The Ohio State University College of Medicine

**Executive Curriculum Committee**Meeting Minutes

Presiding Chair: Howard Werman, MD
Minutes Recorded by: Casey Leitwein
Quorum = 50% Voting Members
Date: 2/25/2020
Location: 150 Meiling
Call to Order: 4:00 PM
Adjourned: 5:47 PM

# Member Attendance

| **Name** | **Role** | **Voting** | **Present** |
| --- | --- | --- | --- |
| Howard Werman | Chair, Faculty member | Y | Y |
| Marcie Bockbrader | Chair, Academic Review Board | Y | Y |
| Preethi Chidambaram | Med Student Representative | Y | Y |
| Camila Curren | Academic Co-Program Director, LSI Part One | Y | Y |
| Douglas Danforth | Academic Program Director, LSI Part One | Y | Y |
| Binay Eapen | Assistant Dean, Affiliated program | Y | N |
| Wendy Frankel | Chair, Basic Science Department | Y | N |
| Ron Harter | Chair, Clinical Science Department | Y | N |
| Eileen Kalmar | Faculty Council Representative | Y | Y |
| Sorabh Khandelwal | Residency Program Director | Y | Y |
| Nicholas Kman | Academic Program Director, LSI Part Three | Y | Y |
| Nanette Lacuesta | Assistant Dean, Affiliated program | Y | N |
| Allison Macerollo | Elected Faculty Member | Y | Y |
| Jennifer McCallister | Associate Dean for Medical Education | Y | Y |
| Leon McDougle | Academic Program Director, Associate Dean Diversity | Y | N |
| Alexa Meara | Faculty Council Representative | Y | Y |
| Aroh Pandit | Med Student Representative | Y | N |
| Bryce Ringwald | Med Student Representative | Y | N |
| Jonathan Schaffir | Faculty Member | Y | N |
| Kim Tartaglia | LCME Compliance Officer, Academic Program Director, LSI Part Two | Y | Y |
| Kristina Witcher | Med Student Representative | Y | N |
| Joanne Lynn | Associate Dean, Student Life | N | Y |
| Kristin Rundell | LP Program Director, PCT Director | N | Y |
| Jack Kopechek | DOC PBLLL, Educational Portfolio Program Director | N | Y |
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## Additional Attendees

| **Name** | **Role** | **Present** |
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## Agenda Items

| **#** | **Agenda Item**  |
| --- | --- |
| 1 | Approval of Minutes |
| 2 | Director of Competency Presentation – Problem Based and Lifelong learning |
| 3 | MICRO Report |
| 4 | Director of Competency Presentation – Interprofessional Collaboration |
| 5 | Primary Care Track Update |
| 6 | Academic Standing Committee Update |
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# Item 1, Approval of Minutes

## Discussion

1. Dr. Werman announced that Dr. Jack Kopechek will be assuming the role of ECC chair beginning in July. Also, announced that Dr. Posid has graciously agreed to take on the role of Task Force chair to examine the ways in which we are teaching about the technologies that will influence the physician-patient relationship in the future. Drs. Kman, Bockbrader and Macerollo have also volunteered to serve.
2. Dr. Werman asked if there were any corrections to the December 10, 2019 meeting minutes. No changes were offered.

## Action Items

##  The minutes were approved without changes.

# Item 2, Director of Competency Presentation-Problem-Based and Lifelong LearningPresenter: Dr. Kopechek

## Discussion

1. Dr. Kopechek briefly summarizedf the Problem Based and Lifelong Learning (PBLI) competency as personal continuous quality improvement.
2. Dr. Kopecheck reviewed the ten curricular learning objectives under PBLI and the levels of competency under each CLO. He noted that Level 2 represented mid-curricular competency and Level 3 represented minimum competence at graduation. Much of the past year was spent developing assessments for the various CLO’s under PBLI. The master spreadsheet was uploaded to our Box account.
3. Dr. Kopechek reviewed the six goals under last year’s action plan for the ECC. He reviewed new CPA’s for CLO’s 301, 303 and 305 which were implemented regarding evidence of self-directed learning and incorporating feedback.
4. The second item involved LCME Standard 6.3, as well as CLO’s 301 and 303, and involved development of an individual learning plan by students. An activity that has been incorporated into the Longitudinal Practice course during the Cardio/Pulmonary block was reviewed. These will be reviewed with their Portfolio Coach. An additional activity will be added during their second year. Dr. Tartaglia clarified that this relates to the patient care domain.
5. Dr. Kopechek discussed some ‘scavenger hunt’ activities which take place in Longitudinal Group to address CLO 307 relating to utilization of the electronic medical record.
6. He also discussed a population health exercise that has been incorporated into the AHSS course during Ring 3, Part 2 of the

curriculum. Population data is used to identify gaps in care to individual populations.

1. Dr. Kopechek reviewed CLO 308 which addresses providing feedback and education to patients, families, peers and other healthcare providers. He reviewed several areas where this objective is assessed in the curriculum.
2. Finally, he discussed assessments for CLO 310 which addresses the use of technology to improve patient outcomes. These assessments include ultrasound-guided IV placement and EPA 4 order entry assignments.
3. Dr. Kopechek reviewed the proposed Action Plan for the coming year. There was some discussion by students and faculty about the potential of increasing the student workload for action item 1, the individual learning plan. However, it was felt that this was not a time-consuming assignment and in line with what is already occurring with some preceptors. These goals were discussed by the ECC and the following action plan was approved by the committee.

## Action Items

1. Create an ILP assignment for Part 3 to address CLO 304.03.01
2. Introduce a low score alert for PBLI CPA’s and develop a plan to address these alerts by May 2020
3. Create method of tracking PBLI CPA’s through the curriculum individually and in aggregate by August 2020
4. Assess quality of assessments for each CLO by December 2020
5. Map PBLI assessments and TLMs to CLO’s by December 2020

# Item 3, MICRO Report

# Presenter: Dr. McCallister

## Discussion

* 1. Dr. Jennifer McCallister updated the group on the activities of MICRO from December 2019 through February 2020.
	2. At the December meeting, there was a presentation regarding the LCME QI process. This was made a standing agenda item. The Part 1 patient care CLO’s were discussed and approved. Dr. Westman provided an overview of LCME Standard 7 and finally, there was a proposed revision of the Part 1 selectives that were reviewed and approved.
	3. Dr. McCallister reviewed the background for the creation of the Part 1 selectives. Due to the heterogeneity in both length and requirements for the selectives, the second week in Part 1 will be removed, thus leaving one selective week in Med 1 and Med 2. This will assist in alignment with the University academic calendar.At the January meeting, LCME Standard 8 was reviewed. The academic calendar for 2021-2023 for Parts 2 and 3 were approved The recommendations of the Step 2 CS Task Force were reviewed and approved. A formal presentation will be made to the ECC at a future meeting. The revised Portfolio assignment for Parts 2 and 3 were reviewed. A revision to the structure of UPRSN was reviewed and finally, creation and dissemination of annual LSI faculty evaluations were proposed.
	4. It was noted that the addition of two competency domains under PCRS potentially added 6 additional reflection writing assignments under the Portfolio program. Several proposals by Dr. Kopechek were reviewed with the eventual decision that there would remain 3 cycles of six stories but that at least one story in each of the 8 domains be completed.
	5. It was proposed that the perioperative unit be eliminated as a separate section. One week of anesthesiology and one week of a surgical subspecialty would continue to be required. The content and assessments would be incorporated into UPRSN. All assessments would be included in the UPRSN grade and the Perioperative test would count as a quiz.
	6. In February, LCME Standard 9 was reviewed. It was also announced that our next LCME review would be from March 20-23, 2022. The academic calendar for 2020-2022 for Part 1 was reviewed and approved. It was noted that the USMLE has announced that Part 1 scores will be reported to the students as pass or fail. It was noted that optimizing the Part 1 CLO reporting in Vitals was conducted. Finally, Dr. Cami Curren presented the Director of Competency for Interprofessional Collaboration report at MICRO

## Action Items

1. All action items approved by MICRO were discussed by the ECC. Each was reviewed and approved by the Committee

# Item 4, Director of Competency – Interprofessional CollaborationPresenter: Dr. Cami Curren

## Discussion

1. Dr. Cami Current updated the ECC as the Director of the Interprofessional Collaboration Competency which was described as a work in progress.
2. Dr. Curren reviewed the definition of the Interprofessional Collaboration and noted that LCME Standards 7.1-7.4 address individual competencies within the domain. She reviewed examples of individual CLO’s and their associated milestones within these competencies, noting that Level 2 is associated with mid-curriculum competence and Level 3 is competence at graduation.
3. Dr. Curren reviewed the process for creating CLO’s within the domain including reliance on learning objectives created by the Interprofessional Educational Collaborative. The new CLO’s were matched with existing successful experiences within the curriculum. Other assessments were created where none existed. Dr. Curren reviewed some of the newly created assessments for CLO’s 701-704 with the ECC for Parts 1-3 within the curriculum including a new interprofessional activity with Pharmacy in Part 3.
4. Dr. Curren then reviewed her SWOT analysis for the Interprofessional Collaboration competency. She noted that there will be more opportunities to teach and assess interprofessional collaboration as the Health Colleges move more towards a single unit.
5. Dr. Macerollo discussed the use of logs in PXDX as a potential measure of interprofessional competence. There was some discussion as to whether this was an adequate assessment tool. Dr. Tartaglia stated that a clinical log may be considered an appropriate lower-level assessment of competence. Dr. Kman also mentioned the possibility of a reflective writing piece after each student participates in a paramedic ride-along that might qualify under this discussion. There is also the potential to develop an educational session focusing on professionalism in consultation which has the potential for evaluation.
6. Ms. Chidambaram raised concerns about generic nature of the current CPA assessment of the students’ function as a team member which she noted has not provided valuable feedback to students
7. The ECC requested that Dr. Curren report back on the effectiveness of these newer assessments during next year’s presentation and approved the following Action Items.

## Action Items

1. Expand upon or revise the current IPE events that are not evaluated but are required
2. Evaluate the effectiveness of newer assessment of Interprofessional Collaboration competence.

# Item 5, 3-Year Primary Care Track UpdatePresenter: Drs. Allison Marcerollo and Kristen Rundell

## Discussion

1. Drs. Macerollo and Rundell presented an update on the 3-Year Primary Care Track to the ECC. The presentation started with a review of the unique elements of the program. She noted that Host Defense block is taken with the MSTP students during the students’ first full summer. She also noted that there is time at the end of curriculum completion for remediation if required.
2. Dr. Macerollo noted that there are regular meetings with the program faculty and one-half of in-state tuition is paid by the program.
3. Statistics were reviewed which included 71 total applications for 12 total accepted students since 2017, of which 22 were Ohio residents, 5 were URM and 14 were lower socioeconomic status applicants. Dr. Macerollo noted the steady number of applicants each year which the program has believed is a manageable number.
4. Dr. Macerollo noted that the two students in our alpha class are on track to graduate, both passing Step 1 and one passing Step 2 CS with the second student awaiting a score. Both students have interviewed with the OSU Family Medicine program and have entered the Match. The beta-class has two students who had a delayed start to Part 2 but have posted a passing score for Step 1. Finally, the third cohort has 4 students who are progressing through the curriculum without difficulty. Plans are being made to address the decreased study time available for Step 1.
5. Dr. Rundell reported several lessons learned. The realignment with the University calendar has impacted student study time for Step 1. The ECC has considered modifications to their calendar as presented by MICRO. Additional steps including earlier Board preparation and modifications to the students’ participation in selectives and professional development weeks within the curriculum are being considered.
6. Dr. Rundell also noted that students must post a passing score for Step 2 CK and CS by late December to allow the College to certify them for graduation. Tutoring and academic counseling continue to be valuable resources for the success of students in the program.
7. Dr. Rundell reviewed a SWOT analysis for the program. Strengths include support for the program and the quality of applicants. Several weaknesses were noted including the small applicant pool, especially among URMs and the requirement that graduating students participate in the NRMP, although an exemption is currently being pursued. A question was raised regarding the students’ ability to apply outside of the OSU Family Medicine Program as well as the impact on tuition support. Finally, there are threats including potential changes in the career choice of accepted students, competition among other primary care track programs in Ohio and the challenges in study time and timing of USMLE exams in a compressed curriculum.
8. There was a discussion regarding the ‘all in’ policy where students can only apply to the 3-year program at OSU COM. It was noted that students can apply to other 4-year programs although they are currently ineligible for OSU’s 4-year program due to timing issues.
9. Dr. Werman asked about the two students in the beta-class who experienced delays in entering Part 2. Specifically, there were some concerns about the loss of 10 days for one of the students but there were early signs that the second student might experience challenges with Step 1. It was noted that changes made to the curriculum should provide these students with additional time for Step 1 study.

## Action Items

1. Consider program expansion to include other primary care specialties (IM, pediatrics) or other Family Medicine Programs in Columbus
2. Develop other funding streams for the program
3. Continue to work closely with the residency training program on AHSS quality improvement projects and learning communities
4. Assess the impact of changes to curriculum and program resources on 3-Year Primary Care Track performance on Step 1.

# Item 6, Academic Standing Committee

**Presenter: Dr. Alex Grieco**

## Discussion

1. Dr. Alex Grieco provided the annual report of the Academic Standing Committee. Dr. Grieco noted that the ASC is undergoing a restructuring but presented the current roster. This Committee functions to review the quality and function of the individual review committees and assesses adherence to policies for the student review process. He highlighted the feedback loop which involves the ECC.
2. Dr. Grieco reviewed the structure of the COM review process and noted that it must be compliant with the University policies.
3. Dr. Grieco reviewed the action plan which included faculty development in the use of VITALS and in Committee needs assessment, charting the ‘outcomes’ of the student review process and optimization of the unified Student Review Committee. Highlights of the committee’s accomplishment have included better VITALS support, a pre-meeting SRC huddle and implementation of a standardized SRC review letter. Correlating interventions by the review committees with student outcomes has been more challenging. There was overall enthusiasm for the improvements made in SRC reviews including a brief introduction for each student regarding the committee function.
4. Dr. Grieco reviewed the current ASC meeting structure which included a series of review committee reports and a root-cause analysis. He is proposing a restructuring because of overlaps in data and committee functions was well a lack of relevance of data to all ASC members. The proposed restructuring will better align with the mission of quality control, be more proactive, be process-focused and omit redundancy with data presented at Academic Advancement Committee meeting.
5. Dr. Grieco reviewed data contained in committee reports from June 2018 – May 2019. The unified SRC’s reviews have been heavily weighted towards M-1 reviews. He reviewed the ‘competencies not met’ for Parts 1, 2 and 3. A full report for individual committees was placed in the Box. Dr. Grieco noted that the ARB Committee had a single request for reinstatement that was denied.
6. Dr. Grieco presented a detailed action plan for the ASC for the coming year. There was a discussion about redundancy in student review membership and possible inclusion of expert educators. Dr. McCallister emphasized shifting towards a more proactive nature of the ASC reviews. After a discussion by the ECC, the plan was approved.

