

**Med 3-4 Academic Program Committee  
Meeting Minutes 3/18/2013**

Committee Members Present: Aaron Bernard, Dan Cohen, Holly Cronau, Pat Ecklar, Chad Hoyle, Sorabh Khandelwal, Nick Kman, Nanette Lacuesta, Mary McIlroy, Wanjiku Musindi, Troy Schaffernocker, Kim Tartaglia

Coordinators / Alternates/ Guests: Dawn Watson  
Laura Volk - recording.

**Start Time: 4:05 p.m.**

AGENDA	DISCUSSIONS and CONCLUSIONS	ACTIONS / FOLLOW-UP
<b>I. Opening / Announcements</b>		
<b>A.</b> Approval of Minutes	Minutes from February 18, 2013 meeting reviewed	Minutes Approved
<b>B.</b> Announcements	1. Committee Attendance: Dr. McIlroy commented on the importance of oversight and review of the Med 3-4 program by the program committee, and appreciation for consistent attendance and valuable contributions of committee members, including many departments and affiliated sites. 2. 2013 Match: It was reported students overall were pleased with the match results. A small number of students did not match and are still actively pursuing positions through the SOAP. Brief discussion ensued about the limited number of positions remaining and the issues surrounding this problem.	
<b>II Old Business</b>		
<b>A.</b> Evaluation Questions about Duty Hour Compliance	Dr. Tartaglia reviewed the duty hour questions we have been using on clerkship evaluations and the questions posted on the ACGME site, and proposed revised clerkship evaluation questions to better assess our duty hour policies and follow the ACGME verbiage. The proposed questions were reviewed and there was discussion regarding making sure we word the questions so the students interpret them accurately. It was agreed a blank should be added to allow the student to identify the service if they state they have exceeded the 80 hours so the committee and department can confirm and address any perceived violations.	Duty Hour Questions approved with the addition of providing a space to identify the assignment in the event of a violation. Laura Volk will revise the questions in the clerkship evaluation on medSTAR and work with the coordinators to implement the change to be effective with the March rotations.

<b>B.</b>	Review of preparations for large class in Med3	<p>The Proposed Plans for the 2013-2014 Med 3 Class Size documents were distributed for review and reporting of progress and preparation for the incoming class.</p> <ol style="list-style-type: none"> <li>1. Dr. Cronau reported Ambulatory numbers are on track. Discussion ensued regarding other possible adjustments, including other learning activities (eg, small group discussions) and potentially finding additional sites.</li> <li>2. Dr. Musindi reported that on OB/GYN the additional students will be absorbed by OSU and that additional opportunities have been created for the students including the ambulatory experience. Additional assistance will be needed with oral exams.</li> <li>3. Dr. Hoyle reported that Neuroscience is on track with the availability of more clinical services at NCH &amp; GMC.</li> <li>4. Dr. McIlroy reported that Pediatrics has identified appropriate inpatient services and small group assignments, and is still working on the outpatient portion.</li> </ol>	<ol style="list-style-type: none"> <li>1. The remainder of the clerkship updates will be reviewed at the next meeting.</li> <li>2. Dr. Lacuesta will work with her alumni to identify faculty for additional sites.</li> </ol>
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<b>III. Standing Reports</b>		
<b>A.</b>	Duty Hour Report	See II. A.
<b>B.</b>	PxDx Report	Will be reviewed next month.
<b>C.</b>	Grades Report	<p>Discussed issue of grades for students in the Ob-gyn/Surgery combined pilot showing up as late when they are not because of the MedSTAR's reporting of due dates. It's unclear if we can alter how they show on the report even though we know they are not late.</p> <p>Dr. McIlroy will discuss further with Dr. Clinchot and with MedSTAR.</p>
<b>IV.</b>	<b>Student Review Report</b>	<p>Dr. Cohen reported that he presented the 2011-2012 Student Review Subcommittee annual report to ECC. Issues discussed included making sure the student grades are located in one place (score tab vs assessment tab in medSTAR), review and revise metrics used to insure consistency across clerkships, develop a better method to identify students who are at risk of failing to progress.</p>
<b>V.</b>	<b>Student Rep Reports</b>	No Report

**Med 3-4 Academic Program Committee  
Meeting Minutes 4/15/2013**

Committee Members Present: Chad Hoyle, Nanette Lacuesta, Alan Letson, Dan Cohen, Beth Liston, Cynthia Ledford, Sorabh Khandewal, Holly Cronau, Kim Tartaglia, Wanjiku Musindi, Claudia Kirsch, Kristin Koenig, Nick Kman

Coordinators / Alternate Guests: Dawn Watson, Lynnsay Sinclair

**Start Time: 4:10 p.m.**

AGENDA	DISCUSSIONS and CONCLUSIONS	ACTIONS / FOLLOW-UP
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**I. Opening / Announcements**

<b>A. Approval of Minutes</b>	Minutes from March 18, 2013 meeting reviewed.	Approved
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<b>B. Announcements</b>	<ol style="list-style-type: none"> <li>1. New Modules for Residents and Fellows on Feedback and Teaching; announced to programs in early April and all residents and fellows will need to complete by June 30. Nanette stated that she would review the modules to make sure they align with what is currently being taught to residents at Ohio Health (they already have a process with mandatory monthly meeting attendance (videotaped) in which these topics are discussed and the addition of FD4ME modules for their residents does not seem to be the best way to accomplish this teaching)</li> <li>2. LCME New Standard 19-A approved, effective July 1, 2013, relates to teaching students about working in interprofessional teams. Discussion ensued that we do this in several places and it's important to document where this is currently taught.</li> <li>3. Med4 grades are due Wednesday, April 17.</li> <li>4. Hooding Ceremony is May 2. Participating faculty line up at 7pm with the ceremony starting at 8pm.</li> </ol>	
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**II Old Business**

<b>A. Review of preparations for large class in Med3</b>	<p>Updates from Internal Medicine, Surgery, and Psychiatry.</p> <p>Lynnsay Sinclair updated that surgery has room for 48-50 Med 3 students/block when accounting for general surgery and specialty spaces. They are working with Mt.Carmel to develop specialty surgical offerings for the pilot which may open up more spots.</p> <p>Internal Medicine (C.Ledford) updated on IM; no students are going to Mt.Carmel or Grant but the IM depts at OSU (incl OSU-E) and RMH are sufficiently large to absorb the extra students. Capacity has increased at RMH and OSU East. Specific details on any service changes will depend on changes made within the residency which are not yet finalized. Students are not currently doing night-float and there are no plans to add that back as students get full H/P through their consult experiences.</p> <p>Julie Niedermier updated (via email) on psychiatry that they are in good shape to absorb the large class size through the additional hiring of faculty (hired 2012); this is as stated in her previous report without changes.</p>	
<b>II. New Business</b>		

