

Clinical Science Curriculum Subcommittee (CSCS) Meeting Minutes
 Tuesday, May 14, 2019 @ 5:00 pm
 E493 Conference Room & via telecomm

In attendance: Marc Basson, Kim Becker, Pat Carr, Chris DeCock, Bryan Delage, Marcia Francis, Jay MacGregor, Devendranath Mannuru, Alicia Norby, Marlys Peterson Jim Roerig, Kamille Sherman, Chris Tiongson, Steve Tinguely, Susan Zelewski.

Not in attendance: Dinesh Bande, Michael Booth, Joy Dorscher, Mac Dyke, Ted Fogarty, Don Jurivich, Walter Kemp, Scott Knutson, Jau-Shin Lou, Dennis Lutz, Mitchell Messner, Jodi Rathjen, David Schmitz, Jon Solberg, Rick Van Eck.

Minutes submitted by: Alissa Hancock

Reviewed by: Susan Zelewski

Approved by: Jay MacGregor and Jim Roerig

AGENDA ITEM	SUMMARY	ACTION/FOLLOW-UP
1. Welcome	Meeting called to order at 5:06 p.m. by Dr. Susan Zelewski.	Informational
2. Approval of April 9, 2019, minutes		MSC (moved, seconded, carried) to approve April 9, 2019, meeting minutes as written Bryan Delage / Kamille Sherman // all in favor; motion carried.
3. Old Business	a.) Policies and Procedures	No Report
4. New Business	<p>a.) Residents as Teachers Program</p> <p>Dr. Kim Becker reported that the curriculum did not change last year. GMEC also voted to continue with the AMA modules for education as residents as teachers and mistreatment education for the upcoming year. We do offer educational presentations in Fargo that are recorded for the other campus residents to view</p> <p>We are having some issues with evaluations completed by students on residents who have taught them being received by the program director . Dr. Zelewski will look into this issue with Becca Maher.</p>	

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	<p>b.) Residents as Teachers Procedure</p> <p>To meet the LCME element 3.1 we are monitoring 3rd year rotations to ensure students get that experience of working with a Resident as Teachers. This allows them to learn what is expected of a resident. We do continue to have students, especially in Bismarck who do not have this experience during 3rd year. In order to ensure that all students have this experience, we are proposing that the completion of a rotation with a resident as a teacher be required either in 3rd or 4th year. This proposal would count an external rotation with residents as well. The plan would be for Dr. Zelewski to monitor in coordination with the campus administrators.</p> <p>This would take effect for the class of 2021 (entering 3rd year this fall).</p>	<p>MSC to accept the Residents as Teachers Procedure. Kamille Sherman / Bryan Delage // carried.</p>
	<p>c.) Surgery Clerkship Annual Report</p> <p>We had no new learning objectives. There were three students that did report more than 25% of their required clinical experiences were through alternative methods. When we looked into this; it was when they were not with their assigned preceptor. A question was raised if there may be unclear communication of what we mean by alternative methods if this is the case. Dr. MacGregor felt this could be the case. There were also students that reported spending more than 25% overserving and not participating. Again, we think that a clearer explanation what observing vs. participating means during orientation will solve this. We also can add feedback for our preceptors on this.</p> <p>The honors percentages are consistent across all campuses with one failure. The failure was due to rotation failure and not shelf exam failure which was unusual. It was decided to have the student remediate the full rotation at another location. It was noted that this year the North East Campus has lower Blackboard and shelf exam scores. This seems to be a one-time thing when looking at this year's numbers.</p> <p>Students' concerns included the quizzes, which we have revamped, the educational activities, and the balancing of work and personal time. As a department we</p>	<p>MSC to accept the annual surgery clerkship report with action items. Kamille Sherman / Jim Roerig // carried.</p>

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	<p>consider the educational activities vital to their education. We also tell them that they must follow the duty hours policy and they are responsible for tracking their own hours, not the preceptors and to let their preceptor know ahead of time if they are nearing an hours violation.</p> <p>Goals are to improve the H & P and mid-course feedback percentages, increase the number of faculty participating in medical education, which we have few young ones that are interested. We also want to add an anesthesiology AI to the NE campus and Sanford in Fargo.</p>	
	<p>d.) Surgery Required 4th year Experience There were no objective changes and a high percentage of honors for this rotation. We are having a hard time with mid-course feedback with it being a 2 week +2 week experience.</p> <p>Dr. Basson did a presentation of the curriculum revision plan at the surgery department retreat, which was a great help with the discussion regarding this experience. When looking at the curriculum revision this experience is no longer in line with the curriculum. The department is ok with removing this required experience. It was decided to make it an elective option, effective for the 2019-2020 academic year.</p>	<p>MSC to change the 4th year surgery experience an optional elective, effective for the 2019-20 academic year. Kamille Sherman / Jay Macgregor // carried.</p> <p>MSC to accept the 4th year Surgery Experience report as presented. Jay Macgregor / Chris Tiongson // carried.</p>
	<p>e.) SHaPE Annual Report The purpose of the program is to have students get more experience and clinical exposure with the cases that we create. The teams that work with the truck and their support of the standardized patients is excellent. We are also getting more faculty and staff across the state helping out with the program.</p>	<p>MSC to approve the Annual SHaPE report with one edit as discussed. Bryan Delage / Chris Tiongson // carried.</p>

