

Student Education Group 9/4/2018 Minutes

Members unable to attend: Chris Bernard, Daniel De Los Santos, Dr. Jeffries

Members in attendance: Sidney Hilker, Flora Liu, Sienna Searles, Audrea Bose, Liz Carson, Ethan Witt, Charlotte Hastings, Hanna Mathers (Skype), Laura Director (Skype), Chad Serels (Skype), Marc Vecchio (Skype), Lawrence Leung (Skype)

Committee Members in attendance: Kalle Fjeld (Medical Curriculum Committee), Brian Rosen (Clerkship Committee, AAMC Rep), Andrew Gallagher (Foundations Committee)

Minutes by: Audrea Bose

Chairperson: None

Guests: Dr. Jesse Moore (Director of Active Learning), Carolyn Geraci ('22), Katie Peper ('22), Malla Keefe ('22), Rachel Harrison ('22), Maggie Carey ('22), Alexa Pius ('22)

Active Learning Update (Dr. Moore):

- Dr. Moore informed SEG of a productive Summer, especially working on the Connections, Foundations of Clinical Sciences (FoCS), and Cardiovascular, Respiratory, and Renal (CRR) courses that occur during the Fall of 2018. He added that Connections was increased to 91% active learning sessions, CRR increased to 100%, and FoCS was increased, but it is still evolving due to the duration of the course.
- Dr. Moore also noted Osmosis has been supplied to all students in Foundations and he is always interested in feedback in how this application is going.
- He added that his team is enforcing ongoing faculty development in how to teach actively, noting a Neural Sciences faculty retreat happening soon to give faculty more tools in active learning modalities.
- Dr. Moore also updated us in how the Active Learning Task Force and VIC Team are working closely together in developing many internal processes to make sure the curriculum runs effectively and smoothly.
- Sidney asked how much the Instructional Design Team was involved in advising faculty on time for teaching, how to run sessions, and help with preparatory learning materials. Dr. Moore stated that a large portion of time is designated to helping curate preparatory material and ensuring student preparation time is reasonable for certain sessions. He noted that combining the faculty expertise for in-class learning and preparatory work with his team's expertise on educational design is essential in finding a good medium for the sessions. He and his team are interested in more feedback about time spent preparing by students to help determine when more curating of materials is needed. They are actively evaluating how well the sessions work in combination with how much time it takes.
- Dr. Moore is looking to reduce the amount of Oasis evaluations, as there are many surveys overburdening students.

- Ethan mentioned that the active learning preparatory time survey will conclude at the end of this school year, which will then provide more information for considering time for preparation for specific sessions.
- Dr. Moore added that the active learning instructional designers are only doing things at the request of faculty to assist with producing prep work, in class activities, or any other materials. He noted that course directors are the initial source of help to design sessions and that the active learning team staff are not medical professionals or content experts, but they can help with making effective sessions.
- Liz suggested requiring peer evaluations for faculty to look at each other's in-class activities and preparatory work to be able to curate materials better. Dr. Moore likes the idea of encouraging faculty to look at effective and successful teaching sessions as models.
- Charlotte noted that it is important to review each day, instructionally, which Dr. Moore agrees with, especially looking at instructional density and how much work can be reasonable packed into a day or week.
- Dr. Moore added that he and Dr. Lounsbury will soon be initiating student focus groups, consisting of first and second year students to answer questions that don't arise in the evaluations to analyze in real time what is working well and what is not.
- Brian stated that the OSR, the student portion of the AAMC, consists of representatives from every medical school that meet at national conferences usually twice per year. He noted that research projects are created every year to show off what certain schools are doing and because of LCOM's work with active learning, he was hoping to show this as a model to other medical schools. Brian is brainstorming on how to do a poster presentation for this to show how we are transitioning and show some feedback on how to do it. He would like SEG to be part of this process with an abstract deadline of September 24th . He noted that November 2nd is the National AAMC Conference and we could possibly use some of the data from the Active Learning Preparatory Time Survey that has been running for the past year. Brian adds that he would like to longitudinally follow this in the future and would like to convey student thoughts on this.
- Brian asked how changes are applied in clerkships, especially because rotations run seven times, so we wouldn't want to present any advantages or disadvantages to some students in a class. He noted that if this is the case, we wouldn't want drastic changes in the middle of every clerkship year. Dr. Moore stated that the Active Learning Task Advisory Council (ALTAC) is coming up with SOP's for courses in the Clerkship year and then they will have to be approved by all the committees, including membership from the clerkship committee. He added that most often, this includes CBL and Workshop.
- Ethan asked about if there is any data on what is being covered for STEP 1 in the curriculum and making sure everything is still being covered. Dr. Moore stated that the Active Learning Team looks at this information, as well as, course directors. He also noted that the curriculum hasn't changed, just the teaching modalities. But through this, they are hoping retention of material will be better for STEP 1 and they will be watching this.
- Flora brought up students' request of releasing materials and answers after class. Dr. Moore stated that we need to encourage students to trust the process of not having answers released, emphasizing that the focus should be on the process of going through the problem, not just obtaining the answers. Dr. Moore added that he wants the curriculum to work for everyone, but at the same time, the process only works if students come to class. We discussed that ensuring answers are clearly stated and explained in class is a necessity for this process.

