The Medical Student Education Committee of the Quillen College of Medicine met on Tuesday, November 19, 2013 at 4:15 p.m. in the Academic Affairs Conference Room, Stanton-Gerber Hall.

Voting Members Present:
- Ramsey McGowen, PhD
- Caroline Abercrombie, MD
- Michelle Duffourc, PhD
- Jennifer Hall, PhD
- Howard Herrell, MD
- Dave Johnson, PhD
- Paul Monaco, PhD
- Jerry Mullersman, MD, PhD, MPH
- Rebekah Rollston, M2

Ex officio / Non-Voting & Others Present:
- Thomas Jernigan, MD, MA
- Theresa Lura, MD
- Cindy Lybrand, MEd
- Cathy Peeples, MPH
- Lisa Myers, BA

Shading denotes or references MSEC ACTION ITEMS

Dr. McGowen welcomed new MSEC member, Jennifer Hall, PhD, Assistant Professor, Department of Biomedical Sciences / Microbiology.

1. Approval of Minutes

The minutes from the 10-29-13 Retreat were approved as distributed.

2. Topics

   a. Quarterly Update to MSEC – [Outcomes Subcommittee] 11-13-13 Meeting
      – Present: Dr. Ramsey McGowen, chair, Dr. Paul Monaco, Dr. Rebecca Copeland and Cathy Peeples, MPH

Dr. McGowen

- Included data from 2013 Residency Questionnaire (RQ) – Program Directors’ evaluation of 2012 Quillen graduates at the end of PGY-1
- Benchmarks due for review this quarter were found to be in compliance, with exception of benchmark Interpersonal Communication Skills for which data is not yet available and will be reviewed in February 2014
Recommendation to MSEC – Change the first two outcome measures to “95% of students….” instead of “all students….” and the third to 100%:

<table>
<thead>
<tr>
<th>Professionalism</th>
<th>4. All 95% students will achieve a rating of “good” or above on end of clerkship composites</th>
</tr>
</thead>
<tbody>
<tr>
<td>Systems-Based Practice</td>
<td>2. All 95% students will achieve a rating of “good” or above on end of clerkship composites</td>
</tr>
<tr>
<td>Practice Based Learning and Improvement</td>
<td>3. All 100% students complete mid-clerkship self-assessment</td>
</tr>
</tbody>
</table>

**ACTION:**
*On a motion by Dr. Duffourc and seconded by Dr. Herrell, MSEC accepted this change in the institutional benchmarks.*

Follow up continues on the 2013 GQ item “Physician-patient communication skill with proper use of interpreter as needed” which had a 27.3 % inadequate rating = above established benchmark of 25%
- MSEC and Outcomes subcommittee are discussing how students can be introduced to and trained in the use of the interpretive phone system at JCMC; also, how this will be incorporated into the curriculum, possibly during the Transitions course; *Dr. Abercrombie is developing a proposal*

**b. Draft: Plan for Year 4 of the Periodic and Comprehensive Review of the Curriculum – Curriculum as a Whole**

[Ref 10-29-13 MSEC ACTION regarding revisions in the policy and process]

- “An evaluation of the curriculum as a whole will follow completion of the full cycle of course/clerkship evaluations (annual and triennial).”
- This review will be based on systematic consideration of a variety of information, according to a devised structure
  - MSEC will determine the effectiveness of the Quillen curriculum by answering questions in seven categories with data from a variety of sources within a set timeframe

**ACTION:**
*On a motion by Dr. Herrell and seconded by Dr. Abercrombie, MSEC approved the plan for review of the curriculum as a whole that will be incorporated into the Policy for Periodic and Comprehensive Review of Curriculum.*

*Work will continue in regard to the subcommittees’ curriculum review process; an update will be brought back to MSEC at the 12/17 meeting.*
c. Update: OB/GYN Clerkship – Post-Period 3

[Reference MSEC’s 7-16-13 discussion and decision to monitor the clerkship based on the significant change in leadership and other issues; plus, 8-20-13 Post-Period 1 and 10-1-13 Post-Period 2 reports]

Dr. McGowen

- Reported on Period 3 NBME mean score & Student Evaluation of OB/GYN Clerkship items (5 point scale) – including comparisons with Periods 1 & 2:

