

Meeting Date: Wednesday, July 21st, 2021
Time: 4:30 – 6:00 p.m.
Meeting Location: Zoom
Approval: August 2021
Recorded By: Terri Eastman

Attendance

Present = X, Absent = 0

Faculty Voting Members

Ahmed, Nayla (Clinical-Medicine)	0	Boardman, Maureen (Preclinical & Clinical- Family Medicine, Community Preceptor Rep)	X	Chow, Vinca (Clinical-Anesthesiology)	0	Crockett, Sarah (Clinical-Emergency Medicine)	X
Hanissian, Paul (Preclinical & Clinical- Obstetrics and Gynecology)	0	Hartford, Alan (Clinical-Medicine)	0	Homeier, Barbara (Preclinical- Pediatrics)	X	Hofley, Marc (Clinical-Pediatrics)	X
Matthew, Leah (Clinical-Family Medicine)	X	Myers, Larry (Preclinical- Medical Education)	X	Nelson, Bill (Preclinical - TDI)	X	Robey, R, Brooks (Preclinical & Clinical- Medicine; Faculty Council Rep)	X
Saunders, James (Clinical-Surgery)	X	Sorensen, Meredith, Chair (Clinical-Surgery)	X	Thompson, Rebecca (Pre-Clinical-& Clinical Neurology)	X		

Student Voting Members Year 1

--	--	--	--	--	--	--	--

Year 2

Carhart, Briggs	X	Fitzsimmons, Emma	X	Thomson, Chris	X	Xu, Jane	0
------------------------	---	--------------------------	---	-----------------------	---	-----------------	---

Year 3

Banerji, Sarah	X	Cheema, Amal	0	Hanley, Meg	X	Morris, Linda	X
-----------------------	---	---------------------	---	--------------------	---	----------------------	---

Year 4

Bertalan, Mia	X	Demsas, Falen	0	Lindqwister, Alexander		Minichiello, Joe	0
Sramek, Michael	0						

MD/PhD

Chidawanyika, Tamutenda	0	Kamal, Yasmin	0	Keim, Abigail	X	Reiner, Timothy	X
------------------------------------	---	----------------------	---	----------------------	---	------------------------	---

Non-Voting Members

Albright, Amanda (Instructional Designer)	0	Borges, Nicole (Chair, Dept. of Medical Education)	X	Dick III, John (Interim, Senior Associate Dean for Medical Education)	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)	X	Holmes, Alison (Associate Dean, Student Affairs)	X

Jaeger, Mikki (Registrar)	X	Kerns, Stephanie (Director, Biomedical Libraries)	X	Lyons, Virginia (Preclinical - Associate Dean Preclinical Curriculum)	X	Marcus, Jillian (Administrative Support, UME Affairs)	0
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
Pinto-Powell, Roshini (Associate Dean, Admissions)	0	Reid, Brian (Associate Director, Educational Technology)	X	Ricker, Alison (Clinical - Director, Clinical Curriculum)	X	Vacant (Associate Dean, Diversity, and Inclusion)	0
Shoop, Glenda (Associate Dean, Evaluation and Assessment)	X						

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

Tersio, Isabelle	0	Conn, Stephen	0				
-------------------------	---	----------------------	---	--	--	--	--

Vice Chairs for Academics – Student Government

Guerra, Sylvia	0	Lindqwister, Alexander	0				
-----------------------	---	-------------------------------	---	--	--	--	--

Guest(s)

Alexander Fuld, MD							

Call to Order

Chair Sorensen called the meeting to order at 4:30 p.m.

Announcements

Meredith Sorensen, MD

- Welcome to Marc Hoffley and Rebecca Thompson to the Medical Education Committee.

Approval of Meeting Minutes

Meredith Sorensen, MD

Approval of June meeting minutes.

Motion to accept the June meeting minutes with a revision to reflect Mia Bertalan presence made by William Nelson, seconded by R. Brooks Robey. Motion passes by unanimous vote.

Student Issues & Feedback

No student issues were brought to the meeting

Consent Agenda

None

Old Business

1. **Geisel Grading Policy, Glenda Shoop, PhD.**
Changes to this policy are in yellow.

Geisel Grading Policy

Summary of Purpose

This policy was written to establish the plan for grading within each Phase of the Geisel curriculum to ensure alignment with the Principles of Assessment Policy and clear communication to students on how grading throughout each Phase will occur. Students are expected to master an approved set of learning objectives, specific to each course or clerkship, that align with applicable and overarching program objectives within Geisel competencies, as defined and reviewed by the Medical Education Committee (MEC), in accordance with accreditation requirements.