## Action Items

1. Restructuring of the ACS including format, membership, data presented and delineation from the Academic Advancement Committee.
2. Align the ASC with its charge of quality control focusing on process- oriented reviews and looking more contemporaneously at case reviews
3. Improve faculty development for both ASC and non-ASC review committee members

The Ohio State University College of Medicine

**Executive Curriculum Committee**Meeting Minutes

Presiding Chair: Howard Werman, MD
Minutes Recorded by: Casey Leitwein
Quorum = 50% Voting Members
Date: 4/14/2020
Location: Zoom
Call to Order: N/A
Adjourned: N/A

# Member Attendance

| **Name** | **Role** | **Voting** | **Present** |
| --- | --- | --- | --- |
| Howard Werman | Chair, Faculty member | Y | Y |
| Marcie Bockbrader | Chair, Academic Review Board | Y | Y |
| Preethi Chidambaram | Med Student Representative | Y | Y |
| Camila Curren | Academic Co-Program Director, LSI Part One | Y | Y |
| Douglas Danforth | Academic Program Director, LSI Part One | Y | Y |
| Binay Eapen | Assistant Dean, Affiliated program | Y | N |
| Wendy Frankel | Chair, Basic Science Department | Y | N |
| Ron Harter | Chair, Clinical Science Department | Y | Y |
| Eileen Kalmar | Faculty Council Representative | Y | Y |
| Sorabh Khandelwal | Residency Program Director | Y | Y |
| Nicholas Kman | Academic Program Director, LSI Part Three | Y | Y |
| Nanette Lacuesta | Assistant Dean, Affiliated program | Y | Y |
| Allison Macerollo | Elected Faculty Member | Y | Y |
| Jennifer McCallister | Associate Dean for Medical Education | Y | Y |
| Leon McDougle | Academic Program Director, Associate Dean Diversity | Y | Y |
| Alexa Meara | Faculty Council Representative | Y | Y |
| Aroh Pandit | Med Student Representative | Y | Y |
| Tasha Posid | Faculty Member | Y | Y |
| Bryce Ringwald | Med Student Representative | Y | Y |
| Jonathan Schaffir | Faculty Member | Y | Y |
| Kim Tartaglia | LCME Compliance Officer, Academic Program Director, Part Two | Y | Y |
| Kristina Witcher | Med Student Representative | Y | Y |
| Joanne Lynn | Associate Dean, Student Life | N | N/A |
| Jack Kopechek | DOC, Practice Based Learning and Improvement | N | Y |
| Carla Granger | Administrator, Medical Education | N | Y |
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## Additional Attendees

| **Name** | **Role** | **Present** |
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## Agenda Items

| **#** | **Agenda Item**  |
| --- | --- |
| 1 | Approval of meeting minutes  |
| 2 | Additional modifications in LSI curriculum  |
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# Item 1, Approval of Minutes

## Discussion

1. Minutes of the March 24, 2020 Webex meeting and the on-line April 8, 2020 meeting were reviewed and discussed by the ECC.

## Action Items

1. The meeting minutest were approved without correction by the Executive Curricular Committee.

# Item 2, Additional Modifications in LSI CurriculumPresenter: Drs. McCallister, Curren Danforth, Tartaglia and Kman

## Discussion

1. Dr. Werman introduced Dr. Jennifer McCallister who requested that the ECC consider additional revisions to the curriculum based on the latest updates from campus on cancellation of instruction. Dr. McCallister requested that each of the academic programs give an update based on our discussions at the March 24 meeting. Parts 2 had a proposal for further revision to their curriculum for discussion.
2. Dr. Curren presented an update on the changes approved to Part 1 at the last meeting of the ECC. She noted that didactic information has been completely converted to virtual presentations. She noted that recorded Mediasite lectures had previously been utilized by 80% of students prior to the cancellation of classroom learning. She provided the following updates:
	1. Team-based learning included a graded iRAT with additional grading of attendance and participation. A gRAT was not included. There was some discussion about leveraging technology to conduct gRAT session but it was felt by Drs. Danforth and Curren that the additional benefit was not justified and that the focus of TBLs was on completing the learning objectives for each case.
	2. Patient Panels were virtual and included video presentations and patient discussions as appropriate.
	3. Spring LP sessions were cancelled. There was discussion of resuming in the fall. However, Drs. Danforth and Curren assured that the learning objectives would be met regardless of whether additional sessions are added. It was later noted that there would not be additional sessions added in the fall.
	4. LG sessions were conducted via Zoom. Attendance has been mandatory.
	5. Anatomy sessions have been conducted virtually.
	6. The final examination for Part 1 will be administered by ExamSoft with proctoring by artificial intelligence. Any breeches of protocol identified by AI will be recorded and reviewed by the program leadership before any action is taken.
3. The Anatomy exam will also be delivered on ExamSoft with AI using self- generated and NetAnatomy images.
4. The OSCE will be a single case conducted via Zoom and graded by a rater and the standardized patient.
5. There was a question about universal internet access by students posed by Dr. Posid. Drs. Danforth and Curren noted that students were required to have access prior to the cancellation of classes and that much of the examination could be completed off-line.
6. Dr. McCallister noted that there was a virtual ‘town hall’ held with students by Drs. Danforth and Curren in which there was concern raised about counting scores for the Endo/Repro block as well as regarding the grading of the OSCE and Anatomy examination. It was explained that the leadership has followed the same principles in including these grades as has been done in other parts of the curriculum. The addition of AI was implemented to prevent concerns over potential cheating on the exams. Dr. Danforth added that there is additional study time available to students for this block which should alleviate concerns over having enough time for study. However, the program leadership is still open to extensions based on individual circumstances.
7. Dr. Tartaglia noted that the previous plans approved by the ECC for those students whose final ring was cut short by the removal from clinical rotations are underway with assessments beginning for Part 2 students in Ring 3.
8. Dr. Tartaglia presented the ECC with two potential solutions to the delay for incoming Part 2 students who were scheduled to start their rotations on May 4. She noted that the ECC has previously approved a virtual course which would begin on that date and approved a delay for posting a passing score for USMLE Step 1 to December 31, 2020.
9. Dr. Tartaglia presented two proposals for a revised academic calendar for the coming year for Part 2 (see Box). In summary, the first proposal was for three equal Rings of 15 weeks duration and the second was for two 14- week Rings with the last being a 16-week Ring. She noted that the first proposal would result in the second Ring ending one week after the winter break. This was felt to be a significant disadvantage in discussion at MICRO. Dr. Tartaglia noted that the Part 2 program and MICRO felt that the second proposal (14/14/16) was favored although not with unanimous approval.
10. Dr. Schaffir noted that the 14/14/16 proposal might result in inconsistency in comparing students for grading. Dr. Tartaglia remarked that this proposal offered a better option for those few students taking Step 1 in December and would get the students back on schedule for the following year. Dr. McCallister discussed the disadvantage of having one week remaining after the break in the 15/15/15 proposal. She also noted that the 14/14/16 allows for additional flexibility should the date for restarting Part 2 be further delayed. Students were in support of the 14/14/16 proposal as well.
11. Dr. McCallister noted that Dr. Clinchot, with input from curricular deans or deans from the other health sciences colleges, forwarded a white paper to the University Provost regarding the safe return of health science students to the clinical environment. Notably, the College of Medicine is the only college that has proposed to have students resume clinical activities in the summer term. This is under consideration by the Provost. Even if the White Paper and summer return is approved, the College must still be assured that we can return students safely before this is actually undertaken.
12. Dr. Kman thanked Drs. Schaffernocker and Fernandez as well as the entire Part 3 team for getting students through Block 11 and assisting in the certification of 50 students who will be graduating early. Only a handful of students remain who are not yet certified to graduate.
13. Twelve students are currently participating in a Pandemic elective which is assisting the facilitators in improving the course for students entering Part 2.
14. Dr. Kman noted that there were 63 Part 3 students who were scheduled for clinical rotations in May. These have been prioritized for re-scheduling, based on their specialty preference. These changes have been going well thus far.
15. Dr. Kman noted the VITALS has been closed to students so that only the program leadership is able to make changes to accommodate the changes in schedules. Additionally, he noted that many students have elected to enroll in asynchronous learning experiences such as the

Advanced Competencies and other electives offered in May. Dr. Kman stated that the program is currently in process making some of these changes so that his updates are incomplete at this time.

1. Drs. Kman and McCallister discussed some potential plans that are in place should we not be able to resume clinical activities in June. Dr. Kman noted that parts of the rotation such as ground school or assessments can be offered asynchronously, especially to accommodate students who may have scheduled for Step 2 CS or CK. He gave the example of AMRCC which will record a Zoom ground school in May to potentially accommodate a student taking Step 2 at the beginning of June.
2. There was a discussion regarding other activities such as simulation that may have to be offered in a digital format. Additionally, Dr. McCallister noted that we have to be consistent in our decision making in what is offered in person and what should be offered digitally during rotations. Dr. Kman stated that we will need to optimize the clinical experiences and include PPE training. He suggested that should we not be able to resume clinical activities in June, a Part 3 elective may have to be eliminated. Finally, he noted that we will need to have enough lead time to implement any further changes.
3. Dr. Kman introduced the notion that should there be further delays, OSU COM may have to eliminate away rotations for all fourth year students.

He noted that there is a 2-week moratorium in the VSLO system. He cited the University of Michigan and University of Wisconsin that have already implemented these policies. It was uncertain as to how many other schools have implemented similar changes. This was discussed extensively by the ECC. Dr. Brockbader suggested that we should decide early on this proposal to alleviate stress among students. Dr. Macerollo noted that this will be a controversial decision among students. Dr. Grieco suggested that some alternatives should be considered if we do cancel away rotations. Dr. Kman noted that the primary goal is not to disadvantage our students in the Match.

1. Drs. McCallister and Lynn noted that there are discussions occurring at the national level within the AAMC regarding this issue and likely we will get further guidance from this organization as well. Dr. Kman noted that we need to commit that our Departments have the capacity to respond to the cancellation of away rotations although there may be certain practical limitations. Dr. Posid suggested that some of these decisions are being made at the Department level as well. There was a significant discussion regarding the implications of cancelling away rotations.
2. Dr. Kman reviewed the revised Pandemic Disaster Course which has added additional material on COVID-19 with the ECC. The general outline was ultimately approved at the last ECC meeting.
3. Ms. Chidambaram asked about the ability to complete their mini- internships prior to the ERAS in their specialty choice as well as the status of those students who have enrolled in mini-I’s as electives. Dr. Kman noted that these can be completed through August and even potentially into September and still be included in their residency application. He also noted that required mini-internships would be prioritized over those students enrolled in electives. Finally, he noted that some electives are more important for specific specialties and that he has empowered Departments to accommodate interested students in their schedules. He requested that individual students can reach out to him directly if problems arise
4. Ms. Chidambaram pointed out that while many students were now trying to schedule Step 2 CK in May, many of the seats at the testing centers in the mid-West have been taken.
5. Dr. McCallister noted that we should be able to resume our normal agenda for April, depending on further information on resumption of clinical activities.

The Ohio State University College of Medicine

**Executive Curriculum Committee**Meeting Minutes

Presiding Chair: Howard Werman, MD
Minutes Recorded by: Casey Leitwein
Quorum = 50% Voting Members
Date: 4/18/2020
Location: Zoom
Call to Order: 4:00 PM
Adjourned: 6:05 PM

# Member Attendance

| **Name** | **Role** | **Voting** | **Present** |
| --- | --- | --- | --- |
| Howard Werman | Chair, Faculty member | Y | Y |
| Marcie Bockbrader | Chair, Academic Review Board | Y | Y |
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| Kim Tartaglia | LCME Compliance Officer, Academic Program Director, Part Two | Y | Y |
| Kristina Witcher | Med Student Representative | Y | Y |
| Joanne Lynn | Associate Dean, Student Life | N | Y |
| Alex Grieco | Chair, Academic Standing Committee | N | Y |
| Jack Kopechek | DOC, Practice Based Learning and Improvement | N | Y |
| Carla Granger | Administrator, Medical Education | N | Y |
| Mike Horgan | Evaluation & Assessment Program Manager | N | Y |
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## Additional Attendees

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## Agenda Items

| **#** | **Agenda Item**  |
| --- | --- |
| 1 | Approval of Meeting Minutes |
| 2 | Progress Toward Returning Students to Clinical Rotations |
| 3 | USMLE Step 1 Prep Revisions |
| 4 | Review of Step 1 Examination Results |
| 5 | Review of 2020 Match Results |
| 6 | Student Mistreatment Report |
| 7 | Interim Report on LSI Curriculum Internal Review |
| 8 | Micro Report |

# Item 1, Approval of Minutes

Discussion

Minutes of the April 14, 2020 meeting were reviewed and discussed by the ECC. Dr. Curren noted that there will be two raters for the Part 1 OSCE.

Action Items

1. The meeting minutes were approved with Dr. Curren’s correction by the Executive Curricular Committee.

# Item 2, Reintegration into the Clinical Environment Presenter: Dr. McCallister

## Discussion

1. Dr. McCallister noted that the ECC had previously set a goal of returning students to the clinical environment on June 1. A revised calendar was approved to achieve that goal. Dr. McCallister stated that a final plan for resumption of clinical activities will have to be reviewed by the ECC some time before our next scheduled meeting.
2. Dr. McCallister reviewed the white paper submitted by the health sciences deans to the Provost outlining the overarching principles that will guide the students’ return (including the MD program) to resume activities on June

 We are still awaiting final approval by the Provost.

1. Dr. McCallister reviewed those overarching principles contained within the white paper including availability of PPE, availability of testing and support from our community partners. In addition, the proper case mix and volume needed to support student learning would be required. Additional considerations included the return of support staff, resumption of elective procedures and non-emergent clinical services and resumption of in- person patient visits. Specific metrics were attached to each of these activities. Virtual patient and telehealth experiences could augment the learning environment.
2. Dr. McCallister outlined the next steps for the ECC which would consider the Governor’s order to open parts of the state as well as the recommendations of the recently convened Education Transition Group on which Dr. Clinchot will participate. Dr. McCallister suggested an interim meeting to take place either May 12 or 19.
3. Dr. McCallister asked for input regarding the resumption on June 1, reminding us that students must quarantine for 14 days upon re-entering Ohio. Dr. Tartaglia asked who will determine whether we reach many of the thresholds noted in the white paper. Dr. McCallister stated that this must include input from our community partners. Dr. Macerollo noted that students need to be notified soon based on travel and quarantine requirements and mentioned a possible June 8 start. Input was provided by Drs. Lacuesta and Eapen from OhioHealth and Mt.Carmel,

respectively. Dr. Kman suggested a May 15 meeting date which would

accommodate both student timelines and allow input from community partners. He

noted that input from Nationwide Children’s would also be needed.

Action Items

1. The ECC approved an interim meeting date of May 15 to review where we are on the timeline for a June 1 return. Dr. McCallister will update to students regarding this timeline.

