

**Medical Curriculum Committee Meeting Minutes – Additional Meeting
SMHS**

Wednesday, August 24, 2016- 4:30 PM, Room E493, via telecomm, and video

In attendance: Marc Basson, James Beal, Mike Booth, Pat Carr, Charlie Christianson, Gene Delorme, Jonathan Geiger, Dawn Hackman, Gwen Halaas, Mark Koponen, Jay MacGregor, Rebecca Maher, Marlys Peterson, Thad Rosenberger, Shae Samuelson, John Shabb, Steve Tinguely, Rick Van Eck, Chen Xuesong, Susan Zelewski

Minutes Submitted by: Rebecca Maher

Minutes Reviewed by: Rick Van Eck

Minutes Approved: 10/26/16

AGENDA ITEM	SUMMARY	ACTION/FOLLOW-UP
1. Welcome/call to order	Dr. Van Eck called the meeting to order at 4:33p in Room E493	Informational.
2. New Business	<p>a.) Surgery Clerkship Report 2014-15 (MacGregor)</p> <ul style="list-style-type: none"> • Dr. MacGregor’s report focused on 3rd year students. The learning goals have not changed. There are 8 goals that were collected and used again this school year. The objectives are known during the 1st week of the year. Section 2 is for the upcoming year and prior to this there were no minimum requirements for student/patient encounters. There was a table that was created on patient type and condition in which 5 broad categories were picked and used number of encounters that would be reasonable for students located at all sites. This is implemented this year. • Section 3 is a breakdown of numbers by site. The averages are similar at each of the campuses. There were 6 honor grades in which 4 of them were at the SE campus. There were 6 students who needed to retake the Shelf exam and 3 students whom required the 4-week remediation but after all ended passing. • Faculty communicates at a minimum of 2 times a year and also as needed. • Number 5 on page 3 said the formula was modified. This has actually been modified again. Surgery reports are from previous years so some things have been modified. • This report had a few suggestions such as adding Minot in Section 3 <p>b.) Surgery AI Report 2014-15 (MacGregor)</p> <ul style="list-style-type: none"> • Objectives are included. This is an AI that has 2 weeks of surgery and 2 weeks of orthopedics. The required activities are listed. The conferences that are required by the Fargo and Grand Forks students are encouraged but not required of students 	<p>MSC to accept Surgery Clerkship report/surgery AI report w/ modifications in Clerkship report Mark Koponen/Pat Carr//all in favor</p> <p>Action item- add descriptor of why surgery clerkship grade was modified and add in section 7A what will be done to improve</p>

	<p>on Minot or Bismarck campus. Average score of the assessments are under section 2. Students who scored under 2.5 were given an unsatisfactory score and over 3.6 receives honors. No students were required for remediation during this year. Students generally liked their orthopedics and surgery rotations.</p> <p>c.) MCC Rep on EASRS (Van Eck/Tinguely)</p> <ul style="list-style-type: none"> • EASRS needs a MCC rep to replace Tom Hill. The rep will need to be a current voting member of MCC. Dr. Tinguely stressed how exciting the EASRS committee is <ul style="list-style-type: none"> ○ Nominations will be asked through electronically 	<p>Action Item-Send out e-mail for nominations of EASRS rep</p>
<p>3. Standing Agenda Items</p>	<p>a.) Approval of Minutes of 7.13.16 (Van Eck)</p> <ul style="list-style-type: none"> • There were no questions or comments 	<p>MSC to approve 7.13.16 meeting minutes Mark Koponen/Thad Rosenberger//carried</p>
	<p>b.) Subcommittee Reports and Action Request</p> <p>i. BSCS report (Shabb)</p> <ul style="list-style-type: none"> • BSCS met on 16 August. The subcommittee spent time reviewing the curriculum mapping exercise that was presented at the Medical Curriculum retreat back in June. BSCS discussed where TB was being taught and what activities were associated with teaching TB. BSCS decided to create the following action items: <ul style="list-style-type: none"> • a) Kurt Borg to meet with independent individuals who are teaching TB to make them aware others are teaching the same thing. • b) The few course objectives that were not linked to any sessions/activities will be removed. • c) Acquire individuals like Dr. Clarens to talk about the TB outbreak. *TB was chosen as the topic since we were already on the topic/news and also because there was talk about blocks 5 and 6 changing Friday's into a team based exercise around TB. Pat Carr had brought up the consideration of shared facilitation on block 7 & 8 in which BSCS has agreed in concept that this is a good idea to reduce the facilitators during these blocks but we do not have a mechanism yet. <p>ii. CSCS Report (Zelewski)</p> <ul style="list-style-type: none"> • Electives were passed and moved to MCC for approval. Some documents have not been posted therefore, they will be moved to an upcoming meeting agenda. <p>1. Update on Patient Safety Curriculum</p> <ul style="list-style-type: none"> • There will be a focus group meeting in the near future about the Patient Safety Curriculum 	<p>Informational</p>

