

DARTMOUTH MEDICAL SCHOOL SENIOR ASSOCIATE DEAN OF MEDICAL EDUCATION

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To: Members of Medical Education Committee

From: David W. Nierenberg

Subject: Minutes - Meeting held Tues., October 18, 2011 - 4:00 to 5:30 pm, Borwell

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Voting
Jessie Bay (Year 2), Ben Colby (Year 2), Aniko Fejes-Toth, Tom Finn (Year 4), Carolyn Koulouris (Year 3), Victor Laurion (Year 1), Dave Nierenberg,

Present: Todd Poret, Virginia Reed, Judy Rees, and Eric Shirley.

(n = 11)

Voting Kathleen Chaimberg, Rich Comi, Matt Crowson (Year 3), Scottie Eliassen, **Members** Sarah Johansen, Tim Lahey, Virginia Lyons, Greg Ogrinc, and Jonathan

Absent: Zipursky (Year 3)

(n = 9)

Guests and Terri Eastman, Diane Grollman, Mikki Jaeger, Tony Kidder, Brian Reid, and

Non-Voting Cindy Stewart.

Members: (n = 6)

Scheduled Meetings:

Sept. 20	Oct. 18	Nov. 15	Dec. 20	Jan. 17	Feb. 21	Mar. 20	Apr. 20	May 15	June 19
Borwell	Borwell	Borwell	Borwell	Borwell	Borwell	Borwell	Borwell	Borwell	Borwell
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I. Introductions:

Because there were new student representatives attending, Dr. Nierenberg explained the different levels of membership in the MEC and the members and quests introduced themselves.

II. Scheduling of the Final Three Clerkship Reviews:

- A. The pediatric clerkship review will take place at the November 15 meeting, presented by Dave Nierenberg and Carolyn Koulouris. The clerkship director will attend and present his introduction as well.
- B. It was tentatively decided that the Neuroscience clerkship review would be presented on January 17. Dr. Nierenberg's assistant will determine if Matthew Crowson can present and if the clerkship directors are able to attend.
- C. It was tentatively decided that the GAM clerkship review would be presented on February 21. Tom Finn and Dave Nierenberg will present. Dr. Nierenberg's assistant will determine if the clerkship directors are able to attend.

III. Revised On-Doctoring Essential Skills:

- A. Dave Nierenberg presented the revised list of essential skills sent to him by On-Doctoring. He opened the floor for discussion and the following alterations were suggested:
 - 1. Change the verbiage from "Health Prevention History" to "Health Maintenance History."
 - 2. Change "Dermatology Exam" to "Skin Exam."
- B. Questions and issues were raised, including:
 - 1. With "Oral Presentations" now being included in Year 1, when and where will they be accomplished? (Small groups and with preceptors)
 - 2. With the new skill of "Musculoskeletal Exam" (with specific designations), how would proficiency be assessed? (Students would have to perform at least five of the specific designations listed)
 - 3. What if the goals are not met? (The program administrator tracks the progress of the students and intervenes with the preceptors. Also, students need to take the initiative and communicate the goals and/or lack of progress to the preceptors)

VOTE: Dave Nierenberg asked for a vote to approve the revised essential skills for On-Doctoring with the suggested changes. The membership voted unanimously to accept.

IV. Revisiting Duty Hours Policy for Students:

Dave Nierenberg presented the Duty Hours Policy for Students that was created in May 2011 and approved by the Committee. He stated that he had received a note from Ann Davis stating that students reported violations of the policy in their

clerkships. Working with Diane Grollman (Student Evaluations), he discovered that students stated in their evaluations that, in certain clerkships, they were staying longer than the policy allowed – sometimes by their own volition, sometimes by encouragement, sometimes being ordered to stay. The most violations were in the surgery clerkship.

