Clinical Science Curriculum Subcommittee (CSCS) Meeting Minutes  
Tuesday, January 8, 2019 @ 5:00 pm  
E493 Conference Room & via telecomm

In attendance: Marc Basson, Michael Booth, Pat Carr, Chris DeCock, Joy Dorscher, Marcia Francis, Walter Kemp, Scott Knutson, Dennis Lutz, Jay MacGregor, Devendranath Mannuru, Mitchell Messner, Marlys Peterson, David Schmitz, Kamille Sherman, Steve Tinguely, Chris Tiongson, Susan Zelewski.


Minutes submitted by: Alissa Hancock  
Reviewed by: Susan Zelewski  
Approved by: Michael Booth and Jay MacGregor

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<tr>
<th>AGENDA ITEM</th>
<th>SUMMARY</th>
<th>ACTION/FOLLOW-UP</th>
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<tr>
<td>1. Welcome</td>
<td>Meeting called to order at 5:03 p.m. by Dr. Susan Zelewski.</td>
<td>Informational</td>
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<td>2. Approval of December 11, 2018, minutes</td>
<td>MSC (moved, seconded, carried) to approve December 11, 2018, meeting minutes as written Jim Roerig / Chris Tiongson // all in favor; motion carried.</td>
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<td>3. Old Business</td>
<td>a.) Policies and Procedures</td>
<td>No Report</td>
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<td>b.) Homeless Project Update (Delage)</td>
<td>No Report</td>
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<td></td>
<td>c.) Clerkship Director Checklist – Surgery</td>
<td>Tabled for next month</td>
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<td>4. New Business</td>
<td>a.) Epidemiology Report</td>
<td>Information</td>
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This year we went back to chart reviews and there were 77 students that made up 44 groups and all students completed the project except for one, who is repeating it this year. Students’ feedback on actual scores increased from 3.3 to 3.6 and the area
with the biggest drop was with the faculty clearly explaining the grading. Dr. Beal explained that he was having difficulty with E*Value and got the explanation to the students after they received their grades.

Dr. Beal stated that going back to having the option to do a chart review rather than use data sets delayed some projects due to the time it takes to get the patient charts from the health system for review. This is the same issue with have had in the past. This is one of the reasons why going to back to chart reviews from secondary dataset points was not a good idea. Students only get to review a couple hundred charts but they get more variables. Whereas with secondary data sets, students get more data but not as many variable are provided. We will be looking into getting more secondary data sets, which could mean we need to try to find more funding for this. An additional funding need may be to assist with journal publication of the projects. The trend seems to be there is a fee for a service and this could lead to additional issues in the future.

Need to amend the report to include Frank Low presentations, this is easier to accomplish on some campuses compared to others but all are able to do so. They will also add in the mid-course feedback that is happening this year, which is missing from the report.

b.) **Honors Grading discussion continued from November**

Currently, the policy states that the goal is that the top 20% of the class will receive honors. This also means that some departments are consistently adjusting the grade requirements to get closer to that 20%.

The proposed change to this policy is to give the departments more control of what percentage of the class would receive honors for that clerkship.

**MSC to approve the report with the edits. Bryan Delage / Ted Forgety // carried.**

**Action Item:** This will go to the Clerkship Directors meeting for discuss and bring back their feedback to the next meeting.
c.) **Proposed AI Evaluation process**  
The proposal is to have students complete a self-evaluation at the beginning of an AI to see how prepared they feel for the 10 EPAs. This will also be part of their final evaluation that is completed by both a preceptor and the student. Then we would like to send the same 10 EPAs to the students during their first month of their internship to see how their self-evaluations have changed.

MSC to approve the AI Evaluation process. Chris Tiongson / Byran Delage // carried.

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<th>5. Electives</th>
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| a.) **Interventional Radiology Elective (9107)**  
This is a new location of an elective that is already exiting. | MSC to approve the Interventional Radiology Elective, new location. Bryan Delage / Ted Forgety // carried. |
| b.) **Internal Medicine Cardiology Elective**  
This is a new location of an elective that is already exiting. | MSC to approve the Internal Medicine Cardiology Elective, new location. Jim Roerig / Bryan Delage // carried. |
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c.) Clinical Psychiatry Elective – reactivated  
The preceptor that did the elective in the past is able to take students again and there are students that are interested in taking the elective also. We removed Axis from the document because psychiatry does not use the Axis system for diagnoses any longer.

MSC to approve the reactivation of the Clinical Psychiatry Elective. Bryan Delage / Jim Roerig // carried.

6. Reports from Committees

a.) MCC – Dr. Zelewski  
MCC received a charge from a FAC meeting where the Dean is challenging the MD faculty to come up with a curriculum where there is a 18 month pre-clinical phase, a clinical phase and a third phase that is essentially our 4th year. The goal is to integrate the biomedical and clinical sciences throughout the curriculum. We need to think about how we could integrate our LO’s.

The other change that is being discussed are to move STEP 1 into the clinical phase, which is on trend with what other medical school are doing. With moving this we also plan give the NBME CBSE exam multiple time throughout the pre-clinical years and also use it as a gateway exam for the clinical phase.

Everyone should be thinking about the curriculum and how we could improve it and integrate biomedical and clinical sections throughout the curriculum.

b.) GMEC – Dr. Zelewski  
No report

c.) EASRS – Dr. Tinguely  
No Report

d.) CEMS – Dr. Zelewski  
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<th>We are in the process of finalizing the process of how we will be writing objectives to ensure we are consistent throughout the curriculum. We will also be recommending a vocabulary list that will be our base and we know it will be evolving as we use it. There will also be a hot topic list and a teaching methodology list, which we will reference Medbiquitous.</th>
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<td>7. Area Updates</td>
<td>The mid-year survey did go out to the students and we are receiving good feedback. Once we have gathered the data we will be reporting the results to you. Information</td>
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<td>8. Adjournment</td>
<td>Meeting was adjourned at 6:12 p.m. The next meeting is scheduled for February 12, 2019, at 5:00 pm in E493 Conference Room, Grand Forks.</td>
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