



QUILLEN
COLLEGE of MEDICINE

EAST TENNESSEE STATE UNIVERSITY

The Medical Student Education Committee (MSEC) of the Quillen College of Medicine met on Tuesday, February 2, 2021, via Zoom meeting.

<u>Faculty Members</u>	<u>Academic Affairs Staff</u>
Ivy Click, EdD, Chair	Mariela McCandless, MPH
Caroline Abercrombie, MD	Skylar Moore, BSPH
Martha Bird, MD	Dakotah Phillips, BSPH
Thomas Ecay, PhD	Aneida Skeens, BSIS, CAP-OM
Russell Hayman, PhD	Sandy Greene
Jon Jones, MD	
Paul Monaco, PhD	<u>Subcommittee Chairs</u>
Jason Moore, MD	Robert Acuff, PhD
Antonio Rusinol, PhD	
Robert Schoborg, PhD	<u>Guests</u>
	Patricia Amadio, MD
<u>Student Members</u>	Susan Austin, MA, BS
Sarah Allen Ray, M3	Earl Brown, MD
R J Black, M2	Lorena Burton, CAP
Andrew Hicks, M1	Leon Dumas, MMED
	Lindsey Henson, MD, PhD
<u>Ex Officio Voting Members</u>	Jerald Mullersman, MD, PhD, MPH
Tom Kwasigroch, PhD	Cathy Peeples, MPH
Rachel Walden, MLIS	Deidre Pierce, MD
	Diego Rodriguez-Gil, PhD
<u>Ex Officio Non-Voting Member</u>	Tory Street, AD
Ken Olive, MD, EAD	David Taylor, M4
	Doug Taylor, AD

Meeting Minutes

1. Approve: Minutes from January 19, 2021 Meeting.

Dr. Click opened the meeting at 3:30 p.m. and asked for comments/updates to the January 19, 2021 meeting minutes, which were distributed with the MSEC meeting reminder. Dr. Monaco noted two minor changes to Item 3, which were regarding his Genetics self-study, the heading

“Recommendations to the clerkship director” needed to be changed to “Recommendations to the course director”. In that same section, it was stated “Dr. Monaco did note in his CQI”, this should be “Dr. Monaco did note in his self-study.” These changes will be made to the minutes.

Dr. Schoborg made a motion to accept the January 19, 2021 minutes with the corrections discussed. Dr. Abercrombie seconded the motion. MSEC approved the motion.

The MSEC minutes for January, 2021 were shared with MSEC Members via Microsoft Teams document storage.

Dr. Deidre Pierce was present for the meeting and was introduced as the new Assistant Dean for Student Affairs.

Discussion: Step 1 Timing

Dr. Click led a discussion regarding changing the timing of the Step 1 exam. A document was sent out to the voting members prior to the meeting listing some information regarding pros and cons of moving the Step 1 exam to after the clerkships based on thoughts from the Curriculum Transformation Steering Committee (CTSC). There was also a straw poll conducted to gauge members’ responses. The result of the two-question poll was straightforward. 14 members responded and 72% (10 members) felt that we should not move Step 1, two members responded yes and two members were unsure. The second question asked “What points should MSEC discuss further regarding this decision?” The responses were as follows:

- Risk of not identifying struggling students
- Impact on underperforming students
- Affects on Step 2 performance
- Students not solidifying foundational content before clerkships
- Incorporation of basic science into clinical years
- It will take time before we understand the impact of Pass/Fail
- Consider changing a few years after the new curriculum is implemented

Andrew Hicks, M1 MSEC student representative, stated that without knowing the impact of Step 1 going to pass/fail grading, he felt from a student standpoint that it would put elevated pressure on the success of Step 2 CK, especially since Step 2 CS is no longer being given, as the only objective score distinguishing applicants for residencies. David Taylor, M4 student, also stated that moving the Step 1 exam until after clerkships could disadvantage students in remembering basic science content that had been learned during the pre-clerkship phase that would be on the Step 1 exam. Sarah Allen Ray, M3 MSEC student representative agreed with this, also stating that students are expected to know and remember basic science content and having the Step 1 exam prior to beginning clerkship helps students to synthesize the information before entering the clinical environment.