<b>A. EM/IM elective</b>	<p>Nick Kman introduced a proposal for an EM/IM elective which is based on the new EM/IM residency. The hope is to take 1-2 interested students per year, starting Sept 2013. Will need to screen applicants to determine their interest in EM/IM as a specialty. Discussion ensued with suggestions to look at where current EM/IM trained doctors are practicing (CDU, ICU, etc) and use opportunity to create an experience that is different from DOC1/DOC4 (so that it could be opened up to our students) as well as provide some mentoring during the elective. Nick will take back these suggestions to his working group to discuss and come up with a written proposal.</p>	<p>Nick Kman to bring written proposal to next Med 3-4 meeting with details of elective for further approval.</p>
<b>Ambulatory Care B. Clerkship</b>	<p>Holly Cronau discussed the changes in family medicine that have resulted in private physicians having decreased capacity for taking students. The Ambulatory Clerkship has recently developed a "blended" site at Lewis Center (12 student-months per year) that has family medicine, internal medicine and Med-Peds. Because of the increased needs of the large class size, she has also developed a relationship assigning students to IM primary care at Marth Morehouse during the Med3 year (18 student-months). Discussion ensued about the focus of the ambulatory care clerkship and many expressed opinions that it's important for students to have a family medicine experience. However, many believed that the overriding principle was to have ideal educational experiences in a primary care setting. Most students, including all students who want family medicine, will still be able to get that assignment and the suggestion was made to track and report to the group how many students might complete medical school without any family medicine experience.</p>	<p>Holly Cronau will track the results for reporting to Med 3-4 APC.</p>
<b>C. Supervision of Students Policy</b>	<p>Mary McIlroy to provide a draft policy at next meeting (discussion deferred until next meeting)</p>	

**III. Standing Reports**

<b>A.</b> Duty Hour Report	Kim Tartaglia provided update for Jan-Feb clerkship which showed a few duty hour violations occurring in the global health elective and a couple occurring in pediatrics. It was noted that this report does NOT reflect the new duty hours questions but those should be already added to all clerkship evaluations for the current clerkship. An announcement was made to review faculty and resident evaluations (of students) and remove any duty hour questions from those as they are unlikely to be accurate.	Kim to email out reports for individual clerkship review. Follow-up of violations by Jessica Small in Global Health and Mary McIlroy for pediatrics, to identify where and why there were violations and plans to address them.
<b>B.</b> PxDx Report	Kim Tartaglia provided report for Jan-Feb which showed very few omissions for PxDx but clerkships will need to review and notify us which students (if any) withdrew from the clerkship since the report does not account for withdrawals.	Kim to email out reports for individual clerkship review.
<b>C.</b> Grades Report	Kim Tartaglia provided update for Jan-Feb clerkship which showed no late grades	Kim to email out reports for individual clerkship review.
<b>IV. Student Review Report</b>	Dan Cohen reported that the theme in student review has been accumulation of exam unsatisfactories. The committee is undergoing a process improvement review but no specific actions to report at this time.	
<b>V. Student Rep Reports</b>	No concerns to report. Students were appreciative of the committee listening to their feedback re: the ambulatory care clerkship preferencing and placement.	

**Med 3-4 Academic Program Committee  
Meeting Minutes 4/15/2013**

Committee Members Present: Chad Hoyle, Nanette Lacuesta, Alan Letson, Dan Cohen, Beth Liston, Cynthia Ledford, Sorabh Khandewal, Holly Cronau, Kim Tartaglia, Wanjiku Musindi, Claudia Kirsch, Kristin Koenig, Nick Kman

Coordinators / Alternate Guests: Dawn Watson, Lynnsay Sinclair

**Start Time: 4:10 p.m.**

AGENDA	DISCUSSIONS and CONCLUSIONS	ACTIONS / FOLLOW-UP
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**I. Opening / Announcements**

<b>A. Approval of Minutes</b>	Minutes from March 18, 2013 meeting reviewed.	Approved
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<b>B. Announcements</b>	<ol style="list-style-type: none"> <li>1. New Modules for Residents and Fellows on Feedback and Teaching; announced to programs in early April and all residents and fellows will need to complete by June 30. Nanette stated that she would review the modules to make sure they align with what is currently being taught to residents at Ohio Health (they already have a process with mandatory monthly meeting attendance (videotaped) in which these topics are discussed and the addition of FD4ME modules for their residents does not seem to be the best way to accomplish this teaching)</li> <li>2. LCME New Standard 19-A approved, effective July 1, 2013, relates to teaching students about working in interprofessional teams. Discussion ensued that we do this in several places and it's important to document where this is currently taught.</li> <li>3. Med4 grades are due Wednesday, April 17.</li> <li>4. Hooding Ceremony is May 2. Participating faculty line up at 7pm with the ceremony starting at 8pm.</li> </ol>	
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**II Old Business**