Definitions

Longitudinal Course. A course that spans a defined time period and incorporates a longitudinal assessment plan. Geisel's longitudinal courses that span Phase 1 are On-doctoring and Patients & Populations.

Compendium Course. A course whose content is a collection of concise, detailed, clinical cases that are meant for students to use their cognitive integration of medical science knowledge to work through each case. The compendium course is the 'Medical Science Integrations' course at the end of Phase 1, Year 2.

Score. Numerical calculation of an exam or course that conveys a student's performance.

Grade. The official mark indicating the degree of accomplishment in a course that is noted on the transcript as described in the Student Education Records Policy.

Benchmark Assessment. These assessments may include exams, projects, or other assignments with weight distribution determined by the course leader prior to the start of the course. Benchmarks serve a diagnostic purpose. They are designed to determine

how a student is progressing and whether the student needs additional support. Students who do not achieve satisfactory progress on benchmark assessments will work with course leaders and the Director of Learning Support to develop an improvement plan that includes components, such as, peer-tutoring, academic skills sessions, one-on-one meetings with course leaders and review sessions.

Final Summative Assessment. These exams provide an opportunity for students to demonstrate that they have fulfilled the objectives of the course or clerkship. Many clerkships choose to use the **NBME Subject Exam** as a tool to determine students' medical knowledge at the end of the clerkship.

Student Performance Evaluation (SPE). SPEs utilize a clinical performance checklist that links to both course and program objectives and includes a written narrative assessment. For all clerkships this tool is used at the end of the rotation. Each clerkship will manage how and who will provide feedback to students based on the clinical dynamic.

Course Assignments. Learning tasks on a specific topic(s) and related to an established set of objectives that are assigned by the course or clerkship director to provide greater insight into a student's abilities and understanding. Students must successfully complete all assignments within a course or clerkship.

Professionalism/Engagement. Students must exhibit professional behavior throughout the clerkship by being on time for clinical obligations, submitting assignments on time, and being respectful of patients, faculty, peers, and staff.

Objective Structured Clinical Exam (OSCE). Exam that evaluates a student's ability to obtain a focused history, perform a focused physical exam, communicate clearly with patients, and document a reasoned assessment and diagnostic plan.

Policy Statement

Overarching

- Clear documentation of individual course or clerkship grading policy will be available to students within the learning management system by the first day of the course or clerkship.
- Changes to grading policy and practices that occur during an academic year shall only occur in exceptional circumstances. If a change is necessary, it must be approved through the Medical Education Committee, and all impacted students must be notified.
- Course or Clerkship directors will make themselves available to meet with a student to discuss questions regarding how a final grade was determined should a student request this.
- Students who fail a course or clerkship and have exhausted the remediation options outlined in the Phase 1 and Phase 2 grading policies, will be referred to the Committee on Student Performance and Conduct (CSPC).

- This policy only references Honors, High Pass, Pass and Fail grades. For a full description of grades and transcript notifications please see the *Student Education Records Policy*.

Phase 1 Grading Policy

Students will be assigned a final grade of Pass or Fail for each Phase 1 course.

Students must pass each Phase 1 course to proceed to Phase 2.

Foundational and Organ Systems-based Courses

The standard for passing a **foundational and organ systems-based** course requires meeting **BOTH** the minimum cutoffs for the final summative exam **AND** the course score as outlined below.

Cutoffs and grade weighting are described below:

- **Benchmark Assessments**
 - No minimum cutoff for passing.
- **Final Summative Assessment**
 - Minimum cutoff for passing the final summative assessment is 65% or 2 standard deviations below the mean based on overall class performance. If 2 standard deviations below the mean is a lower value than the 65% cutoff, this lower score **can** be used as the minimum cutoff score to pass.
- **Course Score**
 - Minimum cutoff for passing a course is 70% or 2 standard deviations below the mean based on overall class performance. If 2 standard deviations below the mean is a lower value than the 70% cutoff, this lower score **can** be used as the minimum cutoff score to pass.
 - Weighting of assessments for calculating the overall course score is as follows:
 - 30-40% of the overall score comes from performance on benchmark assessments.
 - 60-70% of the overall score comes from performance on the final summative assessment.
 - Graded projects, which fall under the category of benchmark assessments in foundational and organ systems-based courses, should contribute no more than 10% to the total course score.

