

MEDICAL EDUCATION COMMITTEE (MEC) MEETING

TUESDAY, DECEMBER 17, 2013 4:00 – 5:30 PM DHMC AUDITORIUM C

MINUTES

Voting Members		Voting Members		Non-voting Members		Non-voting Members	
Abdelghany, Mazin T.	X	Johansen, Sarah G. (Chair)	X	Comi, Richard		Lyons, Virginia T.	
Ahmed, Yashi	X	Madden, Dean R.		Cousineau, Laura K.		McAllister, Stephen B.	
Barnes, Jonathan A.		Manning, Harold L.	X	Davis, Ann J.	X	Noble, Geoffrey P.	
Bay, Jessie		Nierenberg, David W.	X	Dick. III, John. F.	X	Reid, Brian P.	X
Black, Candice	X	Reed, Virginia A.		Eastman, Terri L.		Shoop, Glenda H.	X
Boyce, William		Rees, Christiaan A.		Fall, Leslie H.		Simons, Richard	X
Tiffany, Brazile, M		Shah, Krina S.		Grollman, Diane W.		Stewart, Cynthia L.	X
Burchard, Kenneth W.		Supattapone, Surachai		Hahn, Cynthia K.		Todd, Frances M.	
Colby, Benjamin S.		Usherwood, Edward		Jaeger, Michele W.	X	Trietley, Kalindi E.	
Freemantle, Sarah	X	Weinstein, Adam	X	Kidder, Tony		Eliassen, Scottie	
Hyde, Robert	X			Lahey, Timothy	X	Hammond, Rachel (Admin. Support)	X

Guest(s)				
Matt Duncan				

Present = X Absent = --

1. Call to Order - Sarah Johansen, MD

Dr. Sarah Johansen, Chair, called the meeting to order at 4:02 pm.

2. Approval of November meeting minutes

Dr. Adam Weinstein made a motion to approve the November minutes. The motion was seconded by Dr. Robert Hyde. The motion passed by a unanimous vote.

3. Announcements – Richard Simons, MD

- **Budget** Dr. Simons reported that Dr. Souba continues his commitment to curriculum redesign. As well, the president, and the college board of trustees remain interested in Geisel's curriculum redesign. Dr. Souba has asked Dr. Simons and Dr. Lahey to accompany him to numerous meetings with faculty and staff in various departments throughout January and February.
- Responsibilities On February 28, 2014, in Auditorium G, there will be the second annual curriculum review. The Office of Medical Education and the MEC need to regularly review not only the specific courses, but conduct a periodic examination of the components and the curriculum as a whole, which is the primary purpose of this annual review. Dr. Simons encouraged MEC members to attend this meeting.

4. Review of Two New Clinical Elective Proposals – John Dick III, MD

• General comment about electives

Dr. John Dick feels that more electives are needed in the current curriculum and for Phase 3 in the new curriculum. If any of the MEC members know faculty members who might be interested in creating a new elective, please direct them to Dr. Dick who will coach them through the development and approval process.

• **Hospital Medicine Elective** (Refer to Attachment)

The proposed elective is set to be offered at Mt. Ascutney Hospital in Windsor, Vermont, and sponsored by Joel Elzweig, MD. Dr. Elzweig works at the Veterans Affair (VA) medical center where he supervises residents; he works 50% of his time at Mt. Ascutney. He has been very interested in getting students down to Mt. Ascutney Hospital during their 4th year, and perhaps 3rd year after the medicine clerkship, for a two- to four-week experience in community hospital medicine Mt. Ascutney Hospital offers a slower-paced environment and has an acute rehabilitation facility, which is something that DHMC does not offer.

Dr. Robert Hyde made a motion to approve the Hospital Medicine Elective. The motion was seconded by Dr. Adam Weinstein. The motion passed by a unanimous vote.

• Wilderness Medicine Elective (Refer to Attachment)

The elective is proposed to be offered at DHMC and sponsored by Emergency Medicine. Didactics are offered at DHMC, and some field didactics occur in the White Mountains of New Hampshire. The students will be able to take a certification examination in Wilderness Emergency Medicine upon successful completion of the elective. There will be a small cost of \$300.00 - \$500.00 for the elective, and a fee is associated with the certification. Dr. Dick will check with Charles Mannix, Chief Operating Officer, on proper phrasing as we do not charge students for other courses. Clarification will be needed for travel, food, lodging, and course materials.

• No motion was made for the Wilderness Medicine Elective as additional clarification is needed.

5. Review of Psychiatry Clerkship (Refer to Attachment) – John Dick III, MD and Matt Duncan, MD

The psychiatry clerkship is very popular and well run. The students had a lot of positive comments about the excellent leadership of Dr. Duncan and Chris Bolka, and the very supportive environment. It was the highest ranked clerkship for the previous year.

- **Areas of Improvement** Students felt they were not getting enough outpatient exposure.
- Request Requested elimination of "Delerium" as an essential diagnosis for Psychiatry. At NHH it is the admissions process to screen out delerium and this has been problematic for some students. Delerium is actively covered in Medicine.
- **Recommendations** Use a mini-Clinical Evaluation Exercise (mini-CEX) that Psychiatry is not currently using. However, Dr. Frew and Dr. Duncan are considering an oral board model that would be more extensive than the Mini-CEX.
- **Required Reading** *Introductory to Psychiatry* by Nancy C. Andreasen, MD., PhD, and Donald W. Black, MD. Students are not currently reading the textbook. The clerkship has 3-4 of these textbooks in the office, and

encourages the students to purchase them. The clerkship would need to purchase 14 books in order to have enough for the students.