<b>A. Review of preparations for large class in Med3</b>	<p>Updates from Internal Medicine, Surgery, and Psychiatry.</p> <p>Lynnsay Sinclair updated that surgery has room for 48-50 Med 3 students/block when accounting for general surgery and specialty spaces. They are working with Mt.Carmel to develop specialty surgical offerings for the pilot which may open up more spots.</p> <p>Internal Medicine (C.Ledford) updated on IM; no students are going to Mt.Carmel or Grant but the IM depts at OSU (incl OSU-E) and RMH are sufficiently large to absorb the extra students. Capacity has increased at RMH and OSU East. Specific details on any service changes will depend on changes made within the residency which are not yet finalized. Students are not currently doing night-float and there are no plans to add that back as students get full H/P through their consult experiences.</p> <p>Julie Niedermier updated (via email) on psychiatry that they are in good shape to absorb the large class size through the additional hiring of faculty (hired 2012); this is as stated in her previous report without changes.</p>	
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<b>II. New Business</b>		
<b>A. EM/IM elective</b>	Nick Kman introduced a proposal for an EM/IM elective which is based on the new EM/IM residency. The hope is to take 1-2 interested students per year, starting Sept 2013. Will need to screen applicants to determine their interest in EM/IM as a specialty. Discussion ensued with suggestions to look at where current EM/IM trained doctors are practicing (CDU, ICU, etc) and use opportunity to create an experience that is different from DOC1/DOC4 (so that it could be opened up to our students) as well as provide some mentoring during the elective. Nick will take back these suggestions to his working group to discuss and come up with a written proposal.	Nick Kman to bring written proposal to next Med 3-4 meeting with details of elective for further approval.
<b>Ambulatory Care B. Clerkship</b>	Holly Cronau discussed the changes in family medicine that have resulted in private physicians having decreased capacity for taking students. The Ambulatory Clerkship has recently developed a "blended" site at Lewis Center (12 student-months per year) that has family medicine, internal medicine and Med-Peds. Because of the increased needs of the large class size, she has also developed a relationship assigning students to IM primary care at Marth Morehouse during the Med3 year (18 student-months). Discussion ensued about the focus of the ambulatory care clerkship and many expressed opinions that it's important for students to have a family medicine experience. However, many believed that the overriding principle was to have ideal educational experiences in a primary care setting. Most students, including all students who want family medicine, will still be able to get that assignment and the suggestion was made to track and report to the group how many students might complete medical school without any family medicine experience.	Holly Cronau will track the results for reporting to Med 3-4 APC.
<b>C. Supervision of Students Policy</b>	Mary McIlroy to provide a draft policy at next meeting (discussion deferred until next meeting)	
<b>III. Standing Reports</b>		
<b>A. Duty Hour Report</b>	Kim Tartaglia provided update for Jan-Feb clerkship which showed a few duty hour violations occurring in the global health elective and a couple occurring in pediatrics. It was noted that this report does NOT reflect the new duty hours questions but those should be already added to all clerkship evaluations for the current clerkship. An announcement was made to review faculty and resident evaluations (of students) and remove any duty hour questions from those as they are unlikely to be accurate.	Kim to email out reports for individual clerkship review. Follow-up of violations by Jessica Small in Global Health and Mary McIlroy for pediatrics, to identify where and why there were violations and plans to address them.
<b>B. PxDx Report</b>	Kim Tartaglia provided report for Jan-Feb which showed very few omissions for PxDx but clerkships will need to review and notify us which students (if any) withdrew from the clerkship since the report does not account for withdrawals.	Kim to email out reports for individual clerkship review.
<b>C. Grades Report</b>	Kim Tartaglia provided update for Jan-Feb clerkship which showed no late grades	Kim to email out reports for individual clerkship review.
<b>IV. Student Review Report</b>	Dan Cohen reported that the theme in student review has been accumulation of exam unsatisfactories. The committee is undergoing a process improvement review but no specific actions to report at this time.	
<b>V. Student Rep Reports</b>	No concerns to report. Students were appreciative of the committee listening to their feedback re: the ambulatory care clerkship preferencing and placement.	

**Med 3-4 Academic Program Committee  
Meeting Minutes 4/21/2014**

Committee Members Present: Holly Cronau, Pat Ecklar, Mike Ezzie, Alex Grieco, Chad Hoyle, Sorabh Khandelwal, Claudia Kirsch, Nick Kman, Cynthia Ledford, Cynthia Leung, Mary McIlroy, Troy Schaffernocker, Kim Tartaglia, Jillian Chong, MS2, Sanjay Mohan, MS1, Brittany Nowark, MS3.  
Laura Volk - recording

Coordinators / Alternate Guests: Dawn Watson

**Start Time: 4:05 p.m.**

AGENDA	DISCUSSIONS and CONCLUSIONS	ACTIONS / FOLLOW-UP
<b>I. Opening / Announcements</b>		
A. Approval of Minutes	Minutes from the March 17, 2014 meeting were reviewed and a motion was made and seconded to approve.	March 17, 2014 minutes approved.
B. Announcements	1. L. Volk provided an update on the Med 4 scheduling process. Competitive scheduling is now complete and the add/drop period will open on Sunday, April 27th. We are also working to assign missing DOCs. 2. M. McIlroy reviewed the students on brown status and identified those that will need to stay at OSU.	
<b>II Old Business</b>		
A. LCME	M. McIlroy reported the LCME site visit went very well. The site surveyors gave a draft summary review on departure, with no major Med 3-4 issues identified. Ongoing monitoring of Ob/Gyn and Surgery clerkships was identified as required. The faculty are reminded to stay current and consistently review and maintain the quality measures going forward.	
B. Clinical Curriculum Survey Results	C. Ledford presented the data and led the discussion of the Clinical Curriculum Survey results from this past November, submitted by the 2014 graduating class. Overall, the survey was positive. Issues identified as concerns were student ratings of sufficient time with attendings and of opportunities to evaluate treatment plan costs, which continue from the prior two years. The data showed good improvement in the Ob/gyn clerkship ratings.	L. Volk will send the PowerPoint presentation to the committee.
<b>III New Business</b>		

A.	CAPS 3	S. Khandelwal discussed the Med 3 and 4 CAPS sessions for this year. The students meet with their Med 2 CAPS facilitator to review their progress in Med 3, reflect on their performance, and create learning goals. In Med 4 they submit a reflection reviewing their goals and progress toward those goals. This year, scheduling the preceptors' time is challenging as they are not teaching CAPS in the LSI curriculum (although many are teaching longitudinal group), but have agreed to make time for meeting with the students. The committee discussed proposed meeting dates and re-engaging facilitators.	Dr. Khandelwal and Dr. Post will finalized plans with the preceptors and notify clerkships and students.
<b>III. Standing Reports</b>			
A.	Duty Hour Report	Report next month.	
B.	PxDx Report	All PxDx completed acceptably for January through April rotations except for 1 in DOC4 and what are assumed to be the pilot students for the UPSMN pilot.	L. Volk will verify the pilot students.
C.	Grades Report	Report next month.	
D.	Safety on Service	A. Grieco reviewed the survey responses which identified that most departments use the SECI questions and positive responses are always investigated by the Clerkship Director. The next steps will be to determine if all rotations should use the SECI questions (required and elective), the timing of the evaluation, and the wording of the SECI questions.	
<b>IV.</b>	<b>Student Review Report</b>	One student with multiple SRC referrals will be referred back to ABRC. EU's continue to be the trend.	
<b>V.</b>	<b>Student Rep Reports</b>	The discussion focused on challenges with scheduling Med 4 courses.	
<b>VI</b>	<b>Miscellaneous</b>		
		<b>Meeting adjourned at 6:00 p.m.</b>	

**Med 3-4 Academic Program Committee  
Meeting Minutes 5/20/2013**

Committee Members Present: Dan Cohen, Holly Cronau, Pat Ecklar, Alan Harzman, Sorabh Khandelwal, Claudia Kirsch, Nick K Mary McIlroy, Troy Schaffernocker, Rose Shim, Kim Tartaglia, Michael Ezzie, Kathleen Strafford

Coordinators / Alternate Guests: Dawn Watson, Kristin Koenig  
Laura Volk - recording

**Start Time: 4:10 p.m.**

<b>AGENDA</b>	<b>DISCUSSIONS and CONCLUSIONS</b>
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**I. Opening / Announcements**

<b>A. Approval of Minutes</b>	Minutes from April 15, 2013 meeting were reviewed.
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<b>B. Announcements</b>	
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**II Old Business**

