

Phase 2 Phase 3 Committee (P2P3C) Meeting Minutes  
 Tuesday, July 11, 2023 @ 5:00 pm via Zoom

**In attendance:** Dinesh Bande, Dane Breker, Bryan Delage, Jane Dunlevy, Scott Engum, Sabha Ganai, Luke Roller, Lisa Schock, Kamille Sherman, Chris Tiongson, Susan Zelewski, Tyler Safgren, Sandi Bates, Pat Carr, Minnie Kalyansundarum, Andy McLean, Jim Porter, Ken Ruit, Sara Westall, Christina Walker-Basu, Kathy Camburn, Carla Beach, Marlys Peterson, Anna Haberman-Cherne, Aaron Furstenau, Janet Anderson, Wendy Breitbach

**Minutes submitted by:** Dawne Barwin

**Reviewed by:** Susan Zelewski

**Approved by:** Kamille Sherman and Chris Tiongson

**MSC = motion made, seconded, carried**

AGENDA ITEM	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 June 13, 2023 minutes.		MSC to approve the 6.13.23 minutes. Chris Tiongson / Sabha Ganai // carried.
3. Student Check-in	Tyler had no report from the students today.	Information
4. Old Business	<p><b>a.) Observerships Procedure:</b></p> <ol style="list-style-type: none"> <li>1. Kamille Sherman asked if this is for Phase 1 students out in the clinic?</li> <li>2. Susan Zelewski explained that this is for students coming from elsewhere That just want to do an Observership. This is separate from Shadowing Students in P1. This only applies to our 3 sites that are specifically affiliated with UND, the 2 CFM's and the Pathology Forensic Center.</li> <li>3. Kamille Sherman asked what office this would come through?</li> <li>4. Susan Zelewski said they have to start with the Office of Student Affairs with the request. They talk with campuses and departments to ensure there are appropriate resources that will not detract from the education of our UND students. If the site is full with UND students that Observership will not be available at that time.</li> </ol> <p><b>b.) Policies 4.11 and 5.13 Final Versions</b></p> <ol style="list-style-type: none"> <li>1. These policies are back from UMEC approval and the final edits have been completed and are on this agenda for information only.</li> </ol>	<p>MSC to recommend the Observership Procedure to UMEC for approval. Kamille Sherman / Lisa Schock// carried.</p> <p>Information</p>

