

Medical Curriculum Committee Meeting Minutes – Additional Meeting
SMHS

Wednesday, September 21, 2016- 4:30 PM, Room E493, via telecomm, and video

In attendance: Marc Basson, Mike Booth, Pat Carr, Charlie Christianson, Gene Delorme, Joy Dorscher, Jonathan Geiger, Dawn Hackman, Gwen Halaas, Scott Knutson, Mark Koponen, Jay Macgregor, Rebecca Maher, Shanalee Mountain, Devendra Pant, Thad Rosenberger, John Shabb, Chris Tiongson, Rick Van Eck, Chen Xuesong

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	<p>Dr. Van Eck called the meeting to order at 4:32p in Room E493</p> <ul style="list-style-type: none"> a. We went around the room and did introduction as we have a new member (Shanalee Mountain MSII) 	Informational.
2. New Business	<ul style="list-style-type: none"> a.) BSCS report (Dev) <ul style="list-style-type: none"> i. Block 4 report (2015-16) <ul style="list-style-type: none"> • Dr. pant reported on end of block report for block 4 from class of 2019. This class started with 79 students and ended with 76 students (1 student failed, 1 took absence of leave). By the time students entered block 4 they had completed 24 PCL sessions. The students feel comfortable with the goals and expectations of program. Students scored 83 in MCQ, 87 in Case, and 95 Clinical. The passing score was 75(MCQ), 75(Case), and 80(Clinical). There were 12 students who failed the MCQ, but passed during the retake. There were no block failures which makes this block successful and on par with previous years. The End of Block (EOB) scores in individual disciplines, such as Gross Anatomy Practical, Gross Anatomy & Embryology, Biochemistry/Molecular Biology, Histology (MCQ), Pathophysiology, Clinical Skills and End of Lie Care increased by a range of 4 to 9 points compared to the previous year. Scores in Physiology, Communication, Diagnostic Studies decreased by 7 to 9 points from the previous year. The students highly valued Dry Labs and case vignettes (20 hits) and the PCL experience (19 hits) as the most important elements that helped them learn. The students identified that the patient-centered approach to care was reinforced by the patient-case wrap up; PCL sessions; dry lab case vignettes discussions, clinical lectures. Some goals for Block 4 in 2017 are: <ul style="list-style-type: none"> a. Continue the organizational sequence of the neuro-science lectures and labs as offered in 2016 	

	<ul style="list-style-type: none"> b. Continue the offering of dry lab vignette presentations in neuro-anatomy to the students c. Discuss the issue of “the lecture recordings ended prematurely” with the respective unit and seek a solution d. Request the lecturer to include specific learning objectives in the afternoon lecture topic “Oral Health”. e. Based on the feedback obtained from the QBs in the weekly feedback meetings, it has been proposed to introduce a session “Imaging of the brain and spinal cord” in Block IV. The rationale is the help students better understand (and interpret) the MRI and CT scan images presented in the Exhibits embedded into the PCL cases in Block IV. <p>There have been four new items that have been added to the Block IV evaluation form in 2016</p> <ul style="list-style-type: none"> a. Two items on simulations experience, one related to the simulation scenario and the other related to the simulation debriefing b. One item on Small Group Bioethics Discussion c. One item on Panel Discussion on Death and Dying <p>The concern in regards to a student’s comment about education sharing was brought up and discussed. The way we are trying to prevent this is by changing questions but keeping the concept of the Exams. We hope to have multiple exams in the future.</p> <p>Comments:</p> <ul style="list-style-type: none"> ➤ There was one concern about this report and how Pharmacology has the lowest rank that is reported. It is believed that the reasoning behind this is because students literally do not know anything about them or how to even pronounce them. The suggestion to emphasize this in block IV was made or to even add this into an afternoon lecture that is not yet specified. ➤ Currently, there are no objectives for the dental lecture. ➤ Dev made a suggestion to have a meeting prior to retreat about this report 	<p>Action Item-Pharmacology issue in regards to having the lowest rank to be put on next agenda for further discussion and brainstorm ways to improve</p> <p>MSC to accept block 4 report Dr. Christianson/Rosenberger//all in favor; carried anonymously</p> <p>Action Item-meeting will be scheduled for this report prior to the next Curriculum Retreat</p>
<p>3. Standing Agenda Items</p>	<p>a.) Approval of Minutes of 8.24.16 (Van Eck)</p> <ul style="list-style-type: none"> • Minutes will be for next meeting agenda 	<p>Moved to Octobers meeting agenda</p>

