

**Meeting Date:** Tuesday, July 21, 2020  
**Time:** 4:00 – 6:00 p.m.  
**Meeting Location:** Zoom  
**Approval:** August 18, 2020  
**Recorded By:** Jillian Marcus

## Attendance

Present = X, Absent = 0

### Faculty Voting Members

<b>Ahmed, Nayla</b> (Clinical-Medicine)	0	<b>Boardman, Maureen</b> (Preclinical & Clinical- Family Medicine, Community Preceptor Rep)	X	<b>Chow, Vinca</b> (Clinical-Anesthesiology)	X	<b>Crockett, Sarah</b> (Clinical-Emergency Medicine)	0
<b>Hanissian, Paul</b> (Preclinical & Clinical- Obstetrics and Gynecology)	X	<b>Hartford, Alan</b> (Clinical-Medicine)	X	<b>Homeier, Barbara</b> (Preclinical- Pediatrics)	X	<b>Loo, Eric</b> (Preclinical-Pathology)	X
<b>Matthew, Leah</b> (Clinical-Family Medicine)	X	<b>Myers, Larry</b> (Preclinical- Medical Education)	X	<b>Nelson, Bill</b> (Preclinical - Psychiatry)	X	<b>Robey, R, Brooks</b> (Preclinical & Clinical- Medicine; Faculty Council Rep)	X
<b>Saunders, James</b> (Clinical-Surgery)	X	<b>Sorensen, Meredith</b> (Clinical-Surgery)	0	<b>Weinstein, Adam</b> (Chair; Preclinical & Clinical- Medical Education)	X		

### Student Voting Members Year 1

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### Year 2

<b>Banerji, Sarah</b>	X	<b>Cheema, Amal</b>	X	<b>Hanley, Meg</b>	X	<b>Morris, Linda</b>	X
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### Year 3

<b>Bertalan, Mia</b>	0	<b>Demsas, Falen</b>	X	<b>Lindqwister, Alexander</b>	X	<b>Minichiello, Joe</b>	0
<b>Morgan, Allie</b>	0	<b>Sramek, Michael</b>	0				

### Year 4

<b>Bachour, Kinan</b>	0	<b>Bessen, Sarah</b>	0	<b>Bhushan, Vivian</b>	0	<b>Del Favero, Natalie</b>	0
<b>Guerra, Sylvia</b>	X	<b>Stanko, Kevin</b>	0	<b>Warren, Celestine</b>	0		

### MD/PhD

<b>Chidawanika, Tamutenda</b>	0	<b>Kamal, Yasmin</b>	0	<b>Keim, Abigail</b>	X	<b>Reiner, Timothy</b>	X
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### Non-Voting Members

<b>Albright, Amanda</b> (Instructional Designer)	0	<b>Borges, Nicole</b> (Chair, Dept. of Medical Education)	0	<b>Dick III, John</b> (Interim, Senior Associate Dean for Medical Education)	0	<b>Dick III, John</b> (Clinical - Associate Dean Clinical Curriculum)	0
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<b>Eastman, Terri</b> (Preclinical - Director, Preclinical Curriculum)	0	<b>Eidtson, Bill</b> (Director, Learning Services)	X	<b>Fountain, Jennifer</b> (Assessment)	0	<b>Holmes, Alison</b> (Associate Dean, Student Affairs)	X
<b>Jaeger, Mikki</b> (Registrar)	X	<b>Kerns, Stephanie</b> (Director, Biomedical Libraries)	X	<b>Lyons, Virginia</b> (Preclinical - Associate Dean Pre-Clinical Curriculum)	X	<b>Marcus, Jillian</b> (Administrative Support, UME Affairs)	X
<b>McAllister, Steve</b> (Director, Educational Technology)	0	<b>Montalbano, Leah</b> (Director, Assessment & Evaluation)	X	<b>Mullins, David</b> (Associate Dean, Biomedical Science Integration)	X	<b>Mullins, David</b> (Chair, Geisel Academy of Master Educators)	X
<b>Pinto-Powell, Roshini</b> (Associate Dean, Admissions)	0	<b>Reid, Brian</b> (Associate Director, Educational Technology)	X	<b>Ricker, Alison</b> (Clinical - Director, Clinical Curriculum)	0	<b>Wu, Diana</b> (Interim, Associate Dean, Diversity and Inclusion)	X
<b>Vacant</b> (Associate Dean, Evaluation and Assessment)	0						

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

<b>Tersio, Isabelle</b>	X						
<b>Vice Chairs for Academics – Student Government</b>							
<b>Guerra, Sylvia</b>	X	<b>Lindqwister, Alexander</b>	X				

**Guest(s)**

<b>Lori Avery</b>	<b>Campbell Levy</b>	<b>Nick Ryan</b>	
<b>Alayna Sharp</b>	<b>Members of the Race and Health Equity committee</b>		

## Call to Order

**Adam Weinstein, MD**

Adam Weinstein, Chair, called the meeting to order at 4:00 p.m.

