To: Members of Medical Education Committee
From: David W. Nierenberg.
Subject: Minutes - Meeting held Tues., Nov 27, 2007 - 4:00 to 5:30 pm, Borwell 758

Voting Members Present: Narath Carlile, Rich Comi, Andy Daubenspeck, Scottie Eliassen, Tom Frandsen (Year 1), Brian Guercio (Yr. 2), Brent Harris, Horace Henriques, John Hwa, Bill Kinlaw, Gene Nattie, Dave Nierenberg, Rebecca Pschirrer, Eric Shirley, and Erin Sullivan (Year 1)
(n =15)

Voting Members Absent: Susan Kelly (Yr. 3), Greg Ogrinc, Michelle Oullette (Year 2), Jim Price, Laura Reis (Yr. 4), and Alan Rossi (Yr. 4)
(n = 6)

Guests and Non-Voting Members: Lori Alvord, Don Bartlett, Bill Garrity, Diane Grollman, Beth Harwood, Joan Monahan, Ginny Reed, Brian Reid, and Kalindi Trietley
(n = 9)

Scheduled Meetings:

|----------|---------|---------|---------|---------|---------|---------|---------|--------|---------|

I. **Year 1 Competencies**

Dave Nierenberg announced that the LCME is now mandating reports on Core Competencies. Surveys that will assess Core Competencies coverage and assessment are being sent out to all Year 1 and Year 2 course directors. Dr. Nierenberg hopes to present the results at next months’ MEC meeting.
II. **Survey of Class of 2006**

Dave Nierenberg presented the results of the survey of graduates of the class of 2006 (Attachment A). He made the following observations:

a. Somewhat low scores were achieved in two of the skill preparation questions – “performing routine technical procedures,” and “performing advanced technical procedures.” He suggested that these deficits might be corrected in the future by use of more simulations in these areas.

b. A lower score was achieved in the area of “Exposure to Ethnic and Cultural Diversity” and an improved score in “Access to Underserved Population.” Eric Shirley suggested that it may be difficult to assess socio-economic diversity among patients at DHMC and that the away sites may be becoming more ethnically diverse.

c. Attending members discussed and raised the following points:
   i. Were any questions regarding Medical Informatics included on the survey? (Yes, there was one with a score of 4.3 and more were included in the Graduate Survey that is given in March of Year 4)
   ii. What is the format of the evaluation? (Multiple Choice and Narrative)
   iii. Can the survey be conducted electronically in a platform such as Survey Monkey? (It is being considered for next year as those students may be more comfortable with electronic forms.)

III. **Course Review: Year 4 Health, Society, and the Physician (HSP)**

a. Using information provided by the Office of Medical Education and interaction with the course director Horace Henriques presented a report on the Year 4 HSP course (Attachment B) with the following points:

   i. The five week long course is designed to “provoke study, reflection, and honest conversation about … problems rooted in the processes, attitudes, and environments of healthcare,” and addresses themes of health finance, policy, and improvement.
   ii. The course is conducted using large and small groups, as well as a textbook and internet information.
   iii. In their evaluations, students found the course to be “good” to “very good,” with a very small percentage expressing dissatisfaction.
   iv. Students, on the whole, expressed enthusiasm for the instructors, facilitators, and resources.
   v. Some students expressed that they found the timing of the course difficult since it coincides with interviews for matches and other difficult courses.
   vi. Some students expressed that the practice of grading an entire small groups’ results is unfair to the students who do the majority of the work.
   vii. Some students found the text to be “one-sided” in its approach to the subjects.
b. Course Director Ginny Reed expressed the following points in regards to the course:

i. The course is redesigned every year (new text, new exams).
ii. It is difficult to determine if a small group is not working before the evaluations are published. (A member suggested that the small groups could be “peer graded.”)
iii. The facilitators are prepared in an orientation session in which the goals and methods of the course are discussed.

c. Dave Nierenberg commented that, although the students seem to feel that the timing is inconvenient for the course, it is actually an optimal time in that it occurs after most interviews are over, it gives the students time to finalize their rank lists, and it prepares the students for their imminent internships.

IV. Course Review: Year 1 Physiology (Cardiovascular, Respiratory)

a. Using information provided by the Office of Medical Education and interaction with the course director, Narath Carlile presented a report on the Year 1 Physiology course, focusing on the cardiovascular and respiration aspects of the course, (Attachment C). He made the following observations:

i. Cardiovascular:
   1. Out of 84 students, only 33 (39%) responded in evaluations.
   2. Students expressed overall satisfaction with the course.
   3. In general, students rated lectures, lecturers, small groups, and other resources from “good” to “excellent.”

ii. Respiratory:
   1. Out of 84 students, only 27 (32%) responded in evaluations.
   2. Students expressed overall satisfaction with the course.
   3. Students rated lectures, lecturers, small groups, exams, and labs from “good” to “very good,” with a few scores of “excellent.”

b. Dr. Bartlett and Narath expressed dismay over the low number of respondents to the evaluations. Some reasons speculated included:

i. Dr. Bartlett expressed his belief that it would be counterproductive to withhold grades from students who did not complete the evaluation.
ii. Diane Grollman reported that evaluations were now available on Blackboard, but that would negatively affect students who dislike the technology.
iii. It was suggested that students be informed at exam time, that it would not be necessary to turn in the evaluations before leaving the testing facility.
c. Dr. Bartlett also addressed the students’ criticism of the current textbook by explaining that he has been searching for a better text.

V. Report on Ad Hoc Group to Study Options for Year 3 Clerkships and Electives

a. Rich Comi reported that the Ad Hoc Committee had met and began research on the following three issues:

i. What is the current schedule of rotations and how can electives be incorporated into it?
ii. To what extent do students want electives in Year 3?
iii. How much interest is there for a change in the system to accommodate electives?

b. Rich reported that the following information is being assimilated:

i. The current lottery system of scheduling seems to be working to the satisfaction of the students.
ii. An informal survey revealed that the majority of medical schools offer electives in Year 3.
iii. A survey of Year 2 and Year 4 students revealed a lot of interest in changing the system of Year 3 scheduling to allow at least one elective. How best to accomplish that goal is yet to be decided.

VI. Report on Possible New Clinical Affiliation With California Pacific Medical Center (CPMC)

a. Dave Nierenberg reported that an affiliation contract has been sent to CPMC and DMS hopes to move forward with the affiliation in the following manner:

i. Two students will begin Psychiatry rotations in January of 2008.
ii. Two students will begin rotations in Medicine in March of 2008.
iii. One student will begin a rotation in Neurology in July of 2008.
iv. Other clerkships may follow.
v. The logistics of travel and lodging are currently being addressed.

b. Dave also reported that one goal of DMS is to allow all of the Year 3 students to have one rotation at CPMC, so they can experience one clerkship in a high quality, large urban hospital. It is doubtful that this goal can be accomplished in the first year of the affiliation.
II. Agenda for December 18 (Aud A):

a. Course Review: (TBD)
b. Course Review: (TBD)
c. Report on Ad Hoc Committee for Yr. 3 (Rich Comi)
d. 2007 AAMC Graduate Survey (Dave Nierenberg)