<b>A. ED 25 and 25A Standards - Student Supervision</b>	The committee reviewed the details of the standards and the policy in the Medical Education Teaching handbook, posted on the COM Education Portal, which addresses Faculty Supervision of Medical Students. The policy is not detailed regarding interactions with nonfaculty teachers. The discussion centered around defining adequate oversight by faculty as well as the role of non-faculty teachers. In addition to distributing the core and course objectives, clerkships should send the supervision policy and make sure faculty review the Teaching handbook. There was further discussion regarding the students' assessment of faculty supervision and how we ask the question and gather the data.
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**II. New Business**

<b>A. Associate Clerkship Directors/APC meetings</b>	Discussion focused on attendance of the associate clerkship directors at the APC meetings and establishing an attendance policy. Concerns included making the size of the APC unwieldy and taking away from the other time commitments of the associate CDs. The committee agreed the associate <b>director</b> could attend when the clerkship director is unable to. It was suggested to offer a remote option so those off campus can participate.
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<b>B. Med 3 CAPS FOSCE &amp; Med 4 OSCE</b>	<p>Dr. Khandelwal discussed the current structure of the Med 3 OSCEs which include the CAPS facilitators for the interactions with the students. Because of the end of the CAPS program (as LSI year 2 starts), there are no Med 2 CAPS preceptors with assigned responsibility for these sessions with students. The committee discussed looking for alternatives for the April Med 3 FOSCE; it was noted the Direct Observation of Competence exercise, repeated in each clerkship, does ensure the Med 3 students are observed and given feedback on the H&amp;P and communication skills. Dr. Khandelwal suggested the Med 4 OSCE components be placed in appropriate venues for assessment during Med 4, such as assessing ECG interpretation in DOC 1, imaging in DOC 4, EBM in DOC 2, and appropriate lab interpretation content into Med 3 clerkships. He agreed to create a proposal for the committee's review. There is a current need for help with EBM assessment in June as some students are completing the DOC2 during June since they have completed all Med 3 courses.</p>
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<b>C. Request for Logitudinal Elective Approval</b>	<p>Dr. Ledford submitted a request for a longitudinal course titled Stories of Value: An Advanced Focus on Professionalism Competencies. The committee discussed the previous Stories of Value project and the student learning and benefits of this proposed longitudinal elective. The committee approved the proposal with the recommendation of limiting to 6-8 the number of students that will be able to enroll.</p>
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### III. Standing Reports

<b>A. Duty Hour Report</b>	Bi-monthly report, not due this month.
<b>B. PxDx Report</b>	Bi-monthly report, not due this month.
<b>C. Grades Report</b>	Bi-monthly report, not due this month.
<b>IV. Student Review Report</b>	Dr. Cohen reported no new trends in reviews of students.
<b>V. Student Rep Reports</b>	Student representative indicated no particular concerns or questions to report.

Kman, Cynthia Ledford, Nanette Lacuesta,

**ACTIONS / FOLLOW-UP**

Minutes approved

Dr. McIlroy will work on the wording for the question in the student evaluation regarding faculty supervision.

Laura Volk will set up Web Ex for all future meetings.



**Med 3-4 Academic Program Committee  
Meeting Minutes 7/15/2013**

Committee Members Present: Dan Cohen, Holly Cronau, Pat Ecklar, Michael Ezzie, Sorabh Khandelwal, Claudia Kirsch, Nick Kman, Nanette Lacuesta, Mary McIlroy, Wanjiku Musinidi, Troy Schaffernocker, Rose Shim, Daniel Ash, MS3, Keerthana Bolisetty, MS3, Teresa Kuo, MS3, Stefanie Christopher, MS4, Sally Ogle, MS4  
Laura Volk - recording

Coordinators / Alternate Guests: Lynnsay Sinclair, Dawn Watson

**Start Time: 4:10 p.m.**

AGENDA	DISCUSSIONS and CONCLUSIONS	ACTIONS / FOLLOW-UP
<b>I. Opening / Announcements</b>		
<b>A. Approval of Minutes</b>	Minutes from June 17, 2013 meeting were reviewed.	June 2013 minutes approved
<b>B. Announcements</b>	<ol style="list-style-type: none"> <li>1. The new student members appointed by Student Council introduced themselves. At least one student from each class will attend the APC meetings.</li> <li>2. The Med 3-4 Clerkship Annual Review data was very useful for the LCME data base and self-study. The survey will be updated soon and a timeline established for completion and review.</li> </ol>	
<b>II Old Business</b>		
<b>A. Remediation of 8 week clerkships in 2014-15 academic year</b>	<p>Discussion focused on how to address scheduling those students who will need to complete an 8 week clerkship when the new LSI curriculum begins in July, 2014. There will be several students who have delayed their first assigned rotation and potentially others who may be required to remediate with additional clerkship time. Dr. McIlroy suggested altering the students' schedules to postpone the Ambulatory block into 2014-15. That allows two clinical months added to the Med 4 year with one month in Family Medicine and another as a Med 3 or Med 4 elective. The Ambulatory course didactics are all available electronically, so there would not be a need for lecture sessions. Dr. Cronau has agreed to accommodate these students. Dr. Harzman and Lynnsay Sinclair stated they would offer to run an 8 week clerkship for July and August also. A motion was made to have the students with Med 3 requirements remaining by July 2014 placed in either Ambulatory or Surgery rotations then and have their current Med 3 schedules rearranged for that purpose. It was acknowledged that this arrangement will unlink the clerkships that were time-linked this year, which may require adaptation of orientations and some specific educational sessions this year.</p>	Motion approved.
<b>B. Update on Expert Educator Assignments</b>	The Clerkship Directors reported that most positions for 2013-14 have been assigned. There was a brief discussion on the various departmental structures using the expert educators.	Dr. McIlroy reminded the committee to make sure the information on the appointments is submitted to Dr. Davis and Carla Granger.