	<p>iii. EASRS Report (Tinguely)</p> <ul style="list-style-type: none"> EASRS is reviewing LCME Standard 7 content 	
	<p>c.) Policies Update (Dorscher)</p> <ul style="list-style-type: none"> Dr. Dorscher was not present however, there are no policies to update on 	Informational
	<p>d.) LCME Update</p> <p>i. Element 6.2: Required Clinical Experiences (Zelewski)</p> <ol style="list-style-type: none"> All required activities for this next year CSCS approved changes to the list on 7/12 More changes will come in October-clerkships specify exams These will be sent to MCC for review on future agenda <ul style="list-style-type: none"> In Element 6.2 we saw an example of Surgery. We now have the same template for each clerkship. The changes are not simple to point out (examples: online cases taken out and clinical experiences were subbed out and moved to clinical encounter, family medicine used to 2 muscular and 5 skeletal in efforts to ensure the students got enough clinical encounter experiences. These have been approved as CSCS however, MCC needs look at to determine if there is any unexpected gaps or redundancy. We are asking all clerkships to identify exams in which are being accomplished and will be coming in October <p>STANDARD 6</p> <ul style="list-style-type: none"> We accomplished section 2 at our last meeting. 6.1, 6.2, 6.3 still require monitoring. We are monitoring 6.2 because LCME cited us on it, 6.3 because there is a policy regarding pre-clinical students required learning outside lecture times. Policy is being addressed with BSCS Section 1 still needs approval. Section 1 was motioned to be approved with no changes. All in favor. 	<p>Official approval will be during the next meeting (September 21)</p> <p>MSC to approve section 1 of Standard 6 Thad Rosenberger/Mark Koponen// carried</p>
	<p>e.) Electives (Zelewski)</p> <p>i. (NEW) NE Campus: Pain Management – Surgery 93**</p> <ul style="list-style-type: none"> There is a student who will already like to take this elective later in the year There was a discussion about why this elective is under Surgery and it was decided that this elective remain under Surgery <p>ii. (NEW) SE Campus: Cardiology – IMED 92**</p> <ul style="list-style-type: none"> This is the second elective. The question arose if Dr. Fenstad (past student of UND) wanted to offer this again. This is taught by a past student of ours No other questions or issues with this elective <p>iii. Surgery AIs – additional sites</p>	<p>MSC to approve all w/ link added in AI's Thad Rosenberger/Mark Koponen//carried</p>

	<ol style="list-style-type: none"> 1. SE Campus SURG 9298 2. NE Campus SURG 9395 3. NW Campus SURG 9497 <ul style="list-style-type: none"> • Surgery AI's are identical info but are at different locations. • Link still needs to be added. The link will contain the URL to the elective <p>f.) Follow up on Action Item Table</p> <p>i. Attendance Policy Issue, Next Steps (Carried from 7/13 Meeting)</p> <ul style="list-style-type: none"> • A proposal to make all lectures mandatory was sent to MCC by BSCS and was not approved. During the last meeting there was a vigorous discussion about additional thoughts and actions that could use revision. • Suggestions: <ol style="list-style-type: none"> 1. Wait until the ending of the semester to determine how students do 2. Have a sub group to talk about possible options to consider 3. Leave it as unapproved at MCC level and allow BSCS to decide if they should bring it up after revisions or not. 4. Be proactive by letting students know what their responsibilities are and stressing the importance of attending educational functions. • The consensus was to not act but instead have BSCS decide if they would like to revisit the topic and said revisions forward for approval. <p>ii. MPC Update – Response from FAC (Van Eck; Tinguely)</p> <ul style="list-style-type: none"> • MPC was moved to a different agenda for FAC and should be on the November meeting agenda <ol style="list-style-type: none"> 1. As of now we will continue to work on MPC <p>iii. MCC Representative on CSCS (Van Eck)</p> <ul style="list-style-type: none"> • Charlie Christianson agreed to continue serving as the MCC rep on CSCS <p>iv. Program Goals and Objectives Task Force Update (Christianson)</p> <ul style="list-style-type: none"> • An e-mail sent out that contained a suggestion of renaming the task force to Competency Task Force sparked a lot of interest. • The decision was made to bring a single document up for review rather than the entire domain document. <ol style="list-style-type: none"> 1. Dr. Pant revisited the paragraphs of the Philosophy of Education in which we can vote on during the next meeting 	Informational
4. Next MCC Meeting	Next Regular Meeting – September 21, 2016 – 4:30 PM, Room E493 & Video Bismarck/Fargo	Informational

5. Adjournment	Meeting was adjourned at 5:54 pm.	Informational
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APPROVED