

**SMHS Dean's Quality Improvement Panel (DQIP) Meeting  
December 6, 2021 2:30-4:30 PM (Zoom)**

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

**Absent:**

AGENDA ITEM	SUMMARY	ACTION/FOLLOW-UP
<b>Call meeting to order</b>	Meeting was called to order by Dr. Stephen Tinguely, Committee Chair.	
<b>Review of Minutes</b>	Review of November 24, 2021 meeting minutes. Minutes posted on Blackboard.	Minutes approved.
<b>ISA 2 Survey</b>	Ryan Norris (MS4) ISA 2 student lead provided an update. Student response has been fantastic so far (47% across entire student body). Survey will close on December 15 <sup>th</sup> (3wk survey period). Dr. Tinguely and Dean Wynne commented that the survey will need to close on that date even if the response rate hasn't reached 100%, so that we have enough time for data analysis and entering data into the DCI before submission.	Add to December 22 agenda
<b>Mock Visit Update</b>	Sheila Bosh provided an update. Mock visit schedule will be finalized next week. All participants except for residents have been identified. Residents will be identified by Kim Becker by the end of this week. Students were chosen by the class presidents. All who are participating in the Mock Visit have also been asked to participate in the LCME visit. Finalized schedule will be shared at the next meeting.	Add to December 22 agenda
<b>Student Satisfaction Overall Quality of Education - Follow up Survey</b>	Susan Zelewski provided an update. A significant decrease in satisfaction with overall satisfaction with the quality of medical education was noted on the GQ. Dr. Zelewski sent out this follow up survey to the class of 2021 to gain further understanding as to why this occurred. There were 27 respondents. 19% strongly agreed that	

	<p>they were satisfied with the quality of their medical education, 33% agreed, 15% were neutral and 33% disagreed. Students who were neutral or dissatisfied commented on the outdated curriculum, they felt that their comments were not heard, they were also unhappy with some of the administrative processes. Those who were not satisfied with curriculum were asked if COVID had an impact on their level of satisfaction. Only one person agreed that their experience was impacted by COVID. Dr. Zelewski sent the graduates a follow up message that included a summary of what the school has accomplished. She wanted the former students to know the loop was closed in areas of their concern. Both the survey and the summary have been posted to Blackboard.</p>	
<p><b>Frequency of DQIP meetings Post LCME Survey Visit</b></p>	<p>A post survey meeting has been added to calendars. This will occur after the Dean receives the preliminary report from the survey team. Briefly discussed the role of DQIP and the frequency of meetings following the survey visit. It is noted that the LCME will not meet until October following the visit. It's noted that we will have things from the ISA2 to discuss while we await our official findings.</p>	<p>Add to December 22 agenda</p>
<p><b>Element Review</b></p>	<p>Element 8.2 Use of Medical Educational Program Objectives Dr. Wynne commented that part of the last paragraph in our response to narrative b. may not be necessary. In narrative b. we are asked to <i>Describe the status of linking course and clerkship learning objectives to medical education program objectives. Summarize the roles and activities of course/clerkship faculty and the curriculum committee and its subcommittees in making and reviewing this linkage.</i></p> <p>The Committee recommended removing the last sentence of the final paragraph <i>“The CEMC then used that linking to create a gaps and redundancy analysis report to identify areas of potential need for new course and clerkship objectives in order to fully reflect the program objectives”.</i></p> <p>Element 10.3 Policies Regarding Student Selection/Progress and Their Dissemination Our response states:</p>	

	<ul style="list-style-type: none"> <li>• Ranked applicants are listed as three groups: 1) North Dakota (ND); 2) Minnesota and Western Interstate Commission for Higher Education (MN/WICHE); and 3) Indians into Medicine Program (INMED, a federally sponsored initiative).</li> <li>• The top 60 ND, 11 MN/WICHE, and 7 INMED applicants are offered an invitation to join the incoming class.</li> </ul> <p>The Dean asked whether there's a concern with it appearing as though we are setting a quota based on race and whether this is legal. Jim Porter commented that we have contracts with WICHE to accept students. Marc Basson commented that InMED is not based on race or ethnicity but on citizenship per his conversation with Dr. Warne. The Dean recommended that Dr. Tinguely check with Legal (Jason Jenkins). It was suggested that we add the word "ranked" after the word "top" in the bullet <i>The top 60 ND</i>.</p>	<p>Dr. Tinguely will contact Jason Jenkins</p>
<p><b>Self-Study Conclusions and Summary Report</b></p>	<p>Discussed the format of the document to be submitted to the LCME with the DCI. The LCME prefers that the summary report be 5-8 pages. DQIP is responsible for determining the strengths and weaknesses of the school. The committee reviewed standards 1 – 9 during this meeting.</p> <p>1.1 area of strength No weakness in Std 1 Std 3 3.2 &amp; 4.2 are strengths Dr. Ruit suggested that we comment on the strengths and potential weakness of certain areas such as 3.6 diversity. Std 4 4.1 Dr. Zelewski commented this may be an area of concern. Specifically, Psych, Neurology and General IM availability of faculty varies per campus. The Dean will consider adding this to the Dean's Sunday night meeting, rather than including in the summary report. Noted 4.2 is a strength but is also a weakness from a student perspective. REMS info should go into the DCI (include the table that Dr. Basson has that shows the trend line). Std 5 5.8 &amp; 5.9 potential strengths</p>	<p>Add Standard 10, 11, 12 review to December 22 agenda</p>

	<p>Strength 5.1 mention bidirectional support within the community, sending students back into our community which is our mission. Defined in Century Code and in our Strategic Plan.</p> <p>Std 6, 7 &amp; 8 IPE and Simulations are both strengths, as well as the SHaPE program. In IPE talk about strengths and opportunities (students unhappy with IPHC, they are very pleased with Interprofessional STEMS). Rick Van Eck suggests commenting on strengths and opportunities using the IPE survey that's upcoming.</p> <p>7.6 weakness with opportunity for strength.</p> <p>8.5 weakness and strength</p> <p>No strengths or weaknesses noted in Std 2 or Std 9</p> <p>Std 10, 11, &amp; 12 deferred</p>	
<p><b>Document Proposal to Executive Committee (Central Repository) (Committee Discussion re password protected docs)</b></p>	Deferred	Add to January agenda
<p><b>Tracking Individual Professionalism and Mistreatment Over Time</b></p>	Deferred	Add to December 22 agenda
<p><b>Announcements/Next Meeting</b></p>	December 22, 2021	

Submitted by Sheila Bosh, RN, Accreditation Manager

Approved by Dr. Stephen Tinguely, Chief Accreditation Officer