# Item 3, USMLE Step 1 Revisions Presenter: Dr. McCallister

## Discussion

1. Dr. McCallister requested a revision to assist students who are preparing to take USMLE Step 1 and who may not have yet demonstrated readiness to take Step 1. Specifically, this addresses the policy that states that students must post a passing score of the NBME Practice Examination by May 27. It was noted that rising Part 2 students will be enrolled in the Pandemic and Disaster Medicine Course during May. These students must pass Step 1 by December 31, 2020 in order to proceed in Part 2.
2. Dr. McCallister noted that students are given two attempts to pass the practice examination before they must meet with the USMLE Committee to formulate a plan to be successful on Step 1. Currently, there are two dates for the initial attempt and three dates for a second attempt remaining through the end of May.
3. Dr. McCallister is proposing that for those students who don’t post a passing score on the practice examination, the following provisions would occur:
	1. Excuse from Pandemic and Disaster Medicine Course
	2. Continue Step 1 preparation
	3. Meet with USMLE Committee
	4. Provide academic counselors and tutors
	5. Provide an educational contract
4. The students would still be required to post a passing score by May 27th in order to proceed into Part 2.
5. For students who post a passing score and take the Pandemic and Disaster Medicine Course, they will be provided a one-week window during Part 2 for USMLE Part 1 study review in consultation with the academic program leadership.
6. Dr. Kman noted that some students have requested an alternate experience in May. This raises the issue as to whether the Pandemic Course would be credited in Part 2 or Part 3. Dr. Tartaglia suggested that this can be decided as the academic calendar becomes clearer. Grading and credit for the course can be discussed at a later ECC meeting.

Action Items

1. The motion was made to excuse students from the Pandemic and Disaster Course who don’t pass an NBME practice exam on their first attempt to allow for further preparation and to allow students completing the course to have a one week break during Part 2 for Step 1 review prior to their Step 1 exam. After discussion and consideration by the ECC, the motion was approved.

# Item 4, Review of Step 1 Prep ResultsPresenter: Mr. Horgan

## Discussion

1. Mr. Horgan reviewed the Step 1 report released by the USMLE in March of 2020. The data included first-time test takers in calendar year 2019.
2. There were 203 test takers in 2019 compared to 190 in 2018. The pass rate was 97% compared to a national average of 97% and the same as the 2018 OSU COM pass rate. The mean score was 232 compared to a national average of 231 and down from last year’s mean of 236.
3. Dr. Werman inquired as to why there was an increase by 13 students in the 2019 cohort. Dr. Tartaglia asked if one explanation for the increase in 13 students was the implementation of policy to post a passing score on NBME practice exam prior to taking Step 1. Mr. Ringwald noted that there was also 2 weeks of less study time based on the academic calendar.
4. Mr. Horgan reviewed both the histogram of scores compared to national percentages and the individual subject plots. In general, 2019 plotted closer to the mean, as expected.
5. Mr. Horgan reviewed the historical data on mean scores and passing percentages with comparison to the national average.

## Action Items

## Mr. Horgan will report back to the ECC on the reason for an increase by 13 students between 2018 and 2019 and the potential impact on scores and passing rates.

# Item 5, Review of 2020 Match ResultsPresenter: Dr. Lynn

## Discussion

1. Dr. Lynn reviewed the results of the 2020 Match. She started the presentation with a review of the national statistics in terms of available positions and results among allopathic, osteopathic and foreign medical graduates. 93.7% of graduating seniors from allopathic programs matched. The national % for top choice and top three choices have not been posted.
2. Dr. Lynn noted that each school has several students who do not find a position after the match. She pointed out the neurosurgery, physical medicine and rehabilitation, plastic surgery and thoracic surgery filled all of their open positions. Several other specialties filled more than 80% of their open positions with MD graduates. In particular, OB/GYN and Psychiatry were more competitive in the current Match.
3. Ten of 182 OSU COM students (5.5%) did not Match prior to the SOAP process. This tied for the second greatest number of students (10) who did not match when compared to prior years and for second in terms of percentage (5.5%) of unmatched students. Overall, Dr. Lynn felt that this was a disappointing result.
4. With regards to specific specialties, OSU matched 3 of 4 in dermatology, 10 of 10 in orthopedics, 6 of 8 in ENT, one of 2 in neurosurgery, 2 of 4 in plastic surgery and 13 of 14 in emergency medicine. Four of five students in the military match received a position in their specialty of choice. All three candidates in Urology matched. It was noted that the most popular specialty choices were IM, EM, FM and pediatrics in this year’s match.
5. Only three of 6 applicants in Ophthalmology matched with two unsuccessful candidates electing to take a research year and reapply. Dr. Lynn noted that nationally, 86% of students applying in ophthalmology find a position. She reviewed the Step 1 scores for successful and unsuccessful applicants; two of 3 had below average scores for the specialty. Historical data was reviewed for OSU ophthalmology applicants.
6. Dr. Lynn reviewed the plans for our fully unmatched (8) applicants. Several are planning to apply in other specialties next year. Two students took preliminary positions and two are planning to continue in research and reapply. Dr. Lynn reported that these results were typical of a given year post-SOAP. She reviewed the results from the previous year, noting that all 2019 unmatched students were successful by time of the 2020 Match, including some who found positions in their original specialty of choice.
7. There was an increase in the number of students entering primary care specialties (44% of total). While 41% of students will remain in Ohio, several matched in CA and NY.
8. Dr. Lynn reviewed the average number of applications by specialty. Orthopedics, dermatology, ophthalmology and urology average more than 70 applications per US MD applicant. There was significant discussion around the time and expense associated with these applications.
9. Finally, Dr. Lynn reviewed some of the challenges for the 2021 Match as the result of the COVID-19 epidemic including away rotations, timeline for ERAS and MSPE release, conducting of interviews and impact on specialty choice.

## Action Items

1. No action from Dr. Lynn’s report. Further information will be provided.

# Item 6, Student Mistreatment Report

**Presenter: Dr. Lynn and Dr. McDougle**

## Discussion

1. Dr. Lynn presented the student mistreatment report. She noted that this data reflects information from the 2019 Graduate Questionnaire. The second year questionnaire is not included in this report as these results have not been processed. More than 90% of graduating students were aware of OSU COM student mistreatment policies and procedures for reporting which represents an improvement over time and is above the national average.
2. Overall, about 35% of students reported some form public embarrassment or other mistreatment; this figure is below the national average. Similarly, we are below national averages for threats of or actual physical harm but Dr. Lynn noted that the goal is zero reports. There were no specifics attached to the report which could represent student on student violence. The same is true for requests for personal service. OSU students report witnessing such behaviors less often than other US medical schools.
3. The 2019 questionnaire demonstrated that OSU COM was below the national average for reports of sexual harassment, requests for sexual favors or lower evaluations or limited opportunities based on gender.
4. Overall, reported issues based on race or ethnicity are at or better than the national average with the exception of our scores on denied opportunities based on race or ethnicity. However, our results based on sexual orientation were worse than national averages.
5. In general, clerkship faculty and residents account for the largest percentage of reported mistreatment but there has been a steady rise in students being responsible for mistreatment of other students according to the survey results. These appear to be in the form of unwanted sexual advances.
6. Dr. Lynn reported an increasing trend in student comfort reporting learning environment concerns. She believes that the availability of the student advocate will assist. The most common reasons for not reporting an incident were feeling that an incident did not reach a threshold of importance, feeling that nothing would be done and fear of reprisal.
7. Dr. Lynn reviewed the individual evaluations from Part 2 rings which show a very low rate of student ridicule or observed student mistreatment. She included greater detail from the drop-down menu. Complaints are now being investigated by our new student advocate, Lisa Christian. A similar report from Part 3 was also reviewed.
8. Dr. Lynn reviewed this past year’s efforts to improve the student learning environment.
	1. Office of Student Life continues to hold a series of educational sessions on Optimizing the Learning environment in various departments (past year – ENT, Pathology, Ophthalmology, Family Medicine and Internal Medicine)
	2. 2019 Spring Symposium focused on the Learning Environment
	3. Gender-related issues were the focus of the OSU 4th Annual Women in Surgery Symposium
	4. FAME talk in Sept, 2019 on Building a Positive Environment
	5. Initiated anonymous reporting system through VITALS
9. The Office of Student Life action plan for improving the learning environment was discussed and approved by the ECC. Dr. Werman asked about educational efforts of student on student mistreatment as a future consideration.

## Action Items

1. Continue a focus on the learning environment during resident/fellow orientation
2. Continue grand rounds presentations on optimizing the learning environment
3. Work with student advocate to follow up on all learning environment complaints in VITALS and introduce a button for positive comments
4. Initiate a ‘low score’ notification for student mistreatment and develop a loop-closure system in conjunction with the student advocate
5. Student advocate is reaching out to student groups to open communication channels
6. Develop a communication channel with University Office of Intitutional Equity
7. Expand the existing learning environment work group to include Drs. Holliday, McCallister, Christian and Departmental representatives
8. Long term goal: annual report on the Learning Environment to each Department

# Item 7, Interim Report on LSI Curriculum Internal Review

**Presenter: Dr. Tartaglia**

Discussion

1. Dr. Tartaglia presented an update on the internal review of the LSI curriculum. She reviewed the major goals of the review.
2. Dr. Tartaglia acknowledged the members of the internal review committee. The work of the committee began in earnest in January. Six domains are being examined:
	1. Educational objectives
	2. Teaching and evaluation of students
	3. Student evaluation of learning environment
	4. Curriculum/curricular management
	5. Evaluation of faculty
	6. Evaluation of program effectiveness
3. Each domain has a lead and contributor from the Committee
4. Dr. Tartaglia noted that an addition area of interest is whether the original objectives developed for the LSI Curriculum have been met. This raised some additional questions to be assessed by her task force.
5. Dr. Tartaglia reviewed the progress for each of the domains under investigation.
6. Dr. McCallister thanked Dr. Tartaglia and her task force for their efforts

Action Items

1. A full report will be presented at the June ECC meeting

# Item 8, MICRO Report

**Presenter: Dr. McCallister**

Discussion

1. Dr. McCallister reviewed the activities of MICRO for March and April.
2. In March, the Director of Competency in Problem Based Learning and Improvement presented a report which had been presented to the ECC. Various curricular modifications were discussed which were also considered by the ECC on March 24.
3. In April, Dr. Graham presented suggested modifications to the Patient Care Objectives for Parts 2 and 3. These will be presented to the ECC. Additional alterations to the calendar and curriculum were reviewed and discussed at the April 14 meeting of the ECC.

Action Items

1. None that have not already been considered by the ECC

The Ohio State University College of Medicine

**Executive Curriculum Committee**Meeting Minutes

Presiding Chair: Howard Werman, MD
Minutes Recorded by: Casey Leitwein
Quorum = 50% Voting Members
Date: 5/15/2020
Location: Zoom
Call to Order: 2:00 PM
Adjourned: 6:05 PM

# Member Attendance

| **Name** | **Role** | **Voting** | **Present** |
| --- | --- | --- | --- |
| Howard Werman | Chair, Faculty member | Y | Y |
| Marcie Bockbrader | Chair, Academic Review Board | Y | Y |
| Preethi Chidambaram | Med Student Representative | Y | Y |
| Camila Curren | Academic Co-Program Director, LSI Part One | Y | N |
| Douglas Danforth | Academic Program Director, LSI Part One | Y | Y |
| Binay Eapen | Assistant Dean, Affiliated program | Y | N |
| Wendy Frankel | Chair, Basic Science Department | Y | N |
| Ron Harter | Chair, Clinical Science Department | Y | Y |
| Eileen Kalmar | Faculty Council Representative | Y | Y |
| Sorabh Khandelwal | Residency Program Director | Y | Y |
| Nicholas Kman | Academic Program Director, LSI Part Three | Y | Y |
| Nanette Lacuesta | Assistant Dean, Affiliated program | Y | Y |
| Allison Macerollo | Elected Faculty Member | Y | Y |
| Jennifer McCallister | Associate Dean for Medical Education | Y | Y |
| Leon McDougle | Academic Program Director, Associate Dean Diversity | Y | Y |
| Alexa Meara | Faculty Council Representative | Y | N |
| Paige Speith | Med Student Representative | Y | N |
| Tasha Posid | Faculty Member | Y | Y |
| Bryce Ringwald | Med Student Representative | Y | Y |
| Jonathan Schaffir | Faculty Member | Y | Y |
| Kim Tartaglia | LCME Compliance Officer, Academic Program Director, Part Two | Y | Y |
| Kristina Witcher | Med Student Representative | Y | Y |
| Joanne Lynn | Associate Dean, Student Life | N | Y |
| Alex Grieco | Chair Academic Standing Committee | N | Y |
| Jack Kopechek | N, Practice Based Learning and Improvement | N | Y |
| Carla Granger | Administrator, Medical Education | N | Y |
| Laura Volk | Part 2, 3 Program Manager | N | Y |
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## Additional Attendees

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## Agenda Items

| **#** | **Agenda Item**  |
| --- | --- |
| 1 | Approval of Meeting Minutes |
| 2 | Progress Towards Returning Students to Clinical Rotations |
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# Item 1, Approval of Minutes

## Discussion

1. Minutes of the April 28, 2020 meeting were reviewed and discussed by the ECC.

## Action Items

1. The meeting minutes were approved without correction by the Executive Curricular Committee.

# Item 2, Reintegration into the Clinical Environment Presenter: Dr. McCallister

## Discussion

1. Dr. McCallister updated the ECC regarding information as it affects our June 1 start date. There is an Education Transition Task Force headed by Dr. Clinchot with four subcommittees that are gathering information with regards to resuming our educational activities. This group will provide provide parameters under which the academic programs will develop their recommendations. We are still awaiting administrative approval from the University for a resumption of activities on June 1.
2. Dr. McCallister reviewed the specific protections of proper PPE for students. She also discussed proper monitoring our students for illness through the Medical Center app as well as the work that Dr. Kman is doing in developing instructional materials for students on proper protections during the pandemic including donning and doffing of PPE.
3. Dr. McCallister reviewed the administrative process for requesting resumption of clinical activities by the University. A proposal has been submitted through the proper channels to central campus. All said, the College educational leadership is going on the assumption of an approved June 1 start date. Dr. Kalmar requested clarification on whether the proposal included resumption of other laboratory experiences as early preparation will have to begin over the summer for fall medical student matriculants. Dr. Danforth asked about summer Host Defense with Dr. McCallister suggesting that the course would have to remain primarily virtual. It was noted that our June 1 target is consistent with information coming from the AAMC.
4. Dr. McCallister finally noted that all returning students must observe a 14- day quarantine when returning to Ohio from out of state as many of our students are doing. This has been affirmed by medical center legal counsel. This would similarly apply to away rotations. Dr. McCallister has encouraged students to consider an early return, even in the face of uncertainty. Dr. Tartaglia noted than NCH has different and more specific rules regarding quarantine.
5. Dr. McCallister asked for input from OhioHealth regarding resumption of clinical activities at community sites. Dr. Lacuesta reported that there will be a staggered start beginning on June 1 through June 29 by different services. She stated that there is appropriate PPE supplies. There remains uncertaintly regarding student participation in the OR, ED and ICU.
6. Dr. Kman noted that there are similar considerations for students at the OSUWMC. He went on to review some principles that will guide the return of students in the COVID-19 era. OSU students will be given priority and senior students will be prioritized over more junior students. Finally, students with an existing preceptorship relationship will be given priority over those without such relationships (e.g. research). Part 2 remediation students may also be prioritized for June.
7. Dr. Kman noted that in June, students would be excluded for direct care of COVID patients, especially in the ICU and ED, with some discretion provided by course directors in conjunction with academic program leadership.
8. Dr. Kman has developed different tiers of educational requirements for students returning to clinical activities. Tier 1 would be the most basic review of personal protection. Tier 2 is an operational level which includes instruction on donning and doffing. Finally, Tier 3 would be training to those students participating in an aerosol-generating environment (ENT, ED, etc.)
9. Dr. Kman reviewed his plans for a June 1 resumption of Part 3. AMRCC has identified ambulatory sites for rotating students. Some mini- internships may be limited for AMHBC which may require some students to lose their June rotation. Emergency Medicine will be offered in a more limited environment and utilizing less community sites. A final consideration to accommodate all of the schedule limitations is a reduction in elective requirements. The counter-argument is that the loss of away rotations and virtual residency interviews may require less student travel in Part 3. Dr. Kman is awaiting final approval for our June 1 return which will enable Part 3 leadership to confirm each students’ scheduled rotation. Dr. McCallister suggested that we should be asking each site for confirmation at this time. Dr. Kman noted that the schedule is fluid and he gave several examples. Dr. McDougle expressed some concerns appropriate faculty preceptor supervision with some tele-health environments in ambulatory rotations.
10. Dr. Lynn reviewed the changing residency application timeline. She noted that the application release was delayed into late October and the same is true for the MSPE. This will allow students to complete rotations in their desired specialty at a later date in the curriculum, assuming the grades are submitted promptly. This will also affect the virtual interview schedule as the dates for submitting a rank list have been delayed as well.
11. Dr. McCallister suggested that Part 3 undertake a full review of each student scheduled for a June rotation to determine the likelihood that the

rotation will be available and advise them to travel to Columbus. She

also suggested that the ECC discuss the COM’s position on away

rotations.She and Dr. Lynn reviewed the position statement from the

Coalition for Physician Accountability which suggested significant

limitations in away rotations. The major exception would be to allow

rotations in specialties not offered by the College of Medicine. Dr. Kman

suggested that a formal policy be written from the College leadership

consistent with this recommendation. Dr. Lynn is currently drafting such

a policy.