C.	<b>Supervision questions on evaluations</b>	Dr. McIlroy reminded everyone that the supervision questions need to be added to the course or rotation evaluations starting with the July rotations.	
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<b>II. New Business</b>			
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A.	<b>Student Transportation</b>	Lynnsay Sinclair raised the topic of the policy for students who have no transportation to attend off-site rotations. General consensus in the discussion was that students can request placement assignments but are not guaranteed they won't be required to travel and may need to car pool or take a bus. There is not a formal process in place for consideration.	The student representatives will draft a policy to present at the next meeting.
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B.	<b>Faculty/Resident Acknowledgement of receipt of objectives</b>	Dr. McIlroy asked for discussion regarding the various methods departments are using to distribute and track faculty receipt and review of Core Educational Objectives and rotation objectives. Several departments are using Google Docs to track and some faculty have encountered difficulty opening the attachments. Dr. Musindi reported that they reviewed the OB/GYN goals and objectives at their annual faculty meeting. The faculty then signed off that they received them. Dr. Lacuesta (OhioHealth) stated they will post the student objectives on the RMH website and both affiliated systems represented (OhioHealth and Mt. Carmel) stated they will track compliance internally.	Compiled data will be reviewed as part of the Med 3-4 annual review.
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C.	<b>Patients with Specialized Medical Needs Pilot plan</b>	Dr. Ezzie reported that the UPSMN ring plans to run a pilot beginning October 21 and they have been notifying the students of this availability. They will need to enroll a minimum of 1012 students to run the pilot and can accommodate up to 24. Discussion ensued regarding grade card availability and grading timeliness and the possibility of having a separate roster in medSTAR, since last year's integrated Ob-Gyn/Surgery pilot caused the grades of the pilot students to appear to be submitted late when they really weren't due until after the end of the 16 week block. Dawn Watson and Dr. Musindi can be a resource for the group since they successfully ran a pilot last year. Dr. Ezzie will know by 9/1 if they have enough students for the pilot.	Laura Volk will follow up with medSTAR regarding the roster issue.
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D.	<b>Ground School report from PWP ring components</b>	Dr. Cronau reported the initial ground school went well and only a few technology issues were encountered. The content was appropriate but structure needs to be more varied. Changes will be made to encourage more active student engagement.	
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E.	<b>OSCEs in Med 3/4</b>	Dr. Khandelwal discussed the structure of the Med 4 OSCE. EBM will still be assessed in DOC 2. Imaging will be addressed in DOC 4 and ECG will be addressed in DOC 1. A discussion was had regarding the assessment of laboratory interpretation. Last year, this was completed in DOC 4. The committee felt that clerkships do an appropriate job at teaching diagnostic lab interpretation, either at the bedside, through multimedia or didactics. Thus, a decision was made not to have formal assessment lab interpretation as part of the College level skill assessments. FM, IM and Peds will explicitly incorporate specific cases into their didactics (IM – DKA, ABG; FM – hematology, elevated LFTs; Peds – UA, dehydration). As far as the SP encounter normally completed in the April FOSCE, the committee felt this was unnecessary as students are obtaining direct observations with feedback numerous times throughout the year. Student council representatives stated they feel the OSCEs are useful as long as the expectations are explicitly stated.	
<b>III. Standing Reports</b>			

A.	Duty Hour Report	No duty hours violations were reported.	Report reviewed and approved
B.	Px Dx Report	The report shows a few outstanding items for IM, Neuro and CSIE.	Dr. Khandelwal will follow up with the departments.
C.	Grades Report	All grades have been submitted within 6 weeks.	Report reviewed and approved
IV.	<b>Student Review Report</b>	Dr. Cohen reported there were no new trends to discuss.	
V.	<b>Student Rep Reports</b>	Students reported they would like to see uniformity regarding the absence policy. There is a formal process in place, but sometimes, a student may be excused by a resident, not following proper protocol. Other times, a student will be denied time away to attend activities such as a wedding, or a relative's graduation or birth. The students assured the committee there is no issue with approval to attend to health and personal needs.	The student representatives will discuss with Student Council and develop a list of reasonable and unreasonable requests for discussion.
		<b>Meeting adjourned at 6:20 p.m.</b>	

**Med 3-4 Academic Program Committee  
Meeting Minutes 8/19/2013**

Committee Members Present: Holly Cronau, Michael Ezzie, Alan Harzman, Chad Hoyle, Sorabh Khandelwal, Claudia Kirsch, Nick Kman, Mary McIlroy, Wanjiku Musinidi, Troy Schaffernocker, Rose Shim, Corina Ungureanu, Daniel Ash, MS3, Teresa Kuo, MS3, Brittany Nowak, MS3, Sally Ogle, MS4  
Laura Volk - recording

Coordinators / Alternate Guests: Victoria Cannon

**Start Time: 4:10 p.m.**

AGENDA	DISCUSSIONS and CONCLUSIONS	ACTIONS / FOLLOW-UP
<b>I. Opening / Announcements</b>		
<b>A. Approval of Minutes</b>	Minutes from the July 15, 2013 meeting were reviewed and a motion was made to approve with the following revisions; Add Dr. Khandelwall to the attendance roster and correct the spelling of "specialised" in the heading of item C under New Business.	July 2013 minutes approved with corrections
<b>B. Announcements</b>	No announcements	
<b>II Old Business</b>		
<b>A. Med 3-4 Annual Review Survey Update</b>	Dr. McIlroy reviewed the updated survey form which will be housed on OSU's new collaboration site, "BuckeyeBox". Revisions included adding items that LCME requires review and tracking of such as listing faculty development resources available to faculty and residents. The survey is much more organized and will be easier to review the cumulative data using BuckeyeBox. There was further discussion regarding the timeline. The committee agreed that Pediatrics, Ambulatory and DOC 4 will complete the survey between 8/26 and the next APC meeting which will be held on 9/16. Their data will be reviewed at this time. All other departments will complete the survey by the October 21st meeting.	Dr. McIlroy will send out the GQ data.
<b>B. Remediation of 8 week clerkships in 2014-15 academic year</b>	Students who have had their clerkship assignments postponed have had their schedules rearranged. As a result, to date, 12 students will complete Ambulatory Medicine and 2 will complete Surgery starting in July 2014.	
<b>C. Patients with Specialized Medical Needs Pilot plan</b>	Dr. Ezzie reported that an information meeting was held with the eligible medical students regarding the UPSMN pilot program planned for October 21-February 28th. Only 3 students attended the meeting, but Dr. Ezzie did hear from about 4 others regarding their potential interest. It is thought that the lack of interest is due to the timing of the pilot. Dr. Ezzie stated that regardless if the pilot runs, the preparation will be beneficial for the transition in July. The deadline for students to sign up is 9/1.	
<b>II. New Business</b>		

