

Year 1 Curriculum Advisory Committee Meeting

Tuesday, April 13, 2021

Present: B. Bany, A. Braundmeier-Fleming, J. Cheatwood, J. Daniels, J. Davie, L. DiLalla, K. Hales, A. Johnson, T. Johnson, D. Klamen, P. Narayan, A. Pond, R. Reeder, G. Rose, D. Sarko, M. Sullivan, A. Sutphin, R. Weilbaecher, N. Weshinsky

Guests: J. Arnold, M. Barton, M. Buchanan, M. Gastal, N. Henry, L. Houston, D. Quamen, M. Thurber, M. Volle

N. Weshinsky called the meeting to order at 8:30 a.m.

Minutes

The February 9 minutes were approved as distributed.

Announcements

M. Volle thanked the Year 1 directors for the increase in PSP content, noting that students have reached out about SAQs and exam content. M. Volle commented that while there is variability among the 3 units, PSP content should be about 10% of exams (about 15 questions for the EOU) to prepare students for future exams and practice. D. Klamen mentioned that PSP questions make up about 12% of the Step 1 exam and 15% of the Step 2 and 3 exams. J. Cheatwood shared that there are about 10 PSP questions on the NMB EOU exam but there are only 2 PSP resource sessions in NMB and inquired as to whether it would be possible to increase PSP content in addition to exam questions. M. Volle suggested that adding 5 additional questions seemed feasible, and remarked that it would be great to have more PSP content in Year 1. M. Volle explained that PSP is a streamer throughout the entire 4 years; in Year 2, the PSP experience is a blend of PSP topics in the context of clinical visits and PSP content cross-referenced with other disciplines. A. Pond noted that many students do not understand the importance of PSP, or think it is common sense. L. DiLalla drew a parallel with the need for more BSS content, noting the dearth of BSS faculty, and suggested combining PSP and BSS questions and content. M. Volle shared that the PSP team has included BSS content and that there are opportunities for collaboration. D. Klamen noted that Step 1 performance in BSS and PSP are notoriously low for SIU SOM, while genetics and biochemistry scores have increased and are now at the mean. M. Volle reported that Year 3 and 4 survey respondents expressed a desire for more PSP content in Year 1. N. Henry noted that there are very few PSP resource sessions, and very few PSP LIs in the tutor guides, and recommended cross-referencing PSP content with the Doctoring curriculum. M. Volle suggested adding questions related to PSP and the social determinants of health to standardized patient cases. N. Weshinsky initiated a discussion about how to move forward to address the issue of PSP content. J. Cheatwood inquired as to whether Step 1 score data would still be available after the switch to pass/fail for Step 1, which will go into effect for the Class of 2024. D. Klamen explained that with the switch to pass/fail, more emphasis would be placed on Step 2 scores. D. Klamen noted that if lecture hours are added in one area, hours in another area must be taken out of the curriculum.

L. Houston presented a wellness proposal for a CHOP min-grant for an art therapy-inspired activity to enhance the wellness and interconnectedness of Year 1 students, noting that burnout

