

Clinical Science Curriculum Subcommittee (CSCS) Meeting Minutes
 Tuesday, July 10, 2018 @ 5:00 pm
 E493 Conference Room & via telecomm

In attendance: Marc Basson, Mike Booth, Pat Carr, Bryan Delage, Joy Dorscher, Ted Fogarty, Don Jurivich, Marcia Francis, Jay MacGregor, Devendranath Mannuru, Jodi Rathjen, Jim Roerig, David Schmitz, Kamille Sherman, Steve Tinguely and Susan Zelewski.

Not in attendance: Dinesh Bande, Chris DeCock, Mac Dyke, Scott Knutson, Willie Kemp, Dennis Lutz, Mitchell Messner, Alicia Norby, Marlys Peterson, Jau-Shin Lou, Chris Tionson and Rick Van Eck.

Minutes submitted by: Alissa Hancock

Reviewed by: Susan Zelewski

Approved by: Kamille Sherman and Walter Kemp

AGENDA ITEM	SUMMARY	ACTION/FOLLOW-UP
1. Welcome	Meeting called to order at 5:02 pm.	Informational
2. Approval of June 12, 2018, minutes		MSC (moved, seconded, carried) to approve June 12, 2018 meeting minutes Bryan Delage/Steve Tinguely //all in favor; motion carried.
3. Old Business	a.) Policies and Procedures	No Report
	<p>b.) Yearly tracking updates</p> <p>Looking at the third years reporting mistreatment policy awareness, the numbers improved towards the end of the year and we are hoping that it continues into this year. When Dr. Zelewski followed up with students regarding awareness of how to report mistreatment most of the time it was by error, however, there were a couple of students that needed more information on the mistreatment policy.</p> <p>Earlier this year we did update the duty hours policy and we did have a student in block 6 consciously violate this policy once. Every year we do have a student or two violate this policy intentionally but never repeatedly.</p>	Informational

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	<p>c.) Minor changes to clerkships</p> <p>Psych clerkship has removed the vignette case video quizzes that the students normally watch to practice a mental exam, history and treatment plan. These normally take up to an hour and half four times during the clerkship. The department approved to remove these video quizzes and reallocated the points to the four patient write-ups they are already required to do. These are reviewed by the preceptor who grades them on each on with 1-5 points and it frees up more time for clinical rotations.</p> <p>Family Medicine is changing the percentage to earn honors from 92.5% to 93% to keep the overall honors percentage closer to 20% of students.</p>	<p>Informational</p>
<p>4. New Business</p>	<p>a.) Graduate and Program Director's Surveys</p> <p>Program Director Survey looks pretty good. The only area that could possibly be improved was patient hand-over. This is something to watch in the future to see if there is a trend and the new AI curriculum improves this.</p> <p>Graduate Survey is voluntary and we have increased the percentage of completion to 50%. The areas that were reported that could be improved was management of common conditions and diseases. There was one that said that they were glad that we did not hand hold them, which is good to hear. Along with exposure to diversity and elective time, which we are already aware of and working on. We will continue to monitor these areas in the future.</p>	<p>Informational</p>
	<p>b.) Geriatrics Twitter Poll (Jurivich)</p> <p>This is an educational project, where we use a twitter poll tool to help increase the students' knowledge of geriatric general care. We give the students a set of 10 questions each week and they receive the answers the following week along another set of questions. The students accumulate the answers and have a higher knowledge base, currently it is at about 50-70%. Currently, only 50% of the students have participated and most scored higher than those who did not participate.</p>	<p>Informational</p>

