**Medical Education Committee Meeting Minutes**

**Meeting Date:** Tuesday, February 21, 2017  
**Time:** 4:00 – 6:00 p.m.  
**Meeting Location:** DHMC – Auditorium A  
**Approval:** Tuesday, March 21, 2017  
**Recorded By:** Rachel A. Hammond - Amended

### Attendance

<table>
<thead>
<tr>
<th>Voting Members</th>
<th>Voting Members</th>
<th>Non-Voting Members</th>
<th>Non-Voting Members</th>
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<tbody>
<tr>
<td>James, Ames (Clinical-Orthopedics)</td>
<td>Nelson, Bill (Pre-Clinical and Clinical-Health and Values VIG)</td>
<td>Albright, Amanda (Computing)</td>
<td>McAllister, Stephen (Computing)</td>
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<tr>
<td>Chidawanika, Tamutenda (Student-MD/PhD Rep)</td>
<td>Nierenberg, David (Pre-Clinical Year II Assoc. Director; Clinical-Pharmacology)</td>
<td>Cousineau, Laura (Library Sciences)</td>
<td>Montalbano, Leah (Assessment &amp; Evaluation)</td>
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<td>Sarah, Crockett (Clinical-Emergency Medicine)</td>
<td>Ramos, Joshua (Student-2nd Yr. Rep.)</td>
<td>Dick. III, John (Associate Dean, Yrs. III, IV)</td>
<td>Ogrinc, Greg (Senior Associate Dean for Medical Education)</td>
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<tr>
<td>D’Agostino, Erin (Student-3rd Yr. Rep)</td>
<td>Rees, Christiaan (Student-MD/PhD Rep)</td>
<td>Duncan, Matthew (Assoc. Dean, Student Affairs)</td>
<td>Reid, Brian (Computing)</td>
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<tr>
<td>Paul, Hanissian (Pre-Clinical-SBM Reproduction; Clinical-Obstetrics and Gynecology)</td>
<td>Rees, Judy (Pre-Clinical-Epidemiology)</td>
<td>Eastman, Terri (Pre-Clinical Curriculum Director)</td>
<td>Ross, Jonathan (Chair, Geisel Academy of Master Educators)</td>
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<td>Jonathan, Huntington (Clinical-Medicine)</td>
<td>Robey, R, Brooks (Basic Science)</td>
<td>Eidtson, William (Director, Learning Services)</td>
<td>Sharma, Swapna (Resident, DHMC)</td>
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<td>Alexander, Kettering (Student-1st Yr. Rep)</td>
<td>Sachs, Marlene (Community Preceptor Education Board)</td>
<td>Faye Green, Brenda (Library Sciences)</td>
<td>Shoop, Glenda (Learning Srv./Curric. Design &amp; Evaluation)</td>
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<td>Harold, Manning (Pre-Clinical-Year II Co-Director, Pulmonary; Clinical-Pulmonary Medicine)</td>
<td>Saunders, James (Clinical-On Doc and Surgery)</td>
<td>Fountain, Jennifer (Year II Curric. Mng)</td>
<td>Swenson, Rand (LCME, Chair Dept Med Ed)</td>
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<td>Natasha, Merri (Student-2nd Yr. Rep)</td>
<td>Smith, Marietta (Student-4th Yr. Rep.)</td>
<td>Frew, Julia (Pre-Clinical-Year II Co-Director)</td>
<td>Hammond, Rachel (Admin. Support)</td>
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<td>Philip, Montana (Student-3rd Yr. Rep)</td>
<td>Spaller, Mark (Basic Science)</td>
<td>Jaeger, Michele (Registrar)</td>
<td>(Faculty Development)</td>
</tr>
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<td>Stephanie, Morton (Student-4th Yr. Rep)</td>
<td>Warren, Celestine (Student-1st Yr. Rep.)</td>
<td>Johansen, Sarah (Past - Chair)</td>
<td>(TDI)</td>
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<tr>
<td>David, Mullins (Basic Science)</td>
<td>Weinstein, Adam (Chair; Pre-Clinical-Renal Physiology; Clinical – On Doc and Pediatrics)</td>
<td>Kidder, Tony (Year I Curric. Mng.)</td>
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<td>Larry, Myers (Basic Science)</td>
<td>0 (Faculty Council)</td>
<td>Lyons, Virginia (Assistant Dean, Year I)</td>
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<td>Carolyn, Murray (Clinical-Medicine)</td>
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**Present = X / Absent = -- / Excused = 0**

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**Approval Date:** Tuesday, March 21, 2017  
**Page 1 of 7**
1. **Call to Order** – Adam Weinstein, MD

   Dr. Adam Weinstein, Chair, called the meeting to order at 4:05 p.m.