Discussion brought forth from CTSC discussion included:

- We have no data regarding how pass/fail might affect students’ behavior or outcomes
- We speculate Step 1 pass/fail may mean less focus on a “parallel” curriculum during the pre-clerkship phase
- We may be able to reduce the amount of dedicated study time for Step 1 with the change to pass/fail in the new curriculum

- Students may want more study time for Step 2 due to increased emphasis on this score
- Changing the timing of Step 1 will add an additional variable in determining the effects of the new curriculum on outcomes
 - Did Step 1 pass rates change because of the new curriculum or because of the change to pass/fail or because of the timing of when students take it?

Dr. Click stated that originally, she was interested in moving Step 1 based on some of the studies that she had read from schools that had done it, but after these discussions and thinking it through, she and the CTSC were ultimately not in support of moving Step 1. Dr. Henson added that the CTSC also discussed if the Step 1 was moved and a student failed it, the student would have already spent another whole year of time and tuition, which could be detrimental to the student. This happens infrequently, but could affect a few students each year. It was also noted that over time residencies could begin to look at a school's underlying pass/fail rate to help stratify schools for Step 1 for granting interviews.

Dr. Click wanted to give time to folks who were in support of moving Step 1 and Dr. Hayman said that he was one of the members who voted yes because he wanted to hear the discussion that the committee had for voting no and also, some of the references provided were indicative of positive results, including information that students who scored lower on their MCAT tended to do better on their Step 1 taken at the end of the clerkship. One of the references also stated that there did not appear to be any significant changes in Step 2 scores when Step 1 was taken at the end of clerkships, although this did not take into account the pass/fail grade. Dr. Click agreed and stated those were the same reasons that caused her initial interest in moving Step 1 as well.

The question was asked if the timing of Step 1 was related to having the usual study period and if Step 1 was not immediately following the pre-clerkship phase would it be impossible for students to go immediately into clerkships and whether this was viable with a three-year program. It was stated that most schools have a cut-off date where the students must have passed the exam by. We have a dedicated study period but do not require students to have passed Step 1 before they enter clerkships. The students could have not taken the exam yet or potentially failed the exam but could continue in the clerkship. The policy that was to be implemented this year (before being derailed by COVID) was that students *should* take Step 1 before the beginning of the Transitions course and *must* have taken it at least once by December. If a student has not passed Step 1 by the end of the third year, the student was subject to dismissal.

It was noted that making a decision now, does not preclude looking at this again in a couple of years after the new curriculum has been implemented and we have indications of how students are doing with the pass/fail grading.

Dr. Monaco made a motion that Step 1 be left where it is at this point in time and that the subject could potentially be revisited in the future after seeing how the new curriculum develops and how students perform under the pass/fail grading for Step 1. Dr. Jones seconded the motion. MSEC discussed and approved the motion.

The presented Moving Step 1 – Pros and Cons document is shared with MSEC Members via Microsoft Teams document storage.

2. Discussion: Length of Preclerkship Phases as a whole

Dr. Click presented a PowerPoint regarding the length of pre-clerkship phases as a whole in order to facilitate discussion of an M1 start date, a clerkship start date, and the length of the foundations course(s). Before the foundations group can move forward with sequencing and organization of the organ systems, there must be an idea of where to start and where to end. There are many different aspects of curriculum and pre-clerkship length and several examples were presented in the PowerPoint presentation. AAMC average pre-clerkship length for 2019-2020 was 69.6 weeks. 15 peer institutions were reviewed and pre-clerkship length varied in a range between 60 – 77 weeks, with the average being 68.9 weeks. Quillen's current pre-clerkship length is 74 weeks, taking out breaks.

Start date decisions to be made include the following:

- Prefer to move start date later than current – Quillen start date is early compared to other schools, generally around the second week of July
 - Third week of July or first week of August – moving start date closer to August would be advantageous in aligning calendars for the health science colleges across ETSU with a closer start date
- M1 end at the end of May instead of April
- Summer would move to June and July instead of May and June – moving summer would make it easier for students looking for more research opportunities outside of Quillen as the summer would line up with other institutions.

