The Medical Student Education Committee (MSEC) of the Quillen College of Medicine met for a Retreat Meeting on Tuesday, January 18, 2022 via Zoom meeting.

**Attendance**

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<tr>
<th>FACULTY MEMBERS</th>
<th>EX OFFICIO NON-VOTING MEMBERS</th>
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<tr>
<td>Ivy Click, EdD, Chair</td>
<td>Beth Fox, MD, Vice Dean</td>
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<td>Martha Bird, MD</td>
<td>Ken Olive, MD, Assoc Dean for Accreditation Compliance</td>
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<td>Jean Daniels, PhD</td>
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<td>Thomas Ecay, PhD</td>
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<td>Jennifer Hall, PhD</td>
<td>Robert Acuff, PhD</td>
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<td>Russell Hayman, PhD</td>
<td>Keelin Roche, MD</td>
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<td>Jon Jones, MD</td>
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<td>Paul Monaco, PhD</td>
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<td>Jason Moore, MD</td>
<td>Kortni Dolinger, MS, Staff</td>
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<td>Jerry Mullersman, MD</td>
<td>Mariela McCandless, MPH, Staff</td>
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<tr>
<td>Antonio Rusinol, PhD</td>
<td>Aneida Skeens, BSIS, CAP-OM, Staff</td>
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<th>Tom Kwasigroch, PhD</th>
<th>Lindsey Henson, MD</th>
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<td>Amanda Stoltz, MD</td>
<td>Melissa Hood, MPH, CHCP, CAP</td>
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<td>Robert Schoborg, PhD</td>
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<td>Rachel Walden, MLIS</td>
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<td>Deidre Pierce, MD</td>
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<td>Amanda Stoltz, MD</td>
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<td>Deidre Pierce, MD</td>
<td>Tory Street, AD</td>
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<td>Amanda Stoltz, MD</td>
<td>Doug Thewke, PhD</td>
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<td>Robert Schoborg, PhD</td>
<td>Joyce Troxler, MD</td>
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Retreat Meeting Minutes

Dr. Click opened the meeting at 12:03 p.m. and noted that the meeting would begin with Dr. Antonio Rusinol’s presentation on Team-Based Learning as all course directors were invited to attend the workshop.

1. Workshop: Team-Based Learning

Dr. Antonio Rusinol presented a Team-Based Learning (TBL) workshop. The presentation included discussions on:

- TBL Exercise at a Glance
- Creating a TBL Module
- Backward Design Steps for a TBL Module
- Develop Learning Objectives
- Design 4S Application Activities/Tasks
- Considerations
- Sources of Vignettes for Basic Sciences Courses
- The Tale of a Learning Objective Becoming a TBL Activity
- Summarizing
- Examples of Prompts Eliciting Constrained Responses
- Special Cases: Laundry Lists
- So, a Template Could be
- Checking Your Work
- Develop Readiness Assurance Process

A recording of the presentation is available on Panopto using the link below:

https://etsu.hosted.panopto.com/Panopto/Pages/Viewer.aspx?id=65ee05ab-1e25-47d1-9468-ae2301051a9e

2. Approve: Minutes from the MSEC November 16, 2021 Meeting.

Dr. Click asked for comments/updates to the November 16, 2021 meeting minutes, which were distributed with the MSEC meeting reminder. Dr. Click noted that the December MSEC meeting was cancelled.

A motion was made to accept the November 16, 2021 minutes and seconded. MSEC approved the motion.

The MSEC minutes for November 16, 2021 are shared with MSEC Members via Microsoft Teams document storage.

Announcements:

- Faculty Development
  - Thursday, January 26, 5:30-6:30 PM, Virtual Event – Putting Behavioral into Health: A Model for Integrated Care Teams
    - Jodi Polaha, PhD and Matthew Tolliver, PhD
    - Registration is required – check email from CME
MSEC Retreat Minutes – January 18, 2022

- February – TBD
- Wednesday, March 16, 12:15 PM – **How to Run an Inclusive Search**
  - Rachel Walden, Lori Erickson, and Kasey Hommel
- Wednesday, April 20, 12:15 PM – **Stress Management**
  - Dr. Katherine Bartek

- Other Announcements
  - Course Director meeting will be January 27 at 3:30 PM via Zoom
  - Welcome Dr. Fox as new Vice Dean for Academic Affairs
    - Dr. Olive will remain as a non-voting MSEC member
  - Welcome new MSEC members
    - Dr. Jean Daniels
    - Dr. T.J. Mitchell
    - Dr. Jerry Mullersman

- Correction to November 16, 2021 Doctoring II Course Review
  - Following the November 16, 2021 MSEC meeting, an error was noted in the Doctoring II course review.
    - Students Satisfied with the Learning Environment indicated 84% satisfied but should have been 97% satisfied. This has been corrected and is noted in the minutes.