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	<p>The question was posed if immediate or postponed reinforcement of answers is better? Also if the quizzes are voluntary or graded how the results might be affected. We also need to think about the platform and whether the use of Twitter might be prohibitive if this becomes mandatory in the future and think about other platforms such as qualtrics.</p> <p>If this is going to become mandatory, there will need to be objectives and assessments assigned and worked into the duty hours.</p> <p>Also asked if there is better retention of the knowledge long term. This is not known at this time but will be assessed in the future.</p>	
	<p>c.) Learners from outside UND SMHS and Teaching multiple learners from different programs (Tinguely)</p> <p>The SMHS is starting to get pressure to have volunteer faculty to take on multiple students who might be from different departments within UND (PA or NP), or osteopathic schools. This is raising some concern in regards to our medical students and if their preceptors specifically know what their objectives and expectations are versus those of other students. There is also concern about increased burnout rate of our volunteer preceptors.</p> <p>The surgery department at Sanford in Fargo is already starting to talk about this and have said if they have to take on multiple students as their job, they might have to reduce their time working with UND as a volunteer.</p> <p>This is also concern of how the LCME will look at this and of the preceptors/volunteers can keep up with the LCME standards. We need to start these discussions before we get there and prepare for what the future might bring.</p>	<p>Action Item: we will continue to brainstorm and discuss in the future.</p>

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	<p>Ideas to help would be to work with the IPE and ISCLE programs and potentially have a centralized scheduling for all the departments to take some of that off of the preceptors and avoid double scheduling of preceptors.</p>	
	<p>e.) UND SMHS admissions requirements proposal from BSCS There was some concern raised about requiring students to have a bachelor's degree, even if it would affect few students. This proposal is thought to be bold and raises some concerns with the feasibility of implementing this new way. Suggested to do a pilot program, potential with early admissions. It was suggested that we look at what other schools already do similar to this, so that we are not the pioneers.</p>	<p>Informational</p>
	<p>f.) Clarification of elective scheduling policy The elective scheduling policy is not clearly written to address the intent in which it was written. Although it is clearly stated that no more than 2 subspecialty electives that are the same can be taken, it does not specify that no more than 2 general electives in a specialty can be taken. The limit of 4 total in a specialty is specified. Currently some are taking 4 general electives in a specialty, this does not allow the students to get a well-rounded education.</p> <p>A question was raised with the new AI curriculum whether the elective number limit should be changed to 3 rather than 4. At the campus deans meeting they will discuss whether to have 3 or 4 electives maximum and report back if a change was decided.</p>	<p>MSC to re-word the wording so that the original intent is clarified.</p>
	<p>g.) Homeless Project Proposal (Delage) This project is to provide an opportunity for students to be exposed to the diversity and adverse effects that homelessness can have on patients. During 3rd year Family Medicine and Internal Medicine students and residents along with other departments will have the opportunity to serve a meal every 4 weeks at Churches United in Moorhead. After the meal the students and faculty will have discussions on different topics related to homelessness.</p>	<p>Informational</p> <p>Dr. Zelewski will send the service learning objectives and program description to Dr. Delage to incorporate into this program.</p>

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	<p>Dr. Delage is going to work with Dr. Van Eck to create an assessment for this project. They would like to have the students fill it out before and after this experience.</p> <p>The only concern is that this would also land on the same day as shelf exams happen. It will need to be clearly communicated that the students should arrive when they are comfortable and to not rush their shelf exams.</p> <p>This project could be expanded to the other campuses and Dr. Delage has already started to reach out to some homeless shelters in the other locations. This would also count as a service learning activity and is suggested that they embed that part into the assessment.</p> <p>They will provide an update in January.</p>	
5. Electives		
6. Reports from Committees	<p>a.) MCC – Dr. Zelewski All the grading changes and electives were approved along with the standards 8 report from EASRS. There has been lots of discussion around the curriculum renewal and assessment.</p>	Informational
	<p>b.) GMEC – Dr. Zelewski</p>	No Report
	<p>c.) EASRS – Dr. Tinguely Continuing to look at Standard 6 & 7.</p>	Informational
7. Area Updates		
8. Adjournment	Meeting was adjourned at 6:49 pm.	<i>The next meeting is scheduled for August 14, 2018, at 5:00 pm in E493</i>

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		<i>Conference Room, Grand Forks.</i>
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