

Medical Curriculum Committee Meeting Minutes – Additional Meeting
SMHS
Wednesday, January 27, 2016- 4:30 PM, Room 1917, via telecomm, and video

In attendance: Sarah Meyers, Scott Knutson, Lucas Holkup, Mike Booth, Steve Tinguely, Chris Tiongson, Susan Zelewski, Pat Carr, Shae Samuelson, Dev Pant, Lilia Pederson, Rick Van Eck, Thad Rosenberger, Bryon Grove, Heidi Philpot, Joy Dorscher, Charlie Christianson, Jyotika Sharma, Dawn Hackman, Erik Christensen, David Bradley, Marc Basson

Minutes Submitted by: Shae Samuelson

Minutes Reviewed by: Pat Carr 2.3.16

Minutes Approved by: Sarah Meyers/Pat Carr 2.24.16

AGENDA ITEM	SUMMARY	ACTION/FOLLOW-UP
1. Welcome/call to order	Dr. Carr called the meeting to order at 4:32p. Dr. Sharma was welcomed to the committee.	
2. Approval of Minutes of 12/9/15 & 1/13/16		<p>MSC to approve the 12.9.15 Meeting Minutes. Thad Rosenberger/Bryon Grove – all in favor, carried unanimously.</p> <p>MSC to approve the 1.13.16 Meeting Minutes. Thad Rosenberger/Charlie Christianson – all in favor, carried unanimously.</p>
3. Subcommittee Reports and Action Requests	a. Biomedical Sciences Curriculum Subcommittee Report (J. Shabb)	Tabled
	<p>b. Clinical Sciences Curriculum Subcommittee Report (S. Zelewski) - Currently many clinical experiences can be either observed or participated in, this will be adjusted to not allow for any students to only end up observing. Working on the Duty hours policy and have decided asking questions from the student about compliance of duty hours and 5 main tenants on evaluation form. More to come. Discussed the Internal Medicine AI report that is on hold. It will come forward as soon as possible. Epidemiology report will be coming to CSCS next month with the approved report template from MCC.</p>	Informational.

	<p>i. CSCS Request for evaluation of the length of preclinical education Arose from the question: Can we reorganize the schedule of our medical student education enough to have an elective in the 3rd year and are we efficient in delivering the content needed. The length of time needs to match the goals and objectives, which translates to content matching time. This would also give flexibility for new things to be added to the curriculum vs. being constrained for time as it is currently. The clinical years are being looked at currently and to take it as a whole, it was requested the preclinical be looked at as well. The request would be to the curriculum review task force. It was noted to ensure mapping is part of the curriculum review.</p>	<p>Action Item: Include as part of the Curriculum Task Force</p>
	<p>c. Educational Accreditation Standards Review Subcommittee Report (S. Tinguely)</p> <p>i. Member at large to replace Shannon Sauter</p> <p>ii. Report Dr. Tinguely discussed the EASRS information storage will be held on Blackboard. The committee Has been discussing the best way to move forward in their role and purpose. LCME standard is for each school to have a continuous quality improvement group in place and active, EASRS will fill this requirement. Currently the committee has looked at what other schools have done and may adopt. In process of reviewing standard 6.</p> <p>In review of standard 6, element 6.5 electives, there is no written policy of the fourth year elective guidelines and no policy that states whether or not they need to have a broad experience. Discussion on the electives and allowing the newly approved program goals development task force to address 6.5 so that our SOM program goals and objectives will make clear the rationale for future policies with regard to elective choices for students. – Should the task force be part of this responsibility? The student representatives gave feedback: Broad is good. You cannot take more than 2 electives in a given area. Many students do not like this guideline. Students start interviewing in December and match in March. They have to decide what they want to do in October. So often electives related to specialties they are not going into are being taken after they have matched. Some student have changed their minds because of taking the broad electives. Both perspectives. After discussion it was commented that electives are valuable and ability to take electives in the 3rd year would be helpful. The discussion ended with recommendation the current guidelines turn into a policy to make us compliant for the next LCME cycle. It was noted in the policy to explain why it is broad and to include entrustable</p>	<p>MSC to Replace Shannon Sauter’s place on EASRS with Dr. Susan Zelewski –Charlie Christianson/ Bryon Grove; all in favor, carried unanimously.</p> <p>MSC to recommend the policy committee to consider changing the existing elective guidelines into a policy. Charlie Christianson/Sarah Meyers - all in favor, carried unanimously. - In the policy</p>