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<b>5. New Business</b>	<b>QI/PS Course Yearly Report (Quality Improvement &amp; Patient Safety): Dr. Bande</b> <ol style="list-style-type: none"><li>1. Dinesh Bande reported 74 students completed the course successfully the first time.</li><li>2. Sanford Health has a High Reliability Organization training (HRO) that has been meaningful for practicing clinicians, it involves simple solutions for keeping patients safe and he will be looking into whether this will be available to students during the QI/PS course.</li><li>3. Goals moving forward<ol style="list-style-type: none"><li>a. #1 create more quality improvement virtual elective opportunities.</li><li>b. #2 continue with the QI/PS in residency session in the TTR course</li></ol></li><li>4. Susan Zelewski reported the class of 2023 felt they were not aware enough about the QI/PS graduation requirement. Dr. Zelewski sent out a specific email to the class of 2024 to watch for information from Karla on the course and also emphasized the requirement during the intro to phase 3 session with all students.</li><li>5. There is an issue of students who are off cycle, we need to make sure they are enrolled in the course at the appropriate time. LOA statements should include stating when they will complete this along with the other courses needed.</li></ol> <b>b.) AI Annual Report: Acting Internships Report: Susan Zelewski</b> <ol style="list-style-type: none"><li>1. Susan Zelewski stated that most students got first choice and only 4 got their second choice. Our only availability change was that Montana Pathology was not available. All students successfully completed the required AI and some students chose to take extra ones for electives for a total of 84 AI courses taken for the year. Student feedback was very positive for overall AI feedback.</li></ol> <b>c.) Yearly Clinical Tracking Summary: Susan Zelewski</b> <ol style="list-style-type: none"><li>1. Susan Zelewski gave a review about the comments and issues.<ol style="list-style-type: none"><li>a. There was one Family Med AI duty hours concern that was fixed quickly.</li><li>b. Mistreatment reporting instances<ol style="list-style-type: none"><li>i. Anonymous report of negative comments made regarding INMED program to students</li></ol></li></ol></li></ol>	<b>Information</b> <p>Dr. Bande and Dr. Zelewski will meet to discuss where the HRO curriculum might be implemented for students. Will bring back to the appropriate committee if moving forward.</p>
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	<ul style="list-style-type: none"><li>ii. Preceptor making disparaging remarks regarding student to other staff and encouraging student to lie regarding duty hours.</li><li>iii. Forward feeding of comments regarding a student to another clerkship</li><li>iv. One Title IX concern: comments made regarding a student's religion, this was addresses with a Title IX officer.</li></ul> <p>c. Student supervision</p> <ul style="list-style-type: none"><li>i. Students felt unprepared during the psychiatry rotation when attending a sex offender treatment group. They felt there was not enough debriefing or preparation.</li></ul> <p>d. Professionalism concerns</p> <ul style="list-style-type: none"><li>i. Students reported several instances of unprofessional comments.</li></ul> <p>2. The summary table lists all interventions and follow up for the above issues. It will go to UMEC for approval and then be distributed to students through their student leaders.</p> <p>3. There was no report of inadequate PPE this year.</p> <p>4. For next year's report we will replace the COVID patient care question with whether students have adequate secure storage on their rotations.</p> <p><b>d.) Schedule for Class of 2025 Transition Phase 2 to 3: Susan Zelewski</b></p> <p>1. With the phase transition occurring earlier the committee needs to recommend where time will be for moving and launch. We talked about options of ending the last clerkship a couple days early and starting the first rotation a couple of days later. We would be moving a week of vacation and having that class off cycle so they would be off by a week from other students in courses for 8 weeks.</p> <p>2. Tyler Safgren asked students from other campuses what they thought. They preferred leaving a couple of days early from Rotation 7 and a couple of days late for first course in phase 3 would be best. This would be instead of whole week to move. They were concerned the move of a week of vacation would interfere with their away rotations.</p> <p>3. Committee discussion ensued on possible pros and cons of each option.</p>	<p><b>Tabled</b></p>
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	<p>4. Committee agreed they will discuss with their departments and will be tabled to next agenda.</p> <p><b>e.) Step 1 Prep Course Schedule for Class of 2026</b></p> <ol style="list-style-type: none"><li>1. Susan Zelewski asked if we are keeping the identical schedule, we had last year with the 6 rotations?</li><li>2. Minnie Kalyansundaram said that as the course director she thinks it is working well. A few students had concerns where their rotation was far apart while other students had finished. but it is working well for the most part.</li><li>3. The question was raised if this scheduling worked okay for neurology. Dr. Breker commended that the department will be meeting soon to discuss.</li><li>4. Susan Zelewski said the student's preference would be to move to 4 periods of Step 1 in the first 4 months of Phase 2, so neurology department input will be important in this decision.</li><li>5. As a reminder, the Class of 2026 presented a proposal to UMEC that was approved to allow students that score a 78 or higher on either of their last 2 CBSEs to test prior to the Step 1 Prep course. They will still have to participate in the course and be a good peer leader for the discussion groups, but they could test early regardless of the period they are in unless they have step prep in period 1. Students choosing not to test early will have to meet with Dr. Carr as their academic advisor and their career advisor to get permission as well as have been in good academic standing throughout Phase 1.</li></ol> <p><b>f.) Student Midyear Survey-Quantitative Report by Cohort V4</b></p> <p>Susan Zelewski talked about comments of students from the survey as per the question number and topic, that pertained to P2P3C. The color coding on the graphs are as follows: the green highlighted percentages per class year means that there was less than 15% dissatisfaction amongst the students, the yellow highlighted percentages per class year means 15-19.9% dissatisfaction and the red highlighted percentages per class year means the students had more than 20% dissatisfaction on the topic. LCME tend to use 20% dissatisfaction for their benchmark for the topics we need to pay more attention to.</p> <ol style="list-style-type: none"><li>1. Q 7 - Accessibility of Medical School Faculty. This is a green highlighted area, please continue to be accessible to the students as you have been.</li></ol>	<p><b>Tabled</b></p> <p><b>Information</b></p>
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	<ol style="list-style-type: none"><li>2. Q 10 - The processes to report student mistreatment. This topic is green highlighted, we will continue to educate our students, faculty, and preceptors. We will distribute our policies, discuss at our Faculty Retreats and in our Departmental meetings.</li><li>3. Q 12 – Adequacy of Medical School actions on reports of student mistreatment. This is green highlighted and we want to keep our environment safe for students to report mistreatment and the students appreciate the follow up and our responsiveness upon their reporting.</li><li>4. Q 14 – Adequacy of safety and security at clinical sites. This is highlighted green and there were no concerns.</li><li>5. Q 17 – Adequacy of education/teaching spaces at hospitals/clinics. This topic was highlighted green for the Class of 2023 but red in the Class of 2024. From the Campus Dean perspective, we working on doing a better job of educating the students what spaces are available to them and when in each of the hospitals and clinics. The more we tell them about what is available the better this will be.</li><li>6. Q 20 – Adequacy of student study space at hospitals/clinical sites. These results are very similar and we are making better efforts at educating the students what is available and when for studying at their sites.</li><li>7. Q 21 – Adequacy of secure storage space for personal belongings on the medical school campus. The secure storage space has a little more dissatisfaction for the class of 2023.</li><li>8. Q 23 – Adequacy of relaxation space at hospitals/clinics sites. This topic has green and red highlighted areas. We are following up in real time this year, we are educating students of the spaces available and the best times to use them in the hospitals and clinics. Every campus is intentionally listing and making sure the students know what is available for storage, relaxation, and study space in each location.</li><li>9. Q 26 – Access to Research Opportunities. The Classes of 2023, 2024 and 2025 are highlighted in red. The Class of 2026 is in green. When we hear of clinical research opportunities that students can be a part of, continue to publicize those to the students.</li><li>10. Q 27 – Support for Participation in Research. Please continue to get that information out to students through your departments.</li><li>11. Q 28 – Access to service learning/community service opportunities. The green highlighted are the Classes of 2024 and 2025. The Classes of 2023 and 2026 are red. We found that the red highlighted classes understood the opportunities would be for groups</li></ol>	<p style="text-align: center;"><b>Information</b></p>
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of students through UND sponsored events. We have asked the Student Affairs office and other student group leaders to get the word out and working with career counselors to ask what students would want to be involved and to help connect them.