- Course leaders, in consultation with the Geisel Assessment Oversight Committee, may choose a different weighting scheme outside the parameters stated above with the understanding that the final exam may contribute no less than 50% and no more than 80% to the course score.

In up to two foundational or organ systems-based courses, a student who does not earn the minimum required scores for either the course, the final, or both, is eligible to take 1 institutionally-developed or NBME-customized assessment multiple-choice remediation exam for each failure, without notation in the grade summary or transcript. * Specific details follow.

- If a student is unable to meet the academic standards, as described above, for any two foundational or organ systems-based courses across Phase I, the grade of Incomplete (INC) will be assigned. Upon successful remediation, the INC will be changed to a PAS with no further notation on the grade summary or transcript.
- A student will be granted no less than 2 weeks of study time for the remediation.
- Remediation for M1 students must occur in winter break or summer break. Remediation for M2 students must occur during winter break or the dedicated study period.
- The period in which the remediation occurs will be determined by the student in consultation with the course leader and Associate Dean for Preclinical Education.
- Remediation exam dates, established by the Office of Assessment and Evaluation in collaboration with the Office of Preclinical Education, will be provided to the students to choose from the options.
- If a remediation exam is not successfully passed, a failing grade will be submitted and noted on transcript, and the student will be referred to the CSPC for a remediation plan. **Grade Appeal Process Statement******
- If a student fails to meet the academic standard for a third foundational or organ systems-based course, the failing grade will be submitted and noted on transcript, and the student will be referred to the CSPC for a remediation plan.
- **Students will be expected to meet with the course leader and the Pre-Clinical Dean to establish a supportive structure for remediation.**

* M1 students from AY 20-21 that have already received a course failure(s) will be granted the opportunity to remediate up to two courses in Phase 1, Year 2 as outlined above, without transcript annotations. However, the same CSPC referral policies for failed remediation exams or failure to meet initial academic standards in 3 or more foundational or organ systems-based courses across Phase 1 will continue to apply.

Longitudinal and Compendium Courses

The standard for passing is described below:

- A passing grade will be determined by the course leaders based on satisfactory achievement of all course objectives as related to Geisel program objectives/competencies, reviewed by the Geisel Assessment Oversight Committee, and approved by the Medical Education Committee.
- A grade of Pass or Fail will be given at the end of each year for longitudinal courses.
- If a student fails a longitudinal or compendium course, they will be referred to the CSPC.

Phase 2 Grading Policy

For required clerkships, students will be assigned a grade of Honors, High Pass, Pass, or Fail based on cumulative performance across all methods of assessment. *

The Interdisciplinary Clinical Exercises course (ICEX) will be assigned a grade of Pass or Fail.

All clerkships in Phase 2 must be passed in order to progress to Phase 3. Additionally, the student must pass the ICEX, and the OSCEs associated with it, to progress to Phase 3. The Associate Dean for Clinical Education may allow students to progress to Phase 3 (or Year 4 in the legacy curriculum) without having successfully completed all Phase 2 (or Year 3 in the legacy curriculum) requirements on a case-by-case basis when special circumstances arise.

The standard for passing Phase 2 clerkships will require that students:

- On average, meet expectations in each competency assessed by clinical supervisors as documented on the student performance evaluation tool.
- Score above the 5th percentile on the end of clerkship NBME Subject exam or an applicable cutoff on an alternative final summative assessment as approved by the GAOC.
- Successfully complete all course assignments.
- Meet professionalism and engagement expectations as indicated on clerkship specific grading rubrics.

Due to the varying nature of each clerkship, weight distribution of each assessment category towards the final grade will be made at the clerkship leaders' discretion with oversight by the Geisel Assessment Oversight Committee and approval from the MEC.

****For AY 2021-2022, clerkship grading will be Pass/Fail. In addition, a student will be allowed 1 initial failure and 1 retake of a NBME subject exam without notation in the grade summary or transcript across the required clerkships in***

Phase 2 and Phase 3. If the retake is not successfully passed, a failing grade will be submitted, and the student will be referred to the CSPC for a remediation plan. In the event of a second failure on a subject exam in a required clerkship in Phase 2 and Phase 3, a failing grade will be submitted, and the student will be referred to the CSPC for a remediation plan.