	activities. Last comment; make sure to include students on the task force formation.	
4. Old Business	a. Policies Update (J Dorscher) - No new policies at this time to report on.	Update.
	b. LCME Update - No new update on latest visit, should hear by end of February/Beginning of March	Update.
	c. Dr. Allen Bootcamp Follow up from 12/9/15 - Evaluation feedback: It will be formative of the teams. Students will also evaluate the experience. The experience is trying for IRB approval.	Update.
	d. Continued Discussion on 4th Year Focus Group Findings (11/4, 12/9, 1/13) i. Question 3 (David Bradley) - Concerns 1.) Lack of ability to choose specialties during rotations 2.) Communication (or lack thereof) or knowledge of program, and discrepancies from site to site and preceptor to preceptor. 3.) Students do not have a handle on the <u>why</u> in the 4 th year structure. Campus Deans meeting is follow up on consistency across campuses.	Action Item: Transmit the 4 th year policy to the preceptor and the reason for the broad clinical background
	e. BSCS Task Force Approach (Follow up on 1/13 motion) - Current objectives written 15 years ago. AAMC has written similar objectives that can be used as a template. The outcome of the discussion: Start a proposed approach and composition and then move forward and have that as a place to start a discussion for defining the process and expectations. Composition should consist of: EASRS, 4 th year, BSCS, CSCS, Mapping, Assessment. The task force will be given the items for consideration to and they will bring back what items they do not find feasible.	MSC Dr. Carr tasked with drafting the Task Force initiative and composition. Charlie Christianson/Bryon Grove – all in favor, carried unanimously.
5. New Business	a. Discussion of BSCS and CSCS Reviews of Outcomes <ul style="list-style-type: none"> – CSCS presents this information every regular MCC meeting when reviewed. – BSCS has reviewed Block 1 & 5 that will come to MCC February 10th & Block 2 & 6 was presented at the last BSCS meeting and will come to MCC March 9th. They will also review Step 1 and 2 Results. – It was discussed that MCC and it's subcommittees reviewing the outcomes/external information independently with no uniform plan. The outcome of discussion: review how it was scheduled and change for next year so it doesn't get duplicated on review. 	Action Item: Create a list of what the outcomes that the School of Medicine is interested as reviewing overall. Delegate the outcomes and note if there are no significant outcomes.

6. Electives	a. Electives for removal: NEUR 9203 Psychiatry Prairie St. John's, NEUR 9301 Psychiatry NE Human Service Center, OBGY 9402 OBGyn Cravn-Hagan Clinic - (3) – removal due to no available preceptors. Delete forever but can reinstate at a later time. - Approved at CSCS 1.12.16	MSC to approve the requested elective removal of Neur 9203, Neur 9301 & OBGY 9402 - Bryon Grove/Thad Rosenberger. All in favor, carried unanimously.
	b. (NEW) SW Campus PSYB North Dakota State Hospital (Need up to date copy) Sub-I - CSCS voted to term it a Sub –Internship - Sub I because it does not meet the requirement for AI. - Approved at CSCS 1.12.16	MSC to approve the New PSYB Sub-I Elective at the North Dakota State Hospital - Charlie Christianson/Bryon Grove. All in favor, carried unanimously.
	c. (New Section) NE Campus FMED–Viscito - Same description as a previously approved FMED Elective, only difference is its not a rural. - Approved at CSCS 1.12.16	MCS to approve the new section of Family Medicine Elective at Viscito Clinic-Charlie Christianson/Heidi Philpot
	d. (Revised) SW Campus OB Ultrasound OBGYN 9105 - Approved at CSCS 1.12.16	MSC to approve OBGYN 9105 as revised. Bryon Grove/Thad Rosenberger – all in favor, carried unanimously.
7. Next MCC Meeting	Next Regular Meeting – February 24, 2016 – 4:30 PM, Room 1917 & Video Bismarck/Fargo Next Clerkship Report/Special Meeting – February 10 th , 2016 – 4:30 PM, Room 1917	
8. Adjournment	Meeting was adjourned at 6:00p	