

February 27 <sup>th</sup> 2024		3-5:00pm		Zoom	
Voting Members			Ex-Officio/ Non-voting members		
X	Jesse Young, PhD	Faculty Chair	X	Cynthia Ledford, MD, Ex-officio, and administrative liaison	
X	Joseph Zarconi, MD	PCS Rep	X	Doug Moses, MD	
X	Merri Rosen, PhD	PCS Rep	X	Susan Nofziger, MD	
X	Adam Goodwill, PhD	PCS Rep	X	Leah Sheridan, PhD.	
X	Rachel Bracken, PhD	CCS Rep	X	Marc Basson, MD	
X	Michael Appleman, M.Ed.	CCS Rep			
X	Brad Winters, PhD	At-Large			
X	Rebecca Fischbein, PhD	At-Large			
				<b>Regularly Invited Guests (non-voting)</b>	
	Bryce Pember, M2	SCC Rep		Jennifer Hillyer, PhD – Faculty Development	
	Nino Kovaljesko, M4	SCC Rep	X	Katherine Miranda/Carli Toth – Registrar	
<b>Guests</b>		X	X	Alyssa Pryor – Ops Team Rep	
	Belinda Sasala				
	X	Katie Tunney		Sara Kosiba, PhD Curriculum Data Management	
			X	Allison Hawkes- Director of Accreditation	
			X	Erica Stovsky, MD, MPH – CES Faculty Co-chair	
			X	Heather O’Leary, PhD – PCS Faculty Co-chair	
				Heather McEwen	

Quorum was met and the meeting was called to order by Dr. Young at 3:00pm

Presenter	J Young		
Approval of minutes	Minutes from January meeting was provided to the group in advance for consideration and review.		
Conclusions			
Action Items	Person Responsible	Deadline	
Final approved February minutes posted to TEAMS for member access	Katie Tunney	After meeting	

Presenter	J. Young and H. O’Leary		
Acute Urgent Issues	<ul style="list-style-type: none"> <li>Hallway office hours: an initiative that started quickly and has been effective thus far. Students can have coffee and tea with course directors and Deans.</li> <li>Students can discuss issues they might not get at Townhall.</li> </ul>		

	<p><u>M2 Taskforce Recommendation:</u></p> <ul style="list-style-type: none"> <li>• Cecil's not ideal for students' consumption in M2 year.</li> <li>• Recommended books: <ul style="list-style-type: none"> <li>▪ Davidson's principles and Practice of Medicine</li> <li>▪ Hammer and MacPhee Pathophysiology</li> </ul> </li> <li>• Course Directors appreciated the effort if the textbook review task force based on the student and textbook task force assessments identification of strengths a numerical data – course directors accept all additional books to supplement Cecil's Essentials as primary textbook required for the M2 year, that are available through Access Medicine and Clinical Key. Additionally, we will add Harrison's Principles of Internal Medicine and Robinson's Essentials Pathology to the M2 textbook list provided (keeping Katzung for pharmacology) and allow content experts/coordinators to determine which book is most aligned with each area of expertise.</li> </ul> <p>Motion to Approve M2 Taskforce Recommendations: 1<sup>st</sup> Dr. Rosen, 2<sup>nd</sup> Appleman 7/7 approve, 0/7 abstain, 0/7 no – motion approved.</p>
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Presenter	E. Stovsky, H. O'Leary, and S. Nofziger
<u>Sub-Committee Recommendations &amp; Actions</u>	
<u>Curriculum Evaluation Subcommittee:</u>	
<ul style="list-style-type: none"> <li>• D&amp;T Triannual Review: First draft of review is drafted, and it is currently out to Course Directors. The review will then go to PCS then to CC.</li> </ul>	
<u>Pre-Clerkship Curriculum Subcommittee:</u>	
<u>PPC3 Annual Review:</u>	
PPC3 Strengths:	
<ul style="list-style-type: none"> <li>• Pass rate is always high.</li> <li>• Students enjoy GAPE review.</li> <li>• Motivational interviewing and reflective practice are something that students value.</li> <li>• Interprofessional panel from Akron Children's is highly rated among students.</li> </ul>	
PPC3 Opportunities:	
<ul style="list-style-type: none"> <li>• Alignment with FDT exam and quiz within the same week.</li> <li>• Improve faculty development for telemedicine.</li> <li>• Smaller sizes of reflective practice.</li> </ul>	
PPC3 Action Plan:	
<ul style="list-style-type: none"> <li>• Incorporate student feedback.</li> <li>• Move the comprehensive orientation in GAPE introduction along with telemedicine orientation to the 1<sup>st</sup> week of the course.</li> <li>• USLME session week one and week four.</li> <li>• Quiz week three, motivational interviewing to eliminate issues with FDT.</li> <li>• Retaining faculty to reflective practice in longitudinal way.</li> <li>• Note in 2025 PPC 3 will be Practice of Medicine.</li> </ul>	
<u>ICS Annual Review:</u>	
ICS Strengths:	
<ul style="list-style-type: none"> <li>• Student engagement with course.</li> <li>• Medical Interviewing and physical examination workload were just right.</li> <li>• Effective teaching 4.5/5</li> </ul>	
Opportunities for ICS:	
<ul style="list-style-type: none"> <li>• Course organization in Canvas</li> <li>• Increasing time for vitals practice with human vs mannequin.</li> <li>• Ensure PPE equipment is available.</li> <li>• Decreasing seminar time and increasing interviewing practice time.</li> </ul>	
ICS Action Plan:	