1. Dr. Tartaglia presented a proposed revision to the Part 2 calendar based on the revised June 1 start date. This was based on the limitations for Part 2 students in the clinical learning environment in June. The major change was introduction of a virtual learning month in June, currently being developed by Dr. Walsh with representatives from each of the Rings. It would incorporate much of the material contained in each Ring’s ground school. The Rings have been shortened with the elimination of ground school. Ring 1 would be 13 weeks followed by two 14-week Rings. This would allow one week of vacation prior to Part 3. The students would also enter with one Part 3 credit for their participation in Pandemic course. Bryce Ringwald noted that the revised calendar would result in students and residents starting on July 1. Dr. McCallister asked if each of the Rings will have enough capacity for students within each Ring, especially given limitations in community sites. Dr. Tartaglia shared the programs’ thoughts on this topic. Dr. Lacuesta noted that the case-mix may be the limiting factor for OhioHealth students.
2. Dr. McCallister will provide our students with an update on where the resumption of Parts 2 and 3 stands at this time.
3. There was a brief discussion regarding the number of students who will complete USMLE Part 1 before the end of June. This number remains unknown.

## Action Items

1. The ECC discussed and approved the motion to accept the modified Part 2 calendar as proposed by Dr. Tartaglia.

The Ohio State University College of Medicine

**Executive Curriculum Committee**Meeting Minutes

Presiding Chair: Howard Werman, MD
Minutes Recorded by: Casey Leitwein
Quorum = 50% Voting Members
Date: 6/23/2020
Location: Zoom
Call to Order: 4:00 PM
Adjourned: 5:52 PM

# Member Attendance

| **Name** | **Role** | **Voting** | **Present** |
| --- | --- | --- | --- |
| Howard Werman | Chair, Faculty member | Y | Y |
| Marcie Bockbrader | Chair, Academic Review Board | Y | Y |
| Preethi Chidambaram | Med Student Representative | Y | N |
| Camila Curren | Academic Co-Program Director, LSI Part One | Y | Y |
| Douglas Danforth | Academic Program Director, LSI Part One | Y | Y |
| Binay Eapen | Assistant Dean, Affiliated program | Y | N |
| Wendy Frankel | Chair, Basic Science Department | Y | Y |
| Ron Harter | Chair, Clinical Science Department | Y | Y |
| Eileen Kalmar | Faculty Member | Y | Y |
| Sorabh Khandelwal | Residency Program Director | Y | Y |
| Nicholas Kman | Academic Program Director, LSI Part Three | Y | Y |
| Nanette Lacuesta | Assistant Dean, Affiliated program | Y | Y |
| Allison Macerollo | Elected Faculty Member | Y | Y |
| Jennifer McCallister | Associate Dean for Medical Education | Y | Y |
| Leon McDougle | Academic Program Director, Associate Dean Diversity | Y | Y |
| Alexa Meara | Faculty Member | Y | N |
| Aroh Pandit | Med Student Representative | Y | N |
| Tasha Posid | Faculty Member | Y | Y |
| Bryce Ringwald | Med Student Representative | Y | N |
| Jonathan Schaffir | Faculty Member | Y | Y |
| Paige Speith | Med Student Representative | Y | Y |
| Kim Tartaglia | LCME Compliance Officer, Academic Program Director, Part Two | Y | Y |
| Kristina Witcher | Med Student Representative | Y | Y |
| Joanne Lynn | Associate Dean, Student Life | N | Y |
| Jack Kopechek | Director of Portfolio and Coaching | N | Y |
| Sheryl Pfeil | DOC, Personal and Professional Development | N | Y |
| Alex Grieco | ASC Chair | N | Y |
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## Additional Attendees

| **Name** | **Role** | **Present** |
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## Agenda Items

| **#** | **Agenda Item**  |
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| 1 | Approval of Meeting Minutes |
| 2 | Micro report |
| 3 | Director of Competency Report – Personal and Professional Development |
| 4 | LSI Internal Review |
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# Item 1, Approval of Minutes

## Discussion

1. Minutes of the May 26, 2020 meeting were reviewed and discussed by the ECC. Dr. Danforth suggested a correction in the wording regarding the review of College of Medicine pre-requisites. Alternative language was adopted.

## Action Items

1. The meeting minutes were approved with the suggested correction by the Executive Curriculum Committee.

# Item 2, Micro ReportPresenter: Dr. McCallister

## Discussion

1. Dr. McCallister deferred to her MICRO report which contained the key elements of her two proposals regarding Step 2 CS.
2. Drs. Grieco and Macerollo completed their two-year term on MICRO. Drs. Basuray and Bazan were elected as new members of this subcommittee.
3. There was a proposal to discuss the reporting cycle of the LCME dashboard to the ECC. It was proposed that the reporting cycle span from May through April as this is the starting of the academic cycles for Parts 2 and 3. Dr. Tartaglia clarified the rationale for this proposal.
4. Dr. Pfeil presented her report as Director of Competency for Personal and Professional Development.
5. Part 1 discussed their proposed changes for the coming academic year in response to the COVID pandemic. This will be considered at the July 14 special ECC meeting. A resumption date of August 3 remains contingent on approval by the University.
6. Dr. McCallister discussed the current suspension of Step 2 CS by the USMLE for the next 12-18 months. MICRO proposed that the College of Medicine suspend the requirement for passing Step 2 CS for requirement for the 2021 graduates and in its place develop a summative OSCE which will validate the clinical skills of graduating students. This OSCE would have to be passed in order to fulfill the graduation requirement. Developing the internally administered OSCE would fall to the task force headed by Dr. Tartaglia. Dr. McCallister noted that we do have a small group of 2021 graduating students who have successfully completed Step 2 CS. Such students would be exempt from the internally developed OSCE. There would also need to be a pathway for remediation for the OSCE.
7. Dr. Lacuesta asked if there were current students whose graduation is being delayed for fulfilling this requirement. Dr. McCallister noted that there are a few students who have been referred to the USMLE

Committee for a final disposition on their graduation which could potentially include passing the internally-developed OSCE. Dr. McCallister noted that there are implications for these students with regards to how licensing bodies and residency programs will consider an internally-developed examination.

1. Dr. Khandelwal raised the issue of whether the ECC has faith that the curriculum teaches our students the appropriate clinical skills prior to graduation, noting the Step 2 CS is purely a licensing requirement. He questioned the need to develop a summative OSCE.
2. Dr. McCallister reviewed the College’s decision to require Step 2 CS as a graduation requirement. She noted that these licensing examinations serve as ‘gateway points’ within the curriculum. The suspension of Step 2 CS raises questions about whether the ECC should recommend including this as a graduation requirement in the future once the examination is reinstated. She noted that there is a feeling that some form of assurance of competency in clinical skills is desired by the College leadership. Dr. Khandelwal asked if we don’t trust our evaluations in Part 2 and 3 to assure that students possess the proper clinical skills at graduation and wondered if an internally-developed OSCE is worth the time and effort. Dr. McCallister stated that there is a potential concern about consistency in graduation requirements for all students. Dr. McDougle supported the notion that our curriculum currently prepares students with all of the appropriate clinical skills although he acknowledged that there is a question of consistency for students who failed their first Step 2 CS attempt. Dr. Macerollo suggested that we attempt to identify the few students who may not have achieved competence in some clinical skills but Drs. McCallister and Tartaglia pointed out the challenges in identifying ‘at risk’ students.
3. Dr. Tartaglia asked whether any Part 3 assessments would fulfill the requirement for a summative OSCE, noting that her task force could make existing assessments more robust to meet this requirement. Dr. Kman supported the notion that we re-examine the requirement for successful completion of Step 2 CS for graduation. He also noted that there is no summative OSCE in Part 3 and that implementing an OSCE would require additional funding. Dr. McCallister also raised the concern about what OSCE’s will look like in the COVID era, given the limited in-person exposure.
4. Dr. Tartaglia summarized that the following options exist:
	1. Develop an internal OSCE that would replace Step 2 CS
	2. Make existing assessments in Part 3 more robust to serve as a summative OSCE
	3. Do nothing and assume that the curriculum currently teaches all of the proper clinical skills
5. Dr. Curren noted that several other schools are developing a summative OSCE as a replacement for Step 2 CS.
6. Dr. McCallister will take the ECC discussion back to the Vice Dean for Education, Dr. Clinchot, for his input regarding historical perspectives regarding the current graduation requirement that students must take & pass Step 2 CS. This will be discussed at the July 14 ECC Meeting.
7. Dr. Macerollo reminded the group that there are currently students who are trying to graduate by August who will need to have a decision regarding the Step 2 CS requirement alternatives.

## Action Items

1. The ECC discussed and approved the academic cycle for ECC dashboard reporting from May through April.

# Item 3, Director of Competency Report – Personal and Professional Development Presenter: Dr. Pfeil

## Discussion

1. Dr. Sheryl Pfeil presented her work on the Personal and Professional Development competency. Dr. Pfeil focused on demonstrating the areas in the curriculum where we teach and assess this competency.
2. Dr. Pfeil noted that this is the eighth domain within PCRS and that there are eight competencies which fall within this domain. She had previously presented the four progressive levels of competence within each competency, with level 3 competence being appropriate for a graduating student.
3. Dr. Pfeil reviewed the eight individual competencies within this domain. Dr. Pfeil reviewed each of the competencies with a review of how we teach and assess each competency within all three parts of the curriculum. She highlighted areas where specific gaps exist in either teaching or assessment and highlighted where improvements can be made.
4. Dr. Pfeil summarized that personal and professional development is covered in many parts of the LSI curriculum. Additional opportunities for personal and professional development exist within the Selectives, Advanced Competencies, Longitudinal Groups and in discussion with Portfolio Coaches. She noted that there are opportunities for intentional discussion and reflection on this topic in Part 2 and 3 as well as more robust assessments. Finally, there are opportunities for learning about the best practices in remediation in this domain if the student fails to progress.

## Action Items

1. The ECC discussed and approved the action plan to develop additional opportunities where teaching and assessing Personal and Professional Development within the curriculum are identified or developed, including within Selectives, Advanced Competencies, Longitudinal Groups and Portfolio Coaching sessions.

# Item 4, LSI Internal ReviewPresenter: Dr. Tartaglia

## Discussion

1. Dr. Kim Tartaglia reviewed the work of her internal review task force. She noted that there is a more detailed amount of material that is available in the written report and that her presentation focused on the highlights of that report.
2. Dr. Tartaglia reviewed the major goals of the internal review. She also identified the members of the task force, highlighting the titles that brought them to serve. Finally, Dr. Tartaglia noted that the work was primarily performed between January and April of 2020 and thus, does not reflect alterations to the curriculum made to accommodate the COVID pandemic or any anti-racism TLMs that will be incorporated into the LSI curriculum.
3. There were six sections of the report. For this presentation, the charge to each group was reviewed, the methods used to assess each area were included, some data was presented and areas of strength, weakness and recommendations within these areas were highlighted. Minimal data was included in this presentation.
4. The following areas were considered:
	1. Drs. Kopechek and Troyer evaluated the Educational Objectives.
	2. Drs. Lee and Graham evaluated Student Teaching and Evaluation
	3. Dr. Macerollo evaluated Student Evaluation of the Learning Environment
	4. Dr. Ungureanu evaluated Curriculum Management
	5. Dr. Curren evaluated Evaluation of Faculty
	6. Dr. Pierson evaluated Program Effectiveness
5. The high-level conclusions from this review were that the COM meets the educational objectives set forth by the LSI Curriculum. There were no critical deficiencies.
6. Strength of the curriculum were discussed including:
	1. Commitment to student feedback
	2. Vertical integration through the Directors of Competency
	3. Active monitoring of the learning environment
	4. Support and resources available through the student life department
7. Weaknesses of the curriculum were discussed with specific recommendations made:
	1. Faculty/learning interaction with the curricular learning objectives – better mapping of TLMs and assessments with each CLO along with optimizing faculty and learner use of CLO’s to aid teaching and learning
	2. Inconsistencies in the student handback regarding the Academic Standing Committee – discuss stance of the College of ‘feed forward’ and reflect that stance in the description of ASC
	3. Review of faculty teaching evaluations – prioritize review of faculty evaluations including documentation of these reviews and implementation of peer-to-peer assessments
	4. Vertical integration and internal assessment of knowledge for practice – develop a plan for vertical integration of knowledge for practice and a timeline to review and revise internal assessments
8. Dr. Tartaglia noted that there is an Appendix to the written report that discusses some additional questions which the task force was asked to address. Dr. McCallister suggested that we may wish to consider the specific questions raised in this section and possibly schedule a retreat to discuss making improvements to the LSI Curriculum.
9. Dr. McCallister suggested that the ECC and stakeholders should review this report in terms of implementing and prioritizing the recommendations of this task force. Dr. Kman noted that some of this information will assist in his preparation of his Part 3 annual report. Dr. Danforth noted the challenges in developing graded competencies in Knowledge for Practice given the sheer number of these competencies but suggested revisiting the CLO’s within the competency.

## Action Items

1. The ECC will review the LSI Internal Review and determine priorities for implementing recommendations. This will be discussed at a later meeting as well as at the academic program level and among the Directors of Competency based on recommendations by Drs.

McCallister and Kopechek.