2. **Approval of the January’s meeting minutes** – Adam Weinstein, MD

   Dr. Hal Manning made a motion to approve the January 2017 minutes. The motion was seconded by Dr. Bill Nelson. The motion passed by a unanimous vote.

3. **Announcements** – Adam Weinstein, MD

   Dr. Adam Weinstein opened the meeting with introductions of the new members and asked all members to introduce themselves with their name, department, and role on the committee.

   New members are Dr. David Mullins, Dr. Larry Myers, R. Brooks, Robey, and Dr. Mark Spaller.

4. **Old Business**

   No old business discusses.

5. **New Business**

   - **Course Review Process and Schedule** – Adam Weinstein, MD

     The goal is to enhance the detail of the course review process.

     Individuals who should be involved in Course and Clerkship reviews and be on the committees are listed below.

     **Course Review Committee**
     - Curricular Dean of Course/Clerkship (can select a designee—e.g. in Year 2, can delegate to SBM director)
     - Student MEC member - identified by MEC
     - Faculty MEC member - identified by MEC
     - Course/Clerkship Director(s)
     - Course/Clerkship Administrator - curricular dean and course director(s) appoint
     - GAME member - identified by MEC
     - Health and Value VIG faculty member - identified by MEC
     - Any other applicable VIG faculty - identified by MEC and curricular dean

     It was suggested that a standard email be sent out to the course review committee outlining the process and expectations and roll of each individual.

     The above members represent the committee and should ideally be present at the course review meeting (a 1-2 hour meeting for preparation of the course for presentation before MEC). However, if a course review committee member is unable to attend the meeting, they can instead review the powerpoint and other preparation materials and provide feedback to the committee over email.

     See attachment(s).
• **Year II: Reproduction Course Review** – *Julia Frew, MD, Paul Hanissian, MD, & Joan Barthold, MD*

This course occurs in the fifth term of Year II, and currently has 52 curricular hours. The course directors are Dr. Joan Barthold, and Paul Hanissian, MD, and was last reviewed in April 2014.

There will be ongoing efforts to ensure compatibility of the exam to course materials. There continues to be a challenge with the urology content. The students are asking for a more expert level to ask questions of. The small size of the urology department creates challenges, but could possibly overcome with resident involvement as leaders. The course directors will consider options to respond to this feedback. Lastly, the course plan to use Canvas to highlight the sub-sections of the material in the course so the overall course structure and planning is evident for the students.

See attachment(s).

**Dr. Hal Manning made a motion to approve the Year II: Reproduction course review and action plan. The motion was seconded by Celestine Warren. The motion passed with 1 abstention.**

• **Consent Agenda**

  o Year I: Basic Science of Microbial Diseases Course
  o November meeting minutes

**Dr. Hal Manning made a motion to approve the Consent Agenda. The motion was seconded by Dr. Sarah Crockett. The motion passed with 2 abstentions.**

• **Course Evaluation Process** – *Adam Weinstein, MD*

There is a pilot evaluation that is currently taking place, along with the first-year student reps who created an evaluation separate from the Pilot program that allows for in-time meaningful feedback that can be used during the sessions vs the unprofessional comments. The goal of creating a separate evaluation system was to create a separate outlet to try to enhance constructive comments and limit the amount of purely negative comments.

MEC members asked—What is the actual problem with the current evaluation process? There are a few issues:

- Students don’t remember the session that they are being asked to evaluate
- Unprofessional comments (which most students are unawares of how they may be taken as discourteous or unprofessional)
- The need for students to learn about and begin practicing the sharing of meaningful feedback (since some day they will be practicing physicians, and many faculty at medical schools/teaching hospitals).

