In attendance: Dane Breker, Bryan Delage, Jane Dunlevy, Scott Engum, Dev Pant, Joshua Morrell, Luke Roller, Lisa Schock, Kamille Sherman, Susan Zelewski, Tyler Safgren, Sandi Bates, Pat Carr, Minnie Kalyanasundaram, Jim Porter, Sara Westall, Kassie Lutz, David Schmitz, Kathy Camburn, Stephanie Reilly, Marlys Peterson, Diane Roney, Anna Haberman-Cherne, Janet Anderson, Wendy Breitbach, Brenda Riskey, Gary Schwartz

Minutes submitted by: Dawne Barwin

Reviewed by: Susan Zelewski

**Approved by**: Lisa Schock and Chris DeCock

MSC = motion made, seconded, carried

<b>AGENDA ITEM</b>	SUMMARY	ACTION/FOLLOW-UP
1. Welcome	Meeting called to order at 5:02 p.m. by the chair Dr. Susan Zelewski.	Information
2. Approval of		MSC to approve the 8.8.23
August 8, 2023 minutes.		minutes. Dane Breker / Kamille Sherman // carried.
3. Student Check-in	Tyler Safgren: None today.	Information
4. Old Business	<ul> <li>a.) Policies and Procedures: Susan Zelewski</li> <li>1. Clerkship Professionalism procedure 5.10</li> <li>This is still tabled and when it is completed everyone will receive a copy for review.</li> </ul>	Information

5. New Business	a.) Phase 3 Report AY 2022-23: Susan Zelewski (Document is available on Blackboard)	MSC to recommend the
Si New Business	<ol> <li>Goals for the year: Pilot the Transition to Residency Course (TTR) – Completed. Course was piloted as an elective in 22-23 with excellent student feedback. Required 2-week version will be in place for 23-24.</li> <li>Monitor Step 2 performance in light of pass-fail step 1 and implement required 8-week step 2</li> </ol>	Phase 3 Report to UMEC. Bryan Delage / Lisa Schock // carried.
	prep program - In process. Step 2 prep course is being offered in elective format again 23-24 due to full transition to curriculum 2.0 beginning with class of 2025. That class will be the first to have the 8-week required step-2 prep course	
	<ul> <li>Domain 1: Learn to appraise and assimilate scientific evidence and relate it to patient care issues. Goal Met, Actions/recommendations: Continue to monitor progress on a yearly basis.</li> </ul>	
	<ul> <li>Domain 2: Understand foundational biomedical science concepts, STEP 2 CK. Goal met. Actions and Recommendations: Completed by all students, continue to monitor Step 2 performance, especially in light of pass/fail Step 1 going forward.</li> </ul>	
	<ul> <li>Domain 3: Understand fundamental concepts of patient-centered care and the relevance of social determinants of health. Goal met, all electives an AI evaluations acceptable. Actions and Recommendations: Continue to monitor these goals moving forward.</li> </ul>	
	<ul> <li>Domain 4: Develop interpersonal and communication skills that result in the effective exchange of information and collaboration. Met 4 out of 5 Likert-Type ratings. Goal met. Actions and Recommendations: Continue monitoring of this goal through these measurable assessment items for the domain.</li> </ul>	
	<ul> <li>Domain 5: Demonstrate essential precepts of professionalism and ethical behavior.         Goal met with an excellent 4.88 out of 5 on a Likert-Type scale. Actions and Recommendations: Continue to model and reinforce positive professional behavior as well as monitor these performance measures.     </li> </ul>	
	<ul> <li>Domain 6: Understand basic concepts of health care systems. Goal met with both observed measurable AI and Elective items. Actions and Recommendations: Continue to monitor our current assessment items for this goal as well as adding any new health systems science measurement items when added to the phase.</li> </ul>	
	<ul> <li>Domain 7: Understand and respect the roles of other professions in the delivery of</li> </ul>	

health care. Goal met with excellent performance. Actions and Recommendations:

Continue to monitor clinical elective performance.

