

Clinical Science Curriculum Committee (CSCC) Meeting Minutes
 Tuesday, February 9, 2021 @ 5:00 pm via Zoom

In attendance: Marc Basson, Sandi Bates, Jim Beal, Michael Booth, Pat Carr, Chris DeCock, Bryan Delage, Minnie Faith, Stacie Klegstad, Scott Knutson, Jau-Shin Lou, Jay MacGregor, Devendranath Mannuru, Alicia Norby, Marlys Peterson, Jim Roerig, Luke Roller, Jim Porter, Aaron Robertson, David Schmitz, Kamille Sherman, Jon Solberg, Michael Storandt, Chris Tionson, Susan Zelewski.

Guests: Clint Hosford, Abe Sahmoun

Not in attendance Dinesh Bande, Mac Dyke, Parag Kumar, Dennis Lutz, Jodi Rathjen, Robert Sticca, Steve Tinguely,

Minutes submitted by: Alissa Hancock

Reviewed by: Susan Zelewski

Approved by: Chris Tionson and Scott Knutson

AGENDA ITEM	SUMMARY	ACTION/FOLLOW-UP
1. Welcome	Meeting called to order at 5:03 p.m. by the chair Dr. Susan Zelewski.	Informational
2. Approval of January 12, 2021 minutes		MSC to approve the January 12, 2021 minutes. Michael Booth / Jay Macgregor // carried.
3. Old Business	<p>a.) Policies and Procedures</p> <p>a. Research Design Team Epidemiology Discussion</p> <p>The research design team did a vote to have more of a literature review over a research project and was reported in the Epidemiology Annual report. That is how this discussion was started. The research project is really enjoyed and more research opportunities are requested by students. It also is helpful for them when they are doing interviews for residencies. Sometimes they end up deciding on a specialty that having research experience is really important and epidemiology is a really important experience for them to have. Also, throughout their clinical experiences they have the opportunity to do literature review and gather data but not a true research project like the Epidemiology project.</p>	MSC to approve to keeping the research project for the Epidemiology course. Jay Macgregor / Bryan Delage // carried.

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	<p><u>Timing of Epidemiology</u> Recommend to keep the timing the same and start in July. This just helps with the workload of the faculty in gathering the data needed for student's project and gives them enough time to review and grade the projects. In addition, we want the students to pick a topic that is related to their specialty that they decide on. By waiting until they have some clinical experience they are more likely to be closer to this decision. Reminder that we can move the timing of the project as the curriculum evolves over the years.</p> <p>b. Policies Review Update</p> <p>i. Policy 4.21 (Clinical Supervision) There have been significant changes including adding fellows along with residents and the addition of telemedicine for the new electives being offered. The procedures for d., e., and f are updated and will affect students in phase 2 & 3. We can always be more restrictive, but not less restrictive than what is outlined based on 1.c.</p> <p>We want to be very thorough and intentional about what is included in this policy and the language we use. Everyone should review the policy and send comments to Dr. Susan Zelewski including a few students for input. We will continue the discussion next meeting.</p> <p>c. Covid-19 related concerns The question was raised if there are alternative methods offered to students who request not to participate with patients with COVID symptoms. Students are allowed to treat patients until the patient tests positive for COVID. If a student is requesting alternative methods they should talk with Dr. Jim Porter.</p>	<p>MSC to keep the timing of Epidemiology in the curriculum to start in July. Bryan Delage / Jim Roerig // carried.</p>
4. New Business	a.) MILE Annual Report	MSC to approve the MILE Annual Report. Kamille

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	<p>Our honors and STEP scores have remained the same and are comparable to other campuses. Students still receive their grades at the end of the year. Students are still concerned about the number inpatient experiences they have with a hospitalist, and this is something that we are still working on to find a solution. We are trying to provide more exploration time so that students can spend more time with a hospitalist or surgeon. We still have a shortage of hospitalists and the ICU doctor is not willing to take students. They just started to take residents, and we are hoping that they will be willing to take students soon. There has been an increase in the Psych, IM and Surgery preceptors, but we were short on preceptors for the year we are reporting on.</p> <p>There are no concerns with duty hours and the residency service has been a stable place for students to get experiences in the hospital.</p> <p>There were some issues with the quarterly grades being submitted for Neurology. We believe that it was because the preceptor was only working part-time, but has returned to full-time now. Faculty development has needed improvement for a while. Right now we are doing monthly meetings with preceptors and having informal faculty development.</p>	<p>Sherman / Jon Solberg // carried.</p>
	<p>b.) Neurology Annual Report</p> <p>For grading we use 60% preceptor evaluation, and 40% NBME scores and we have 41% of the students that received honors. We do adjust the honors limit annually to try to achieve the 20% honors goal.</p> <p>Students would like the clerkship to be longer and we will be extending the clerkship to 4-weeks in the new curriculum. The students also enjoyed the willingness of the preceptors to teach.</p> <p>All the required encounters were met. The mid-clerkship feedback is not always recognized by students and we need to be better about labeling feedback to the students. Because we question students about this they do remember it then.</p>	<p>MSC to approve the Neurology Annual Report with the added statement that they do adjust the honors levels annually. Bryan Delage / Jay Macgregor // carried.</p>