How can we help the students who are writing the unprofessional comments understand the process and teach them how to write a meaningful comment?

- 70% of the evaluations share do not have feedback that is helpful for the course director.
- While some course directors prefer seeing the raw feedback an evaluation that identifies key themes of feedback is also helpful.
- Currently Leah Montalbano shares the full evaluation and also a version with the key issues and themes summarized for the Year 1 and 2 course directors.

Evaluation should be approached in a very systematic and coordinated fashion to maintain the integrity and credibility of the evaluation system. Too many one-off evaluations or poorly constructed evaluations
can lead to evaluation fatigue or insufficient input. Dr. Greg Ogrinc is convening a Geisel Evaluation Oversight Committee, there will be representation from the MEC, students, Basic Science, Clinical Sciences. Invites will be going out within the next week.

The MEC’s context and role in this Evaluations Oversight Committee:

- The MEC must use the info generated from course and curriculum evaluations to evaluate the courses and the program curriculum
- So the Program Evaluation process has to be sufficient to generate appropriate and sufficient info.
- The MEC does not create or need to approve the evaluations process, but rather should be familiar with it and if there are issues with it (such that it’s not giving the MEC the info needed to evaluate the courses and the program) then the MEC can bring this to the attention to administration and try to help them with solutions, if applicable.

Year III: Split/Step 1 delay – John Dick, MD and Greg Ogrinc, MD

Dr. John Dick was not able to attend the meeting. Dr. Greg Ogrinc presented on his behalf.

An increasing number of students are requesting to delay the taking of Step 1 past the start of their first planned clerkship. The only current administrative structure to handle this is to place them on leave or have them split Year III. This leads to significant financial, administrative and clerkship planning issues.

Schools that have moved the date up, typically need to rearrange their curriculum.

From the Dean’s office standpoint, it would be helpful for the MEC to give some direction. Specific questions on where and when things happen. Please email Adam Weinstein if you are interested in participating (and also leading) this Task Force. A first step will potentially be some data gathering which the Geisel Deans and Administration can assist with.

Back on topic regarding taking of the Step 1, an increasing number of students are requesting to split or decompress their third year in order to have more time to prepare for Step 1 which has led to the need to more clearly define the curricular expectations of a split 3rd year. The financial and visa implications of having a student take a leave versus a split are significant. Split students are considered “full time” and therefore avoid the leave issues. Many schools do not allow for a student to be on leave for more than 90-days without making the student take a leave of absence. There are a lot of financial aid issues, and reporting entity to the student clearing house, there is always the possibility of getting in trouble. This policy will help with that.

See attachment(s)

There was much discussion and therefore felt that we needed more time to review the proposals and we deferred further discussion to the March meeting.

For the MEC, it is important context to recognize that regarding the curricular decisions about when a student can or cannot take Step 1 is needed to be discussed and voted on by the MEC. However, the definition of a full time student, a split student schedule, or a leave of absence is not a curricular decision, rather a student affairs and registrar decision. The administration is sharing their plans with the MEC in particular so the MEC has the appropriate context in their discussion regarding Step 1.
Student Feedback / Follow-up – 4th Year Student Representative

In terms of defining a “split student,” I wanted to share my personal experience about how “easy” it is to take 90 days off from coursework. I finished my neurology clerkship on October 14th. I then headed home to Chicago, studied for Step 2 CS/CK for 2-3 weeks, and started interview season. Since I had to interview for both anesthesiology and preliminary medicine positions, my interview season was perhaps longer than the Geisel average. I returned to Geisel on January 16th for a radiology elective. Thus, I spent 94 days off between electives. I am easily on track to graduate based on the electives I scheduled during Year 3 and Year 4, but I could have remedied the 90 days off by scheduling a reading or research elective during that time.

I realize that there may be larger reasons for needing to minimize students time off between electives, but I wanted to provide an example of how 90 days off did not hinder progress toward graduation and was used for a productive reason, e.g., securing a residency position.

