1. **Call to Order:** *Richard Simons, MD*

Dr. Simons called the meeting to order with the following members present:

**Voting Members:** Yashi Ahmed, Candice Black, Benjamin Colby, Robert Hyde, Sarah Johansen, Dean Madden, David Nierenberg, Virginia Reed, Christiaan Rees, Surachai Supattapone, Adam Weinstein, Sarah Freemantle

**Non-voting Members:** Ann Davis, John Dick, Diane Grollman, Virginia Lyons, Geoff Noble, Glenda Shoop, Richard Simons, Cindy Stewart, Kalindi Trietley

**Guests:** Tiffany Brazile, Tim Lahey, Sarah Kleinschmidt, Stephanie Morton, Jeff Reeves

2. **Approval of the August meeting minutes**

   *A motion was made to accept the August minutes with an amendment to change ???? to profession. The motion was seconded. A vote was taken, and the motion passed unanimously to accept the August minute.*

3. **Announcements** – *Richard Simons, MD*

   - Virginia Lyons announced the preclinical subcommittee of the MEC. This committee is trying to tie the monthly meetings to either one of the reviews faculty have prepared or reviewed to offer their expertise. If faculty are interested in participating on the committee, please email Virginia Lyons or David Nierenberg.

   - **Upcoming events**

     - Reminder, on Friday, September 20, 2013 – Phyllis A. Guze, MD, FACP, Associate Vice Chancellor, Health Affairs, and Senior Executive Dean, from the University of California, Riverside, will be a guest presenting at Medical Education Grand Rounds, “The Best Is Yet To Come”
4. **Unintended Consequences of New Class Attendance Policy** – Richard Simons, MD and Tiffany Brazile, Sarah Kleinschmidt, Stephanie Morton, Jeff Reeves

Dr. Simons gave background information that was discussed at the Curriculum town-hall meeting where some students who attending the meeting raised some concerns about the impact that the new class attendance policy is having on the first year courses. Please reflect the reasons why we put this policy together is a combination of things that happened last year with faculty expressing concerns that some students were missing small group sessions. Also, the current second years class was expressing concern about patients were being invited to class and class attendance was poor and thought that was unprofessional and that classmates were showing up late for lectures. Which lead to the attendance policy which is trying to get at small group conference attendance as well as some professional expectations around coming on time and attendance policy. What was heard at the town hall meeting is while small group conferences are being required, many large groups sessions in the first year are being required and students are feeling “this is not what they were told on their recruiting tour and they different learning styles and feel this is impacting their ability to learn affectively, as some people don’t learn as well in a class room. He invited four members of the first year class (Tiffany, Sarah, Stephanie and Jeff) to present a survey which they took.

Jeff, explained the concerns indicated by his classmates regarding the “flip classrooms.” The concerns are how each student learns differently and they are all adult learners but feel they are not able to learn as affectively. This is when they decided to send a survey to the first year class. The goals of this survey are to determine the big concern and share with the entire class. Of the 85 members of the class which were sent the survey, 67 responded to the survey. See Attachment of the survey. Jeff explains question number 3 on the survey. A lot of the time spent in class, leaning is happening all that much and takes away from the learning. They realize a lot is because of the huge learning curve and focuses on lectures rather than focusing on more interactive learning. A lot of students do not feel all the time spent in classes isn’t as effective. The amount of required lectures is different than what they had expected and compared to what second years have experienced.

Tiffany summarized the students classes, what’s required and how the flip classes are being conducted so the committee can have a sense of what kind of learning is occurring. The anatomy lab is incredibly attractive as it’s conducted in a small group and is a wonderful experience. The flip classrooms happens after the lab so students have time to look at material on their own, experience it in the lab and answer questions in a small group format. Questions in the flip class rooms are clinically focused, which opens them up to have more discussion which perpetuates the learning process for students. In Biochemistry, lectures are not required. Student’s who find lectures difficult to sit through can watch the lecture on Echo, use their textbooks or learn with another student. There more flexibilities with this format. The small group discussions happen at the end of a week or two week block before the quiz. Again, allowing students to time to utilize any resources they need to understand the material. Groups are smaller offering a better discussion and are more conceptual. In Physiology there are some large groups that are requires. The first hour lecture is required but is not attraction. It’s a traditional lecture followed by a class-wide demonstration. This is when the students learning is not as effective. The lecture is rather lengthy. There is a small group for
physiology that happens after multiple exposures to the material and become more inter-active. For CTO, the flip classrooms are over a two hour sessions but students are only covering 15 questions. This is the same number of questions as in Anatomy but in twice the time. Because classes are stacked back to back, there’s a lot of information that needs to review with not enough time to prepare. If this was more conceptual it may be more effective for students. There is a lot of time to prepare for labs as they end up being at the end of a two week period. There are groups of four looking at materials and actual slide preparation they have already been preparing for. Therefore, having a higher yield for student comprehension.

Sarah reviewed the “typical” calendar week for first years. Quizzes are every two weeks. Every Wednesday afternoon is anatomy lab, Friday morning are histology lab and small group On Doctoring sessions Thursday morning. Students agree these should all be required. Biochemistry large groups are not required just for the course director. All other sessions are large groups that are required. Just because groups are indicated as a “lab” it doesn’t always mean they are active labs. Leaving four hours of large group sessions that can be any combination of lecture of that lab or large group demonstration or that combination of lecture with questions in the flip classrooms. Student’s understand the curriculum is in redesign, and all the faculty are working hard to make the hours high yield. Students have met with Kalindi and other advisors to make this more e

5. Geisel School of Medicine Competencies – Glenda Shoop, PhD

6. Essential Clinical Conditions – John Dick, MD
   Due to ending of meeting, this will be first on November agenda after announcements.

7. Other Business
   NONE

Future Meeting Date:

   October 15, 2013    Auditorium G
   November 19, 2012   Auditorium A

Prepared by: Tina Wilcox and Glenda H. Shoop
Date: October 9, 2013