## Announcements

**Adam Weinstein, MD**

Adam announced that Maureen Boardman and Leah Matthew started their terms today as faculty voting members. He continued to announce that Abigail Keim and Timothy Reiner were the newly appointed MD/PhD student voting members. As well, Isabelle Tersio is the newly appointed student non-voting DICE rep.

## Approval of Meeting Minutes

**Adam Weinstein, MD**

Approval of June meeting minutes.

***Eric Loo a motion to approve the June 2020 MEC meeting minutes. The motion was seconded by Bill Nelson. The motion passed by a unanimous vote with an abstention.***

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## Student Issues & Feedback

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None.

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## New Business

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### 1. LCME Update – Nick Ryan, MPA

- i. Nick provided an LCME update to the MEC. His update included telling the MEC how the survey visit that was scheduled to be in person will now be virtual. The virtual visit will still be held from April 25 – 28<sup>th</sup>, 2021. Nick's update also included how things are progressing with the completion of the survey package and how the timeline does not change, as it is still due January 1<sup>st</sup>. He also mentioned the progress in identifying the areas of challenge for the school.
- ii. Discussion
  - a. One member asked how involved individuals in the MEC would be when the LCME did the virtual survey visit. Nick answered that if an individual is in a leadership role, or a course leader/clerkship director then they would likely be asked to participate, and others might as well.

### 2. USMLE Step 1 Policy – Adam Weinstein, MD

- i. Adam Weinstein summarized the changes in the document presented to the MEC.
- ii. Discussion
  - a. One member suggested adding, “at the start of their final year of medical school prior to graduation,” to the first and third policy statement.
  - b. A few members suggested revisiting certain parts of the policy to scrutinize the specifics of the timing more.
  - c. Others agreed though felt it would be helpful to the rising 2<sup>nd</sup> year class to move forward with a vote on the main idea of the update, which would be to allow students to take Step 1 either before, during, or immediately following Phase 2 of the curriculum.

***Linda Morris made a motion to approve the current updates to UME-CNTRL-0001 USMLE Step 1 Policy and then subsequently work together to update the timing logistics on the document to make sure the dates align properly. The motion was seconded by Abigail Keim. The motion passed by a unanimous vote.***

***Action item: Update to some of the wording on timing.***

### 3. Foundations Study Skills Course Discussion – Bill Eidtson, Ed.D.

- i. Bill summarized the document presented to the MEC.
- ii. Discussion
  - a. One member asked a clarifying question of where the course falls in the curriculum. It will be immediately following the Medical Science Integrations course at the conclusion of Phase 1. period. The intention is to have this course assist both in preparation for Step 1 study as well as NBME shelf study for the clerkships and be equipped for medical style board questions moving forward and throughout a medical career.
  - b. A member asked about having this course earlier in the curriculum such as around Foundations (since there is a focus on NBME style questions). This was an interesting consideration. One student member expressed that they took an elective with content like this course that they found valuable for coming into their clerkships and the Step exam.
  - c. It was clarified that this course will be offered at a fixed point, just as all other Phase 1 courses. There will not be very many classroom hours, so if a student chooses to use the timeframe of the course to dedicate time to study for Step 1, this course would not interfere with that, and if anything, assist in Step 1 study (as study skills is part of the study needed to prepare for Steps).
  - d. Another member asked about assessments during this course, and Bill answered the assessments would be primarily formative. Bill continued to clarify he is still working on finalizing the course, and he will be presenting the objectives and course plan in the upcoming MEC meeting.
  - e. A member mentioned changing language in the first paragraph of the document Bill presented. The specific language of comment was, “the ability to decipher their often convoluted, multi-level questions.” The member suggested changing the text to, “the ability to apply that knowledge and choose the best answer amongst other plausible choices under strictly time conditions.” Bill agreed with the change.
  - f. A member asked if portions of this course could be optional. The course is designed in a workshop format with students working together in active cases and question study and practice. Different students will bring different levels and experiences, and all will provide helpful insights to one another in different contexts.
  - g. Bill clarified that this course will be virtual.