Dr. Nierenberg is concerned, but supports the amount of time needed by the faculty to have to do one-on-one with the students. Dr. Duncan stated that time is built into the didactics series; they use a didactic afternoon. Dr. Simons commends Dr. Duncan's investment of time and agrees that more of this direct observation of clinical skills is necessary, certainly with this milestones concept coming out from the AAMC.

Dr. Adam Weinstein made a motion to approve Psychiatry Clerkship Objectives with changes. The motion was seconded by Dr. Robert Hyde. The motion was passed by a majority vote with one abstention.

Dr. Adam Weinstein made a motion to approve Psychiatry Clerkship Proposed Changes and Review. The motion was seconded by Dr. Robert Hyde. The motion was passed by a unanimous vote.

Dr. David Nierenberg raised the issue of mapping the clerkship objectives to the school's competencies and program objectives to show what material is covered. Since this is an area of non-compliance by LCME standards, Dr. Richard Simons expressed the need to show due diligence in mapping course and clerkship objectives to the school's competencies and program objectives.

As second motion was made by David Nierenberg to accept the currently changed learning objectives for the psychiatry clerkship with the agreement that the clerkship director bring the objectives back to the MEC in the same content, but in a different format so that it shows the MEC that the school's objectives inform the psychiatry clerkship objectives. Adam Weinstein seconded the motion. The motion passed by a unanimous vote.

A decision was made that in all future reviews, the courses and clerkships must use the new format, mapping forward from the Geisel program objectives, and encourage all courses and clerkships reviewed in 2013 to revise their objectives in the new format. This new format will be presented to the MEC members at a future meeting.

6. Liaison Committee on Medical Education (LCME) – Richard Simons, MD

This presentation was not completed because a decision was made to end the MEC meeting on time. Dr. Simons will present the LCME findings at the next MEC meeting, which will be held on January 21, 2014. The following describes areas that Dr. Simons was able to cover before the presentation ended:

Geisel School of Medicine received accreditation for a full 8 year term, with no adverse actions. The next LCME survey is 2020/2021.

Progress reports are due December 2013, which is before the new curriculum will be implemented. This means we cannot wait for the new Geisel program objectives. The assignment for the progress report is (1) to provide evidence that the 51 overall educational objectives and those of individual courses and clerkships are now linked, and (2) provide examples of how the overarching program objectives are being used to drive the evaluation of the curriculum, and the horizontal and vertical integration of curriculum content. This is an area that we need to pay attention to and keep on the radar. In the process of curriculum revision, there is a lot of attention paid to this. Much attention in the course of clerkship reviews is given to our objectives.

Non-compliance

• *IS-12 Inter-professional education* – students should have the opportunity to learn in environments with students enrolled in other health professions. Good news is Greg Ogrinc, MD, Director of Health Delivery Science course, is incorporating more inter-professional (IP) sessions with nursing students and Franklin Pierce physician assistant students, and there is a plan to do more IP activities in the 4th year Health, Society and the Physician (HSP) course. On our most recent 2013 AAMC Graduation Questionnaire, Geisel students ranked higher than the national mean for the opportunities for IPE activities. Dr. Simons feels that Geisel is making good progress on this thanks to Dr.

Ogrinc.

- *IS-16 Diversity* the institution must have policies in place to achieve appropriate diversity among its students, faculty, and staff. The LCME cited us for the lack of a coordinated and systematic strategy to increase diversity of the faculty. Leslie Henderson has been assigned this standard.
- *ED-1 Institutional Objectives* The LCME found that while there are well-defined objectives, it is unclear how these overarching objectives are used to design the objectives and learning outcomes of the courses and clerkships. It is unclear how the clerkship directors utilized the school wide objectives to develop the evaluation form. The clerkship directors have taken steps under Dr. Dick's leadership to craft a standard evaluation form that reflects the competencies.

Due to the decision to end the presentation, the MEC members requested that Dr. Simons' PowerPoint presentation be sent out to the voting members so they can prepare for the presentation and discussion at the January 2014 meeting.

7. Student Representative Comments

• No comments from students.

9. Other Business

- Dr. Sarah Johansen asked for thoughts and suggestions on ways to make the MEC members productive and efficient. Materials will be distributed in a timely manner beforehand for review and not reviewed step-by-step during the meeting. The members requested brief comments, limited to a few slides to address key items only, and allow time to discuss questions.
- Discussion: Meeting end time will be 6:00 pm.
- A request was made to note the time allotted for each item, on the agenda.

10. Adjournment – Sarah Johansen, MD

Dr. Johansen adjourned the meeting at 5:30 pm.

Future Discussions

- On Doctoring Preceptor Survey
- Consideration of Pass/Fail for all electives
- MEC policy on Independent studies and Individual electives

Future Meeting Dates (Third Tuesday of each month, 4:00-6:00 pm)

- February 18, 2014
- March 18, 2014
- April 15, 2014
- May 20,2014

Prepared by: Rachel A. Hammond Date: January 9, 2014