A.	<b>Student Transportation</b>	The student representatives reported that the transportation issue was discussed at the General Academic Committee meeting with the 3rd and 4th year students. The general consensus from the meeting is the students feel it is fair to expect them to have transportation for their rotations. The only exceptions being a disability or financial hardship. They also feel that these issues need to be identified ahead of time, possibly before they begin their 1st year of medical school, and also that students should not receive preferencing based on their transportation issues. Discussion ensued on the best way to identify students with transportation issues and what office it should be vetted through.	Dr. McIlroy will discuss with the Assistant Deans, Drs. Lynn and Davis.
B.	<b>Student Requests for time away</b>	This topic was also discussed at the General Academic Committee meeting and the student response was that absence requests should be approved on a case by case basis. It was also suggested to have an appeal process. The students also feel that when a request is denied, they should be informed of the rationale behind the denial.	Absence requests from the last 6 months will be reviewed and results discussed at the next APC meeting.
<b>III. Standing Reports</b>			
A.	Duty Hour Report	Dr. McIlroy reviewed the duty hour violations report for the year. In all instances, the students stated that they inadvertently reported violations where there were none.	Report reviewed and approved
B.	PxDx Report	No areas were reported as problems. However, there were a few students that did not complete their logs and some there were some issues with duplicate procedures.	Report reviewed and approved
C.	Grades Report	Late grades identified were a result of the OB-gyn/Surgery pilot project and a Pediatric student who started the rotation 2 weeks late. Otherwise, the data shows all grades have come in early.	Report reviewed and approved
IV.	<b>Student Review Report</b>	No Report	
V.	<b>Student Rep Reports</b>	Nothing further to report	
VI	<b>Miscellaneous</b>	Dr. McIlroy reported that additional tagging will need to be done in Vitals to address ED 37. This will be accomplished over the next couple of months.	Dr. McIlroy will send out the final Annual Standing Reports (duty hours, PxDx & Grades) to committee members.
		<b>Meeting adjourned at 6:00 p.m.</b>	

**Med 3-4 Academic Program Committee  
Meeting Minutes 9/16/2013**

Committee Members Present: Holly Cronau, Pat Eckler, Michael Ezzie, Chad Hoyle, David Kasick, Sorabh Khandelwal, Claudia Kirsch, Nick Kman, Alan Letson, Mary McIlroy, Troy Schaffernocker, Corina Ungureanu, Alex Grieco, Cynthia Leung, Sally Ogle, MS4, Keerthana Bolisetty, MS3  
 Laura Volk - recording

Coordinators / Alternate Guests: Victoria Cannon, Lynnsay Sinclair, Dawn Watson

**Start Time: 4:10 p.m.**

AGENDA		DISCUSSIONS and CONCLUSIONS	ACTIONS / FOLLOW-UP
<b>I. Opening / Announcements</b>			
A.	Approval of Minutes	Minutes from the August 19, 2013 meeting were reviewed and a motion was made and seconded to approve.	August, 2013 minutes approved.
B.	Announcements	Technology Session on September 30th at Prior HSL	
<b>II Old Business</b>			
A.	Med 3-4 Annual Review Survey	Dr. McIlroy inquired if there were any issues with trying to complete the survey. Discussion focused on being able to compare data across years.	This will be further discussed at an upcoming meeting.
B.	Absence Requests	discussion postponed	
<b>II. New Business</b>			
A.	Clerkship Reviews	<p>1) Dr. McIlroy reported the results from the Pediatric review. Issues to address included ensuring the faculty receive the feedback from evaluations regarding teaching performance and making sure the students clearly understand grading criteria. A brief discussion centered around program standards for the distribution of clerkship grades. It was also discussed that medSTAR can create a report, if needed, to send reports to a large number of faculty . 2) Dr. Kasick reported the results from the Psychiatry review. Issues identified centered around the new curriculum and ensuring continuity of the student experience and maintaining quality in a shorter period of time. Dr. Kasick reported that evaluations of the faculty are given in aggregate form. Discussion ensued regarding standardizing the weights in the grading schema across the clerkships. Dr. Kasick reported that the faculty will get teaching credit for completing their evaluations in a timely manner.</p> <p>3) Dr. Hoyle reported the results from the Neurology review and included that finding Expert Educators this year was a challenge. In addition, a method for identifying and tracking activities promoting lifelong learning needs to be identified is needed.</p>	The other clerkships will provide their review reports at the next meeting. Items identified for further program discussion included grade distribution expectations, standardization of weighting of final grade components, tracking activities which promote lifelong learning, and faculty evaluation of clerkship programs.
<b>III. Standing Reports</b>			

A.	Duty Hour Report	Dr. Khandelwal reviewed the Duty Hour violation report for the July-August rotations. One student reported 3 violations and another reported 1 on Ambulatory Pediatrics. Dr. McIlroy reported she had already requested explanations from the students involved for each reported violation, and the students replied that they had misinterpreted the questions. The revised question wording had not yet been implemented in that particular evaluation form. The 20122013 annual Duty Hour report was also reviewed. The clerkship directors were reminded to follow up with students who reported violations.	Report reviewed and accepted.
B.	PxDx Report	Dr. Khandelwal reviewed the PxDx report. It was mentioned that students can enter their procedures even after the rotation ends. Discussion followed regarding making sure the students know how to log the procedures. A suggestion was made to set it up so the students would receive notification on the procedure log due date.	Report reviewed and accepted.
C.	Grades Report	No Report	
IV.	<b>Student Review Report</b>	No Report	
V.	<b>Student Rep Reports</b>	No issues to present.	
VI	<b>Miscellaneous</b>		
		<b>Meeting adjourned at 6:15 p.m.</b>	

**Med 3-4 Academic Program Committee  
Meeting Minutes 10/21/2013**

Committee Members Present: Holly Cronau, Pat Eckler, Michael Ezzie, Carla Granger, Alan Harzman, Chad Hoyle, Sorabh Khandelwal, Claudia Kirsch, Nick Kman, Alan Letson, Mary McIlroy, Wanjiku Musindi, Troy Schaffernocker, Kim Tartaglia, Alex Grieco, Kimberly Bates, Katherine Walsh, Daniel Ash, MS3, Teresa Kuo, MS3, Stefanie Christopher, MS4, Brittany Nowak, MS3.  
Laura Volk - recording

Coordinators / Alternate Guests: Victoria Cannon, Lynnsay Sinclair, Dawn Watson

**Start Time: 4:05 p.m.**

<b>AGENDA</b>	<b>DISCUSSIONS and CONCLUSIONS</b>	<b>ACTIONS / FOLLOW-UP</b>
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**I. Opening / Announcements**