- Domain 8: Understand the basic concepts of financial literacy and wellness as a medical student. Goal met as reflected by the only duty hours violation being recognized and brought forward by the student involved and it being easily remedied going forward. Additionally, the excellent cohort score on the ability to give and receive feedback as well as the time reflections the cohort shared regarding various time amounts in electives and Als. Actions and Recommendations: Continue to monitor student performance and feedback on these measures going forward.
- 2. Phase 3 Performance Metrics Evaluation
  - Metric 1: The Outcomes of the Medical Program for the Phase are Met. Goal met at criteria of >90% passing rates. Actions and Recommendations: Continue to monitor these assessment items. Review of the Residency Director Survey by curriculum committees when available.
- 3. Metric 2: The Phase is Complete and Organized Effectively
  - Unwanted Redundancies: There are not AI redundancies, however, there are several
    competencies as noted above which are redundant for the QI/PS course. Since the
    course spans the length of the academic year and covers many of the core topics in
    different required modules, this redundancy is expected.
  - Goal was met. Actions and recommendations: Cause of the one phase 3 duty hours violation was remedied with the department to avoid future violations. Continue monitoring these metrics.
- 4. Metric 4: There Are No Other Threats to Curriculum Delivery/Attainment of Objectives
  - Goal met. Actions and recommendations: Continue to actively recruit new teaching
    faculty and encourage the departments to offer elective and/or AI courses on more
    than one campus when able. The Campus Deans will continue to work with students
    to facilitate course requests not available on their campus with student participation
    at other locations when able.
- 5. Comprehensive Phase 3 Recommendations
  - Overall, the performance goals for Phase 3 are all met by this cohort. The upcoming Transition to Residency course will add one more opportunity for all students to receive standardized curriculum addressing additional program competencies.
  - Step 2 performance will continue to be evaluated very carefully as the transition to Step 1 pass/fail has occurred. This is anticipated to increase the importance of the Step 2 score in the match process. Additionally, the upcoming implementation of an

8-week required Step 2 prep course for the class of 2025 and subsequent Step 2 performance will be monitored as well.

#### b.) Phase 2 Report AY 2022-23: Susan Zelewski (Document is available on Blackboard)

- 1. Phase 2 Performance Evaluation by Domain: The phase goals from Table 2 (next page) are evaluated by specific assessment data per domain. For each domain, the assessment data that are used to evaluate it have been included. Interpret the data for each to evaluate whether that domain's goal has been met for the Phase.
  - Domain 1: Identify critical patient care issues and select and apply scientific evidence.
    Goal was met. Actions and Recommendations: As the SHaPE H&P is formative and
    therefore not a summative assessment of a student's performance, it would be
    recommended to remove this measurement item for the Domain 1 assessment for
    future reporting. All other measures should continue to be monitored.
  - Domain 2: Relate foundational biomedical science concepts to clinical
    pathophysiology. The goal was met for Phase 2. Actions and Recommendations:
    Increased shelf exam initial failure rate observed last year was not observed for this
    cohort. Will continue to monitor. The note writing section of the CSPR will be piloted
    again for next year. There will be increased instruction and feedback in the phase
    with note writing being added in a formative manner to SHaPE. Will reassess the
    note writing section results next year as well.
  - Domain 3: Apply fundamental concepts of patient-centered care and demonstrate relevance of non-medical issues to patient health. Goal was met. Actions and Recommendations: Since the SHaPE H&P is a formative event and not summative, it is recommended we remove it from the phase data in this report. Continue to monitor the other parameters measured here on a yearly basis.
  - Domain 4: Demonstrate effective interpersonal and communication skills that result in the effective exchange of information and collaboration with health care professional in the care of patients. The goal was met. Actions and Recommendations: Lowest score was during the telemedicine case which will likely be improved with the telemedicine badge in place for class of 2027 onward. Will be monitored as these students reach phase 2. Due to some of these items being the last things done in a 15-minute CSPR encounter, it would be suggested that a question be added to the evaluator questionnaire asking if the student ran out of time. This would better give context to the values seen on that examination.

MSC to recommend the Phase 2 Report to UMEC. Bryan Delage / Luke Roller // carried.

- Domain 5: Demonstrate precepts of professionalism and ethical behavior in the care of patients. Goal was met. Actions and Recommendations: Continue to monitor all items going forward.
- Domain 6: Relate foundational concepts of health care systems to patient issues.
   Regarding the goal, the measures we have available demonstrate acceptable
   performance. However, there are minimal specific data points to evaluate this Phase
   2 goal for Domain 6. Actions and Recommendations: It is recommended to UMEC
   that if the committee would like more specific reporting on this goal, specific target
   topics or areas of assessment be identified so that it may be incorporated into phase
   2 summative assessment going forward.
- Domain 7: Recognize and value opportunities for interprofessional interaction in health care settings. Goal met. The additional IPE elective implemented for this cohort in phase 2 has been successfully completed by all students. Actions and recommendations: ISCLE is no longer a stand-alone activity with the existence of the IPE badging activities. Recommend it be removed for the measurements of this domain. The class of 2026 has the IPE badge required. In the next couple of years adding the progress of the class toward badging levels at the end of phase 2 will be an important assessment item for this domain.
- Domain 8: Maintain personal wellness in the context of the clinical environment.
   Understand and cope with uncertainty and limitations in knowledge, skills, and abilities. This goal has been met for items available for evaluation at this time. There were not duty hours violations in the 22-23 year for phase 2. Additionally, students performed well on the clerkship evaluation items. Actions and recommendations: P2P3C will request UMEC to design any specific questions they would like added to the mid-year student survey to evaluate this Phase 2 Domain 8 goal.
- 2. Phase 2 Performance Metrics Evaluation by Goal:
  - Metric 1: The Outcomes of the Medical Program for the Phase are Met. Yes, this goal
    has been met. The specific targets of: "90% of students will pass all summative
    assessments linked to the domains/competencies taught in the phase; Step 2 scores
    shall be within 1 standard deviation of national averages" have both been
    successfully met. CSPR initial passing rate of 95.2% with all failures successfully
    remediated also meets this goal. Actions and Recommendations: Continue to follow
    all of these metrics for each cohort in the phase.