The Ohio State University College of Medicine

**Executive Curriculum Committee**Meeting Minutes

Presiding Chair: Jack Kopechek, MD
Minutes Recorded by: Casey Leitwein
Quorum = 50% Voting Members
Date: 7/14/2020
Location: Zoom
Call to Order: 4:00 PM
Adjourned: 5:40 PM

# Member Attendance

| **Name** | **Role** | **Voting** | **Present** |
| --- | --- | --- | --- |
| Jack Kopechek | Chair, Faculty member | Y | Y |
| Marcie Bockbrader | Chair, Academic Review Board | Y | Y |
| Preethi Chidambaram | Med Student Representative | Y | N |
| Camila Curren | Academic Co-Program Director, LSI Part One | Y | Y |
| Douglas Danforth | Academic Program Director, LSI Part One | Y | Y |
| Binay Eapen | Assistant Dean, Affiliated program | Y | N |
| Wendy Frankel | Chair, Basic Science Department | Y | N |
| Ron Harter | Chair, Clinical Science Department | Y | N |
| Eileen Kalmar | Faculty Member | Y | Y |
| Sorabh Khandelwal | Residency Program Director | Y | Y |
| Nicholas Kman | Academic Program Director, LSI Part Three | Y | Y |
| Nanette Lacuesta | Assistant Dean, Affiliated program | Y | N |
| Allison Macerollo | Elected Faculty Member | Y | Y |
| Jennifer McCallister | Associate Dean for Medical Education | Y | Y |
| Leon McDougle | Academic Program Director, Associate Dean Diversity | Y | Y |
| Alexa Meara | Faculty Member | Y | Y |
| Aroh Pandit | Med Student Representative | Y | N |
| Tasha Posid | Faculty Member | Y | Y |
| Bryce Ringwald | Med Student Representative | Y | Y |
| Jonathan Schaffir | Faculty Member | Y | Y |
| Paige Speith | Med Student Representative | Y | Y |
| Kim Tartaglia | LCME Compliance Officer, Academic Program Director, Part Two | Y | Y |
| Kristina Witcher | Med Student Representative | Y | N |
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## Additional Attendees

| **Name** | **Role** | **Present** |
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## Agenda Items

| **#** | **Agenda Item**  |
| --- | --- |
| 1 | Approval of meeting minutes |
| 2 | Summative OSCE |
| 3 | Part one annual report |
| 4 | Part one autumn semester proposal  |
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# Item 1, Approval of Minutes

## Discussion

1. Minutes of the June 23, 2020 meeting were reviewed and discussed by the ECC. Dr. Danforth requested revisiting the decision that made the ECC Dashboard reporting cycle as May 1 to April 30. The Endo/Repro block will not end until early May in some years so an adjustment in timing of reporting may be needed.

## Action Items

1. The meeting minutes were approved. Dr. Tartaglia will discuss the Dashboard reporting cycle with Dr. Start and will bring any proposed changes back to the ECC.

# Item 2, Summative OSCEPresenter: Dr. McCallister

## Discussion

1. Dr. McCallister described three options to consider as a possible response to the temporary waiving of the graduation requirement for students to take and pass Step 2 CS.
	1. Develop an internal summative OSCE to replace Step 2 CS for either all students, or selected students based on at risk criteria
	2. Supplement existing assessments in Part 3 to serve as a summative OSCE
	3. Make no changes and trust our current assessments for assuring student competency
2. Dr. McCallister recommended that the decision to develop a summative OSCE be discussed separate from discussion of Step 2 CS as a graduation requirement. We have implemented many more assessments (OSCEs) since the original decision to require Step 2 CS for graduation. The requirement to take and pass all of the USMLE exams should be considered together as one graduation requirement. In addition, this requirement is intended to ensure that our students are eligible for licensure upon graduation, but is not intended to represent an assessment of student performance.
3. The three options were discussed at MICRO and through a survey of the students. Both groups recommended that no summative OSCE be developed for the 2020-21 academic year. It was recommended that an analysis be performed this year to map OSCEs to targeted learning outcomes and determine if there are gaps in OSCE assessments.
4. A few students have taken and not passed Step 2 CS. Dr. McCallister is working with the USMLE Student Review Committee to establish plans for each of these students while making sure that our current decision on this topic has no detrimental effects for these students.
5. Dr. Macerollo asked if students who wanted to improve their patient care skills would have access to any internal OSCE opportunities for practice. Dr. Tartaglia responded that Telehealth OSCE opportunities can be made available if students request this.
6. Dr. Schaffir asked if a new summative OSCE would be ongoing if and when Step 2 CS was reinstituted. Dr. McCallister replied that any new assessments would address gaps that would need to be addressed even if Step 2 CS was reinstituted. Dr. Tartaglia confirmed that the purpose of any new assessment would be focused on making sure our students have the skills necessary to take care of patients.
7. Dr. Kman described related Part 3 assessments including an observed history and physical by an EE in AMHBC, robust summative simulation experiences, and OSCEs on writing orders and patient handovers. He recommended looking at ways to improve our current assessments rather than creating a new summative OSCE.

## Action Items

1. ECC approved the proposal that no summative OSCE be developed for the 2020-21 academic year and that a task force appointed by Dr. McCallister with representatives from the Evaluation and Assessment team and the academic programs study the effectiveness of our current OSCEs across the curriculum to determine if they provide adequate assurance that students are achieving the desired learning outcomes and whether improvement in our assessments are needed or not.

# Item 3, Part One Annual ReportPresenter: Dr. Curren

## Discussion

1. Dr. Curren provided an overview of Part 1, program evaluation data, measures of student performance, salient changes, successes, opportunities and action plan.
2. Program Evaluation:
	1. Students rated the Bone and Muscle and Cardiopulmonary blocks as having the highest quality and the Neurological Disorders and Endo-Repro block as having the lowest quality. These latter two blocks are considered to have some of the most challenging content.
	2. Block leaders and teaching faculty generally had high ratings of how the blocks functioned but some would like more time to cover their content.
3. Student Measures of Performance:
	1. Number of student competency not-mets were low and fairly stable except for an increased number for Patient Care in Endo-Repro where the OSCE was limited to two cases. This did not enable students who did poorly on one case to compensate on other cases.
	2. USMLE Step 1 scores averaged just above the national mean with 97% of students passing on the first attempt.
	3. Ten cases of student mistreatment were reported. All were investigated and documented in Vitals.
4. Changes in Part One:
	1. Curricular Learning Outcomes have replaced Primary and Secondary Learning Objectives
	2. Block leaders have started meeting to share best practices
	3. EE’s are attempting vertical integration of components and quality improvement as needed (such as with pharmacology)
	4. Student feedback through Student Counsel representation at APC on all components of curriculum has been strengthened
	5. There is an increased number of TBLs and small group learnings instead of lecture.
	6. Students who experience mistreatment now meet with Student Advocate, Dr. Lisa Christian
	7. Individual sessions with Dr. Kaplan and extra LG practice sessions were utilized to improve student interviewing and PE skills
	8. There in an ongoing robust review of block test questions to place these questions into NBME format
	9. There is ongoing research into complementary resources that would help with Step Review
	10. Various methods were tried for improving assessment of professionalism
	11. Work is being done to increase support of faculty, staff and students
5. Successes
	1. Added clinical content to lectures and more small group learning (TBL’s, etc.)
	2. Test question revision to NBME format
	3. Expanded student input
	4. Expanded student support
6. Challenges
	1. Continued mapping of CLO’s
	2. LCME compliance/CQI Process ongoing
	3. Virtual OSCE’s and SP’s to teach PE
	4. Physical Exam teaching
	5. Further expansion of student support
	6. Increase grading transparency
7. Dr. McCallister and Dr. Demicha Rankin have been asked to chair the Equity and Anti-Racism task force for the College of Medicine to address a

broad range of issues in admissions, student services, and the curriculum. Dr. Chris Pierson represents Part One on this task force. Dr. McCallister asked if action is being taken to ensure that patients on patient panels are adequately diversified. Dr. Curren has a meeting scheduled to address this and block leaders will be reporting representation on patient panels to the Part One directors.

1. Bryce Ringwald noted that the number of responders to the Faculty evaluation of Part One was noted to be quite a bit lower last year. Efforts will be made to increase responses this year.

## Action Items

1. Continue mapping Assessments and TLMs to the CLO’s
2. Continue LCME compliance monitoring and CQI process ongoing
3. Further expand student support
4. Work to increase grading transparency
5. Increase response rate for the faculty curriculum survey

# Item 4, Part One Autumn Semester ProposalPresenter: Dr. Danforth

## Discussion

1. Dr. Danforth presented a plan for Part 1 Autumn semester that identified the learning activities that would most benefit from being in person along with plans for virtual learning and maintaining safety during the pandemic.
2. Lectures/didactics will be provided either by pre-recordings, Zoom or by lectures in Meiling Hall that allow for a limited number of students to attend in person with spaced seating.
3. Team-based learning will mostly be conducted by Zoom with a few conducted in person with teams spread out to different rooms. The main concern of TBLs by Zoom is exam question security.
4. Anatomy labs will be performed in smaller groups and limited to 90 minutes per group. Students will have appropriate PPE.
5. Patient panels may be done by Zoom or in Meiling Hall if there is a specific benefit to this and patients can attend safely.
6. Small groups may be either in person or by Zoom
7. Longitudinal Group (LG) is planned to occur in person but each group will be broken into two sub-groups of 6-7 students each in order to maintain adequate social distancing. Each subgroup would meet with facilitator for 90 minutes and then do other required LG work in a different location during the remaining 90 minutes of class while the other subgroup works with the facilitator. Student engagement may be increased due to the smaller size of sub-groups.
8. Longitudinal Practice (LP) is planned to occur in person. Students will not see Covid-19 patients. Skills training would be limited to learning to do Vital Signs and Basic Sterile Technique/ Standard Precautions. Only about 20 % of LP students have been able to do venipunctures or injections during LP, so teaching of these skills will be postponed. (Venipuncture will be taught in Part 2 Ground School and teaching on injections will be postponed until after the pandemic). Up to 50% of LP encounters may be Telehealth Encounters for Year 2 students. Year One students will see patients primarily in person.
9. Community Health Education will be a hybrid of on-line learning and in person learning with appropriate safety precautions in place.
10. The preferred option for assessments is for in person assessments using both Meiling Hall lecture halls for morning and afternoon sessions with appropriate distancing. If this is not allowed, exams will be given remotely with Examsoft proctoring software. Anatomy practical exams will be administered similar to anatomy labs. OSCEs are preferred to take place on two floors of the CSEAC with two telehealth cases and one in person SP case in order to demonstrate physical exam. If SPs are not able to come in, then all three cases would be telehealth with students at the CSEAC.
11. Part One is soliciting ideas for how to improve student socialization while maintaining safety.
12. If students are not allowed to be on campus, the plan would be similar to what was done in Endo-Repro block last year: virtual lectures, LG by Zoom, virtual anatomy lab using images and video, LP would be suspended and assessments done remotely by exam soft with proctoring software and OSCEs done by Zoom with telehealth cases.
13. Dr. Macerollo asked what we can do to connect students and make them feel supported. Dr. Danforth discussed the need for faculty to be intentional about engaging students. Dr. McCallister discussed ways the deans will be reaching out to students and interacting with students in small groups. She encouraged block leaders having frequent communication with students.
14. Dr. Kopechek asked how physical exam skills will be assessed if SPs cannot come to campus. Dr. Curren mentioned that some schools are doing this by having students examine someone in their home with feedback and then planning for summative OSCE after the pandemic is over.

## Action Items

1. The proposal for Part One Autumn Semester as presented was approved by ECC.

The Ohio State University College of Medicine

**Executive Curriculum Committee**Meeting Minutes

Presiding Chair: Jack Kopechek, MD
Minutes Recorded by: Casey Leitwein
Quorum = 50% Voting Members
Date: 7/28/2020
Location: Zoom
Call to Order: 4:00 PM
Adjourned: 5:57 PM

# Member Attendance

| **Name** | **Role** | **Voting** | **Present** |
| --- | --- | --- | --- |
| Jack Kopechek | Chair, Faculty member | Y | Y |
| Melissa Quinn | Chair, Academic Review Board | Y | Y |
| Paige Spieth | Med Student Representative | Y | Y |
| Camila Curren | Academic Co-Program Director, LSI Part One | Y | Y |
| Douglas Danforth | Academic Program Director, LSI Part One | Y | Y |
| Binay Eapen | Assistant Dean, Affiliated program | Y | N |
| Wendy Frankel | Chair, Basic Science Department | Y | Y |
| Ron Harter | Chair, Clinical Science Department | Y | Y |
| Kim Bjorklund | Faculty Member | Y | Y |
| Sorabh Khandelwal | Residency Program Director | Y | Y |
| Nicholas Kman | Academic Program Director, LSI Part Three | Y | Y |
| Nanette Lacuesta | Assistant Dean, Affiliated program | Y | Y |
| Allison Macerollo | Elected Faculty Member | Y | Y |
| Jennifer McCallister | Associate Dean for Medical Education | Y | Y |
| Leon McDougle | Academic Program Director, Associate Dean Diversity | Y | Y |
| Alexa Meara | Faculty Member | Y | Y |
| Charissa Newkirk | Med Student Representative | Y | Y |
| Elisa Bradley | Faculty Member | Y | Y |
| Bryce Ringwald | Med Student Representative | Y | N |
| Jonathan Schaffir | Faculty Member | Y | Y |
| Kim Tartaglia | LCME Compliance Officer, Academic Program Director, Part Two | Y | Y |
| Kristina Witcher | Med Student Representative | Y | N |
| Joanne Lynn | Associate Dean, Student Life | N | Y |
| Allison Heacock | Applied Health Systems Science Program Director | N | Y |
| Philicia Duncan | Applied Health Systems Science Program Director | N | Y |
| Alex Grieco | ASC Chair | N | Y |
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## Additional Attendees

| **Name** | **Role** | **Present** |
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## Agenda Items

| **#** | **Agenda Item**  |
| --- | --- |
| 1 | Approval of Meeting Minutes |
| 2 | Summative OSCE |
| 3 | Part one Annual Report  |
| 4 | Part One Autumn Semester Proposal  |
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# Item 1, Approval of Minutes

## Discussion

1. Minutes of the July 14, 2020 meeting were reviewed. After discussion with Dr. Tartaglia and Dr. Danforth, it was determined that the ECC Dashboard reporting cycle should remain as May 1- April 30

## Action Items

1. The meeting minutes were approved.

# Item 2, ECC Mission and Membership Presenter: Dr. Kopechek

## Discussion

1. Dr. Kopechek reviewed the mission and responsibilities of the ECC according to the By-Laws, explained associated academic committees, listed ECC membership and invited feedback on ECC procedures, especially on the timing requirement for presenters to put their documents in Box prior to meeting (currently noon the day before the meeting)
2. ECC members introduced themselves to each other

## Action Items

1. ECC members should email Dr. Kopechek with any feedback on how soon meeting documents should be posted to Box prior to ECC meetings.