- Improve CANVAS organization.
- Add two sessions for transition to POM1; Patient is Why I'm Here, GAPE 1 with Dr. Lecat

Population Health Triennial Review:

- Engaged learning methods instead of PI.
- Greater opportunities for large group panel discussions and strengthen PI and exam questions.
- 2024/2025 Biostats will be in Biochem and Foundation of Medicine in the header. Heath System science will be taught I the new course during May Mester.

Strengths of Population Health:

- PI questions stimulating and good discussion.
- Course organization.
- Well organized canvas page.
- Course director accessibility.
- Fair workload.

Opportunities for Population Health:

- 18% said that there was too little PI. 76% said that it was just right.
- 23% Lectures were fair/poor.
- Biostats being moved.

Action Plan:

- Identified source of unfavorable lectures and will work with course directors.
- Moving health systems science material to May Mester.
- Moving Biostats to a new course in the header, Foundations of Medicine.
- Re- evaluating the scientific method exercise.
- Re- evaluating the self-directed learning exercise.
- Course objectives for the two new courses have been approved by PCS and CC.

Clinical Curriculum Subcommittee:

- Faculty Resources: IMSE – International Association of Medical Science Educators Webinars
- Opportunities:
- Adjust timing of content for 2<sup>nd</sup> week.
- Investigating splitting up suturing day.
- Investigating returning the casting and splinting session.
- Reviewing the ethics and health lecture.

Clinical Epilogue and Capstone:

Opportunities Identified:

- Central logistical student support.
- Continued evaluations and oversight of consistency in workload.
- Low satisfaction for alumni affairs and commence sessions.
- Implementing centralized assessments to evaluate learning objectives.

<b>Presenter</b>		
<b>Conclusion</b>	<ul style="list-style-type: none"> <li>• Motion to Approve PPC3 Triennial Review: 1<sup>st</sup> Dr. Zarconi, 2<sup>nd</sup> Dr Goodwill 7/7 approve, 0/7 abstain, 0/7 no – motion approved.</li> <li>• Motion to Approve ICS Annual Review: 1<sup>st</sup> Dr. Appleman, 2<sup>nd</sup> Dr. Rosen 7/7 approve, 0/7 abstain, 0/7 no – motion approved.</li> <li>• Motion to Approve Population Health: 1<sup>st</sup> Dr. Ramundo, 2<sup>nd</sup> Dr Zarconi 7/7 approve, 0/7 abstain, 0/7 no – motion approved.</li> </ul>	
<u>Action Items</u>	<u>Person Responsible</u>	<u>Deadline</u>

<b>Presenter</b>	S. Nofziger
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Update on LCME Compliance

AY 2022-2023 LCME Data:

- Midpoint GQ data is low in Internal Medicine, Ob/GYN, Ped, Psych and Surgery.
- CSEP and end of year clerkship eval data from last year better except for psych and surgery.
- New 23-24 compliance officer.

Critical Elements Dashboards:

- Grades in on time.
- Mistreatments.
- Midway tracking started during the second block – areas for improvement and increased monitoring are ob/gyn, psychiatry and surgery.

