

Medical Education Committee Charge and Bylaws

Charge

The Geisel School of Medicine's Medical Education Committee (MEC) is one of several permanent standing committees of the medical school faculty. The Committee is charged by the Dean to oversee and direct the entire four-year curriculum leading to the MD degree.

Summary of Purpose

The goal of the faculty is to train the next generation of doctors to be superb physicians whom we would welcome as colleagues in the care of our patients, our families, and ourselves. The MEC holds the responsibility to ensure that our medical school curriculum develops and offers a curriculum to train future physicians who are highly knowledgeable; clinically skilled; professional and caring; excellent communicators; committed to lifelong learning and continuous assessment and improvement in all that they do; and skilled at practicing within a complex healthcare environment. Our graduates enter many different areas of healthcare practice, teaching, or research, but we expect all our graduates to have the knowledge, skills, and commitment necessary for them to excel at and improve their chosen areas of healthcare.

Responsibility

The MEC has direct responsibility and authority for determining what is taught, learned, and assessed in all the major competency areas. It designs the general architecture of each year and decides what courses should be offered and the placement of these courses. The committee relies on the wisdom and experience of individual course directors, clerkship directors and their faculty to decide details of course content and evaluation strategies. The MEC makes specific recommendations concerning new and important content areas, modes of instruction, and especially techniques for assessing student achievement and performance in our competencies. In all decisions, the MEC shall put the needs of medical student education ahead of narrower interests of individual courses, clerkships, or departments.

The MEC meets its obligations to the Dean's charge by attending to the following specific responsibilities:

1. Ensure that all relevant requirements of the Liaison Committee on Medical Education (LCME) are addressed by Geisel's Undergraduate Medical Education (UME) curriculum. For example, the MEC is responsible for ensuring that our curriculum includes enough total weeks of instruction and provides sufficient instruction in specific areas to permit licensure of our

- graduates in every state. The MEC must also document that our students are meeting specific learning objectives in every course and clerkship and at every clerkship site.
2. Ensure excellent channels of communication with both faculty and students, especially when reporting new policies or initiatives. Listening carefully to the expressed needs of students, course directors, and faculty is important for making curricular decisions.
 3. Recommend curriculum-related educational policy that applies to all courses and clerkships.
 4. Build upon best learning practices. Identify “what works” in terms of adult learning strategies, especially as validated in medical schools or other doctoral training programs.
 5. Use data to identify/evaluate weaknesses. Pay close attention to many outcome measures to be sure we know which parts of our curriculum are working well, and which require specific targeted improvements. When necessary, request and use data systems for documenting the effectiveness of teaching and learning and the ability of students to achieve learning objectives.
 6. Use the model of continuous quality improvement to provide guidance for ongoing curriculum improvement, change, and innovation within courses and within each year.
 7. Review the outcomes of every course and clerkship at least every two years. Focus attention on improving those courses and clerkships that appear to be most in need of design changes and reassessment.
 8. Review the structure and integration of the entire curriculum at least once every three years with attention to gaps and unintended overlaps in the curriculum and the ability of the curriculum to assure attainment of core Geisel competencies by our students.
 9. Focus on high priority items such as new and important curricular themes that may require planning, nurturing, or greater attention.
 10. Encourage dialogue and communication between course directors to be certain there is deliberate overlap, redundancy, and sequencing, but not accidental or excess duplication of topics.
 11. Maintain oversight of the grading system. Ascertain that methods used for evaluating student performance, and reporting out formal grades, remain consistent with our desire to foster the highest academic achievement of each student while minimizing excessive competitiveness that can interfere with cooperative and collegial learning.

Accountability

The Medical Education Committee is accountable to Geisel’s Dean.

Reporting and Communication Relationships

The MEC is empowered to make and enforce all policies affecting the formal Geisel curriculum leading to the MD degree. The Medical Education Committee reports directly to the Dean as outlined below. The Chair of the MEC will provide periodic updates to, and seek advice from, the Senior Associate Dean for Medical Education (SADME) as part of their standing monthly meetings together. The Dean, or the Dean’s delegate, will arrange for periodic reports by the Chair of the MEC to the Dean’s Academic Board, especially when advice or input is requested. When the Dean determines that a new or proposed policy of the MEC represents a major change in the curriculum (e.g. approval of a new or deletion of an old course

or clerkship, change in the architecture of a complete year, change in the grading system, etc.), then the Dean will refer the recommendation of the MEC to the General Faculty or to the Faculty Council for discussion and consideration of the new policy. In addition, the Dean will arrange for the Chair of the MEC to provide a yearly report to the general medical faculty as part of a scheduled faculty meeting. Finally, the Chair of the MEC will meet with any department at the department chair's request to facilitate feedback and discussion and will extend the same courtesy to the Student Government when requested by the President of that organization.