# Item 3, Part 3 Academic Program Annual ReportPresenter: Dr. Kman

## Discussion

1. Dr. Kman reviewed Part 3 program accomplishments from the past year, evaluation data, and Part 3 Internal Review and SWOT analyses for AMHBC, AMRCC, Clinical Tracks, Advanced Competencies and Electives, and for the overall program and learning environment.
2. Program Strengths include:
	1. Graduated over 50 students early to join workforce
	2. Finished last 7 weeks of Part 3 asynchronously including the development of a novel course: Pandemic and Disaster Medicine
	3. Specialty specific tracks mapped to ACGME Milestones
	4. Small amount of funding for Clinical Track Directors to better support clinical tracks (Approx0.3 FTE redirected from some Part 3 EE positions)
	5. Longitudinal experiences expanded (72 AMRCC Longitudinal rotations in 2019-20)
	6. Autonomy in patient management
	7. EPA 4 OSCE
	8. Student perception of readiness for residency
3. Program Weaknesses:
	1. Inadequate mapping of assessments and TLMS to CLOs in Vitals
	2. EM Articulates are old
	3. Some clinical experiences still don’t count for Mini-I which reduces flexibility for students
	4. Coordinator turnover
	5. Late grades
4. Opportunities:
	1. Universal Bootcamp
	2. Consistency of Clinical Track Experience
	3. Feedforward Letter (mMSPE)
5. Threats: Covid-19 has posed significant threats to away rotations and the residency application process but may also have some benefits in providing more time for students to focus on Part 3 courses and projects.
6. Dr. Kopechek asked what could be done to improve student awareness/appreciation for learning activities that occur outside of clinic in AMRCC. Dr. Macerollo advised explicit discussions in ground school and wrap sessions or weekly small groups. Ms. Newkirk mentioned that students concerns were likely unrelated to course content.
7. Action Plan:
	1. Ms. Newkirk will collect some feedback from Part 3 students to help us better understand AMRCC student concerns and forward this to Dr. Kman.
	2. Finish dCEO conversion to PCRS/Curriculum Learning Outcomes (CLOs) and Update Vitals.
	3. Zero late grades.
	4. Continued monitoring of Learning Environment.
	5. LCME preparation and Compliance.
	6. Build a Curriculum involving a Covid Case to address the following CLOs

404.03.01 Negotiate role as consultant to meet needs of requesting provider. (Present to Part 3 APC)

702.03.01: Engage in inter-professional communications and collaborations in the EMR (e.g., reviewing other professionals’ notes) to establish an inter-professional patient care plan.(IPEC -RR3, RR8)-IHIS Learn Exercise

802.03.01: Make use of effective and healthy personal strategies in response to stressors-AMHBC Wellness Session.

## Action Items

1. The action plan proposed by Dr. Kman was discussed by the ECC. The ECC voted to adopt the Part 3 action plan items for the current academic year without modification except for the addition of Item 7a. Dr. Kman will report back to MICRO on response to item 7a above by September 2020.

# Item 4, Applied Health Systems Science Project UpdatePresenter: Dr. Heacock

## Discussion

1. Dr. Heacock provided an overview of the AHSS project
2. Dr. Philicia Duncan is the new director for AHSS.
3. New Part 1 activities have been created to better establish relevance of health systems science for students
4. Part 2 sessions have been consolidated into three boot camp sessions
5. Part 3 projects
	1. 19 specialties were represented
	2. 87% of student groups completed the entire DMAIC process.
	3. 75% of completed projects showed some progress towards the goal
6. All project evaluation metrics showed improvement from previous years.
7. Project evaluation strengths and weaknesses were outlined
8. Proposed Improvement Plan for this year included:
	1. Formation of an AHSS Committee- In Process. Members assigned
	2. Improve organization by providing materials and due dates ahead of time- Completed for this year’s Part 3 project
	3. Provide more application during in person sessions-Review in person session teaching notes and adjust to reach goal- In Process
	4. Institute behaviorally anchored rubrics-In Process
	5. Improve engagement of team members into the project-Investigate the feasibility of leadership training- Updating team formation process.

## Action Items

1. The action plan proposed by Dr. Heacock was discussed by the ECC. The ECC voted to adopt the AHSS improvement plan for the current academic year without modification.

# Item 5, LSI MICRO ReportPresenter: Dr. McCallister

## Discussion

1. Dr. McCallister reviewed the items discussed at MICRO on July 10 th and approved by ECC on July 14th.
	1. No summative OSCE for 2020-21. OSCE needs assessment will be done
	2. Revisions for Longitudinal Group and Longitudinal Practice to comply with Covid restrictions
	3. Plan for assessment procedures during 2020-21
2. Two annual reports were given:
	1. Director of Competency Update: Systems Based Practice
	2. Applied Health System Science Annual Program Evaluation Report
3. Nationwide Children’s Hospital COVID exposure and positive test response policies were communicated
4. Excused absences and COVID policies will need to be established- waiting for university guidance

## Action Items

1. The Director of Competency: Systems-based Practice report will be given at the August ECC meeting.
2. Excused Absence Policies will be revisited once university policies have been communicated. Dr. McCallister will review university policies with MICRO once they are available.

The Ohio State University College of Medicine

**Executive Curriculum Committee**Meeting Minutes

Presiding Chair: Jake Kopecheck, MD
Minutes Recorded by: Casey Leitwein
Quorum = 50% Voting Members
Date: 8/25/2020
Location: Zoom
Call to Order: 4:00 PM
Adjourned: 5:43 PM

# Member Attendance

| **Name** | **Role** | **Voting** | **Present** |
| --- | --- | --- | --- |
| Jack Kopechek | Chair, Faculty member | Y | Y |
| Melissa Quinn | Chair, Academic Review Board | Y | Y |
| Paige Spieth | Med Student Representative | Y | Y |
| Camila Curren | Academic Co-Program Director, LSI Part One | Y | Y |
| Douglas Danforth | Academic Program Director, LSI Part One | Y | Y |
| Binay Eapen | Assistant Dean, Affiliated program | Y | N |
| Wendy Frankel | Chair, Basic Science Department | Y | Y |
| Ron Harter | Chair, Clinical Science Department | Y | Y |
| Kim Bjorklund | Faculty Member | Y | N |
| Sorabh Khandelwal | Residency Program Director | Y | Y |
| Nicholas Kman | Academic Program Director, LSI Part Three | Y | N |
| Nanette Lacuesta | Assistant Dean, Affiliated program | Y | Y |
| Allison Macerollo | Elected Faculty Member | Y | Y |
| Jennifer McCallister | Associate Dean for Medical Education | Y | Y |
| Leon McDougle | Academic Program Director, Associate Dean Diversity | Y | Y |
| Alexa Meara | Faculty Member | Y | N |
| Charissa Newkirk | Med Student Representative | Y | Y |
| Elisa Bradley | Faculty Member | Y | Y |
| Bryce Ringwald | Med Student Representative | Y | Y |
| Jonathan Schaffir | Faculty Member | Y | Y |
| Kim Tartaglia | LCME Compliance Officer, Academic Program Director, Part Two | Y | Y |
| Kristina Witcher | Med Student Representative | Y | N |
| Joanne Lynn | Associate Dean, Student Life | N | Y |
| Allison Heacock | Applied Health Systems Science Program Director | N | Y |
| John Gunn | Biomedical Science Undergraduate Major Director | N | Y |
| Steven Mousetes | Biomedical Science Undergraduate Major Program Manager | N | Y |
| Laura Volk | Part 2/3 Program Manager | N | Y |
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## Additional Attendees

| **Name** | **Role** | **Present** |
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## Agenda Items

| **#** | **Agenda Item**  |
| --- | --- |
| 1 | Approval of meeting minutes |
| 2 | Biomedical science undergraduate major |
| 3 | Part two program |
| 4 | LSI MICRO report |
| 5 | Director of Competency – Systems based practice |
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# Item 1, Approval of Minutes

# Discussion

* 1. Minutes of the July 28, 2020 meeting were reviewed and discussed by the ECC.
	2. Dr. Lacuesta noted that a student representative had been left off of the attendance page.
	3. Dr. McCallister noted a typo on Item 4.1b where the second “longitudinal group” reference should have said “longitudinal practice”
	4. Old Business- Ms. Newkirk surveyed Part 3 students regarding concerns with AMRCC and reported to Dr. Kman that student dissatisfaction was not related to course content but rather how assignments were organized and communicated.

## Action Items

1. The minutes from the July 28, 2020 meeting were approved with corrections to the attendance sheet and to Item 4.1b changing the second “longitudinal group” to “longitudinal practice.”
2. Further work to improve AMRCC assignment communication was delegated to the Part 3 APC

# Item 2, Biomedical Science (BMS) Undergraduate MajorPresenter: Dr. John Gunn, Steven Mousetes

## Discussion

1. Dr. Gunn reviewed the purpose of having this undergraduate major in the College of Medicine, described major courses and reviewed program data from the past year.
2. Student retention in the major is good.
3. Minority and underrepresented minority students were well represented in comparison to campus demographics.
4. The majority of graduating students go on to medical school with many attending the Ohio State University College of Medicine.
5. Research presentations were down moderately this year secondary to event cancellations due to the pandemic.
6. Student and staff accomplishments and awards were reviewed. All incoming Freshman were awarded university academic scholarships.
7. 88% of graduates are pursuing graduate/professional degrees in healthcare fields.
8. Program goals include finding alternate funding sources, developing learning abroad opportunities for seniors, ensure that teaching in BMS is appropriately recognized in the College of Medicine, fill some open

instructor positions and maintain class diversity and retention of BMS students.

## Action Items

## The ECC noted the effectiveness of the BMS major as evidenced by the exceptional student outcomes and had no action items to add.

# Item 3, Part 2 Annual ReportPresenter: Dr. Kim Tartaglia

## Discussion

1. Dr. Tartaglia shared an overview of Part 2 and discussed program disruptions due to the pandemic that resulted in students missing the last 5 weeks from their final ring. Virtual learning activities and assessments were completed. The ring grading was changed to Pass/Fail. Each department set minimal requirements for what constitutes an adequate clinical experiences for each student. This resulted in most students needing to make up 2-3 weeks of clinical time sometime during Part 3. Nearly all students have now successfully made up this clinical time.
2. Development of service-specific orientation tip sheets was interrupted due to the pandemic. Target date for completion is now December 2020.
3. Student documentation in the EHR is now being captured. Students averaged 19 notes per rotation on their OSU Internal Medicine rotation. There was significant variation by service which the program plans to address going forward.
4. Actions for development of Expert Educators was delayed due to the pandemic.
5. Extensive program evaluation data was reviewed.
	1. UPSMN ratings of Tuesday teaching sessions dropped significantly this year. The reasons for this are being explored by the UPSMN ring
	2. Several duty hour violations were reported
	3. Faculty supervision was adequate for ensuring patient safety.
	4. Learning Environment-Respect questions showed concerns for 0.016% of the responses. Dr. Lynn follows up on each of these.
	5. There were no late grades in the 2019-20 academic year.
	6. Adequate secure space for personal belongings and student workspace is a newly identified need. Drs. Tartaglia, Kman and McCallister toured some clinic sites to further assess needs and are addressing this with Dr. Clinchot
	7. There are less “competencies not met” this year compared to previous years. (28 total). While some students required remediation, there were no referrals to ABRC.
	8. 13-16 % of students on each ring were awarded ‘Honors” and 16- 21 % were awarded “Letters” over the first two rings
6. Proposed Action items included:
	1. Revision of quizzes/midterms to better align with CLOs and improve the quality of the clinical vignettes
	2. Develop an action plan to address concerns for bias in clinical evaluations. (Dr. McCallister and Dr. Rankin’s task force is also working on this)
	3. Improve student agreement that they have adequate space by at least 20 %
	4. Complete service-specific tip sheets by January 2021.
7. Mr. Ringwald applauded the plan to study clinical evaluations for bias and he and Ms. Newkirk encouraged Part 2 to make Tuesday Teaching Sessions more homogenous and case-based across all three rings
8. Dr. McCallister inquired whether implicit bias training is being done at Ohio Health and Mt. Carmel. Dr. Lacuesta responded that teaching faculty and residents are completing implicit bias training at Riverside and Grant.
9. Dr.Kopechek asked how student duty hours are monitored. Dr. Tartaglia responded that students are to monitor their own hours and that the vast majority of students are not close to 80 hours per week and that there may be some misinterpretation of the survey question by students.

## Action Items

1. The ECC voted to adopt the action plan recommended by Dr. Tartaglia with the two additional items from the discussion.
	1. Review Internal Developed Medical Knowledge Measures‒ Revise quizzes / midterm questions to align with CLOs and improve quality of clinical vignettes
	2. Develop action plan to address concerns for bias in clinical evaluations‒Implicit bias training for faculty?‒Collaborating with task force led by Drs. McCallister and Rankin
	3. Work with COM and departments to improve agreement to adequate student space question by 20%.
	4. Implement Rotation-Specific Tip Sheets by Jan 2021
	5. Increase homogeneity of Tuesday teaching sessions across rings along with mostly case-based teaching methods
	6. Check with staff to better understand reasons behind duty hour violations

# Item 4, LSI MICRO UpdatePresenter: Dr. Jenn McCallister

## Discussion

1. Update given on Institutional Self Study plan
2. Professionalism CLOs were discussed and approved by MICRO.
3. MICRO discussed and approved the Inter-professional Education Event for M2s to focus on racism as a public health crisis and extend this over the entire academic year
4. MICRO brainstorming session done on Teaching Telemedicine and content review for eliminating race-based medicine and inclusive teaching practices
5. The pediatric clerkship requested a revision, retroactive to the last academic year, for the minimum clinical requirement for pediatrics for students with extenuating circumstances such as the pandemic shut down. The proposal is to maintain the minimum requirement of 4 weeks of pediatrics but eliminate the requirement that one week be in the ambulatory setting. There are multiple administrative barriers to getting the outpatient experience for many of these students and all pediatrics objectives are able to be met in the inpatient environment. MICRO discussed and approved the revision.

a. Dr. Lacuesta questioned whether students can get an adequate exposure to the field of pediatrics without an outpatient experience but was in favor of the revision since it is supported by the pediatrics clerkship leadership.

## Action Items

1. After the discussion, the ECC voted to approve the revision to the pediatrics minimum clinical experience eliminating the requirement for one week of outpatient pediatrics.
2. Recommended that Dr. McCallister collaborate with Technology Task Force leader, Dr. Tasha Posid, regarding development of a curriculum for teaching telemedicine.