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	<p>When we extend the clerkship to 4-weeks a more formalized feedback process should be followed like the other clerkships to help with this misunderstanding. We should make sure that we have documentation of all the mid-clerkship feedback in Leo.</p> <p>We do have a unique curriculum as that we do not have a rural health and we do not have very many minority patients. There is a new clerkship director in Bismarck and we are working on getting a few more preceptors in anticipation of the new curriculum and the extended clerkship length.</p>	
	<p>c.) Timely Grading Report We have had more late grade reporting so far this academic year and we know that some of it was new administrative staff confusion, there was an issue with LEO for a department certain preceptors being extra busy with COVID may have affected some of these late grade submissions. We would like to see everyone make a great effort in getting grades in on time for the rest of the academic year.</p>	<p>Informational</p>
	<p>d.) ROME Affiliation to main campus reviewed</p>	<p>Postponed for 6-months</p>
	<p>e.) Clerkship Books Clerkships provide students with paper books and the question do we still want to provide students with these books or other material electronically? The student on the committee added that the books that are provided are useful but whether they are paper book or electronic it doesn't make that much of a difference.</p> <p>Departments will discuss further what they would like to do and we will continue the discussion next meeting.</p>	<p>Informational</p> <p>Will continue discussion at the next meeting.</p>
	<p>f.) Away Rotation 2021-22 AAMC Coalition's recommendation for away rotations was released for the next academic year starting July 1, 2021. No student is allowed to do an away rotation before August 1, 2021, even if it is already scheduled. Students would be limited to</p>	<p>MSC to follow the recommendation of the AAMC Coalition with the exception for Emergency</p>

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	<p>one away rotation per their recommendation. Applications start April 15th and programs cannot offer positions until May 1st.</p> <p>Emergency Medicine is asking for an exception to the recommendation because the residencies for this specialty do require two standardized recommendations from programs with residencies to be competitive, and they cannot get those within the state. There are also no international away rotations at this time, but we will re-address this if circumstances change.</p>	<p>Medicine. They can do two away rotations, so they can be competitive for residency. Also, if students have away rotations already scheduled in July they should try to reschedule them. There will also be no international rotations but will re-address at a later time if circumstances change. Jon Solberg / Michael Booth // carried.</p>
	<p>g.) Phase 2/3 Timing This will be discussed at the next meeting. UMEC needs to have a discussion and vote tomorrow at their meeting based on the feedback we have received from students regarding vacation time and the amount of stress students are feeling and their mental health. There are two proposals that they voted on and one would extend the phase 2 curriculum by 8-weeks, but the class was also split on the vote.</p>	<p>Informational</p>
<p>5. Electives</p>	<p>a.) Urology AI This is another specialty AI that is similar to the plastic surgery AI last month. This would be for Fargo and Grand Forks.</p>	<p>MSC to approve the Urology AI. Michael Booth / Bryan Delage // carried.</p>
	<p>b.) Emergency Medicine elective There will be weekly meetings with students and a standardized test at the end of the elective. We hope to expand the elective in the future. Students need to print off a feedback form to have all preceptors/faculty to add their feedback and would</p>	<p>MSC to approve the Emergency Medicine elective with the edit that student will turn in the feedback from at end of</p>

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	like to add that the students will need to turn that feedback form in at the end of the elective.	elective. Michael Booth / Bryan Delage // carried.
6. Reports from Committees	<p>a.) UMEC - Dr. Zelewski Discussed the narrative feedback definition from CEMC. We will be formalizing the procedure for narrative feedback to be completed and will be shared once written. The ROME application process was approved to start before matriculation into medical school. Also, the Admissions committee membership will be increasing to help spread out the workload.</p>	Information
	<p>b.) GMEC –Dr. Zelewski The Fargo Family Medicine Residency program director resigned. The program also received their accreditation letter with their warning removed. It was approved that residents must pass the STEP exam before finishing their residency. The Mistreatment Policy was updated to have residents report mistreatment of students that they witness. In addition, FC is revising the school-wide mistreatment policy and we will watch for that to be completed.</p>	Information
	<p>c.) EASRC Working on LCME preparations</p>	Information
	<p>d.) CEMC – Dr. Zelewski Worked on the narrative feedback definition and what the curriculum as a whole and phase reports will look like.</p>	Information
7. Area Updates		
8. Adjournment	Meeting was adjourned at 7:01 p.m.	<i>The next regular meeting is scheduled for March 9, 2021, at 5:00 pm.</i>