3. **Action/Approval: Tri-TRAILS Curriculum**

Dr. Stoltz gave a presentation on the Tri-TRAILS curriculum, which is the three-year medical school curriculum that culminates in the MD degree. This curriculum is linked to a standard three-year residency in either Family Medicine, Internal Medicine, or Pediatrics in one of the five Quillen College of Medicine residency programs.

**Purpose of Tri-TRAILS Curriculum:**
- Prepare primary care physicians more efficiently and with less cost
  - Three years of tuition instead of four
  - Program fee 15% in Years 2 and 3
- Offer student a seamless transition between their medical school and resident training settings and curricula
- Will utilize the eight weeks between Year 1 and Year 2
- Step 2 CK, Keystone, sub-internship, ICU after Year 3
- Satisfy all graduation requirements before the end of May

Dr. Stoltz noted that students interested in this program will follow the usual admissions process in applying to Quillen College of Medicine and if accepted, they will then apply for the Tri-TRAILS Program completing an additional application and interviews. Interviews for the Tri-TRAILS Program will include program directors and representatives from the participating residency programs.

Dr. Stoltz reviewed the timeline for implementation of the Tri-TRAILS Curriculum:
- Submit to LCME for review and approval in April 2022
- Plan for the first class to matriculate in July 2023
- Initial class size will be nine students
  - Two each for each Family Medicine Residency Program (total of six students)
  - Two for Internal Medicine Residency Program
  - One for Pediatrics Residency Program
- Curriculum includes 131 weeks of instruction (traditional track is 153 weeks)
Dr. Stoltz noted that students in the Tri-TRAILS Program who had any kind of failure, any absence from medical school that would make the student off-cycle, or had any need for remediation of any kind would be transferred to the traditional track. Students must also receive at least “as expected” or above on overall evaluations in order to stay in the program. Students will also have the option of transferring back to the traditional curriculum if they decide they do not want to be a physician in Internal Medicine, Family Medicine, or Pediatrics.

Dr. Stoltz commented that the students in this program would still need to register and participate in the NRMP Match.

Dr. Click commented that MSEC needs to agree and approve the general curriculum for Tri-TRAILS as presented by Dr. Stoltz. Dr. Click noted that the ambulatory rotation will cover the same objectives as the fourth-year selectives. There are not a lot of details on the QI Leadership course and the differences in the Keystone course and should be able to have those courses come back when details have been more developed. At this point in time, MSEC needs to approve the overall plan and curriculum so it may be submitted to LCME for review.

**A motion was made to accept the Tri-TRAILS Curriculum as presented and seconded. MSEC discussed and approved the motion.**

The presented Tri-TRAILS Curriculum document is shared with MSEC Members via Microsoft Teams document storage.


RPCT Community Health Based Projects – 2020-2021 Review

*Please see the RPCT Community Health Based Projects Annual Review report for additional information.*

Dr. Acuff presented a course review for RPCT Community Health Based Projects course. Dr. Karen Schetzina is the course director. The reviewer was Dr. Robert Acuff.

- Goals, Outcomes, and Objectives: Met expectations.
- Content, Delivery, and Environment: Course includes content that integrates well within the curriculum was below expectations. Other categories met expectations.
- Assessment, Feedback, and Grading: Met expectations.
- Educational Outcomes: Grade breakdown exceeded expectations. There is no NBME exam for this course.
- Student Feedback: Students are satisfied with overall course quality met expectations. Students are satisfied with teaching quality exceeded expectations.
- Previous Reviews: Met expectations.

Strengths and weaknesses of the course were discussed. Please see the M1/M2 Review Subcommittee RPTC Community Health Based Projects report for further details.