Student SOP Discussion (Sienna Searles):

- Sienna informed SEG that she was an intern in the Active Learning office this Summer and dedicated her time to making Student Standard Operating Procedures (SOPs) for Cased-Based Learning (CBL), Problem-Based Learning (PBL), and Team-Based Learning (TBL) sessions. These are similar to the Faculty SOPs, but catered to the student in what applies to them and their learning.
- Some changes that came out of outlining SOPs for students and faculty are more standardizing active learning sessions, ensuring that each session has prescribed preparatory work and in-class activities. Dr. Moore requests that SEG review these and send them to the Medical Education Leadership Team (MELT) for approval.
- As part of this project, Sienna mentioned this also outlined respectful and considerate behavior in these sessions.

Committee Updates:

- MCC: (Kalle Fjeld and Chad Serels)
 - o Approved Quality Assurance reports that were essentially comparable for the past years of the Attacks and Defenses (A&D) and Nutrition, Metabolism, and Gastrointestinal (NMGI) courses
 - o Approved the course calendar for PCR
 - The LCME Standard was discussed at this meeting, as the LCME Accreditation is on the radar
 - Discussed a Vertical Curriculum Mapping Tool that would highlight every portion of the 4-year curriculum where a certain topic is covered. This is required by the LCME Standard and Dr. Moore made the motion to create this that covers the entire curriculum. It was discussed that this would be very helpful for every objective brought up in the curriculum.
- Foundations: (Andrew Gallagher)
 - o None
- Clerkship: (Brian Rosen)
 - The Longitudinal Integrated Curriculum (LIC) at the Central Vermont Medical Center (CVMC) will begin in March of 2019. Brian added that a new Psychiatry Director was recently hired and the faculty has starting the planning for this. He noted that 4 students from the Class of 2021 will be selected after applying to attend and all the first weeks will happen there, but there may be parallel paths. Brian addressed the concern of being able to have both the LIC and the traditional rotations at CVMC at the same time. He stated that the committee discussed this and they are currently deciding how to address the extra students that would also be rotating. He added that the highest concern is for the Internal Medicine rotation, specifically, where they are considering utilizing more night shifts for students, which they want SEG input on. Liz noted that there is more opportunities for oversight, since the site is geographically closer than the alternate LIC site at Hudson Headwaters Health Network (HHHN), but as we all discussed, Internal Medicine night shifts may be too grueling and not provide the same connection with the attending like it normally would. Laura added that she thinks it would be very difficult for them to manage the LIC and the traditional rotation students at the same time.
 - Brian added that the committee also discussed how they would like an LIC student representative on the clerkship committee.
 - o Brian also stated that the committee reviewed multiple clerkship rotations and found that Internal Medicine (inpatient and outpatient) were the only rotations to

score poorly on the Graduation Questionnaire. Students have consistently ranked it around the 8^{th} percentile nationally over the past few years. The committee is looking for ways to get feedback on why it is ranked so low. They considered that it depends on the stage at which students are answering these. Students may be inputting their 4^{th} year information, instead of 3^{rd} year. Sidney mentioned that we will be creating the LCME Accreditation Questionnaire soon, so we can include this on it to get further feedback.

- AAMC: No Updates.

Course Updates (Flora Liu and Sienna Searles):

- Flora states that the Connections course went well, mentioning that there were only 4 lectures over the 3 week course, which is a lot of progress. She added that students were often concerned with a large amount of preparatory material for the active learning sessions. She also discussed that instructional designers were present at some of the sessions to evaluate how the sessions were running.
- Sienna and multiple students from the Class of 2022 that are in attendance in the meeting note that the Foundations of Clinical Sciences (FoCS) course is going well, but the class hasn't received their scores yet from their exam on Friday.
- They stated that the Class of 2021 SEG Representatives are planning Cookies and Milk sessions for FoCS and CRR in order to collect some immediate feedback.

Continuing Agenda:

- Start preparations for LCME Standards Student Survey to prepare for next accreditation meeting in 2021; would want survey to be done during 2019 calendar year.
- Audrea will begin meeting with the VIC Curriculum Management Team, regularly, to improve communication in problems that arise and broaden the opportunities for solutions.