	<p>b.) Subcommittee Reports and Action Request</p> <p>i. BSCS report (Shabb)</p> <ul style="list-style-type: none"> ➤ We are at a “wait and see” mode with shared facilitation & lecture attendance policy. ➤ The current policy about lecture attendance will be in effect in the meantime. ➤ Element 8.3.2- We are currently developing a policy for required unscheduled time for medical students (will be LCME accreditation response). We expect to have this policy forward to MCC in October. Currently there is no policy. ➤ The curriculum mapping exercise that was done on TB helped us identify any overlap in content and specifically about the 2012 Grand Forks outbreak in TB, Block 5 PCL case, Block 6 Pharmacology lecture, and Public Health perspective/hospital care perspective. We then instructed Dr. Borg to make the individuals teaching the same thing aware of what is being taught. ➤ The block 2 Immunology instruction new PCL case is currently being developed however, it will probably not be used in this year. ➤ We have reviewed aspects of GQ that are applied to the first two years and saw nothing that arose to the level of action. <ul style="list-style-type: none"> ● A discussion came up about the students not because able to hear past lectures. Lectures are not available for students who are not in the class to avoid any outdated information. There are many problems that may come up if the lectures from past years were available due to content possibly not being up to par. <p>ii. CSCS Report (Zelewski)</p> <ul style="list-style-type: none"> ● Dr. Zelewski is not here however, Dr. Basson mentioned clerkship director concerns about step 1 and taking time off prior to beginning their rotations and how it could make future students rotations change was discussed previously at CSCS. <p>iii. EASRS Report (Tinguely)</p> <ol style="list-style-type: none"> 1. MCC Rep on EASRS (Van Eck/Tinguely) EASRS currently need a MCC rep. There were no volunteers Dr. Christianson volunteered to serve. Upon consulting the bylaws, nothing was found that would prevent Dr. Christianson from serving in this capacity. MSC- to make Dr. Christianson the MCC rep for EASRS 	<p>Informational</p> <p>MSC to make Dr. Christianson MCC rep for EASRS Dr. Rosenberger/Koponen//all in favor; carried anonymously</p>
	<p>c.) Policies Update (Dorscher)</p> <ul style="list-style-type: none"> ● Nothing to report on. Dr. Dorscher is currently working on the Dean’s letters 	<p>Informational</p>

	<p>d.) Electives (Zelewski)</p> <p>i. Heme-Onc NE Campus</p> <ul style="list-style-type: none"> • This elective already exists however, it is for a different campus <ul style="list-style-type: none"> ○ MSC to approve this elective; carried unanimously 	<p>MSC Heme-Onc NE Campus elective Dr. Christianson/Rosenberger//all in favor; carried anonymously</p>
	<p>e.) Follow up on Action Item Table</p> <p>i. Revisit by-laws for the continuity of committees - representation by chairs and not an appointed position</p> <p>not discussing this—moved to future agenda</p> <p>ii. Program Goals and Objectives Task Force Update (Christianson)</p> <ol style="list-style-type: none"> 1. MD Curriculum Philosophy <ul style="list-style-type: none"> • This is the first document back from the goals and objectives task force. It is informational only, as it will be part of a larger document that the task force is working on. This goes at the front of the goals and objectives. Dr. pant had made some updated changes and modifications. One comment about PCL being part of it as philosophy of education which could lead to the need to revise it if the PCL strategy ever changes. Future versions of the document will be considered and approved, so the changes could be made at that time if needed. MSC to accept Christianson/Rosenberger//all in favor 	<p>MSC to accept the MD Curriculum Philosophy document presented by the Task Force as is Dr. Christianson/Rosenberger//all in favor; carried anonymously</p>
4. Next MCC Meeting	Next Regular Meeting – October 26, 2016 – 4:30 PM, Room E493 & Video Fargo	Informational
5. Adjournment	Meeting was adjourned at 6:07 pm.	Informational