Recommended Changes to the Course Director: The course is moving to an elective status next iteration. As MSEC stated several meetings ago for the M1 course to prepare students to participate in this course and do their community-based project, it might be helpful to have a CQI Plan for this course as well.
Recommendations for MSEC: As was recommended by MSEC for the M1 preparation course to the community-based project, it might be helpful to have a CQI Plan for this portion as well.

Dr. Click noted that Dr. Schetzina offered to complete a CQI Plan for this course. Dr. Click commented that in looking at the overall report, it does not quite meet the criteria that MSEC established in requiring a CQI Plan to be completed, but felt it was reasonable to have Dr. Schetzina come back and present a CQI Plan reflecting the changes of the course now that it will become an elective.

A motion was made to recommend Dr. Schetzina complete a CQI Plan for the RPCT Community Health Based Projects course and to accept the M1/M2 Review Subcommittee report as presented and seconded. MSEC discussed and approved the motion.

The presentation slides for the RPCT Community Health Based Projects course document are shared with MSEC Members via Microsoft Teams document storage.

Cellular and Molecular Medicine – 2021-2022 Review

Please see the Cellular and Molecular Medicine Annual Review report for additional data.

Dr. Acuff presented a course review for Cellular and Molecular Medicine. Dr. Antonio Rusiñol is the course director. The reviewers were Dr. Robert Acuff and Blanton Gillespie, M1.

- Goals, Outcomes, and Objectives: Met expectations.
- Content, Delivery, and Environment: Exceeded expectations.
- Assessment, Feedback, and Grading: Formative assessment and feedback are provided to students revealed 100% of students believe feedback is received throughout the course. No narrative assessment is required for this course. Grading is transparent and fair revealed 98.75% of students believed course grading components were fair and transparent.
- Educational Outcomes: Grade breakdown: Exceeded expectations; NBME Performance: Met expectations with 58.75% scoring at or above the National Mean (noted this was a modified NBME exam).
- Student Feedback: Exceeded expectations.
- Previous Reviews: Not applicable.

Strengths and weaknesses of the course were discussed. Please see the M1/M2 Review Subcommittee Cellular and Molecular Medicine report for further details.

Recommended Changes to the Course Director: None.

Recommendations for MSEC: None.

A motion was made to accept the M1/M2 Review Subcommittee Cellular and Molecular Medicine course report as presented. MSEC discussed and approved the motion.

The presented Cellular and Molecular Medicine Annual Course Review document is shared with MSEC Members via Microsoft Teams document storage.

**Doctoring IV - Keystone**

*Please see the Doctoring IV Review Report for additional data.*

Dr. Roche presented a review for Doctoring IV-Keystone. Dr. James Denham is the course director. The reviewers were Dr. Gigi Miranda and Nancy Claire Smith, M4.

- Goals, Outcomes, and Objectives: Met expectations.
- Content, Delivery, and Environment: Met expectations.
- Assessment, Feedback, and Grading: Not applicable to this course.
- Educational Outcomes: Not applicable to this course.
- Student Feedback: Exceeded expectations.
- Previous Reviews: Met expectations.

Strengths and weaknesses of the course were discussed. Please see the M3/M4 Review Subcommittee Doctoring IV report for further details.

Comments from Course Director: Students enjoy and desire more business and financial topics. This is planned to be expanded in the future. Remote sessions can be incorporated even under “normal” circumstances. Students felt they were efficient and ran smoothly with little to no technical issues.

Recommended changes to the Clerkship Director:

1. Recommend continuing with a portion of the class online as students enjoyed the flexibility this format provided; however, we do suggest having in-person meetings for topics that would be enhanced and benefit from in-class interactions. We suggested screen time break for lectures over one hour, and the course director confirms that lectures over an hour were recorded and students have capability to pause as they needed.

2. Students did have concerns about redundant topics over the course of the curriculum. We recommend different lecture topics (see recommendation #4) or a different focus within repeated topics. For example, EKGs covered by Dr. Blackwelder could focus on high-yield/common/“do not miss” EKG patterns.

3. A few students did not find the wellness and burnout lectures helpful as data was not up to date. Students suggested learning more about the causes of burnout and practical applications to avoid burnout. We recommend changes to this to provide a more practical applications for students.

4. Recommend adding content that students suggested: EMR and documentation, high yield information for interns, common medications and dosages to order, insurance and billing, life/disability insurance, how to get a home-loan, specialty-specific information for intern year (subspecialty “bootcamp”).