- Metric 2: The Phase is Complete and Organized Effectively. The goal has been met. Actions and recommendations: Continue to examine the phase 2 curriculum for opportunities to incorporate more DEI curriculum. Continue to monitor these metrics as well as student and faculty feedback on areas of redundancy or gaps.
- Metric 3: Curriculum Delivery Allows Attainment of Learning Outcomes and Wellness. this goal has been met with only no Duty Hours policy violations and all questionnaire responses within 30% of the possible highest values and positive GQ results compared to the national average. Actions and recommendations: Continue monitoring of these assessments going forward especially free time as more students felt they had too little time in this area than for any other time category during clerkships.
- Metric 4: There Are No Other Threats to Curriculum Delivery/Attainment of Objectives. This goal has been met currently. However, requires ongoing monitoring for items including student competition for educational sites both within UND and from external educational institutions and ongoing preceptor availability with the constant flux of faculty numbers in the state, especially for internal medicine, surgery, neurology and psychiatry. Appropriately credentialed long-term locums who are interested in teaching have applied for clinical faculty appointments to meet some of these needs. Actions and recommendations: Continue close follow up with campus deans and departments to ensure that the availability of preceptors and clinical educational sites is maintained to meet the needs of the phase 2 curriculum.
- Comprehensive Phase 2 Recommendations. Overall, the phase 2 curriculum is meeting the educational and curricular needs outlined in the program domains and competencies and cohort performance for the class of 2024 met expectations.
- Previous concerns have been addressed with the addition of scheduled step 1 prep
  time (adjusted to 4 weeks at student request) and the upcoming addition for the
  class of 2025 of step 2 prep course for 8 weeks. Additionally, the new
  interprofessional elective for the class of 2024 cohort addresses previously raised
  concerns of needing increased exposure to these topics. The continued stress on
  clinic faculty for available time to be dedicated to teaching due to shortages in
  certain departments will continue to be monitored going forward.

	c.) GQ Report: Questions # 8, #10 and #11 Review: Susan Zelewski	Information
	<ol> <li>GQ Report Q. #8: Science Relevance and Integration, clinical experiences integrated into basic science content. The scores are good, nobody disagreed or strongly disagreed with the question. The efforts the departments are making have been effective in improving these scores.</li> <li>GQ Report Q. #10 and 11: Quality of Clerkships, FMED: Bryan Delage and Kamille Sherman. The scores were similar to the clerkships from before. Family Medicine continues to do well with benchmarking.         The remaining clerkships will report at the next meeting.     </li> </ol>	
	<ol> <li>d.) STEP 2 CK Review: Susan Zelewski</li> <li>US Medical Licensing Examination (US-MLE) Step 2 CK Annual Report 2020-2022. This continues to be positive for our students with a pass rate of 99% and a re-examine rate of 100%. The current year scores have all students passing on their first attempt, there are 2 students still waiting for their scores. This is a good trend.</li> <li>The last page shows the performance by specialty, please take a look at that report for your departments.</li> </ol>	Information
6. Electives	None today.	
7. Reports from Committees	<ul> <li>a.) UMEC – Susan Zelewski: Nothing to report.</li> <li>b.) GMEC –Susan Zelewski: Did not meet.</li> </ul>	Information
	c.) EASRC – Steve Tinguely: Started the Element Review.	
	<b>d.) CEMC – Susan Zelewski:</b> Working on Phase 3 reports and planning Curriculum Retreat that will be virtual this year on 10.26.23.	
8. Area Updates	Clerkship reports start next month	Information

9. Pending Agenda Items	a) Professionalism policy: This is on hold until MPPRC sends to P2P3C.	
10. Adjournment	Meeting was adjourned at 5:55 pm.	The next regular meeting is scheduled for October 10, 2023, at 5:00 pm.