

**SMHS Dean’s Quality Improvement Panel (DQIP) Meeting
January 19, 2022 12:00-2:00 PM (Zoom)**

Attending: Steve Tinguely, Sheila Bosh, Dean Wynne, Pat Carr, Ken Ruit, Ryan Norris (MS4), Bryon Grove, Marc Basson, Ken Ruit, Rick Van Eck, Susan Zelewski, Jim Porter, Judy Solberg

Absent:

AGENDA ITEM	SUMMARY	ACTION/FOLLOW-UP
Call meeting to order	Meeting was called to order by Dr. Stephen Tinguely, Committee Chair.	
Review of Minutes	Deferred review of December 22, 2021 meeting minutes. Minutes are posted on Blackboard. It is noted that the January 7, 2022 meeting was canceled due to scheduling conflicts.	Minutes will be reviewed and approved at the next meeting. Add to February agenda.
ISA 2 Survey Update	Tables have been incorporated into the DCI. Discussed where we go from here and how to involve students post ISA2. Dr. Zelewski commented that the four ISA 2 committees believe their work (responsibility) is done. If we want them to continue it would be a change in plans for them. Discussed whether we should recruit for new groups. The Dean commented, “one of the four major themes was communication. If the communication has been rectified by a, b, c, and d, then we don’t need special committees to do that. If not confident that the communication (bi-directional) is now sufficiently robust will need the theme to continue with a new group.” Dr. Basson commented that we don’t have effective process in place as evidenced by a recent decision by administration that students were unhappy with. Roles of student council and student rep roles may need to be clearly defined. Discussed best ways to engage students. Dr. Carr suggests intentional goals and including SASRC and SCQI. Dr. Van Eck commented that review of qualitative comments would be beneficial. Ryan Norris (ISA Student Lead) commented that he will talk with Carissa Karisch one of the ISA 2 Committee leads to see	Add to February agenda.

	<p>what the committee recommends. Dr. Tinguely commented that DQIP is responsible for reviewing the qualitative data as well as the quantitative. Dr. Basson suggested informing students that if the committee work is done, this is no longer an LCME issue, it's an issue of QI. He recommended seeking student volunteers with appropriately appointed faculty. These people (groups) would review and make recommendations. Ryan Norris suggested that we utilize Student Council. Dr. Zelewski commented that some Student Council members have indicated that they are not interested in enhancing their roles. It was concluded that DQIP will review the ISA 2 data analysis at a future meeting and decisions will be made after that review.</p>	
Element 1.1	<p>Table f. reviewed again. Discussed previously cited elements. Dr Tinguely explained that those in green are resolved, and those in blue require ongoing monitoring. He asked for the committee's opinion on 12.5 Non-involvement of Providers of SHS in Student Assessment/location of Student Health Record. It is noted that we previously had SHS providers in the Sim Center and that is no longer our practice and additionally COI policy for assessment wasn't in place in the previous visit. This is now in place. It was verified during the meeting that we have a conflict statement in the SIM Center grading forms. Concluded that this no longer requires DQIP monitoring.</p>	
Conflict of Interest (COI) policy	<p>COI policy is under review. It's out for comment. Once that it complete it will require approval from Faculty Council.</p>	
Element 10.3	<p>Dr. Porter provided an update. Committee as whole has not voted on this. Discussion on regarding whether the person was an instructor. He noted the policy wouldn't be admitted halfway through the admission cycle. It will need to be implemented prior to the next cycle. This will be discussed at the Admissions Committee Retreat. Definition of who makes the judgement will be included in this language.</p>	
Element 10.9	<p>Dr. Porter provided an update on students who would like to have an alternate site assignment. Campus Deans have already reviewed</p>	

	<p>this. Dr. Porter will forward to Dr. Zelewski and Dr. Carr with the language modification. Noted that if this is a procedural change only, it won't require UMEC approval.</p>	
Element 11.0	<p>Previously Reviewed 11.0-2 table. Noted that in 2019-20, 14 students took a leave of absence (LOA). Dr. Wynne asked that we circle back to this. Dr. Porter was recently asked to provide the data. He commented that he will send the updated table to Dr. Tinguely.</p>	<p>Add to February agenda.</p>
Element 12.3	<p>Narrative c. discussed whether there are issues with "stigma" of being seen entering the office. Dr. Basson commented that this is an issue of how students respond when asked by the LCME. If students aren't concerned, then it won't be an issue. He suggested we add this sentence to the narrative "These wellness advocates don't provide MH care, they facilitate referrals."</p>	
Element 12.4	<p>Narrative a. regarding medical students on regional campuses in the Dean's review he asked "can students be seen in our 2 FM clinics? And what are the confidentiality safeguards?" Dr. Basson commented that he doesn't think students are being seen in these clinics. He asked OMA to check with Dave Schmitz to see if this is occurring. This isn't in the medical care orientation per Dr. Zelewski.</p>	<p>OMA will check with Dave Schmitz.</p>
Self-Study Summary	<p>Summary has been reviewed by the internal and external SSTF groups. UMEC reviewed and approval has taken place. DQIP reviewed at this meeting. Dr. Zelewski commented that she liked the comments that Dr. Basson emailed to the committee. The committee agrees that these should be incorporated. These would include:</p> <ol style="list-style-type: none"> 1. Creation of a structured note template customized for each visit to guide the career counselor through the process at each visit. 2. Central monitoring of these visits to make sure that they occur. 	

	<p>3. The creation of an additional data base of clinicians in various specialties who can also be available to students with specialty-specific questions.</p> <p>Discussed whether we should include any of the areas of improvement noted in the ISA2. These conclusions have been included in the DCI but not in the SSSR. Concluded that it would be beneficial to include this information and indicate that while this may be a preliminary review/report, there is evidence to suggest that things have improved.</p> <p>Dr Grove made a few suggestions which he submitted in writing. Dr. Tinguely will incorporate the suggestions made by Dr. Basson, Dr. Zelewski and Dr. Grove and then return to the Dean for his final review.</p> <p>Document was approved with these modifications.</p>	
DCI Submission Update	Dr. Tinguely shared the timeline for DCI review, completion and submission. All documents need to be submitted by January 31, 2022. Elements have been combined into standards and the entire document has been forwarded to the Dean for his final review.	
Mock Visit Schedule and Preparation	Visit schedule has been finalized, schedule was emailed out by Jeanette Gratton along with the Outlook calendar invites. OMA is sending out emails to all participants which include DCI elements relevant to their respective sessions as well as possible questions to anticipate. IT support is expected to be provided by Nasser Hammami (Information Resources) and his team.	
Tracking Individual Professionalism and Mistreatment Over Time	Ongoing agenda item	Add to February agenda
Frequency of DQIP meetings Post LCME Survey Visit	Ongoing agenda item	Add to February agenda

Document Proposal to Executive Committee (Central Repository) (Committee Discussion re password protected docs)	Ongoing agenda item	Add to February agenda
Announcements/Next Meeting	February 2, 2022	

Submitted by Sheila Bosh, RN, Accreditation Manager
 Approved by Dr. Stephen Tinguely, Chief Accreditation Officer