

Education Accreditation Standards Review Subcommittee (EASRS) Meeting Minutes
SMHS

Wednesday, January 16, 2019 – 4:30 pm in room E493 and via phone/video

In attendance: Pat Carr, Joy Dorscher, Bryon Grove, Erica Johnson, Steve Tinguely, Ken Ruit, Bryan Delage, Rick Van Eck, Mark Koponen and Susan Zelewski.

Not in attendance: Dinesh Bande and Leigh Moyer.

Minutes Submitted by: Alissa Hancock

MSC = motion made, seconded, carried

Minutes Reviewed by: Steve Tinguely

Minutes Approved by: Bryon Grove and Mark Koponen

AGENDA ITEM	SUMMARY	ACTION/FOLLOW-UP
1. Welcome/call to order (Tinguely)	Dr. Tinguely called the meeting to order at 4:33 p.m. via video conferencing in room E493.	Informational
2. Review and approve meeting minutes October & November 2018	<p>a. October meeting minutes</p> <p>b. November meeting minutes</p> <p>c. Action Table Review and Updates All clerkships have been encouraged to add inter-professional objectives into their clerkships when and where they can. It was agreed to mark 6.7 as completed.</p> <p>7.2 – The Standard 7 review report recently sent to MCC contains the following: Even though EASRS is confident that the above content areas are experienced by all students during their preclinical learning experiences and in their clinical encounters, mapping of these content areas to the UNDSMHS Competencies for Undergraduate Medical Education document and to specific clerkship learning objectives has not yet been completed.</p> <p>2018 Action Plan Recommendations:</p> <ol style="list-style-type: none"> 1. Send to CEMS and BSCS the following for review and action: <ol style="list-style-type: none"> a. Element 7.2 DCI questions, b. EASRS current conclusions regarding this Element c. The recommended Action Plans from the 2016 Standard 7 Report 2. Request a status report from CEMS and BSCS within 6 months that addresses how our medical curriculum is meeting the intent of Element 7.2. <p>7.9 –The Standard 7 review report recently sent to MCC contains the following: Action Plan Recommendations:</p> <ol style="list-style-type: none"> 1. IPHC directors develop assessment methods for the IPHC 	<p>MSC – approve October minutes. Rick Van Eck / Susan Zelewski // carried.</p> <p>MSC – approve November minutes. Mark Koponen / Rick Van Eck // carried.</p> <p>7.2 Action Item Table: Request status report from CEMS and BSCS to EARS in 6 months.</p> <p>7.9 Follow up with IPHC directors in 6 months regarding the creation of IPHC assessment methods and the coordination of IPHC in the clinical phase of the curriculum</p>

	<p>2. MCC consider how best to coordinate the teaching and assessing of interprofessional skills over the four-year curriculum.</p> <p>Dr. Zelewski will write a short statement on the status of IPHC in the clinical phase of the curriculum.</p>	
<p>3. Old Business</p>		
<p>4. New Business</p>	<p>a. 8.1 Curriculum Management (Koponen) Dr. Koponen presented formal review and analysis of Element 8.1 in written format.</p> <p>It was noted that 8.1 d of the DCI needed to include the Curriculum Evaluation and Management Subcommittee (CEMS) along with its membership and role in the support of the work of MCC.</p> <p>There was discussion of whether or not regular reviews and formal processes for evaluation of the multiple component of the medical curriculum suffices for planning, integrating, evaluating and monitoring the curriculum as a whole. This committee concludes that the School does a good job in the horizontal monitoring and management of the curriculum but has work to do in the vertical integration of the curriculum over all four years. The work recently undertaken to revise the entire 4-year curriculum will go far to achieve the intent of this section of Element 8.1.</p>	<p>Dr. Koponen will add information re CEMS to Element 8.1 DCI information.</p> <p>Anticipate regular updates as curriculum revision planning progresses.</p>
	<p>b. 8.2 Use of the Medical Ed Program Objectives (Van Eck) We are in the process of reviewing all the objectives and making sure that they are also mapped to the new domains and competencies (i.e., our medical program overall objectives). Ideally, it is the responsibility of the curricular subcommittees to help ensure that the clinical and basic sciences faculty course and clerkship objectives link to the program objective.</p> <p>It was mentioned that the origins of some of the course objectives are unknown. We have to accept that faculty members approved these objectives at one point because they felt they were appropriate and met the educational goals at the time as they have continued to serve us well overtime. It was discussed that the process</p>	<p>Action Item: Dr. Van Eck will add a preamble to the report and this will be reviewed at our next meeting.</p>

	<p>of the addition of new course and clerkship objectives is rigorous; that the linking of these objectives to the overall program objectives is deliberate; and these objectives are adopted only after receiving approval by curriculum subcommittees and the MCC.</p> <p>The committee agreed that this report does answer the DCI question fully and therefore Dr. Van Eck will write a preamble to the 8.2 a. narrative response that will place the rest of the narrative in context to our current processes and practices.</p>	
	<p>c. 8.4 Program Evaluation (Carr)</p> <p>There was discussion whether DCI table 8.4-2 should also include the Y2Q report as an outcome indicator. Interestingly Y2Q was not listed by the LCME in the DCI table.</p> <p>Data regarding the licensure rates and location and practice types are incomplete and out dated. The committee concluded that this outcome data would be valuable to the School as it evaluates the success of meeting its mission and purpose of providing health care providers for the state. The School's Center for Rural Health has access to the AMA data and therefore could potentially provide us with the requested data. Dr. Carr will reach out to Mandy in Rural Health for assistance.</p> <p>It was discussed whether or not we are addressing correctly the question posed in the DCI of how we evaluate meeting our program objectives. Our answer addresses that the methods used in evaluating individual students. Some committee members felt that this satisfactorily explains the outcome of the program objectives. Others felt that there should be a defined program objective outcome measure of itself. In the end it was concluded that by following student outcomes we are properly gauging the outcome of particular program objective.</p> <p>It was suggested that the DCI narrative should re-state the question to prove that we understand what they are asking. It should be clear that assessment methods are linked with learning objectives. For example, we could have a checklist and include ways that we demonstrate that the students are assessed in relationship to the objectives to ensure that we are meeting our goals.</p>	<p>Action Item: Dr. Carr will work with Mandy Peterson from Rural Health to get updated data regarding licensure rates, practice types and locations for our graduates.</p>
	<p>d. 8.5 Medical Student Feedback (Grove)</p> <p>Dr Grove submitted a report with updated answers to DCI questions pertaining to this Element. There were no questions from the subcommittee about the report.</p>	<p>Dr. Grove will add clarifications to his Element 8.5 report.</p>

	<p>Dr Grove asked for clarification regarding the current end of block evaluations from students and whether these include course evaluations of faculty and how that information should be best addressed in this report.</p> <p>Dr Grove also asked for clarification re DCI section 8.5.b. regarding student evaluation of residents as teachers. Dr. Zelewski will write a statement addressing this process.</p>	
5. Other Business		
	<p><u>Future Meeting Assignments:</u></p> <p>February</p> <p>8.3 Curriculum Design/Review/Revision/Monitoring: Tinguely</p> <p>8.6 Monitoring Required experiences: Zelewski</p> <p>8.7 Comparability of Education/Assessment: Bande</p> <p>8.8 Monitoring Student Time: Delage</p>	Informational
6. Adjournment/Next EASRS Meeting	Dr. Tinguely adjourned the meeting at 6:01 pm.	Next meeting is Wednesday, February 20, 2018 in Room E493.