In terms of the course evaluation process, here are the bulleted notes of what I said aloud:

- **Explanation of the course process to students**
  - I think it would be helpful to orient students to the course review process, including the frequency with which courses are reviewed. It would also be worth explaining that comments about specific faculty members can be used for promotional purposes as I think many students, including senior medical students, are unaware of this use.
  - Based on the current structure of Year 1, this explanation could take place after orientation (because orientation is overwhelming) but before the end of Term 1 (when the first course reviews are due).
  - If we wanted to couple the explanation course review process with a session on giving/receiving feedback, I could imagine a session falling under the scope of On-Doctoring or Patients & Populations. Alternatively, I recall Ann Davis hosting a required lunchtime session with our class to review the ombudsman process (because we heard it once during orientation but she wanted to repeat it during Term 1 at a time when we were less overwhelmed).
  - We acknowledge that some course directors may want “pure, raw” feedback. I think that teaching one method for giving feedback would likely not result in all students using it, so I think there would still be raw feedback regardless of this possible intervention.

**Education around giving and receiving feedback**

- As part of Leadership Development Council and other leadership training courses, I have learned about one technique for structuring feedback called the DESC method/script.
- There are alternative models for giving and receiving feedback (sandwich method, asking what went well?, etc), but I think the DESC method is particularly good for written feedback such as course reviews as it challenges the user to come up with a constructive alternative.
- This session could include “good vs bad” examples of feedback taken from course reviews.

**Other tips that Stephanie and I have found helpful during our time as curriculum reps**

- Circle of control – what can and cannot be changed? What can be changed mid-course? What would be better addressed in a review?
• The feedback that we give our classmates when they come up to us with angry concerns is along the lines of, “Put this in your course evals. It’s helpful to be as specific as possible so that we can fix things.” These words prime students to focus on suggestions for improvements.
  o When we approach course reviews, we take all course comments and sort them into themes and quantify frequency. This approach is especially helpful when reviewing courses over multiple years to track changes in themes.

Additional thoughts
  o We worry that there would be repercussions for students if evaluations no longer were anonymous. I also think that even if we did not enact formal repercussions, there is the possibility that an identified comment may change a course director’s opinion of a student...which could introduce bias in year 3 grading or beyond.
  o There have also been frustrations about receiving feedback in Year 3 and 4. I would hope that would could create a larger culture of empathy around the evaluation process through education and mutual understanding.
  o I once again wonder about the differences between Tuck and Geisel in this regard as my colleagues who are enrolled in the MD-MBA culture have remarked on the positive culture around feedback in their small groups and coursework.

Amendment to minutes
*Clarification regarding what constitutes 90-days. Clarification was subsequent to meeting.*

Response from Administrator

I just reviewed the MEC minutes and noticed your follow up comment about the fact that you had more than 90 days off between rotations (on a non-split schedule). Perhaps we need to clarify the language that the 90 days off refers to within a Geisel term. Your last fall 2016 rotation was on 10/14/16, the term officially ended 12/16/16, so it is short of 90 days. The 90 days then starts over beginning with the new term, which started 1/3/17. Technically you did not take more than 90 days within a term.

6. Adjournment – Adam Weinstein, MD

Dr. Adam Weinstein, Chair, adjourned the meeting at 6:05 p.m.
7. **Action Items**

a. Denise Aaron and David Nierenberg will submit the final list of course objectives for the SBM Dermatology course at the next MEC meeting.

8. **Future Business**
   - Inter-Professional Student Collaboration
   - Enrichment Electives Discussion (April or May)
   - 4th Year Curriculum Development (ongoing VIG) – John Dick
   - Nutrition VIG
   - Consider Addiction Medicine Curricular Review vs VIG
   - Update on Duty Hours – John Dick (waiting for CECD)
   - Course Evaluations Process
   - Curricular Design
   - Bob Maue to present in July 2017 meeting the findings of his Neurology course and discuss division into/from HAE III.

9. **Future Meetings**

   ***Please note these meetings are on the 3rd Tuesday of each month, 4:00 - 6:00 p.m.***

   - March 21, 2017
   - April 18, 2017
   - May 16, 2017
   - June 20, 2017
   - July 18, 2017