<table>
<thead>
<tr>
<th></th>
<th>Period 1</th>
<th>Period 2</th>
<th>Period 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>NBME score</td>
<td>76.7</td>
<td>74.9</td>
<td>73.0</td>
</tr>
<tr>
<td>(2012-13 Mean was 76.2)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overall evaluation of clerkship</td>
<td>4.0</td>
<td>4.33</td>
<td>3.83</td>
</tr>
<tr>
<td>Enthusiasm for specialty</td>
<td>4.2</td>
<td>4.11</td>
<td>3.33</td>
</tr>
<tr>
<td>Enhanced professional skills</td>
<td>4.1</td>
<td>4.56</td>
<td>4.0</td>
</tr>
<tr>
<td>Clinical experiences improved my</td>
<td>4.4</td>
<td>4.67</td>
<td>4.67</td>
</tr>
<tr>
<td>competence</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mentoring</td>
<td>4.2</td>
<td>4.67</td>
<td>3.5</td>
</tr>
<tr>
<td>Didactic material well-presented and relevant</td>
<td>3.2</td>
<td>3.89</td>
<td>3.17</td>
</tr>
<tr>
<td>Reading assignment relevant</td>
<td>3.44</td>
<td>4.11</td>
<td>3.5</td>
</tr>
<tr>
<td>Patient load</td>
<td>2.0</td>
<td>2.0</td>
<td>2.0 (appropriate)</td>
</tr>
<tr>
<td>Level of responsibility appropriate</td>
<td>3.9</td>
<td>4.33</td>
<td>3.67</td>
</tr>
<tr>
<td>Variety of clinical problems</td>
<td>2.0</td>
<td>1.89</td>
<td>2.0 (appropriate)</td>
</tr>
<tr>
<td>Value of attending rounds/hospital experience</td>
<td>4.3</td>
<td>4.22</td>
<td>4.0</td>
</tr>
<tr>
<td>Ambulatory experience contributed to achievement</td>
<td>4.44</td>
<td>4.38</td>
<td>4.33</td>
</tr>
<tr>
<td>Evaluations and examinations covered important aspects</td>
<td>2.9</td>
<td>4.11</td>
<td>4.5</td>
</tr>
<tr>
<td>Timely assessment of h&amp;p/ddx/tx plans</td>
<td>3.3</td>
<td>3.89</td>
<td>3.2</td>
</tr>
</tbody>
</table>

- Summarized Period 3 student evaluation narrative comments, which were similar to comments from Periods 1 and 2.

*In January after Period 4, the committee will again review the OB/GYN clerkship.*
d. Dean Candidates’ Curriculum Insights

Members’ discussion regarded medical education leadership related to:

- Basic science and clinical background
- Curriculum and accreditation experience
- Teaching modalities
- Interprofessional education
- Continuum focus = UME – GME – CME
- Community relationships and support
- Diversity

e. Proposal: M4 Surgery-Oncology (C) Selective [SURG 4801]

Members reviewed this updated offering with attention to the stated goals, objectives and assessments.

- Instructor – New Surgery faculty member: Tamra McKenzie, MD
- Goal: To provide broad clinical training in surgical oncology under a close tutorial arrangement, etc.

ACTION:
On a motion by Dr. Herrell and seconded by Dr. Abercrombie, MSEC approved the revised Surgery-Oncology (C) Selective.

f. Information Items

- Changes to USMLE 2014-2015

Discussion regarded:
- The topics of and keywords related to Continuous Quality Improvement and Safety Science
- Root Cause Analysis (RCA) method of problem solving
- Core Entrustable Professional Activities for Entering Residency [About]

- Policy on International Travel for Academic Credit
  - Revision in progress will include: “Students cannot receive academic credit for experiences in any country under a U.S. State Department “travel warning.” No waivers are granted to this policy. If a travel warning is issued after a Quillen student’s international experience is approved, the approval will be rescinded.”

- Faculty review session for the Comprehensive Basic Science Exam is scheduled for December 12.
3. Recent documents / topics

Quarterly Report: [Outcomes Subcommittee] Review of items identified for this quarter's reporting cycle

Draft: Plan for Year 4 of the Periodic and Comprehensive Review of the Curriculum – Curriculum as a Whole


Proposal: Updated Surgery-Oncology (C) Selective

Changes to USMLE® 2014 – 2015

Draft: Revised QCOM Policy on International Travel for Academic Credit

AAMC – Curriculum Inventory and Reports (CIR)

4. Announcements

The next MSEC meeting will on December 3, 2013.

5. Adjournment

The meeting adjourned at 5:08 p.m. (in advance of faculty meeting with QCOM Dean Candidate, Dr. Margaret Dunn).