5. Students suggested having pre-recorded lectures available for time periods outside of the course dates for reference and for more of the course content to be recorded for future reference.

Recommendations for MSEC: None.

A motion was made to accept the M3/M4 Review Subcommittee Doctoring IV-Keystone course report as presented. MSEC discussed and approved the motion.
The presented Doctoring IV-Keystone Annual Course Review document is shared with MSEC Members via Microsoft Teams document storage.

Doctoring III - Transitions to Clinical Clerkships

Please see the Transitions to Clinical Clerkships Review Report for additional data.

Dr. Roche presented a review for Doctoring III - Transitions to Clinical Clerkships. Dr. Caroline Abercrombie is the course director. The reviewers were Dr. Sheree Bray and Merkle Moore, M4.

- Goals, Outcomes, and Objectives: Met expectations.
- Content, Delivery, and Environment: Met expectations.
- Assessment, Feedback, and Grading: Not applicable to this course.
- Educational Outcomes: Not applicable to this course. There is no NBME exam for this course.
- Student Feedback: Overall course quality was below expectations as only 80.77% of students were satisfied or very satisfied. Course organization was below expectations as only 62.82% of students were satisfied or very satisfied. Teaching quality exceeded expectations. Course instructors met expectations.
- Previous Reviews: Met expectations.

Strengths and weaknesses of the course were discussed. Please see the M3/M4 Review Subcommittee Transitions to Clinical Clerkships report for further details.

Comments from Course Director:

- The growth in enrollment leading up to the course increased each group by at least one person. The increase to 78 was due to the policy that students re-entering clinical years must re-take the three-day Transitions to Clinical Clerkships component. I think we need to work to identify any students returning earlier and attempt to adjust group size or numbers of available task trainers to meet the new influx of students this course is required to support. The last-minute additions created shifts in groups and schedules that caused confusion and left no time for alteration or resource expansion.
- Hybrid is hard. The hybrid approach means that half the students are virtual and half in person all in one day. We added hyperlinked module guides in D2L to help students locate group and session schedules, completing daily modules, and to work through sessions very heavy in prep work. The hyperlinked modules were modeled after the IPE D2L site guides familiar to students. Hybrid schedules create an issue that links cannot be in a large overall schedule because virtual skills are happening both skill days. Links were placed in a separate virtual schedule for each day for each group with their specific links for the actual day they are virtual – these were hyperlinked in the D2L module. There were schedules available early for viewing before Zoom links were available from all faculty. Despite the title of draft schedule, students downloaded the schedule and did not have the updated linked schedule as faculty Zoom links were added to the Cloud Document.
- Past schedules have been modified to evenly distribute prep work, but the hybrid approach made this less achievable. Prep work dropped by an hour. A number of sessions were made asynchronous opening in the weeks leading up to the course and due dates moved to the end of the week to attempt to accommodate the shifts, but not all took advantage of this.
Recommended changes to the Course Director: We appreciate all of the hard work that Dr. Abercrombie puts into this course and recognize it is a lot of work for one person. If possible, return to in-person learning this coming year. The students really wanted an in-person OSCE and physical exam review. One of the problems with an in-person OSCE is the number of SPs available. Dr. Abercrombie needs support in recruiting SPs. Unfortunately, D2L is the only site currently available to do everything that needs to be done. D2L allows faculty to track student progress and integrate the quizzes into it.

Recommendations for MSEC: Given two areas in student feedback fall below expectations a CQI plan is recommended.

Following the presentation and recommendation from the M3/M4 Review Subcommittee that Dr. Abercrombie submit a CQI Plan, a discussion was held regarding the circumstances of why the student feedback was below expectations. MSEC felt that Transitions to Clerkships being a hybrid course this year and having difficulties with scheduling due to this was what led the students rating the course quality and course organization below the acceptable 85% rating.

Dr. Kenneth Olive noted that Dr. Abercrombie changed the course every year based on the previous year’s feedback. Dr. Olive suggested that instead of asking for a formal CQI Plan that we ask Dr. Abercrombie to submit a summary of changes she plans to make in the upcoming year. Dr. Schoborg asked if it would be an issue with accreditation if we do not follow the policy we have already established with courses completing a CQI Plan if two or more items in a single element were rated as below expectations. Dr. Click stated she reviewed the policy and it states “may require” and not “must require.” Dr. Olive commented that if MSEC ignored the recommendation of the M3/M4 Review Subcommittee altogether, that would be problematic, but if MSEC chooses to do something slightly different with the recommendation, that is reasonable.