Textbooks:

- Goal: Online accessible reading material for content.
- No increase in student cost.
- Recommend clerkship with hardcover book recommendations change to online resources for 24-25.
- Pediatrics = add current diagnosis resource.
- Surgery: add Lange current diagnosis and treatment surgery.
- Psychiatry= all Lange current diagnosis and treatment psychiatry.
- Obstetrics and Gyn = Lange current diagnosis and treatment ob/gyn.

<b>Conclusion</b>	<ul style="list-style-type: none"> <li>• Motion to Approve PPC Annual and triannual review 1<sup>st</sup> Dr. Appleman, 2<sup>nd</sup> Dr. Zarconi 7/7 approve, 0/7 abstain, 0/7 no – motion approved.</li> <li>• Motion to Approve CEC annual and triannual review: 1<sup>st</sup> Dr. Zarconi, 2<sup>nd</sup> Dr. Fischbein 7/7 approve, 0/7 abstain, 0/7 no – motion approved.</li> <li>• Motion to Approve CEC annual and triannual review: 1<sup>st</sup> Dr. Rosen, 2<sup>nd</sup> Dr. Bracken 7/7 approve, 0/7 abstain, 0/7 no – motion approved.</li> </ul>
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Action Items	Person Responsible	Deadline
N/A	N/A	N/A

<b>Presenter</b>	<b>S. Kosiba and C. Ledford</b>
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Further Updates/ LCME:

EPO 2.2:

- CC previously voted to remove EPO (Educational Program Objectives) 2.2 due to the previous phrasing being difficult to accomplish with current university resources.
- However, we may need to bring it back in a new form, in that EPO 2.2 that might align LCME Standard 7.3, which focuses on scientific method and clinical/ translational research.
- One solution would be to use the language of the Physician Competency Reference Set (PCRS) 2.2: “Apply established and emerging bio-physical scientific principles fundamental to health care for patients and populations”
- Concern from previous 2.2 was the wording that all students needed to participate in research.
- Needing a verb to put into compass. Educational program objectives are the overarching learning outcomes that guide the entire curriculum.
- Using the word “examine” in EPO 2.2.
- Current: 2.2 – Contribute to the creation, dissemination, and/or application of evolving knowledge through scholarly activity.
- Recommended: “Examine established and emerging bio-physical scientific principles fundamental to health care for patients and populations”.

<b>Conclusion</b>	Motion to use the word examine in 2.2, 1 <sup>st</sup> Dr. Appleman, 2 <sup>nd</sup> : Dr. Winters 7/7 approve, 0/7 abstain, 0/7 no
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<b>Presenter</b>	<b>J. Young and L. Sheridan</b>
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Revisiting Issues: Short term:

SBAR on improving student perceptions of the COM CC

- Recommending Hallway Office Hours
- Creation of an online form which will be anonymous for student concerns.
- Dr. Young and Dr. O’Leary will be at M1 and M2 Town Halls to give updates.
- You Asked We Listened monthly newsletter.
- COM SCC recommending making town halls mandatory.
- SCC recommending students engaging by course reps attending PCS and CC meetings to give updates.

Report from the Communication Task Force:

- Recommend publishing minutes online once approved at CC meeting.
- Develop a standard operating procedure for the student curriculum counsel to register recommendations with the PCS and CC and receive formal feedback from committees; Dr. Young and Dr. O’Leary will attend the March SCC meeting to work on this.
- Townhalls lack dialogue with the students. Should make town halls more about the students’ concerns and questions.

Response to M2 concerns expressed in February Independent Student Analysis:

- Creating a taskforce to work on recommendations that CC can work on.
- Starting the M2 curricular design.
- Proposing to start in April.
- Draft document of the M2 Task Force charge will be considered and approved by PCS and CC in voting March meetings.

<b>Conclusion</b>	Motion to endorse SBAR 1 <sup>st</sup> Dr. Winters 2 <sup>nd</sup> Dr. Rosen – 7/7 yes, 0/7 abstain, 0/7 no. Motion to endorse M2 Curricular Design: 1 <sup>st</sup> Dr. Rosen 2 <sup>nd</sup> Dr. Appleman – 7/7 yes, 0/7 abstain, 0/7 no.
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The meeting was adjourned by Dr. Young at 5:20 pm.

The next Curriculum Committee meeting is **March 26<sup>th</sup>, 2024.**