

Meeting Date: Monday, March 23, 2020
Time: 10:00 – 11:00 A.M.
Meeting Location: Zoom
Approval: April 21, 2020
Recorded By: Jillian Marcus

Attendance

Present = X, Absent = 0

Faculty Voting Members

Ahmed, Nayla (Clinical-Medicine)	X	Ames, James (Preclinical & Clinical-Orthopedics)	X	Chow, Vinca (Clinical-Anesthesiology)	X	Crockett, Sarah (Clinical-Emergency Medicine)	X
Hanissian, Paul (Preclinical- SBM Reproduction; Clinical-Obstetrics and Gynecology)	X	Hartford, Alan (Preclinical; Clinical-Medicine)	0	Homeier, Barbara (Preclinical-On Doctoring)	X	Loo, Eric (Preclinical-Pathology)	X
Myers, Larry (Preclinical, Medical Education)	0	Nelson, Bill (Preclinical-Psychiatry)	0	Robey, R, Brooks (Preclinical & Clinical-Renal; Faculty Council)	0	Sachs, Marlene (Community Preceptor Education Board)	0
Saunders, James (Clinical-Surgery)	X	Sorensen, Meredith (Clinical-Surgery)	0	Weinstein, Adam (Chair; Preclinical-Renal, On Doc; Clinical- Pediatrics)	X		

Student Voting Members

Year 1

Banerji, Sarah	0	Cheema, Amal	0	Hanley, Meg	0	Morris, Linda	0
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Year 2

Bertalan, Mia	0	Demsas, Falen	0	Minichiello, Joe	0	Sramek, Michael	0
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Year 3

Bessen, Sarah	0	Del Favero, Natalie	0	Guerra, Sylvia	X	Lindqwister, Alexander	x
Morgan, Alexandra	X	Stanko, Kevin	0				

Year 4

Bachour, Kinan	0	Berkowitz, Julia	0	Bhushan, Vivian	X	Di Cocco, Bianca	X
Kettering, Alexander	0	Ramos, Joshua	X	Warren, Celestine	X		

MD/PhD

Chidawanika, Tamutenda	0	Kamal, Yasmin	0	Rees, Christiaan	X	Smolen, Kali	0
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Non-Voting Members

Albright, Amanda (Instructional Designer)	X	Borges, Nicole (Chair, Dept. of Medical Education)	X	Brown, Lin (Preclinical – SBM Co-Director)	X	Dick III, John (Clinical - Associate Dean Clinical Curriculum)	X
Eastman, Terri (Preclinical - Director, Preclinical Curriculum)	0	Eidtson, Bill (Director, Learning Services)	X	Fountain, Jennifer (Assessment)	0	Holmes, Alison (Associate Dean, Student Affairs & Support)	X

Jaeger, Mikki (Registrar)	X	Kerns, Stephanie (Director, Biomedical Libraries)	X	Lyons, Virginia (Preclinical - Associate Dean Pre-Clinical Curriculum)	X	Marcus, Jillian (Administrative Support, UME Affairs)	X
Manning, Hal (Preclinical – SBM Co-Director)	X	McAllister, Steve (Director, Educational Technology)	0	Montalbano, Leah (Director, Assessment & Evaluation)	X	Mullins, David (Associate Dean, Biomedical Science Integration)	X
Mullins, David (Chair, Geisel Academy of Master Educators)	X	Dick III, John (Interim, Senior Associate Dean for Medical Education)	X	Pinto-Powell, Roshini (Associate Dean, Admissions)	X	Reid, Brian (Associate Director, Educational Technology)	0
Ricker, Alison (Clinical - Director, Clinical Curriculum)	X	Vacant (Associate Dean, Diversity and Inclusion)	0	Vacant (Associate Dean, UME Administration)	0		

**Student Non-Voting Members
Diversity and Inclusion & Community Engagement (DICE)**

Conn, Stephen (Preclinical)	X	Lewis, Chad (Clinical)	0	Trinh, Katherine (Clinical)	0		
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Vice Chairs for Academics – Student Government

Bachour, Kinan	0	Jain, Raina	X				
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Guest(s)

Call to Order

Adam Weinstein, MD

Adam Weinstein, Chair, called the meeting to order at 10:00 A.M.

Announcements

Adam Weinstein, MD

None.

New Business

1. Ensuring our 4th years impacted by the clinical rotation suspension will be set and supported to graduate – John Dick, MD

- i. John and Adam introduced a document that summarizes the elective requirements that students have in their phase 2 and phase 3. “Over the clinical years, students must complete at least 16 credits of electives. 12 of those must be clinical. The remainder may be clinical or non-clinical. 6 must be outside of a narrowly defined field. 1 credit shall equal at least 40 hours of work. The first SubI does not count as elective. Subsequent SubIs do.” John said that once the graduating students finish up this week’s capstone work, there will be 8 weeks left for the students to fulfill their requirements.
- ii. John proposed the two following changes for the MEC to discuss:
 - 1. Consider changing number of required clinical credits to 8.