After much discussion, some MSEC members felt that Dr. Abercrombie should submit a summary of the changes she plans to make in the upcoming year instead of submitting a CQI Plan.

A motion was made to accept the M3/M4 Review Subcommittee Transitions to Clinical Clerkships course report as presented with the exception of not requiring a CQI Plan be submitted but instead have Dr. Abercrombie submit a summary of changes she plans to make in the upcoming year. MSEC discussed and the motion failed.

With failure of the first motion, a new motion was made. Dr. Schoborg asked if he could make an addition to the motion in that it be communicated to Dr. Abercrombie to note in her CQI Plan that this was out of her control and that the course will not be a hybrid course next year. Dr. Click commented she had talked with Dr. Abercrombie previously about the M3/M4 Review Subcommittee’s recommendation of completing a CQI Plan and would pass this information on to her.

A motion was made to accept the M3/M4 Review Subcommittee Transitions to Clinical Clerkships course report as presented including requiring a CQI Plan. MSEC discussed and approved the motion.

The presented Transitions to Clinical Clerkships Annual Course Review document is shared with MSEC Members via Microsoft Teams document storage.
6. Approval: Addiction Medicine Elective

Kortni Dolinger presented the Family Medicine Addiction Medicine Elective document for MSEC’s review and approval. Kortni noted that this would count as both a selective and elective in that if the ambulatory selective slots did not fill, they would then open up as an elective. The elective will take place at the Family Medicine Johnson City Clinic. Kortni noted that the selective/elective will accept third-year students for a two-week rotation as part of the M3 Specialties Clerkship depending on availability.

Dr. Troxler gave an overview of the selective/elective. The purpose/goal of the rotation is:

1. To increase medical student knowledge of the care of patients with substance use disorder and decreasing stigma around this disease.
2. A secondary goal is to give students experience in the specialty of Addiction Medicine, which may be of interest to them as possible future career.
3. The student will participate in clinic activities which will include seeing patients who have a primary diagnosis of Substance Use Disorder with ADM Fellows and Faculty, engage in behavioral health screening and intake assessments with BH staff.
4. The student will obtain histories and physicals on patients in the ADM clinic, contributing to the medical record as appropriate for the student’s level of training.
5. The student will have a variety of educational materials to support learning and understanding of substance use disorders. Materials will be provided to the student by ADM staff throughout the rotation.
6. The student will participate in ADM Fellows Didactic sessions and any ECHO sessions that occur during their rotation.

Please see the Family Medicine Addiction Medicine Elective document for additional information.

A motion was made to approve the Family Medicine Addiction Medicine Selective/Elective as presented. MSEC discussed and approved the motion.

The presented Family Medicine Addiction Medicine Selective/Elective document is shared with MSEC Members via Microsoft Teams document storage.

7. Report: M3 NBME Performance

Dr. Click noted that there were some concerns over the number of Clerkship NBME failures for the 2020-21 academic year. Kortni Dolinger presented an update of where we stand thus far for the 2021-22 academic year. Kortni noted that comparing data to the 2020-21 year, numbers are much better. There are three clerkship periods left for the eight-week clerkships, four for the six-week clerkships. Kortni stated that the NBME failures have been discussed in the Student Promotions Committee and they feel that due to COVID, the numbers were higher last year with some courses being virtual and many students having to delay taking Step 1 and study for it during their clerkships. Dr. Click noted that no student has failed a repeat exam thus far.

No voting action required.

The presented M3 NBME Performance document is shared with MSEC Members via Microsoft Teams document storage.

8. Report: External Resources

Dr. Hayman presented a report from the Student Outside Resources Working Group. The subcommittee was formed to determine if there are products available that might be used by both
students and faculty as supplemental resources to our curriculum in both the pre-clinical and clinical phases and to make recommendations to MSEC for identified resources to be provided by QCOM that would fit the new curriculum.