12. Q 32 – Access to online learning resources. This topic is excellent and all green highlighted.
13. Q 46 – Adequacy of career advising. The class of 2025 is red highlighted. There has been a lot of improvement in this area. The early meetings with Department Chairs and their career advisors have been helpful for the students.
14. Q 41 – Availability of academic counseling. This topic is all green highlighted and is good.
  - Pat Carr said that he is meeting with Phase 1 students in class of 2027 and 2026 to discuss their academic advising. He has a template he will fill out with each student that includes all the issues that have come up from this survey. They will have an opportunity to have all their questions answered. Emily Hau has agreed to take over the student led tutoring program that has been widely accepted.
  - Susan Zelewski stated that once the students get to Phase 2 and 3 their campus Dean becomes their academic advisor
15. Q 43 m- Adequacy of education to prevent exposure to infections and environmental hazards. This topic is all green highlighted.
16. Q 45 – Utility of the medical program objectives to support learning. This topic is all green highlighted. Everybody is happy with our education program objectives here.
17. Q 56 – Quality of the required clerkships. This topic is all green highlighted.
18. Q 57 – Access to patients during the required clerkships. This topic was green highlighted with satisfied students.
19. Q 58 – Student workload in the required clerkships. This topic was green highlighted. The comments reflected students are satisfied.
20. Q 59 – Adequacy of supervision in Clinical settings. This is a green highlighted section and great. One reminder, if you haven't sent out your yearly email to your faculty with policies, procedures objectives required clinical encounters, this would be a great time to do it and include the supervision policy.
21. Q 60 – Amount of formative feedback in the required clerkships. This is green highlighted and the students are appreciating the daily feedback.