# Item 5, Systems Based Practice Annual ReportPresenter: Dr. Allison Heacock

## Discussion

1. Dr. Heacock reviewed the status of the Systems-based Practice CLOs along with associated Teaching/Learning Methods and Assessments and shared her SWOT analysis:
	1. Strengths
		1. 19/28 CLOs have associated assessments
		2. Teaching is inherent in clinical rotations
		3. AHSS supports the clinical teaching of these competencies
		4. Curriculum innovation
	2. Weaknesses
		1. Dual role of SBP Director of Competency and Director of AHSS
		2. Some CLOs do not have associated assessments
		3. Lack of High Value Care thread
	3. Opportunities
		1. Increased interest in High Value Care by students and faculty
		2. May be able to use AHSS to bring together various elements of the Part 2 curriculum
	4. Threats
		1. Hidden Curriculum may not always call attention to these competencies
		2. Risk of making CPAs too long by adding items
		3. Challenge to providing adequate faculty development to ensure consistent faculty rating
2. Dr. Heacock proposed the following action plan for the current academic year:
	1. Review Vitals Tags with Academic Programs –Remove outdated tags
	2. Create High Value Care Task Force –Needs assessment, action plan, next academic year
	3. Review Longitudinal Practice CLOS and assign as appropriate
	4. Implement PXDX logging for CLO 604.02.01
	5. Review with Part 2 Program and AHSS Director to determine an action plan for TLM/Assessments and implement for next academic year

•601.02.01•601.02.02•602.02.01•602.02.02•602.03.01

* 1. Summarize literature for presentation at ECC reports ongoing.
1. Dr. Tartaglia asked for further explanation of what is meant by tagging CLOs in Vitals. She also asked whether Choosing Wisely Stars is still active and encouraging student leadership in SBP. She recommended that these students be included in the High Value Care Task Force. She also agreed that PxDx logging for 604.02.01 can be included in Part 2 once criteria are established

## Action Items

1. After discussion, the proposed action plan was adopted without changes and approved by the ECC.

The Ohio State University College of Medicine

**Executive Curriculum Committee**Meeting Minutes

Presiding Chair: Jack Kopecheck, MD
Minutes Recorded by: Casey Leitwein
Quorum = 50% Voting Members
Date: 9/22/2020
Location: Zoom
Call to Order: 4:00 PM
Adjourned: N/A

# Member Attendance

| **Name** | **Role** | **Voting** | **Present** |
| --- | --- | --- | --- |
| Jack Kopechek | Chair, Faculty member | Y | Y |
| Melissa Quinn | Chair, Academic Review Board | Y | Y |
| Paige Spieth | Med Student Representative | Y | N |
| Camila Curren | Academic Co-Program Director, LSI Part One | Y | Y |
| Douglas Danforth | Academic Program Director, LSI Part One | Y | Y |
| Binay Eapen | Assistant Dean, Affiliated program | Y | N |
| Wendy Frankel | Chair, Basic Science Department | Y | N |
| Ron Harter | Chair, Clinical Science Department | Y | Y |
| Kim Bjorklund | Faculty Member | Y | Y |
| Sorabh Khandelwal | Residency Program Director | Y | Y |
| Nicholas Kman | Academic Program Director, LSI Part Three | Y | Y |
| Nanette Lacuesta | Assistant Dean, Affiliated program | Y | Y |
| Allison Macerollo | Elected Faculty Member | Y | N |
| Jennifer McCallister | Associate Dean for Medical Education | Y | Y |
| Leon McDougle | Academic Program Director, Associate Dean Diversity | Y | Y |
| Alexa Meara | Faculty Member | Y | Y |
| Charissa Newkirk | Med Student Representative | Y | N |
| Elisa Bradley | Faculty Member | Y | N |
| Bryce Ringwald | Med Student Representative | Y | Y |
| Jonathan Schaffir | Faculty Member | Y | Y |
| Kim Tartaglia | LCME Compliance Officer, Academic Program Director, Part Two | Y | Y |
| Kristina Witcher | Med Student Representative | Y | Y |
| Joanne Lynn | Associate Dean, Student Life | N | Y |
| Ashley Fernandes | DOC, Professionalism | N | Y |
| Jeff Barbee | Research Specialist | N | Y |
| Laura Volk | Part 2/3 Program Manager | N | Y |
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## Additional Attendees

| **Name** | **Role** | **Present** |
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## Agenda Items

| **#** | **Agenda Item**  |
| --- | --- |
| 1 | Approval of meeting minutes |
| 2 | ECC Dashboard, Future DOC Reports |
| 3 | Director of Competency, Professionalism  |
| 4 | Future DOC Reports |
| 5 | LSI Internal Review Response |
| 6 | LSI MICRO Report |
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# Item 1, Approval of Minutes

## Discussion

1. Minutes of the August 25, 2020 meeting were reviewed by the ECC.

## Action Items

1. The minutes from the August 25, 2020 meeting were approved.

# Item 2, ECC DashboardPresenter: N/A

## Discussion

* 1. An ECC dashboard has been created to assist the ECC in monitoring key curriculum data.
	2. All ECC members will have access to the dashboard, although faculty without an OSU sign-on and students will need to access it through Casey Leitwein or through another committee member.
	3. A brief orientation to the dashboard was provided. Those who would like more training may contact Jeff Barbee in the Office of Curriculum and Scholarship.

## Action Items

1. Two ECC members will be assigned to each dashboard page
2. Members will review their page between ECC meetings and report any concerning trends to the ECC chair for discussion during the next meeting

# Item 3, Director of Competency – Professionalism Presenter: Dr. Ashley Fernandes

## Discussion

1. Dr. Fernandes reviewed Professionalism goals from the prior year and their outcomes.
	1. Professionalism Curricular Learning Outcomes (CLOs) were developed and approved.
	2. Several new professionalism assessments were added to the curriculum, primarily in Longitudinal Group (Part 1) and to Advanced Management in Relationship Centered Care (AMRCC- Part 3)
	3. Professionalism is also significantly addressed through required patient panels and electives.
	4. Attention is being given to providing curricula for addressing vulnerable/underserved populations.
2. Data was shared showing the student ratings of professionalism in the learning environment is very strong. (4.68 on a scale of 1-5)
3. Future goals/plans include’
	1. Tracking and mapping of Part 1 OSCE content, patient panels, and selective’s professionalism content in Vitals
	2. Adding a didactic or small group ethics session to Part 2
	3. Integrating ethics/professionalism content into Advanced Management of Hospital-based Care (AMHBC- Part 3))
	4. Adding Race, Disparities and Ethics required session to Part 3
	5. Creating an effective means for professionalism remediation when needed
4. Dr. McDougle commented that efforts to educate students about vulnerable populations should include persons with disabilities and those with limited English proficiency.
5. Ms. Witcher asked which aspects of the curriculum do students typically need to remediate beyond task completion. Dr. Fernandes responded that it usually involves low score alerts on CPAs or occasionally student plagiarism.
6. Dr. Kopechek asked what is being done to recognize and address professionalism issues during Part 1 and is OSCE rating the way to address this. Dr. Fernandes replied that LG does an excellent job teaching professionalism in Part 1 and that integrating more professionalism assessment into OSCEs would be ideal.
7. Dr. McCallister commented that professionalism deficits is typically what triggers need for remediation in GME.
8. Dr. Curren commented that peer evaluations may be another useful assessment method. Dr. Fernandes said that peer evaluations in LG could be a way to do this.
9. Ms. Witcher commented that Longitudinal Practice may be another opportunity for assessing professionalism. Dr. Fernandes added that LP does have a professionalism question on its CPA.
10. Dr. Kopechek mentioned that Part 2 small group sessions are expected to be case-based and new ethics sessions should include discussion of cases.
11. Dr. Kopechek also elaborated that the Portfolio Program does require reflection on professionalism in two of its assignments but that these assignments are not necessarily assessed for professionalism content.
12. Dr. Fernandes asked if it was acceptable to introduce the new Part 3 TLM on Racism, Disparities and Ethics mid-year. Dr. McCallister advised that this TLM be discussed at the Part 3 APC meeting.

## Action Items

1. No additional actions were taken by the ECC.

# Item 4, Future Director of Competency ReportsPresenter: Jack Kopechek

## Discussion

1. Dr. Kopechek noted that ECC agendas have been very full, sometimes necessitating additional meetings. Eight Director Competency reports are delivered each year.
2. DOCs are already giving annual reports to MICRO (ECC subcommittee)
3. Dr. Kopechek proposed that two ECC members who are not on MICRO will attend or review the DOC MICRO reports and provide an executive summary of the competency reports during an ECC meeting.

## Action Items

## The ECC approved the proposed changes for annual DOC reporting.

# Item 5, LSI Internal Review ResponsePresenter: Dr. Jenn McCallister

## Discussion

1. Dr. McCallister reported on the outcome of a meeting of Academic Program Directors, the ECC chair and herself in which LSI Internal Review Recommendations were prioritized and assigned.
2. Each recommendation was reviewed along with a responsible delegate and a target date for completion.
	1. Accurate and complete mapping of assessments in Vitals (high priority)- APDS and DOCs- December 2020
	2. Investigate how faculty and students can best use CLOs (high priority)- APDs- March 2021
	3. Update Handbook to more accurately describe the role of the Academic Standing Committee (recently renamed Academic Review Process Committee) high priority- Drs. Grieco, McCallister and APDS- September 2020
	4. Create Vitals database for learning environment concerns (high priority)- Drs. Lynn, Christian and Beth Sabatino- December 2020
	5. Create process to centrally document that faculty/fellows/residents regularly review the evaluations of their teaching (moderate priority)- Dr. Tartaglia and Beth Sabatino- December 2020
	6. Create programmatic ways to implement faculty peer review (moderate priority)-Dr. Mahan and McCallister and OCS- April 2021
	7. Develop a plan to vertically integrate specific CLOs within Knowledge for Practice- (moderate priority)- Dr. Pierson and APDs- April 2021

## Action Items

1. Dr. McCallister will provide an update on progress on this plan in February 2021

# Item 6, LSI MICRO Report

**Presenter: Dr. Jenn McCallister**

## Discussion

1. Dr. McCallister reviewed discussions from the September 23 MICRO meeting
	1. Dr. Westman is updating the Faculty Education Handbook
	2. Approved USMLE Step 1 gateway dates for Primary Care Track students
	3. Approved flexibility for Dr. Alexander to move some Longitudinal Group sessions to remote delivery if facilitator illness or quarantines significantly impact faculty availability to teach on campus.(Physical exam sessions would continue to be delivered in person and faculty and student feedback would be monitored for concerns if remote teaching is resumed)

## Action Items

1. MICRO actions were approved by the ECC

The Ohio State University College of Medicine

**Executive Curriculum Committee**Meeting Minutes

Presiding Chair: Jack Kopechek, MD
Minutes Recorded by: Casey Leitwein
Quorum = 50% Voting Members
Date: 10/27/2020
Location: Zoom
Call to Order: 4:00 PM
Adjourned: 5:25 PM

# Member Attendance

| **Name** | **Role** | **Voting** | **Present** |
| --- | --- | --- | --- |
| Jack Kopechek | Chair, Faculty member | Y | Y |
| Melissa Quinn | Chair, Academic Review Board | Y | Y |
| Paige Spieth | Med Student Representative | Y | Y |
| Camila Curren | Academic Co-Program Director, LSI Part One | Y | N |
| Douglas Danforth | Academic Program Director, LSI Part One | Y | Y |
| Binay Eapen | Assistant Dean, Affiliated program | Y | N |
| Wendy Frankel | Chair, Basic Science Department | Y | Y |
| Ron Harter | Chair, Clinical Science Department | Y | Y |
| Kim Bjorklund | Faculty Member | Y | Y |
| Sorabh Khandelwal | Residency Program Director | Y | N |
| Nicholas Kman | Academic Program Director, LSI Part Three | Y | Y |
| Nanette Lacuesta | Assistant Dean, Affiliated program | Y | N |
| Allison Macerollo | Elected Faculty Member | Y | Y |
| Jennifer McCallister | Associate Dean for Medical Education | Y | Y |
| Leon McDougle | Academic Program Director, Associate Dean Diversity | Y | Y |
| Alexa Meara | Faculty Member | Y | Y |
| Charissa Newkirk | Med Student Representative | Y | Y |
| Elisa Bradley | Faculty Member | Y | Y |
| Bryce Ringwald | Med Student Representative | Y | Y |
| Jonathan Schaffir | Faculty Member | Y | Y |
| Kim Tartaglia | LCME Compliance Officer, Academic Program Director, Part Two | Y | Y |
| Kristina Witcher | Med Student Representative | Y | Y |
| Joanne Lynn | Associate Dean, Student Life | N | Y |
| Cynthia Leung | Evaluation & Assessment Director | N | Y |
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## Additional Attendees

| **Name** | **Role** | **Present** |
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## Agenda Items

| **#** | **Agenda Item**  |
| --- | --- |
| 1 | Approval of Meeting Minutes |
| 2 | ECC Dashboard and DOC Report Review Assignments |
| 3 | Graduate Questionnaire Results |
| 4 | Technical Standards for Admission |
| 5 | Equity and Anti-Racism Task Force Report |
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# Item 1, Approval of Minutes

## Discussion

1. Minutes of the September 22, 2020 meeting were reviewed by the ECC.

## Action Items

1. The minutes from the September 22, 2020 meeting were approved.

# Item 2, ECC Dashboard and DOC report review assignments Presenter: Dr. Kopechek

## Discussion

* 1. Dashboard access was reviewed.
	2. Two ECC members are to be assigned to each dashboard page. Each member should review their page between ECC meetings and report any concerns to the ECC Chair.
	3. Those who would like more training may contact Jeff Barbee in the Office of Curriculum and Scholarship. Jeff.Barbee@osumc.edu
	4. Directors of Competency will give their annual reports to MICRO. Two non-MICRO ECC members will also review the report and provide an executive summary of the report to the ECC later that month.

## Action Items

1. Assignments were made for reviewing the dashboard pages and for reviewing the DOC reports

# Item 3, Graduate Questionaire ResultsPresenter: Dr. Cynthia Leung

## Discussion

1. Dr. Leung presented selected data from the 2020 Graduation Questionnaire (GQ). Notable findings included:
	1. Response rate of 92%
	2. Overall satisfaction with the quality of medical education was excellent
	3. Integration of basic sciences and clinical science was very strong.
		1. Biochemistry was a notable exception
		2. Dr. Tartaglia asked when biochemistry is covered during Part 1
		3. Dr. Danforth replied that most biochemistry is taught during Foundations 1 and 2 and that students have commented that they felt unprepared for the biochemistry questions on Part 1
	4. Highly rated clerkships included Internal Medicine, Neurology and Pediatrics. OB-GYN was the lowest rated clerkship.
	5. Direct Observations were being performed consistently in Pediatrics, Family Medicine, Internal Medicine and Psychiatry but much less often in Surgery.
	6. Quality of feedback was rated highly in Family Medicine, Internal Medicine, Neurology, Pediatrics and Psychiatry but much lower in Surgery.
	7. Students rated confidence in their preparation for residency very highly.
	8. Student perception that our school’s diversity enhanced their training was strong.
	9. The broad range of student electives was highlighted.
	10. Faculty professionalism was generally rated highly.
	11. Student satisfaction with faculty mentoring was high. Satisfaction with academic counseling and tutoring was less.
	12. Career planning services and information about specialties was rated highly. Information about alternate medical careers was rated low.
	13. The full GQ report is available on the ECC Dashboard.
2. Dr. Schaffir asked about the effects of the Covid shut down on ratings. Dr. Leung responded that Emergency Medicine ratings may have been affected by this during March and April.
3. Dr. Schaffir commented that students may have not considered their mid- ring feedback to be mid-rotation feedback. Dr. Tartaglia responded that some specialties obtain mid-rotation feedback using a form whereas mid- ring feedback is usually only verbal. Ms. Witcher and Ms. Newkirk confirmed that the lack of a feedback form on UPRSN may cause students to not recognize when they are receiving feedback. Dr. Bjorkland pointed out that poor quality of feedback seems to be an ongoing problem. Dr. Tartaglia commented that students do get feedback on all their rotations but that the quality of feedback may not be as good on Surgery rotations. Ms. Witcher asked if student feedback is discussed during the faculty promotion process. Dr. McDougle responded that student feedback is included in the promotion process. Dr. Leung pointed out that the impact of this varies by department. Dr. Tartaglia noted that it should also be included in faculty annual reviews and that a recent Vitals enhancement automatically sends out a teaching report to all clinical teachers every six months that includes student feedback. A next step will be to create a report that shows how many teachers are actually opening and reviewing the report.
4. Dr. McCallister commented that the GQ report will be going back to the APCs to study the results in more detail and bring back their detailed reports to the ECC.