Doug Taylor from Admissions was present for the meeting and stated from a recruiting standpoint, perspective students who have been accepted at ETSU and committed to come to ETSU would not be deterred by a change in the start date. He did offer the observation that a lot of students that come to ETSU have been in school continuously for their entire life and to let them finish up in May and then bring them back in just four or five weeks could be a disservice to the students. He referenced an AAMC study that showed that students who had more time off did better than students who were more immersed in the curriculum on the shelf exams. Dr. Henson also noted that no matter when the start date occurs, the new curriculum would be compressed and the amount of content that the students have to master before the complete the pre-clerkship would come at them faster than it currently does and it may be very helpful to the students to have a decent break between the end of college and the beginning of medical school to prepare and get ready or just take time off and relax. It was asked if starting later would create obstacles in implementing an accelerated three-year track. Dr. Click noted that students on an accelerated track generally do something in the summer between their first and second year during the break as one way to make up that time. Having a three-year track is not a requirement, but highly favored by Dr. Block and hoped to begin a few years after implementation of the new curriculum. Doug Taylor noted that our primary competitor school is in the process of launching a three-year curriculum program with guaranteed admission into their primary care programs. He stated a three-year program cuts down on a whole year of education and expenses and this will probably have an impact on ETSU in the next few years if ETSU does not have something better than what they are offering. Dr. Click stated that ETSU has not committed to providing a three-year accelerated program, but we must keep in mind that the decisions we make cannot eliminate the possibility of having a three-year program.

There was also discussion regarding adding a two-week immersion experience for M1 students (such as Wilderness Medicine or Street Medicine.) The benefits of an immersion experience were discussed such as the idea of getting students excited and doing something from day one so that they feel like medical students by getting into the experience right away. It was also noted that an immersion experience could also incorporate well with learning communities as a way for students to feel like part of a group. It was stated this could be popular later on for recruitment if students hear about this kind of energy that starts at the beginning of medical school at Quillen. It was pointed out that some schools start off with an immersion experience that allows students to get EMT certification. Sarah Allen Ray, M3 MSEC student representative, thought an immersion experience would be beneficial for the students and could improve their morale by giving the student body a community feel. She felt it was important for the students to establish connections early on. It was noted that this could also be a helpful transition into medical school.

Considerations to discuss regarding the Foundations length include the following:

- 12 weeks
 - Allows for organ system 1 in M1 Fall
 - Anatomy begins in Foundations, but integrated throughout organ systems if possible logistically
 - Capstone multiple systems course in M2 Spring
- 18 weeks
 - Pushes last organ system into M2 Spring if we keep the same organ systems blocks
 - More anatomy during Foundations
 - Possible loss of capstone multiple systems course

Pre-Clerkship length options include the following examples:

- 71 – 73 weeks – this is close to what we do now
 - Clerkships start in May
 - 10-weeks course(s) in M2 Spring
 - Does not allow for three-year track option because clerkships are not over before graduation

ETSU Quillen COM New Curriculum Schematic (Pre-clerkship ~71-73 weeks)																																																					
	July			August				September				October				November				December				January				February				March				April				May				June									
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Year 1	Pre-clerkship Phase																																																				
	Alternative start	Immersion	Foundations 18 weeks																		Winter Break	Organ Systems 1 12 weeks												Break	Organ Systems 2 9 weeks									Break 8 weeks									
Year 2	Pre-clerkship Phase																																																				
	Organ Systems 3 14 weeks																		Organ Systems 4 6 weeks						Winter Break	Organ Systems 5 6 weeks						Multi-systems 4 weeks				Step 1 Study 6 weeks						Transitions	Clerkship Phase										
Year 3	Clerkship Phase																																																				
	Required Clerkships Jr Selective																		Winter Break	Required Clerkships Jr Selective																		Post-clerkship															
Year 4	Post-Clerkship Phase																																																				
	Selectives Electives Flex time																		Winter Break	Selectives Electives Flex time												Keystone Course				Break	Graduation																

Notes: 18 week Foundations; 51 weeks of Organ Systems.
 Could move Clerkships to April if dropped the multi-system course

ETSU Quillen COM New Curriculum Schematic (Pre-clerkship ~71-73 weeks)																																																					
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3-year track only works if we drop 4 weeks

Notes: 18 week Foundations; 51 weeks of Organ Systems.
 Could move Clerkships to April if dropped the multi-system course

- 65 – 67 weeks
 - Clerkships start mid-March
 - Four-week multi-systems capstone course in M2 Spring
 - Move to after Step study?