**Action item: Bill to update the description of “the ability to decipher their often convoluted, multi-level questions” to, “the ability to apply that knowledge and choose the best answer amongst other plausible choices under strictly time conditions.”**

**4. OB-GYN Clerkship (Phase #2) – Paul Hanissian, MD & E. Rebecca Pschirrer, MD, MPH**

- i. Adam and Paul summarized the MEC review team's recommendations and the clerkship's action plans.
- ii. Discussion
  - a. There was a small discussion clarifying the conditions that are encompassed within the medical term, "abortion (any type)."
  - b. Discussion also occurred related to the plan to mitigate students having varying learning hours at different sites, emphasizing no students exceed the learning hours maximum. Some sites had allowed students to be sent home early when the work was completed, and this varies between the sites. It will be interesting to see how this will look in the pass/fail situation of the current academic year.

*Eric Loo made a motion to approve OBGY 304 Obstetrics & Gynecological (OB/GYN) Clerkship. The motion was seconded by James Saunders. The motion passed by a unanimous vote with an abstention.*

**5. Capstone Course (Phase #3) – Campbell Levy, MD**

- i. Adam and Campbell summarized the MEC review team's recommendations and the clerkship's action plans.

*Vinca Chow made a motion to approve MDED 401 Capstone Course. The motion was seconded by Alan Hartford. The motion passed by a unanimous vote.*

## 6. Race and Health Equity Longitudinal Curriculum Objectives – Diana Wu, MD & David Mullins, PhD

- i. David summarized the document.
- ii. Discussion
  - a. There was discussion on the word, “ability,” within the mission statement and what may be a different interpretation of the word relating to “performance” rather than for different levels of physical and cognitive ability. Diana clarified that the word ability was more specific in this context to different levels of physical/cognitive abilities, and she included examples such as cerebral palsy. It was then proposed to add the definition of “ability” to the glossary so that this definition would be clear to all.
  - b. A couple members expressed that they felt it was appropriate and clear to have the word “ability” within the mission statement.
  - c. The word “intersectionality” was also discussed and the different ways in which the word could be interpreted. Diana clarified that the curricular objective 2, “Understand how intersectionality not only compounds health inequities but also leads to specific and unique disadvantaged experiences for marginalized individuals and populations,” is providing somewhat of a definition in the objective itself. She continued to explain that having intersections of different marginalized identity can compound health inequities. She said the other part is having multiple marginalized identities can lead to a specific experience, that is unique to the other identities by themselves.
  - d. Diana explained that curricular objective 1, “Utilize interdisciplinary, intersectional approaches to recognize and mitigate health inequities and iatrogenic risk driven by oppression, bias, and prejudice at intrapersonal, interpersonal, institutional, and structural levels,” is using an intersectional approach and it is meaning recognizing that there are these intersections that happen. The intent was not to indicate to use an intersectional approach of privilege to recognize and mitigate health inequity but rather, using the concept of intersectionality to understand how it is almost emphasizing how intersectionality is important in understanding and recognizing and mitigating health inequities. It was suggested to reword this objective to say: “Utilize interdisciplinary approaches *and the concept of intersectionality* to recognize and mitigate health inequities and iatrogenic risk driven by oppression, bias, and prejudice at intrapersonal, interpersonal, institutional, and structural level,” so that this intention is more fully clear.
  - e. A member asked about adding the word “identify” to outcome number 5 so it would read, “Identify, intervene and advocate effectively when inequity exists.” The same member expressed interest in having more definitions added into the glossary for “cultural humility,” “inequity,” and “inequality,” or “equity,” and “equality.”

- f. One point a member wanted to make was to applaud the team for seeing “locally,” and “globally,” within the mission statement. But, did not see anything in the outcomes or objectives that talk about the inequities on a global scale, and they would like to see some language on specific goals and objectives to include some awareness of how this is impactful on a global scale. It was suggested the words “locally and globally” could be added to a couple of the current objectives so this would be captured (e.g. like on curriculum inventory searches).

***Barbara Homeier made a motion to approve the Race and Health Equity Longitudinal Curriculum Objectives with the highlighted modifications for the RHE committee to consider, including where “locally and globally” can be added to objectives if applicable, and additional/clarified definitions in the glossary section. The motion was seconded by James Saunders. The motion passed by a unanimous vote.***

***Action item: Diana and David to take feedback to the RHE committee and update document.***

### **Adam Weinstein, MD**

Adam Weinstein, Chair, adjourned the meeting at 6:23 P.M.

## **Ongoing Business**

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- Evaluation Oversight Committee
- LCME Oversight Committee
- ABG Interpretation
- USMLE Step 1 Policy
- USMLE Step 2 Policy
- 3<sup>rd</sup> Year student clinical elective credit requirements

## **Future Meetings**

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**MEC meetings are the 3<sup>rd</sup> Tuesday of each month from 4:00 - 6:00 p.m.**

- August 18, 2020
- September 15, 2020
- October 20, 2020
- November 17, 2020
- December 15, 2020
- January 19, 2021