2. Consider decreasing number of required electives to 14.
- ii. Discussion
 - a. Adam shared the Geisel program objectives with the MEC. Every Geisel student should achieve these objectives for graduation requirements. Geisel ensures that the students meet these objectives through mapping with each course and clerkship. Adam said that he looked through the program objectives with the lens to see if we were to decrease the number of clinical electives, would this influence the ability for students to achieve these objectives. From his view, it would not influence achievement, as the clinically applicable objectives can be met through a combination of required clerkships, the sub-internship, and the capstone course.
 - b. A member asked to clarify what constitutes as a clinical credit. John answered that they use a rubric that when electives get set up, if the elective is going to have greater than 50% patient contact or patient related activities, it is considered a clinical elective, otherwise it is non-clinical. Most clinical electives are set up for 40-hour workweeks and this would be considered 1 elective credit (one 40 hour work week). Some non-clinical electives may get up with the same timing, and 1 week = 1 credit; or if it were 20 hours/week, then it would be 2 weeks = 1 credit.
 - c. One member asked if we must stick with 40 hours equaling one credit or is there flexibility there. Adam and John answered that there are different methods that students can use to obtain the hours. i.e. If a student wants to do a reading elective and it will take roughly two weeks and that amount of work over that time, then they can obtain the hours that way as well.
 - d. A member asked if the number of students would change who need to earn the credits by lowering the number of clinical credits. John answered the number would remain the same with 46 still having to earn credits.
 - e. A member asked if there would be a way to have students do screenings via phone calls or working with primary care doctors doing virtual consults? She said she is trying to put the two concepts together of them fulfilling their clinical requirements and using their strong desire to want to help. Alison Holmes answered that they have taken this to the legal office at the college and it is being reviewed. Alison also mentioned that she has been working with a small group of faculty to put together a COVID pandemic elective that students could do for credit.
 - f. One member mentioned that in regions of the country that are currently hit hardest by the pandemic, students might be asked to start their residency early. They asked, what has Geisel thought about this? Could students be able to graduate early in this context? John answered that they spoke to the LCME last week, and they are still holding strong that the students need to be able to meet a program's objectives and graduation requirements. If students are asked to start their residency early, they will have to look at it at an individualized basis to ensure they have met the graduation requirements.
 - g. A member asked about the possibility of pairing students and faculty together to create electives so that students can obtain credit. Sarah Crockett proposed that there could be an elective on PPE, bed management, and COVID physiology. Vinca Chow mentioned that there are videos to help address this, and she would be happy to share them, so the students are prepared.
 - h. Stephanie Kerns mentioned that through the EBM elective, they have a small capacity to help students gain electives.

- i. Adam summarized the discussion at this point to highlight two different and overlapping topics/proposals:
 - 1. What do the graduation requirements need to be as far as clinical electives and total elective time
 - 2. The idea of a COVID 19 elective, offering this as an elective to those with interest and remaining requirements vs requiring all graduates to take this elective even if they've already met all requirements.
- j. Regarding the latter, a few members mentioned that it would be too difficult, practically, at this point, to require all graduates to take this elective. Others did express it would be valuable to everyone in all fields.
- k. One member wondered if 4th years were asked to start residency early, if they could accomplish both at the same time (ie get "away elective" credit for their work in their residency program). Adam thought this made some practical sense though would be uncertain what the LCME would say with regards to this since they'd be working at their residency as a resident before they have the MD degree.

James Saunders made a motion to approve "changing number of required clinical elective credits to 8 (rather than the current 12), and acknowledge that if a student is called upon to start their residency early, on an individual basis, their portfolio will be reviewed to see if they have met all Geisel program objectives and requirements otherwise, even in lieu of completing that requirement." The motion was seconded by Nayla Ahmed. The motion passed by a unanimous vote.

- l. Adam opened for discussion whether we should extend this past vote to the 3rd year students whose elective time will be impacted by potential make-up work next year; and who currently may have time to be productive and enroll in non-clinical electives. There were a few members who felt it was uncertain how impacted the 3rd years would be and it may be too early to make this decision.
- m. John brought up the idea of considering decreasing the total number of required elective credits to 14, from 16. Discussion centered on the short amount of time left in the 4th year, would expecting everyone to reach 16 make it so a student cannot graduate. Adam brought up decreasing to 14 would not influence a students' ability to meet all Geisel Program Objectives. John and others felt that with faculty tied up in clinical work at the moment, to ensure all students have a chance to meet requirements, it made sense to decrease to 14.

Paul Hanissian made a motion to approve "decreasing number of required elective credits to 14." The motion was seconded by Sylvia Guerra. The motion passed with one abstention.

After both votes, Adam mentioned to the MEC that the AAM and Neurology clerkships are requirements that some of our 4th year students may still need to complete. As there is no clinical aspect to the rotations this spring, we wanted to share with the MEC how students enrolled in these clerkships will meet all the clerkship objectives and essential skills and conditions requirements.

1. In summary, there are many objectives, which can be accomplished through remote learning activities. For these, the students will remain enrolled in the clerkship and participate with remote learning
2. Other objectives require direct clinical and in person contact. However, for these, the LCME has supported that if the students have met this objective in another setting, e.g. another clerkship, then this could satisfy the requirement. Using “interviewing patients skillfully in an ambulatory setting” as an example, AAM students could have met this requirement through their Family Medicine clerkship already. Therefore, all objectives and essential requirements can still be achieved by our soon to be graduates
3. We will discuss moving these courses to Pass/Fail related to less time with faculty and patients and inability to discern between H/HP/P performances, but maintaining the ability to identify whether the student has achieved the objectives or not (Pass/Fail).

The MEC will meet again on Wednesday, March 25th to discuss the two following topics.

- 1) How to innovate 3rd year clerkships so students impacted by the rotation suspension will meet objectives and requirements. At this time, we can discuss elective requirements for the current 3rd year class as well.
- 2) Any revisions need to the USMLE policies based on delays in scheduling as testing centers are closed spring 2020.

Adjournment

Adam Weinstein, MD

Adam Weinstein, Chair, adjourned the meeting at 11:19 A.M.

Ongoing Business

- Evaluation Oversight Committee
- LCME Oversight Committee
- ABG Interpretation

Future Meetings

MEC meetings are the 3rd Tuesday of each month from 4:00 - 6:00 p.m.

- April 21, 2020
- May 19, 2020
- June 16, 2020
- July 21, 2020
- August 18, 2020
- September 15, 2020