Membership

Voting Members

Chair. The Chair of the MEC is chosen from the voting members of the MEC and should be a fulltime faculty member with a strong preference to be at the rank of Associate Professor or higher and have significant teaching experience in the medical school curriculum.

To ensure continuity of leadership, the elected chair will serve as a “chair elect” under the sitting chair for up to six months prior to assuming authority. The Chair is a full voting member of the committee.

Faculty. In addition to the chair, the MEC shall have up to 12, but no fewer than 9 voting faculty members, and additionally, a voting representative from the community-based faculty, and a voting representative from the Faculty Council. These members are selected by the Faculty Council according to the Council's policies and procedures.

- Each voting faculty member will have one vote.
- Faculty members shall be selected based upon their experience and interest in the broad medical school curriculum.
- There shall be no more than two voting faculty members from any one department.

The MEC shall strive for approximately equal numbers of faculty members representing pre-clinical, foundational science (Phase 1), curriculum and clinical (Phase 2 and 3) curriculum.

Students. Each medical school class, as well as the MD/PhD program, shall have four student representatives to serve on the MEC with terms expected for the duration of their enrollment as students at the Geisel School of Medicine with each class having one vote. Selection will be made from students with expressed interest in and experience with medical education and/or curriculum. The student affairs dean will receive student nominations and share all qualified applicants with student government for election by student government.

- Each medical school class shall ensure at least one class representative will be present at each meeting.
- During times of curricular change or important curricular discussion, at the discretion of the MEC Chair and the SADME, additional students from Phases 2 and 3 may be invited to ensure the medical student perspective is incorporated into discussion and decisions (with each class still having one vote per class).

Members who fail to attend the majority of meetings without cause shall be excused from the Committee.

Non-voting Members

Ex-officio MEC members are not elected nor appointed, rather they serve in an advisory position because of their expertise. These individuals will provide the benefit of their knowledge and experience with the curriculum and the impact of current policies and proposed changes. Ex-officio, non-voting members shall include the following:

- Associate Dean for Admissions
- Associate Dean for Biomedical Science Integration
- Associate Dean for Clinical Education
- Associate Dean for Diversity and Inclusion
- Associate Dean for Preclinical Education
- Associate Dean for Student Affairs Career Advising
- Associate Dean for the Student Affairs Student Services
- Associate Dean for Undergraduate Medical Education (UME) Administration
- Associate Director, Instructional Technologies
- Chair, Department of Medical Education
- Chair, Geisel Academy of Master Educators
- Coordinator, Assessment and Curriculum Inventory
- Co-Directors, Scientific Basis of Medicine (*until July 2020*)
- Director, Biomedical Libraries
- Director, Clinical Education
- Director, Evaluation and Assessment
- Director, Instructional Technologies
- Director, Learning Support and Student Accessibility Services
- Director, Preclinical Education
- Instructional Designer
- Registrar
- Senior Associate Dean for Medical Education
- Student Diversity, Inclusion, and Community Engagement (DICE) Representatives; (n=2, Phase 1, and Phase 2 & 3)
- Student Government Vice Chairs for Academics; (n=2)

Additional guests and non-voting members may attend as well.

Terms of Service

Chair. The Chair will serve a three-year term. An individual may serve a second three-year term.

Faculty Voting Members. Each faculty voting member shall serve for a term of three years. A member may serve a second three-year term. Faculty members will be appointed by the Faculty Council on a staggered basis (with slots becoming open each year).

Student Voting Members. Medical students and MD-PhD students will be expected to serve for the duration of their enrollment as students at the Geisel School of Medicine.

Meetings

The MEC shall meet monthly for at least 9 times per academic year. These standing meetings are held on the third Tuesday of each month from 4:00-6:00 p.m.

A quorum shall be 50% of the voting members of the MEC.