The standard for passing ICEX will require that students:

- Successfully complete all course assignments
- Attend all required sessions
- Pass the year end OSCEs

Assessment Categories (described under Definitions)

- Student performance evaluation (SPE)
- Final summative assessment (Many clerkships choose to use the NBME Subject Exam)
- Course assignments
- Professionalism/Engagement
- OSCE

Phase 3 (or Year 4 - 2021-2022 - in Legacy Curriculum) Grading Policy

Students must pass each Phase 3 (or Year 4 in Legacy Curriculum) course, sub-internship, clerkship and elective to be considered for graduation.

- Required Phase 3 (or Year 4 in legacy curriculum) clerkships will align with the grading plan outlined for the Phase 2 clerkships.
- All elective and sub internships will utilize a student performance evaluation derived from the Geisel Program Objectives as well as a narrative assessment to determine if a student meets expectations and learning objectives.
- For Sub-Internships, students will be assigned a grade of Honors, High Pass, Pass, or Fail based on their clinical performance as assessed by their supervisors and rotation director. Sub-internships may utilize a final exam in addition to student performance evaluations to determine the final grade.
- Electives will be graded similarly to Sub-Internships with the exception that elective directors may choose to use a Pass / Fail system instead of Honors, High Pass, Pass, Fail.
- The Capstone course will utilize a variety of assessment methods unique to the course's learning opportunities and objectives. Based on fulfillment of course objective and requirements students will be assigned a final grade of Pass or Fail.

Motion to approve the policy as written by Mia Bertalan, seconded by Chris Thompson. Motion was passed with one member abstaining.

New Business

1. Integrations Course Review. Meredith Sorenson, MD; Alexander Fuld, MD-Guest

Strengths:

The course effectively integrated material from multiple courses and was a good review of Phase I.

Case-based format of the course helped material stick.

Format allowed students to discuss/debate material with classmates and learn from peers.

Opportunity to practice interviewing and oral presentation skills.

MEC Recommendations:

Continue Faculty Development and create standardization of facilitator expectations-- Stephanie Kerns has offered to assist with this.

Review Session Objectives to determine if they are truly being captured in the student experience.

Consider Blue Printing Student Evaluation Tool to ensure alignment with the course and program objectives.

Consider getting support from Bill Nelson to enhance the course material relating to interpreter use.

Consider revisions to the Consultation experience within cases

Course Leader Action Plan:

Update Course Objectives as revised on the Revised Curriculum Inventory Tab

Standardize expectations of faculty facilitators

Revamp the consultation experience and role

Discussion took place regarding assessment and evaluation of the integrations course. It was suggested that a look at the DXR cases to make more cognitive integrations with students. It was suggested to use these to as a path for decision making and mapping outcomes in various cases. Glenda offered to assist with this. Additionally, discussion around EBM and how to integrate this LC into the integrations course. Stephanie offered to assist with this.

R. Brooks Robey made a motion to approve the Integrations course review, motion was seconded by Chris Thompson. The motion passed by unanimous vote.

2. Student Skills Course Review. Virginia Lyons, PhD.

Strengths:

Students appreciated interacting with 4th year students to gain perspectives on their exam experiences and strategies.

Students appreciated the opportunity to analyze NBME style questions and to work as a group

MEC Recommendations:

Incorporate the course material and transfer the objectives to the Leadership and Professional Development (LPD) LC to disseminate the learning experience throughout the pre-clinical years.

Coordinate the sessions with the 3 cumulative exams that are conducted over the course of Phase I - this will strengthen both aspects of the curriculum.

The MEC review subcommittee believes that the request to make this course optional was based upon the timing during dedicated study time. Given the recommended changes above regarding the timing, the subcommittee recommends that this course remain a required part of the curriculum

Course Leader Action Plan:

Upcoming AY: Find date for course that does not interfere with dedicated

Subsequent AY: Coordinate w LC Dean to integrate course into M1 and M2 LC curricula

Discussion took place relative to the structure of the course and the timing. It was suggested that the course become a longitudinal course like On Doctoring and P & P due to comply with guidelines from the Registrar's office. The student dedicated study period would come at the end of the course. The cumulative exam would be formative in nature and would provide students with an idea of curricular strengths and weaknesses. Expectation that all students would participate.

Changing the name of the course to reflect concepts and purpose of the course more accurately was discussed.

Mia Bertalan made a motion to change the name of the Foundations Study Skills Course to Medical Learning Science and that the course would now be considered a longitudinal course starting during Integrations and ending April 1st. Motion was seconded by Tim Renier

3. Attendance Policy-Virginia Lyons, PhD.

Preclinical Attendance Policy

Summary of Purpose

This policy is intended to (1) establish and clarify expectations regarding attendance, promptness, and other aspects of professional student classroom behavior in the preclinical years; (2) provide a fair and consistent process to ensure that absenteeism does not have an adverse impact on learning and the learning environment; and (3) provide guidelines for tardiness and planned/unplanned absences.