## Action Items

1. Further study of the GQ results was assigned to the academic program committees with recommendations for improving the effectiveness of biochemistry education in Part 1 and for improving the quality of feedback to students on the Surgery rotations in Part 2.

# Item 4, Technical Standards for Admission Presenter: Dr. McCallister

## Discussion

1. Members of the Technical Standards Task Force were recognized.
2. The charge of the Task Force was to update the existing technical standards for admission using a functional rather than organic approach to promote inclusivity
3. This document will be reviewed and attested to by current students as well as incoming students. The full document is available in Box.
4. Ms. Witcher asked if residency programs are making similar changes to their technical standards. Dr. McCallister responded that residency programs are beginning to adopt similar standards in response to compelling literature and legal actions supporting this approach.

## Action Items

1. The ECC voted to approve the updated technical standards and appreciated the task’s forces work on this document

# Item 5, Equity and Anti-Racism Task Force ReportPresenter: Dr. McCallister

## Discussion

1. Members of the Task Force were recognized. Dr. Demicha Rankin was the other co-chair for this task force.
2. The charge was to analyze and integrate recommendations from students, staff and faculty in order to develop and anti-racism action plan with short and long term goals.
3. This work has been reported and supported by the Vice-Dean Clinchot, Dean Bradford and Chancellor Paz.
4. Three key general areas for action were identified with accompanying goals:
	1. Student support
		1. Decrease URiM student attrition and need for remediation
		2. Evaluate, strengthen and expand pre-entry programs
		3. Explore potential for academic strengthening for students with needs to occur during the summer between M1 and M2
		4. Increase resources and support for students on LOA
		5. Evaluate availability of pre-emptive PEER tutor support to URiM students and expand if possible
		6. Establish an early URiM physician mentorship program (this has started this year)
		7. Expand mental health support services for URiM students
	2. Curriculum, evaluation and assessment
		1. Develop structured approach to evaluate existing curricular materials to identify and eliminate bias and race based teaching and teach structural causes of health disparities.
		2. Support faculty in developing and maintaining skills to eliminate bias in teaching and assessment.
		3. Complete curriculum review and mapping process to identify existing gaps to ensure principles of diversity, equity, inclusion and anti-racism guide curriculum development
		4. Create curriculum working group charged with revising and implementing a longitudinal curriculum to support diversity through education
		5. Increase diversity in patient panels and standardized patient programs
		6. Increase diversity of educators in the LSI curriculum through ongoing recruitment efforts
		7. Evaluate student concerns related to equity in education and evaluation in the learning environment
		8. Improve the process for reporting bias in the learning environment with a focus on curricular content
		9. Establish a standing meeting between student leaders from affinity groups, curriculum leaders, other medical school leaders, peers and staff for the Office of Diversity and Inclusion (ODI) to evaluate progress, identify opportunities, and maintain open dialogue.
	3. Admissions and representation
		1. Expand on-going recruitment efforts to increase the admissions of UriM students
		2. Identify students who may benefit from longitudinal academic support early in the curriculum to optimize availability of support services and resources upon matriculation
		3. Evaluate and expand the use of existing pre-entry programs to better prepare students for success prior to matriculation.
		4. Examine the current role of ODI and create vision for expanded role in the College of Medicine community with emphasis on student support and education
		5. Expand staffing for the Office of Diversity and Inclusion
		6. Add Assistant Dean of Diversity and Inclusion
	4. An Implementation Oversight Committee chaired by Dr. Clinchot with ensure progress on this work
	5. A town hall meeting for the students will be scheduled.
	6. Dr. Tartaglia asked about the process of how this information will be disseminated. Dr. McCallister plans to talk with the students first, then spread the information to the academic programs. Carla Granger is being consulted for budgeting needs.

## Action Items

1. The ECC approved the goals provided by the task force and asked that a progress report be provided to the ECC in 6 months.

# Item 6, LSI MICRO Report

**Presenter: McCallister**

## Discussion

1. There was no MICRO meeting in October

The Ohio State University College of Medicine

**Executive Curriculum Committee**Meeting Minutes

Presiding Chair: Jack Kopechek
Minutes Recorded by: Casey Leitwein
Quorum = 50% Voting Members
Date: 11/24/2020
Location: Zoom
Call to Order: 4:00 PM
Adjourned: 5:57 PM

# Member Attendance

| **Name** | **Role** | **Voting** | **Present** |
| --- | --- | --- | --- |
| Jack Kopechek | Chair, Faculty member | Y | Y |
| Melissa Quinn | Chair, Academic Review Board | Y | Y |
| Paige Spieth | Med Student Representative | Y | Y |
| Camila Curren | Academic Co-Program Director, LSI Part One | Y | Y |
| Douglas Danforth | Academic Program Director, LSI Part One | Y | Y |
| Binay Eapen | Assistant Dean, Affiliated program | Y | N |
| Wendy Frankel | Chair, Basic Science Department | Y | Y |
| Ron Harter | Chair, Clinical Science Department | Y | N |
| Kim Bjorklund | Faculty Member | Y | N |
| Sorabh Khandelwal | Residency Program Director | Y | Y |
| Nicholas Kman | Academic Program Director, LSI Part Three | Y | Y |
| Nanette Lacuesta | Assistant Dean, Affiliated program | Y | Y |
| Allison Macerollo | Elected Faculty Member | Y | Y |
| Jennifer McCallister | Associate Dean for Medical Education | Y | Y |
| Leon McDougle | Academic Program Director, Associate Dean Diversity | Y | Y |
| Alexa Meara | Faculty Member | Y | N |
| Charissa Newkirk | Med Student Representative | Y | N |
| Elisa Bradley | Faculty Member | Y | Y |
| Bryce Ringwald | Med Student Representative | Y | Y |
| Jonathan Schaffir | Faculty Member | Y | Y |
| Kim Tartaglia | LCME Compliance Officer, Academic Program Director, Part Two | Y | Y |
| Kristina Witcher | Med Student Representative | Y | Y |
| Joanne Lynn | Associate Dean, Student Life | N | Y |
| Alex Grieco | ASC Chair | N | Y |
| Cynthia Leung | Evaluation & Assessment Director | N | Y |
| Laura Volk | Part 2/3 Program Manager | N | Y |
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## Additional Attendees

| **Name** | **Role** | **Present** |
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## Agenda Items

| **#** | **Agenda Item**  |
| --- | --- |
| 1 | Approval of meeting minutes |
| 2 | Step 2 CK/CS Results |
| 3 | Graduate/Program Director Survey |
| 4 | Micro Report |
| 5 | Knowledge for Practice Competency Survey |
| 6 |  |
| 7 |  |
| 8 |  |

# Item 1, Approval of Minutes

## Discussion

1. Minutes of the October 27, 2020 meeting were reviewed by the ECC.

## Action Items

1. The minutes from the October 27, 2020 meeting were approved.

# Item 2, USMLE Step 2 CK/CS and Student Preparation Evaluation ReportsPresenter: Dr. Leung

## Discussion

1. Step 2 CK performance continues to be above the national average
2. Pass rates for Step 2 CS have fallen to 93% the past 2 years, but the 2020 data included mostly students from the class or 2020 who took the exam later in their cycle. Only about 20 students from the class of 2021 were included due to testing site closures secondary to Covid-19.
3. Response rates were down for the Student Preparation Evaluation, about 60% for residency program director and 40 % for former students.
4. Overall, student and residency directors indicated that OSUCOM students were well prepared for residency.
5. Skills that appeared to have scored significantly lower that previous years included:
	1. Clinical Motor Skills (EPA 12, procedures)
	2. Practice of Preventative Care
	3. Management of emergent patients (EPA 10)
	4. Identifying System Failures, Culture of Safety and Improvement (EPA 13)
	5. Obtaining Informed Consent (Program Directors only)
6. Dr. Kman brought attention to the small scale of the drop for EPA 10 and suggested that it may not be significant. He also pointed out that the decreased response rate may have introduced a selection bias to this year’s data. The lower response rate could be related to Covid changes. There does seem to be some real concerns with student readiness for procedural skills.
7. Dr. McCallister pointed out that pharmacologic therapeutics was another area identified as a weakness by the report. This will be addressed at the LSI retreat in February.
8. Dr. Kman is working with Bryce Ringwald to develop a Covid related teaching case that highlights pharmacologic therapeutics.

## Action Items

1. The ECC delegated further work on the five areas of concern listed above to Dr. McCallister for discussion at the LSI retreat in February 2021.

# Item 3, MICRO Report and Planning for Spring SemesterPresenter: Dr. McCallister

## Discussion

1. On 11/12/20, MICRO reviewed the Director of Competency report for Knowledge for Practice and the technical standards for Admission, Retention and Graduation. They also approved minor revisions for Part One Patient Care CLOs and the USMLE calendar for MSTP students which aligned their policies with those of the Traditional and Primary Care Tracks.
2. A proposal was reviewed from Longitudinal Practice to adjust to past and present Covid restrictions by moving to a competency-based evaluation of student skills through direct observation rather than a time-based system. MICRO approved the policy but required the LP program to determine the minimum number of sessions that students would need to attain competency and the Part 1 program would need to provide supplemental curriculum prior to Part 2 entry for students with identified gaps in skills. This plan will be brought back to ECC once it is developed.
3. To align with university calendar changes due to the recent increase in Covid, the COM has moved to remote instruction for the remainder of Fall semester and for the first two weeks of Spring semester. Part 2 and Part 3 students doing clinical rotations are continuing these unchanged as long as there is sufficient personal protective equipment and an adequate patient mix for learning. Dr. McCallister proposed that the ECC consider how far into Spring semester we should plan for virtual instruction in Part 1.
4. Dr. McDougle asked about what kinds of PPE students are using on rotations and suggested consideration of N-95 masks and face shields if student safety becomes a limiting factor for student participation in clinical care. Dr. McCallister responded that students are following hospital employee guidelines for use of PPE.
5. Dr. Schaffir asked where students will be prioritized in regards to receiving Covid vaccine. Dr. Kman responded that students are not being prioritized as front line healthcare workers since they are not hospital employees and not going into rooms of known Covid patients. Dr.McCallister suggested that we discuss the timing of initiating Covid patient care by medical students when we meet in January.
6. Ms. Spieth advocated for providing the Med2 curriculum virtually through Step 1 and for Med3 and Med4 students receiving higher priority for the Covid vaccine due to their risk of exposure from being involved with patient care. Ms. Witcher concurred. Dr. Kman shared that there are 10,000 OSUMC healthcare workers who will be prioritized for the vaccine. He agreed that medical students should be prioritized however. It is unknown what the time gap will be between the different phases of distribution.
7. Dr. Curren brought up concerns for the gap in clinical skills that exclusive virtual learning will likely cause.
8. Dr. Quinn explained the toll that frequent changes in delivery of curriculum has on faculty and students. To have one clear plan would help relieve stress compared with having to plan for several different scenarios. Dr. Danforth commented on the difficulties of making late decisions and communicating these to hundreds of students. He said that we can definitely provide the curriculum virtually with the exception of clinical skills. Dr. McCallister suggested that students will get the best learning experiences when faculty can plan proactively rather than reactively.
9. Dr. Tartaglia agreed that we should plan virtual learning for a specific time. She is also concerned about clinical skills but suggested that we look at ways to provide more intensified clinical skills training after Med 2 students finish Step 1. Dr. Danforth advocated for creativity in meeting student learning needs possibly by utilizing an altered LG curriculum in Endo/Repro to better address Med 1 student deficits in clinical learning.
10. Dr. McCallister requested input from Med2 students and Dr. Danforth requested input from Cardio/Pulmonary block leaders. Dr. Kopechek offered to schedule a special ECC meeting for December if needed for further discussion. Dr.Danforth suggested that the ECC make the decision about going virtual but then consult the Cardiopulmonary block leaders on how that can best be accomplished. Dr. Tartaglia said we can’t wait to mid-December to make a decision but could we decide to do the first half of the block virtually and then decide about the second half later. Dr. Danforth said this would cause a great deal of difficulty due to the integrated nature of the block learning activities.
11. Dr. McCallister proposed virtual learning for Med 2 students through the Professional Development week with input from Med 2 students and faculty and planning for a clinical skills boot camp prior to starting Part 2 rotations. Dr. Grieco affirmed that Professional Development Week can be done virtually and that Dr. Gupta has a prototype clinical skills boot camp that has been used for students who have been away from the curriculum for a while.
12. Ms. Witcher suggested that students may push back on needing to come back to campus for clinical skills sessions prior to Step 1. She also asked if it could be incorporated into Part 2 Ground school. Dr. Curren remarked that the training would require several days. Dr. Tartaglia suggested that it should also involve an assessment. Ms. Spieth suggested that some time off prior to starting Part 2 is important for student well-being. Dr. McCallister suggested that Part 1 with Part 2 input discuss how best to provide clinical skills instruction over the next month and bring a proposal back to ECC. Dr. Tartaglia asked about moving Step 1 study prep and exams moved a week early. Dr. McCallister said students are planning Step 1 dates now and testing center availability issues may complicate this as well.

Action Items

1. Plan January discussion/reevaluation of policy regarding student participation in care of Covid positive patients.
2. Approved changing to virtual delivery of curriculum through end of Cardiopulmonary block for Med 1 students. We will reevaluate plans for the Endo/Repro block January.
3. Approved changing to virtual delivery of curriculum through Host Defense and Professional Development week for Med 2 students. Dr. McCallister and Part 1 leadership with discuss how students will get Clinical Skills training and report back to ECC within the next two months.

# Item 4, Summary of Knowledge for Practice Competency Report

# Presenter: Drs. Schaffir and Quinn

1. Knowledge for Practice has the most CLOs of any competency. A committee is working to streamline the process of identifying and linking these competencies to TLMS and assessments.
2. Student “Not Mets” have increased for Knowledge for Practice in Part 1, but are low for Parts 2 and 3 despite an increase in internal exam scores
3. Integrations of basic and clinical sciences is strong
4. Medical Program Objective 2.6 involves student research experiences. Dr. Kopechek pointed out that while many students participate in research, it is not currently required in the curriculum. Dr. Tartaglia pointed out that many student research experiences are paid positions that are outside of the curriculum.

Action Items

* 1. Knowledge for Practice Director of Competency (Dr. Pierson) and his committee will complete linking of CLOs with TLM and assessment items and fill gaps in content and assessment through work with the block leaders and assessment item committee.
	2. Voted to remove Medical Program Objective 2.6 since research is not a curriculum requirement for medical students
	3. Will forward Director of Competency request to include a speaker focused on Knowledge for Practice at a future education symposium.

McCallister said students are planning Step 1 dates now and testing.