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	<p>22. Q 62 – Quality of formative feedback in the required clerkships. This was green highlighted as well. We are encouraging students to ask for feedback and when they ask, they get more useful and direct feedback than if waiting for someone to tell them they did a good job today.</p> <p>23. Q 65 – Clinical skills assessment in the clerkship. This is very good as well.</p> <p>24. Q 66 – Medical School Responsiveness to Student Feedback on Clerkships. This is also good.</p> <p>25. Q 68 – Adequacy of education to manage disease. All good as well.</p> <p>26. Q 71 – Adequacy of education in caring for patients from different backgrounds. Here the highlighted areas were yellow, green and red. This continues to be an area of challenge. If you see opportunities in your clerkship and ask students to tell you places, they could have had more diverse patient care exposure and we will continue to work on that. The Dean of Diversity, Equity and Inclusion position is still under recruitment. That Dean and the DEI Committee will continue to work on ways we can increase exposure. This is a challenge we face when our population in North Dakota is very homogeneous.</p> <p>27. Q 72 - Adequacy of education related to interprofessional collaborative skills. This topic is all highlighted in green. We will continue with the interprofessional elective in Phase 2. It is part of the required Interprofessional Badge for the Class of 2026.</p> <p>28. Overall Quality – Overall, I am satisfied with the quality of my medical education. The class of 2024 had dissatisfaction but there were not a lot of comments that went with this question over all. We do not have more granular feedback on why students may be dissatisfied. This question will be asked in the GQ and we will have more comments then.</p> <p>29. Student Engagement 1 – Avenues to submit feedback to UND SMHS is adequate. This is green highlighted.</p> <p>30. Student Engagement 4 – It is easy to become engaged in making improvements in my medical education. The students often see that changes are going to be made but it's for a future class or future cohorts. We continue to work on improving closed loop communication, letting students know we are making changes.</p> <p>31. Comm 1 – Communication from UND SMHS to medical students on important topics is timely. There are green, yellow and red highlighted areas for this topic. Th student comments were more about Step timing rather than UND communication.</p>	<p><b>Information</b></p>
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	<p>32. Comm 2 – Communication from UND SMHS to medical students is adequate. There was a minor concern about transparent communication but this is improving and will continue to improve. The Communication Officer position for each class will be able to help with this directly. Students feel they do not always know the “why” behind a decision and we can communicate that better.</p> <p>33. Comm 45 – Communication from UND SMHS to medical students in response to inquiries is timely. All in green highlighting and is good.</p> <p>34. Counseling Q7 – I feel there are adequate resources for academic support. Students come to you for academic support in their clerkships, they feel they are getting what they need.</p> <p>35. Mentor 1 – Including the recently launched student led mentorship process, there is adequate access to alumni contact information for specialties of interest. Please thank your preceptors that are alumni and ones that are not but have volunteered to mentor. Please reach out to other institutions for students not in Grand Forks when they need a mentor that is not local.</p> <p>36. Mentor 3 – Including the re-opened shadowing program, there is adequate opportunity for exposure to specialties. Students would like more support in making a specialty choice. We have talked about that early connection with the department is helping them. We will continue with the career counseling every trimester as well.</p> <p>37. Mentor 5 – There is appropriate information and guidance regarding residency applications. The Class of 2025 was red highlighted. This survey was asked while they were still mid-phase 1 so they did not have a lot of information yet about applications. Hopefully with the next survey that will change and they will have received more information. The Heads-Up meetings seem to be very helpful for the students and the information they want.</p> <p>Susan Zelewski gave a reminder: the GQ will be up in 3 months and we can look at the same questions and comments to see if there are any changes.</p>	<p><b>Information</b></p>
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<b>6. Electives</b>	<p><b>a.) Electives for P2P3C: Susan Zelewski</b></p> <ol style="list-style-type: none"> <li>1. Family Med AI Park River: New Section           <ul style="list-style-type: none"> <li>• Susan Zelewski stated that there are new sections of courses in place but there are no significant changes.</li> </ul> </li> <li>2. PMR-PAM Fargo: New Section           <ul style="list-style-type: none"> <li>• Motion to approve both Electives and recommend to UMEC.</li> </ul> </li> </ol>	<p><b>MSC to recommend to take the electives Family Med AI Park River and PMR-PAM Fargo and move them to UMEC for approval. Kamille Sherman / Chris Tiongson // carried.</b></p>
<b>7. Reports from Committees</b>	<p><b>a.) UMEC - Dr. Carr:</b> UMEC approved many policies and procedures, were we had extensive discussion on the Committee Reports. There was discussion on what to focus on for the Annual Curriculum Retreat with the main focus being DEI. We are attempting to schedule an AAMC speaker. We received information on the Telehealth Badging and its future implementation for the Class of 2027. All will be monitored by the Telehealth Badging Champion, Rick Van Eck.</p>	<p><b>Information</b></p>
	<p><b>b.) GMEC –Dr. Zelewski:</b> This committee did not meet.</p>	<p><b>Information</b></p>
	<p><b>c.) EASRC – Dr. Zelewski:</b> This committee is off for the summer.</p>	<p><b>Information</b></p>
	<p><b>d.) CEMC – Dr. Zelewski:</b> This committee did not meet this week.</p>	<p><b>Information</b></p>
<b>8. Area Updates</b>	<p><b>a.)</b> Susan Zelewski said the new clerkship report templates will look similar to last years. She will get them out to everyone in the coming week. The calendar for your presentation dates will be out soon. If you are not happy with your date, let me know, we can move you to another date. Also, we have had some transition in the UND Legal Department and it has made the process of affiliation agreements a bit slower. If you will need a new affiliation agreement for a site, and it is urgent, get it to me as soon as possible. It can take a month at this time.</p>	<p><b>Information</b></p>
<b>9. Pending Agenda Items</b>	<p>a) Professionalism policy: This is on hold until MPPRC sends to P2P3C.</p> <p>b) CSPR timing class of 2025</p>	

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<b>10. Adjournment</b>	Meeting was adjourned at 6:19 pm.	<i>The next regular meeting is scheduled for August 8, 2023, at 5:00 pm.</i>
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