Scope and Applicability

This policy applies to all Geisel medical students enrolled in the preclinical curriculum.

Definitions

None.

Policy Statement

Class Attendance

The expectations for class attendance are as follows:

- Attendance is required at all sessions that require collaborative and synchronous learning to achieve the learning goals of the session. Sessions will be identified as “required” by course directors on the student calendar prior to the start of each term.
- Sessions with patient participants are required. Student concerns about attending sessions with patients should be discussed with the course leader. These types of learning sessions are not recorded due to concerns about patient privacy.

Tardiness

- There is an expectation that students will arrive at all scheduled class sessions they wish to attend on time, i.e., prior to the start of the session.
- If a pattern of tardiness becomes evident (3 or more incidences of tardiness), the student will work with their coach to develop a plan to remedy the tardiness.
- If tardy behavior continues, the student will meet with the Associate Dean for Preclinical Education to discuss the situation. Subsequent persistent tardiness will be

referred to the Committee on Student Performance and Conduct (CSPC) for further consideration.

Absences

The medical school recognizes that there will be circumstances that preclude a medical student from attending a required session, such as personal illness or a family emergency. Professionals in medicine are provided with a specified amount of planned time off that may be used at their discretion if advance notification is provided.

Procedures and policies related to absences are as follows:

- Students should submit a request for time away utilizing the Preclinical Time Away Request Form. Requests for planned time off must be submitted at least 15 days in advance. Requests for absences due to unforeseen circumstances (illness, family emergency, etc.) should be submitted as soon as it is possible, ideally prior to the session(s) that will be missed.
- Absences due to unforeseen circumstances or religious observances are not counted as planned time off. Some examples are: personal illness/mental health, family emergency, funeral, military service, and unexpected transportation issues (e.g., flat tire). The school respects that health issues are private and confidential and therefore students will not be expected to divulge the nature of their illness/mental health reasons for missing a day.
- Each student is granted up to six days during Phase One of the curriculum for planned time off when approved in advance by the Associate Dean for Preclinical Education. Some examples of reasons students request planned time off include presenting at a conference, attending a wedding and attending an extracurricular event (e.g., Urban Health Scholars trip). In general, planned time off should not be taken on the day of a scheduled assessment. In rare circumstances, at the discretion of the Associate Dean for Preclinical Education, students may be granted additional planned time off.
- Required group sessions with a small number of participants (e.g., PBL or On Doctoring groups) need a critical mass to function effectively. Thus, absences due to planned time off will be limited to two individuals from small groups with twelve or fewer members. Students who would like to miss a small group session should gain approval from their group members prior to submitting the Preclinical Time Away Request Form. If more than two members of the group seek to miss a particular session, the group will need to decide which two members are allowed to miss. There will be no adjudication from deans or course leaders regarding this situation.
- In all cases of absence from a required class, the student is responsible for contacting the appropriate course leader to discuss making up the work that is missed. Students should contact course leaders prior to the missed session(s) if possible.

- A medical student absent from a required class without prior approval or a compelling reason will be contacted by the Office of Preclinical Education to inform them of the documented unapproved absence.
- After a second unapproved absence, the medical student will be counseled by the Associate Dean for Preclinical Education.
- If a pattern of unprofessional behavior becomes evident, e.g., three or more unapproved absences from required sessions, the medical student will be required to meet with the Senior Associate Dean for Medical Education. Subsequent unapproved absences will be addressed by the CSPC.

During meeting a decision to table the policy until the August meeting. However, based on a virtual Qualtrics vote among the voting MEC members, the Preclinical Attendance Policy discussed during the July meeting has been passed and will be implemented for the start of the Phase 1 academic year. The policy above is the approved policy. If there are any additional comments regarding the policy, time will be held at the start of the August MEC meeting to make them.

Motion to adjourn the meeting by James Saunders, Seconded by "Unknown Speaker".
Meeting adjourned at 6:31PM.

Ongoing Business

- Evaluation Oversight Committee
- CQI Committee
- Enrichment Electives

Future Meetings

Future Meeting Dates (Third Wednesday of each month, 4:30 – 6:00 p.m.)

- August 18, 2021
- September 15, 2021
- October 20, 2021
- November 17, 2021