A. Approval of Minutes	Minutes from the September 16, 2013 meeting were reviewed and a motion was made and seconded to approve.	September, 2013 minutes approved.
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B. Announcements	<p>1) K.Tartaglia announced that the October LCME Prep meeting is cancelled. The Prep meetings scheduled for November through February will be held to prepare for the LCME site visit.</p> <p>2) V. Cannon announced that there will be a 3 hour education technology information session during the Celebration of Scholarship on November 20th. IT staff will be available to answer questions regarding Articulate, iTunes, and other educational technology. This session will be held from 11:00 a.m. to 2:00 pm in the BRT Room 105.</p>		
<b>II Old Business</b>			
A.		None	
<b>II. New Business</b>			
A.	EM/IM Elective	<p>N. Kman presented the curriculum for a new elective rotation which will be offered to visiting students only. The rotation will be a combination of EM and IM and will consist of 2 weeks of each discipline. A pre-requisite will be that students submit an ERAS application to the EM/IM dual residency program. The elective will take 1 student per month during the October/November/December rotation blocks. Discussion ensued regarding ensuring there is enough space for the DOC 1 and 4 students. This rotation will provide exposure to the EM/IM residency and an opportunity for students to actively see the program.</p> <p>A motion was made and seconded to approve the new EM/IM elective.</p>	EM/IM Elective rotation approved.
B.	Teaching Hours calculations	<p>V.Cannon reviewed a composite of the teaching hour questions and discussion ensued on what counts as teaching time. M. McIlroy suggested getting guidance from R. Ruberg to ensure consistency.</p>	<p>V. Cannon and M. McIlroy will send out a detailed survey regarding what activities count.</p>

C.	Clerkship Survey Reviews	<p>1) W. Musindi reviewed the documentation from the OB/GYN review. One issue that was addressed was consistency of sites related to there being no specific gynecologic oncology service at St. Ann's. This issue has been addressed with the addition of a new Gynecologic Oncologist building up a larger practice at St. Ann's. Also, the faculty and staff there address the objectives in didactic sessions and assigned case presentations, and the students at St. Ann's spend one week on gyn/onc service at OSU. Efforts for improving the clinical experience included the initiation of a night float week this year. Feedback to students was an area of faculty development focused on. Communication with sites has increased with the quarterly newsletter to all faculty which includes updates on medical student education and activities. Improvement was seen in evaluations of chair rounds, housestaff teaching, and clinical experiences. Dr. McIlroy commended Dr. Musindi for her efforts in improving the clerkship.</p> <p>2) A. Harzman reviewed the documentation from the Surgery review. The move from lectures to podcasts was not popular, but students are being encouraged to use the podcasts for learning material, with more discussion during didactic sessions. Small group sessions have been added to work on basic skills. Resident teaching is highly rated. Time in clinic and the 1/2 day assignment in Pathology have been well received by the students. Faculty presently do not evaluate the course. Grand Rounds address faculty development topics. Dr. Tartaglia reiterated that the residents and fellows are required to complete 2 CBL modules on teaching students, adding more faculty development.</p> <p>3) H. Cronau reviewed the documentation from the Ambulatory review. One issue Dr. Cronau identified was not being able to visit each office each year, but abundant communication is maintained through faculty meetings, telephone conversations, and electronic methods. Sites are generally evaluated as excellent; when issues arise, they are typically the result of a crisis and the student is reassigned. A new small group series is being used to augment the didactic experiences. Dr. McIlroy commended Dr. Cronau for her positive interpersonal communications with the faculty.</p> <p>4) M. Ezzie reviewed the results from the Internal Medicine review. The successful Medicine Mentor program has been expanded, and enhanced with more specific curriculum. Grade distributions were re-examined and cutoffs adjusted to alter the large number of LOC grades. There was an issue with the survey not accepting decimal points so questions 32 and 36 are not accurate.</p>	<p>1) OB/GYN report accepted.  2) Surgery report accepted.  3) Ambulatory report accepted.  4) IM report accepted.  5) M. McIlroy will again send the Curriculum Survey data for last year to all clerkship directors.</p>
<b>III. Standing Reports</b>			
A.	Duty Hour Report	K.Tartaglia reviewed the Duty Hour report. Some evaluations do not have the updated duty hour question wording. Dr. McIlroy reported contact had already been made with the students from pediatrics and they had responded that their answers were in error from misunderstanding and were not duty hour violations.	L. Volk will send the question ID's to the coordinators. Report reviewed and accepted.
B.	Px Dx Report	K.Tartaglia reviewed the Px Dx report from the first 8-week block. No issues were identified.	Report reviewed and accepted.
C.	Grades Report	K. Tartaglia reported all grades are on time.	Report reviewed and accepted.
<b>IV.</b>	<b>Student Review Report</b>	No issues to present	

V.	<b>Student Rep Reports</b>	No issues to present	
VI	<b>Miscellaneous</b>	N/A	
		<b>Meeting adjourned at 6:15 p.m.</b>	

**Med 3-4 Academic Program Committee  
Meeting Minutes 11/18/2013**

Committee Members Present: Corina Ungureanu, Kim Bates, Holly Cronau, Carla Granger, Alex Grieco, Chad Hoyle, Sorabh Khandelwal, Claudia Kirsch, Nick Kman, Alan Letson, Cynthia Leung, Troy Schaffernocker, Kim Tartaglia, Daniel Ash, MS3, Teresa Kuo, MS3  
Laura Volk - recording

Coordinators / Alternate Guests: John Davis, Dawn Watson

**Start Time: 4:10 p.m.**

<b>AGENDA</b>	<b>DISCUSSIONS and CONCLUSIONS</b>	<b>ACTIONS / FOLLOW-UP</b>
<b>I. Opening / Announcements</b>		
A. Approval of Minutes	Minutes from the October 21, 2013 meeting were reviewed and a motion was made and seconded to approve.	October 21, 2013 minutes approved.
B. Announcements	None	
<b>II Old Business</b>		
A.	None	
<b>II. New Business</b>		
A. Funds Flow	J. Davis discussed the Funds Flow process and provided the Formula for Determining Teaching Credit Hours approved by the College Assembly. The college needs to collect information about any teaching activity and the following 4 components: Faculty Member involved (and dept), student(s) involved, type of activity, and length (in hours.) It is important that the departments use the same tracking process. VITALS may not be available to house the data, therefore, other options were discussed. It was agreed that using an Excel spreadsheet may be the best option until VITALS is ready for tracking.	Dr. Davis will bring an Excel template to the next meeting for review.
B. Mid-Rotation Feedback	S. Khandelwal discussed the LCME requirement of providing verification that near-time central monitoring of mid-rotation feedback is occurring with the medical students. There was further discussion as to the appropriate tracking process. The coordinators can send verification to Laura Volk to track or medSTAR may be able to add a check box to indicate compliance. OME would then be able to run a report. Central oversight would then be provided by the APC.	K.Tartaglia to discuss with coordinators at a meeting on 11/19. S. Khandelwal will check with medSTAR on adding the checkbox.