ETSU Quillen COM New Curriculum Schematic (Pre-clerkship ~65-67 weeks)																																																							
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	Selectives Electives Flex time																		Winter Break			Selectives Electives Flex time																		Keystone Course			Break			Graduation									

Notes: 12 week Foundations; 51 weeks Organ Systems.
 Could move Clerkships to mid-Feb if dropped multi-systems course. Alternative: put MS after Step 1 study

- 69 – 71 weeks
 - Clerkships start in April
 - Six or eight-week course(s) in M2 Spring
 - Step 1 study time six or four weeks

ETSU Quillen COM New Curriculum Schematic (Pre-clerkship ~69-71 wks)																																																							
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Year 4	Post-Clerkship Phase																																																						
	Selectives Electives Flex time																		Winter Break			Selectives Electives Flex time																		Keystone Course			Break			Graduation									

Notes: 12 week Foundations; 55 weeks Organ Systems. (Alternative: 18 weeks Foundations; 49 weeks Organ Systems)
 Step study time shortened to 4 weeks. M2 Spring 8 wks of courses, could reduce to 6 wks to give extra study time.

It was discussed that orientation take place during the two-week immersion experience shown on the examples since orientation only takes about two days and many of the other activities are related to student interaction for them to get to know each other and a welcome to Quillen.

It was suggested that Step 1 study time be discussed and decided on before deciding on a start time whether it should be four weeks or six weeks. Dr. Click explained that the four-week option was put on there as a possibility with the pass/fail grading of Step 1. Dr. Olive thought it would be unwise to decrease Step 1 study time from six weeks until we had some evidence of how the pass/fail exams work for our students. David Taylor also stated that most students generally took at least a week of that study time to take a vacation before beginning the M3 year. It was noted that Step 1 study time was increased a few years ago mainly due to students' request.

David Taylor pointed out that a lot of the discussion happening was predicated on the concept that we are going to be teaching all of our courses the same way with the same content in them and he felt there was a lot of room to improve how and when we teach things as we are going through this process. He gave an example from Dr. Henson of approaching the teaching of physical exam skills in a different way where it is more centered around different chief complaints that would more align with an organ system kind of methodology so that the students were not learning a checklist. He said it also sounded like the discussion was assuming that anatomy will look exactly the same with the exact amount of content but if anatomy was broken up to a half day here and there during the organ system blocks, there would be more room for it to be spread out and balanced with physical therapy students being in there at the same time. He stated we needed to move beyond that we are going to be teaching the same amount of anatomy the same way if we are truly changing the curriculum and we have to be willing to change how courses are taught and not assume that the way we are currently teaching anything is going to be the same way.

Difficulties with anatomy were discussed such as how to achieve anatomy curricular goals when the anatomy faculty were also teaching physical therapy students, occupational therapy students, and prosthetic and orthopedic students throughout the rest of the year, including summertime and springtime and they have no real control over the timing of that. Most of this faculty is also Academic Affairs faculty that are over other courses as well.

Much discussion was had on different ways to make the pre-clerkship phase work and examples were discussed of how other schools were approaching their foundational content. A question was asked about the purpose of a multi-systems block. It was explained that this block would serve two purposes, one would be to actually provide the students with some review and integration before taking the Step 1 exam and it would also remind the students of complex clinical issues management and hit high value topics.

After thorough discussion, it was suggested that the first year would be fall and spring and to make a commitment to end the pre-clerkship curriculum at Christmas break of the second year, whether there was a multi-system block or not. This would be achieved by having an immersion experience and orientation in the last two weeks of July, start the foundations course the first week of August, the rest of the first year go to the end of May, come back in August and go to Christmas break. Where the blocks fit into the schedule could be decided later, but a start and end date needed to be determined.

Dr. Schoborg made a motion to start the Pre-Clerkship Phase the third week of July with two (2) weeks of immersion/orientation, eight (8) weeks of summer, and end the Pre-Clerkship content at the M2 winter holiday break. Dr. Moore seconded the motion. MSEC discussed and approved the motion.

Dr. Schoborg made a second motion to make a commitment to add at least four (4) weeks of advanced basic sciences content to the clinical phase of the curriculum. Dr. Abercrombie seconded the motion. MSEC discussed and approved the motion.

The presented New Curriculum Pre-Clerkship Length document is shared with MSEC Members via Microsoft Teams document storage.

The MSEC meeting adjourned at 6:15 p.m.

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 2020-2021:

March 16 – 3:30-6:00 pm - Zoom meeting

April 20 – 3:30-6:00 pm - Zoom meeting

May 18 – 3:30-6:00 pm - Zoom meeting

June 15 – **Retreat** 11:30 am-3:00 pm – Zoom meeting

June 15 - **Annual Meeting** - 3:30-5:00 pm – Zoom meeting