



**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., November 15, 2011 - 4:00 to 5:30 pm, 221 Rensen

Voting Members Present: Jessie Bay (Year 2), Rich Comi, Scottie Eliassen, Aniko Fejes-Toth, Sarah Johansen, Carolyn Koulouris (Year 3), Tim Lahey, Victor Laurion (Year 1), Virginia Lyons, Dave Nierenberg, Todd Poret, Judy Rees, and Eric Shirley. (n =13)

Voting Members Absent: Kathleen Chaimberg, Ben Colby (Year 2), Matt Crowson (Year 3), Tom Finn (Year 4), Greg Ogrinc, Virginia Reed, Krina Shah (Year 1), and Jonathan Zipursky (Year 3). (n = 8)

Guests and Non-Voting Members: Matthew Braga, John Butterly, Nan Cochran, Ann Davis, Terri Eastman, Diane Grollman, Mikki Jaeger, Cathy Pipas, Brian Reid, Alison Ricker, Cindy Steward, Kalindi Trietley, and Adam Weinstein (n = 13)

Scheduled Meetings:

Sept. 20	Oct. 18	Nov. 15	Dec. 20	Jan. 17	Feb. 21	Mar. 20	Apr. 20	May 15	June 19
Borwell 758	Borwell 758	Rensen 221	Borwell 758						

I. Introductions:

Upon Dr. Nierenberg's request, the guests and members introduced themselves.

II. Report from the Committee for New Curriculum:

- A. Dr. Nierenberg introduced John Butterly, Tim Lahey, and Cathy Pipas as members of the New Curriculum Planning Committee and posed two questions:
1. What will be the roll-out for the new curriculum (when will it begin for each year)?
 2. Are any details starting to become available now as to what different components may look like?
- B. John Butterly reported that Dean Souba has a large and compelling vision for the new program that incorporates an MD and Master's Degree. His goal is to train the students in leadership in medicine and develop their level of expertise to qualify for an MS in a particular area of healthcare. The program that is developing is both integrated and longitudinal. As part of the New Curriculum Committee, Cathy Pipas is defining the core areas and competencies to be taught and Tim Lahey is creating specific committees to design and implement different portions of the new program.
- C. Tim Lahey reported that the task forces are comprised of many different experts and includes students. He stated that the core values in the existing curriculum will be maintained and that the Curriculum Committee values the input of the Medical Education Committee. The following issues are being examined:
1. What are the things valued in medical education?
 2. How can the new program address students' problems?
 3. How can it prepare them for leadership?
 4. How can existing strengths be brought to the new curriculum?
 5. How can a longitudinal learning experience be provided?
 6. How are other schools dealing with the new challenges of the changing healthcare environment? What works? What doesn't?
 7. What will graduating students look like after completing the new curriculum?
- D. Kathy Pipas presented an overview of the curriculum redesign (see Attachment) and reported that the redesign of the curriculum is taking place in two phases:
1. Brainstorming: Identifying stakeholders and determining the correct form and right messages for them.
 2. Getting the core components working
- E. Discussion ensued and the following issues were brought up:
1. For a number of reasons (including that students interviewing for admission should have this information), it's important to know when the new curriculum will launch with Year 1. (Dean Souba would like to implement the program with the class entering in summer 2013. The

current plan is to advertise it in summer 2012, but nothing is definite and it is hoped that a definite roll-out date will be announced in the near future.)

2. Will students finish in the curriculum in force at the time of their matriculation? (Yes. Also, pilots of the program may be implemented.)
3. Could literature reporting on programs at example schools be made available to stakeholders? (The concept of theme-based monthly town halls is being considered. That would be the first subject.)
4. How can a program that mandates two degrees be implemented without expanding the curriculum and number of years to complete? (Pilot programs will help to determine what is feasible. The current curriculum is being examined for redundancies and obsolete content and ways to integrate current subjects more efficiently.)
5. Will the revised curriculum take into consideration the high stakes exams the students will be needing to pass? (Some schools are moving all exams until after clinical education and finding higher pass rates. Also, the LCME is encouraging schools to develop new curricula.)
6. How will the new curriculum accommodate recent and ongoing expansions in class size (i.e., classroom space, more faculty, etc.)? (Technology is being assessed to change the way medical education is delivered. Innovations such as “virtual campus” are being considered.)
7. Will the new curriculum – with the likelihood that it will include two degrees – mandate a raise in tuition? (Currently, DMS charges for the degree – not the time to complete.)

III. Report on the Social Justice Curriculum Vertical Integration Group (VIG):

Tim Lahey introduced a report (see attached) on the Social Justice Curriculum VIG. He reported that the committee met once a month for 1-1/2 hours and, in the interim, studied the work of other schools, existing flagship service sites, and literature on the subject. The final recommendations of the committee are as follows:

- A. Add 15 hours of new social justice material to the curriculum;
- B. Integrate an additional 15 hours in collaboration between course directors and a group of social justice-expert faculty and students; and,
- C. Require a minimum of 25 hours of hands-on work with communities of need.

Due to time constraints, the full report is tabled for the December meeting.

IV. Review of the Pediatrics Clerkship:

A. Dr. Nierenberg, Todd Poret, and Year 3 student Carolyn Koulouris presented a review of the pediatrics clerkship. Details are included in the attachment "Peds Clerkship Summary."

V. Agenda for December 20, 2011 MEC Meeting:

- A. Vote on Pediatrics Essential Skills, Essential Diagnoses and Conditions, and Competency Tasks/Assessment Grid.
- B. Confirmation of the review of the neurology clerkship at the January MEC meeting
- C. Vote on several changes to Essential Conditions and Essential Clinical Skills in the Surgery Clerkship.
- D. Discussion of possible changes to the timing of clerkships in Year 3
- E. Continued discussion of the Social Justice VIG