C.	Med 3-4 Program Course Reviews	<p>1) C. Ungureanu reviewed the documentation from the DOC 2 curriculum review. Additional faculty resources were identified and the survey will be updated. There was brief discussion regarding how often the faculty evaluation data is used. Faculty need to know how to access the evaluations rather than waiting until the end of the year.</p> <p>2) N. Kman reviewed the documentation form the DOC 1 curriculum reivew. There was brief discussion regarding adding the CBL's to Q23 which allows course leadership to monitor resident participation in activities that enhance their teaching and assessment skills. N. Kman pointed out that the faculty will begin to evaluate the course.</p> <p>3) T. Schaffernocker reviewed the documentation from the DOC 4 curriculum review.</p> <p>4) K. Bates reviewed the documentation from the DOC3 curriculum review. It was pointed out that residents and faculty also receive emails to apprise them of educational objectives, course requirements, etc.</p>	<p>1) DOC 2 report accepted.</p> <p>2) DOC 1 report accepted.</p> <p>3) DOC 4 report accepted.</p> <p>4) DOC 3 report accepted.</p>
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**III. Standing Reports**

A.	Duty Hour Report	No report	
B.	PxDx Report	No report	
C.	Grades Report	No report	
<b>IV.</b>	<b>Student Review Report</b>	None	
<b>V.</b>	<b>Student Rep Reports</b>	The question was raised on whether evaluations of residents/attendings by students can be viewed immediately or if there is any process to hold/batch releasing evaluations for anonymity.	K. Tartaglia will investigate with MedStar and report back at the next meeting.
<b>VI</b>	<b>Miscellaneous</b>	Comm members proposed that future annual survey reviews could include sending out the course reviews prior to the meeting so that presenter can focus on highlights and questions by the committee members.	
		<b>Meeting adjourned at 6:45 p.m.</b>	

**Med 3-4 Academic Program Committee  
Meeting Minutes 12/16/2013**

Committee Members Present: Kim Bates, Holly Cronau, Mike Ezzie, Carla Granger, Alan Harzman, Chad Hoyle, Sorabh Khandelwal, Nanette Lacuesta, Mary McIlroy, Troy Schaffernocker, Corina Ungureanu, Daniel Ash, MS3.  
Laura Volk - recording

Coordinators / Alternate Guests: Dawn Watson

**Start Time: 4:10 p.m.**

<b>AGENDA</b>	<b>DISCUSSIONS and CONCLUSIONS</b>	<b>ACTIONS / FOLLOW-UP</b>
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<b>I. Opening / Announcements</b>			
A.	Approval of Minutes	Minutes from the November 18, 2013 meeting were reviewed and a motion was made and seconded to approve.	November 18, 2013 minutes approved.
B.	Announcements	None	
<b>II Old Business</b>			
A.	Funds Flow Template	M. McIlroy reported that C. Granger is developing a template for clerkships/departments to use to track teaching time and student interactions. There was brief discussion on exploring different methods to track teaching hours and activities to track. The process will start July 2014.	C. Granger will bring the template to the next APC meeting for review. L. Volk will email the Formula for Determining Teaching Credit hours approved by the College Assembly to committee members.
B.	Evaluation Release	There was discussion regarding when evaluations can be viewed by the evaluatees and if they are set up correctly. MedSTAR is currently set so that evaluators are unable to see evaluations of themselves until they have completed the reciprocal student evaluation, but a recent occurrence seemed to indicate a problem. The situation under which this problem occurred is not clear at the moment, but the Student Representatives agreed to get more details so the problem could be addressed and to develop other suggestions for improving the process.	The Student Representatives will obtain more information and report at the next APC meeting.
<b>II. New Business</b>			
A.	DOCcom	D. Post reviewed the DOCcom website, which is an educational tool that the faculty can use for various teaching modalities, such as communication skills. There are presently 42 different modules and the program is currently being used in Part 1. The COM has been granted permission for additional users until June of 2014. D. Post encouraged the group to see if the site would be beneficial for the COM and maybe even intern and residency programs. The committee members discussed looking at the modules for incorporation into clinical assignments, along with the uncertainty of whether there would be an ongoing subscription to use if items were identified as desirable for inclusion in the Med 3 and Med 4 years.	V. Cannon will create a group for Med 3-4. L. Volk will send her a list of committee members to be added to the user list.
B.	Med 3 Schedule	The committee discussed the challenges with the start dates for the 3rd year students when they return in January (Med 3 returns 1/6) in relation to the resident block start and end dates. The students have a 3-week winter break, which means they start the rotation joining a team which has one week left in the resident block, then the resident team will change. This pattern will repeat itself again in the next month, so that students may have a number of one-week assignments with their resident teams. The departments all indicated awareness of this issue and efforts to deal with it in their assignments.	
C	Program Review	M. McIlroy asked the committee to review and comment on the dashboard that she created to reflect the clerkship/course reviews and program compliance. There was brief discussion on how this tool could be used for oversight of the Med 3-4 program.	Any ideas should be submitted to M. McIlroy.

<b>III. Standing Reports</b>			
A.	Duty Hour Report	Follow-up by Dr. Cronau - reported violations were error, per student response. Follow-up by Dr. McIlroy indicated reported violations were student error.	Report accepted
B.	PxDx Report	All PxDx completed acceptably for November/December rotation except students participating in the UPSMN pilot. Those students will not have PxDx for IM/Psych/Neuro completed until the end of the pilot, which will be in February.	Report accepted
C.	Grades Report	All grades submitted timely.	Report accepted
D.	Safety on Service	K. Tartaglia presented a new report of evaluations of the learning environment, which included data from the question on the clerkship evaluation which asks students if supervision was sufficient to ensure a safe learning and patient care environment. Six student reports identified concerns about supervision, coming from Ambulatory (2), DOC2 (2), a sub-I at NCH, and Phys Med at NCH. The committee agreed these need follow-up and report back to the APC. A lengthy discussion followed about other concerns regarding the learning environment which would come from the question on the evaluation of the attending, which asked about avoidance of ridicule and humiliation. Committee members expressed concerns regarding who collects this information, assesses its validity, and at what point communicates concerns to the individual faculty member. A defined process within the administration and departments would be helpful.	Course directors will follow-up with the students who reported lack of supervision to determine the issues and report findings to Med 3-4 APC. Dr. McIlroy will request administration to discuss a process for dealing with concerns expressed on faculty evaluations.
<b>IV.</b>	<b>Student Review Report</b>	No report	
<b>V.</b>	<b>Student Rep Reports</b>	<ol style="list-style-type: none"> <li>1. Student representatives discussed the benefit of having an RSA token for IHIS access when off campus. Read-only would be sufficient.</li> <li>2. The Student Representatives initiated a discussion regarding request for fuel/transportation costs for students who travel to distant assignments but are not living at that location.</li> <li>3. The students asked for discussion about how limited observation or teaching time is accounted for in assessment and grading.</li> </ol>	1 and 2. These issues will be forwarded to Dr. Davis and Dr. Lynn. 3. Clerkships and courses will be asked to make clear to students how this issue is addressed.
<b>VI</b>	<b>Miscellaneous</b>		
		<b>Meeting adjourned at 6:15 p.m.</b>	