- A. Discussion ensued, with the following points included:
 - 1. Students and faculty should be made aware of the policy.
 - 2. Clerkship directors and faculty may be misinterpreting the policy.
 - 3. Clerkship directors may be unaware of violations.
 - 4. The Medical Education Committee is responsible for the policy and the clerkships are mandated to comply.
- B. The following suggestion were made
 - 1. The policy needs to be communicated again to the clerkship directors and clarified. (Eric Shirley will handle this)
 - 2. If violations continue, it may be necessary for the students to log their clerkship hours which no one wants to do.
 - 3. The most prolific offenders will be called to meet with Dave Nierenberg.
- C. The following strategies are or will be in effect:
 - 1. Dave Nierenberg sent Richard Freeman, Section Chief for Surgery, a letter detailing violations (and other issues) and will meet with him within the next ten days.
 - 2. Eric Shirley will bring up the issue and clarify the policy at the next CECD meeting.

V. Continuation of Report on AAMC Graduate Survey for the Class of 2011:

- A. Dave Nierenberg presented the rest of the results (beginning with "Clinical Education Quality {Slide 24}) of the AAMC Graduate Survey that the Class of 2011 completed (see attached). For the most part, the responses matched or were better than the national average, with the following exceptions:
 - 1. In OB/GYN, the students felt that they were not adequately observed by a faculty member while performing a physical examination. The membership was not able to deduce why the response was below the national average.
 - 2. In Surgery, the scores on all six questions were significantly below the national average and a drop from the previous year. In response the following strategies are in place:
 - a) The aforementioned letter and meeting between Dr. Freeman and Dave Nierenberg;

- b) Eric Shirley will be meeting with Year 4 students next week and will raise the issue of problems in the surgery clerkship at that time.
- 3. Scores on questions specific to OSCEs were significantly low. Dave Nierenberg stated that clerkships don't have specialized OSCEs relating to their curriculum at this time. He has requested, and acquired, funds for end-of-clerkship OSCEs to be developed within clerkships.
- 4. Students scored three of eight questions regarding electives or volunteer activities significantly low. They are:
 - a) Authorship of a research paper submitted for publication (DMS does not have a requirement for this)
 - b) Theses project (will likely be remedied with the new curriculum)
 - c) Experience with a free clinic for the underserved population (Dave Nierenberg expressed surprise at the low rating as he has seen a lot of student volunteers at the Good Neighbor Clinic and that the national average is high.)
- 5. Under "Special Topics," students scored significantly below the national average on the following:
 - a) Physician-patient communication skills with interpreter (not readily available due to lack of cultural diversity in the patient populations)
 - b) Teamwork with other health professionals (the lack of a nursing and pharmacy school at DHMC and the VA impacts this issue)
 - c) Biological, chemical and natural disaster management (not provided at DMS may be remedied by the new curriculum)
 - d) Occupational medicine (not covered in curriculum)
 - e) Culturally appropriate care for diverse populations (lack of diversity in the Upper Valley is a factor)
 - f) Law and Medicine (recently dropped from the HSP curriculum and replaced by Health Care Management
 - g) Biomedical ethics (part of the curriculum, but not as a free-standing course)
 - h) Rehabilitative Care (not offered needs to be revisited as it is an LCME requirement)
 - 6. Under "Preparation for Fourth Year Selecting Electives" the students scored the question significantly low. Eric Shirley believes that the problem lies in a lack of transparency in the assigning process. The issue is being addressed by students and faculty. Dave Nierenberg requested that the Committee be updated on the progress.
 - 7. For the question "How satisfied are you with your opportunities during medical school to explore potential career choices?" DMS students expressed dissatisfaction. It was proposed that there could be two contributing factors:
 - a) The lack of career advising
 - b) That the graduating students did not have access to electives in Year 3.

VI. Report on New Curriculum:

The membership expressed concern at the lack of information from the committees involved in developing the new curriculum. Dave Nierenberg suggested that committee members be invited for a report and discussion at the November MEC meeting.

VII. Agenda for November 15, 2011 MEC Meeting:

- A. Report and Discussion of New Curriculum
- B. Final Report of Social Justice Curriculum Vertical Integration Group (Tim Lahey)
- C. Analysis of Comparability of Sites Within Each Clerkship (Dave Nierenberg)
- D. Review of Pediatrics Clerkship (Carolyn Koulouris)