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	<p>We offer all the students a standardized education, with faculty or residents performing assessment and students get feedback right away from faculty on their experience. Some suggestions students have made to improve the program include not having an asynchronous program (topic and clerkship they are in), but with the staff we currently have this is the only way we can run this program. Students have requested that their 2nd case be more challenging and more dynamic, which we are working on developing. We would like to see students start to debrief each other on the case, which will take time to educate them.</p> <p>Some things that are threatening the program are the mechanical truck issues from traveling the thousands of miles, when students take a LOA or miss a session and needing to rescheduling, this takes time and money to do so. We also know that students should understand they if they miss a scheduled session they might have to travel to Grand Forks to complete that session. When traveling if the wind speed is at 20 mph or if the temp is below -10 the truck does not travel and Amy Malhiem is the person that makes that call to keep our staff safe while traveling. Overall the SHaPE program is going very well and Stephanie Flyger is doing a great job at building relationships with the faculty, standardized patients and staff at all the locations.</p>	
	<p>f.) Yearly Review of Policies</p> <ul style="list-style-type: none">i. Duty Hours Policy (4.3) This year there was some confusion on what happens when students have call-in hours during at home call. Students need to have 8 hours free of responsibilities after a shift. If they get called in their shift starts when they arrive back to the healthcare site. We need to clarify this in the policy and include that when students are in danger of violating the duty hours policy it is their responsibility to notify their preceptor. Dr. Zelewski will bring a draft of the changes to the next meeting.	

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	<ul style="list-style-type: none"> ii. Specialty Elective Day Policy (4.13) One change is needed on the permission form at the end of this policy to have a signature from both the home campus and the rotation location campus deans, instead of just the home campus. It is important that the rotation location know the student is on their site. iii. Elective Scheduling Limits Policy (4.7) Will update the policy to remove the 4th year surgery requirement. No other changes are needed. iv. Clinical Supervision Policy (4.21) No changes needed. v. 3rd Year Absence Policy (4.18) No changes at this time. 	
	<p>g.) Specialty Days Questions on Rotation Feedback Form Students are rarely reporting not being able to have specialty days, and when they do it's not due to the lack of faculty being available. It is because students don't ask soon enough. So it was agreed that we could remove this question from the feedback forms.</p>	<p>MSC to remove the question regarding specialty days from the feedback form. Bryan Delage / Jay MacGregor // carried.</p>
	<p>h.) ROME and MILE Steering Committee Review The ROME steering committee meets twice a year; with the next meeting is in June. They do have a hard time getting enough OBGYN experience at the Hettinger site, but are hopeful that students can spend a week in Dickinson and work with the five OBGYNs there to get this full experience.</p> <p>They have lost the Devils Lake location for the coming year. We are hoping it is because there is a new clinic in town and they are trying to get comfortable with the</p>	

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	<p>new working environment without students. Hopefully we will get them back on board soon for next year. They will communicate with them that students really enjoyed their time there and other students are hoping to go to that site in the future.</p> <p>Surgery department is happy with the rural surgery experiences students are receiving. When we plan ahead and communicate well with those rural sites ahead of time really helps and prevents gaps from happening.</p> <p>They had 14 students apply for the ROME program and they were only able to place 7 students. They are hopeful that with the new curriculum they will be able to improve the ROME program in the coming years.</p> <p>MILE has monthly meetings, and they don't have any big changes for the next year with eight students for upcoming academic year. They will be discussing how they can adapt to the new curriculum.</p>	
	<p>i.) Curriculum Revision The Curriculum Retreat is on May 31st and we are bringing in two speakers from WWAMI. We are already aware that there is concern about scheduling students in phase 2 for 18 months which causes some overlapping scheduling within the clerkships. The campuses have been asked to see how they might want the scheduling to work and bring back suggestions and ideas for what will work best. We will not be scheduling students over the clerkship capacity numbers they can handle. Drs. DeCock and Tiongson have volunteered to help and be involved in the process. If anyone else is interested to contact Dr. Zelewski.</p>	
5. Electives	a.) Quality Improvement (Fargo)	MSC to approve the Quality Improvement elective for Sanford. Jay

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		Macgregor / Kamille Sherman // carried.
	b.) Anesthesia AI (Grand Forks) & FM Oakes AI There are no changes to the AIs just new locations.	MSC to approve the new sites for the Anesthesia AI (Grand Forks) and Family Medicine AI (Oakes). Bryan Delage / Jay Macgregor // carried.
6. Reports from Committees	a.) MCC – Dr. Zelewski Discussed the curriculum revision and approved Standard 7, with a continued focus on improving the diversity experiences we can provide to students. There is also a governance structure change that may occur, where a group like MCC would have the sole oversight of the medical curriculum rather than FAC having oversight. FAC working group is working on this and should be reported at the FAC meeting in August.	Information
	b.) GMEC – Dr. Zelewski We ask that Minot continue to monitor student capacity as it was mentioned at GMEC that the residency is asking that residents and students not be scheduled at the same time with preceptors Also Family Medicine is looking at space requirements at a few different sites.	Information
	c.) EASRS – Dr. Tinguely	No Report
	d.) CEMS – Dr. Zelewski There was an orientation call with Leo and other meetings are scheduled. Please watch your email for the recording of those meeting for you to view. The group is aware that tracking and reporting student required clinical encounters is a high priority of ours.	Information
7. Area Updates		Information

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8. Adjournment	Meeting was adjourned at 6:33 p.m.	<i>The next meeting is scheduled for June 11, 2019, at 5:00 pm in E493 Conference Room, Grand Forks.</i>

APPROVED