*Please see Dr. Hayman’s presentation document for additional information on product reviews.*

After review of the available products, the subcommittee recommends the following:

- Continue to use the products that are currently in use this academic year
  - UWorld Step 1 for M2 students and UWorld Step 2 for M3 students
    - Heavily used by our students for board prep
    - The gold standard (essential) for all levels of board examinations
    - Qbank Highlights
      - Question flagging
      - Flash cards, notes
      - Customizable exams
      - Performance graphs
      - Use on multiple devices
      - Integrated space repetition
    - Very highly regarded by students
  - OnlineMedEd Case X, Intern Bootcamp and Guide book for M4 students (residency prep resource) and OnlineMedEx all four years (Basic Science, Clinical Science, Faculty)
    - Faculty comments
      - Would be a great foundational resource for the new TRAILS curriculum.
      - The learning style of P.A.C.E. (Prime, Acquire, Challenge, Enforce) would benefit student learning/retention.
      - Would level the field on the basics of content given to students from different faculty.
      - OME would work with us to customize content to our curriculum.
      - Faculty could monitor student progress of content.
      - Would enhance our success with the new curriculum.
  - Amboss all four years
    - Faculty comments
      - In use by most all QCOM students
      - Consistently receive positive feedback for Amboss
      - A developmental program that grows with the student
      - Can be utilized and targeted to specific system, shelf, or step prep
      - Specifically used by Academic Counseling for remediation/needs assessments
      - Has features that help students integrate various content quickly and assesses retention

Dr. Hayman commented that the combination of OnlineMedEd and Amboss would allow for a strong foundational framework for the pre-clinical curriculum in which faculty could provide content and assessments concisely and consistently across all blocks in a manner that allows for the monitoring of student success. UWorld would continue to be used by students in the M2 and M3 years as a Step prep source, which is currently utilized by many medical students nationwide.
After much discussion, MSEC felt that we should continue doing what we have been doing with UWorld, Amboss, and OME but to expand OME to the basic sciences for access all four years.

**A motion was made to accept the recommendations from the Student Outside Resources Working Group as noted above and seconded. MSEC discussed and approved the motion. The recommendations will be presented to Dr. Block.**

*The presented M3 NBME Performance document is shared with MSEC Members via Microsoft Teams document storage.*

9. **Discussion: Student Support**

Dr. Earl Brown gave a presentation on the Student Success Program (a.k.a. Academic Support Group, a.k.a. Student Academic Support Program [SASP]).

Dr. Brown noted the goals of the program are:

1. Student success in TRAILS courses
2. Student success on Step 1
   a. Even though Step 1 is Pass/Fail
   b. It is not any easier
3. Collaborate with faculty and course directors
   a. Vital to success of the SASP

Dr. Brown reviewed concerns of the program as well as the role of administration and implementation of the program.

Dr. Click noted that there would need to be more discussion and questions regarding the program as there will need to be changes made.

*Please see Dr. Browns presentation slides for additional information.*

**No voting action required.**

*The presented Student Success Program document is shared with MSEC Members via Microsoft Teams document storage.*

10. **Demonstration: Leo Curriculum Management System**

Kortni Dolinger presented a video that gave an overview of the new curriculum management system, Leo. Dr. Click noted that training in Leo for M1/M2 course directors will be held in an upcoming course director meeting and training for M3/M4 coordinators will be January 25, March 8, and May 10. Training for M3/M4 directors will be February 7 and April 11.

A more in-depth presentation on Leo will be given at an upcoming MSEC meeting.

The MSEC Retreat meeting adjourned at 5:06 p.m.
MSEC Retreat Minutes – January 18, 2022

MSEC Meeting Documents
MSEC Members have access to the meeting documents identified above through the shared Microsoft Teams document storage option made available with their ETSU Email account and login.

If you are unable to access Microsoft Teams MSEC Team please contact: Aneida Skeens at: skeensal@etsu.edu, Telephone contact is: 423-439-6233.

MSEC Meeting Dates 2021-2022: (Zoom meetings unless noted)
January 18, 2022 Retreat – 12:00-5:00 pm
February 15 – 3:30-6:00 pm
March 15 – 3:30-6:00 pm
April 19 – 3:30-6:00 pm
May 17 – 3:30-6:00 pm
June 21 - Retreat -11:30 am-3:00 pm (In-person meeting)
June 21 - Annual Meeting - 3:30-5:00 pm (In-person meeting)