starts early, with depersonalization rates spiking at end of Year 1 and often not recovering. A. Pond requested clarification of the meaning of the term *depersonalization* in this context. L. Houston explained that it included feelings of cynicism; not feeling connected to others, including peers and patients; and being emotionally hardened. The proposed intervention would include 5 90-minute sessions. Students would get their own art kit, and most of the grant would go toward art supplies. Participants would take the student version of the Maslach Burnout Inventory. G. Rose asked how the intervention would be implemented and how students would be taught how to use the materials. A. Pond asked whether non-visual art forms such as music and writing could be incorporated into the activity. L. Houston explained that this intervention would focus on the visual arts; the art kits come in multiples of 50 and no prior art experience would be required. The intervention would be art-therapy inspired, and art would be used to get to the therapeutic content. J. Cheatwood shared that the SIUC craft shop has a lot of art materials and spaces at no or low-cost to students. L. DiLalla inquired as to what would be done if more than 40 students signed up. L. Houston replied that she would purchase more kits with her own money if there was that much interest. D. Klamen added that the OEC could cover the extra cost if more students wanted to participate. G. Rose asked whether the assessment would be re-administered after the intervention in order to test for a measurable positive outcome. L. Houston remarked that students would hopefully continue on their own since they will have the training and their own art supply kits to keep, but that it may not be possible to re-administer the Maslach inventory due to privacy issues; an online survey would allow students to choose a personal identifier to maintain anonymity but still allow comparison at the individual level. G. Rose suggested that the IRB might have ideas about anonymizing personal information, since the participants would be in Springfield the following year. N. Henry stated that it is very important for students to have time to be creative and connect with one another, and wondered whether the activity could be done in groups. L. DiLalla commented that it would be interesting to randomly assign students to be a part of the wellness activity in order to avoid self-selection bias. L. Houston noted that targeted wellness interventions are often voluntary so self-selection could be a barrier but that a voluntary program could still be a good first step and that this particular intervention was designed to be voluntary.

N. Weshinsky reported that EPC discussed the Step 2 CK, which students are now required to take but not pass in order to graduate. The EPC also discussed how to make residency applications more competitive.

B. Bany reported that the Faculty Council general faculty meeting with the dean will be held next Monday, April 20 at 4-6 p.m.; two emails were sent out with the Webex link.

Reports

M. Sullivan relayed C. Anderson's Doctoring report: All students who failed the NMB MU CCX passed the NMB EOU CCX, so no students had to remediate the CCX for NMB and all students had a Green/Satisfactory for Doctoring for the NMB unit. ERG clinical skills sessions are back in the PDL. Students are seeing standardized patients for their ERG Practice H&P, which occurred last Tuesday, April 6 and is finishing up today, April 13. The students seem very happy to be in the PDL and working on patients and the clinicians are thrilled to be back working with students in the PDL. We currently have every expectation of having both the MU and EOU CCXs in the PDL using SPs. Also, the HTT Extravaganza will be on May 4, 11, and 18, during

which time we will cover the entire HTT; students will practice PE maneuvers on each other during these sessions. Tomorrow we have a Y1/Y2 Doctoring meeting with Dr. Rull and Leslie Montgomery during which time we will discuss which HTT maneuvers to emphasize most to get students ready for Y2 Doctoring. Parenthetically, Y1s in the Class of 2024 will not receive actual grades (Green/Yellow/Red) on their performance of PE maneuvers. Y2 is aware and will plan Y2 Doctoring activities with this in mind.

J. Cheatwood reported that the NMB summary document is being prepared, and that while it was very challenging to adapt the curriculum to remote learning, NMB exam means were good. G. Rose noted that there were no mental illness mini cases this year due to clinician availability and COVID restrictions but that exam performance was as good as that of previous years.

J. Davie reported that ERG is going well, and that it has been great to have some in-person sessions. Dr. dela Cruz and his team came to deliver the Ultrasonography sessions in person yesterday, April 12. N. Henry noted that 3 former students, now current ED residents, came with Dr. dela Cruz and that students loved the sessions and learned a lot. J. Davie stated that Dr. dela Cruz did a great job of putting the session together, and it was great that they were willing to come.

R. Reeder reported that students were disappointed to miss the mental illness mini cases in NMB and inquired as to whether they could be done in ERG. J. Cheatwood explained that they include a lot of content that should not take up ERG time. The mental illness mini cases are now presented by the department of psychiatry but they were unable to facilitate them this year. D. Klamen suggested releasing the mini cases to the students this summer. R. Reeder announced that students are putting together a student-led ERG MU exam, for which each student will write 2-3 questions.

Other Business

L. DiLalla reported that one student in her tutor group had something written about them in the TGAs that had not been brought up in tutor group, and that it caused the student distress right before exams. L. DiLalla suggested delaying the release of the EOU TGAs until after the exams, instead of releasing them immediately after they are filled out. N. Weshinsky stated that he would be fine with postponing the release of the TGAs until after the exams, and that it is possible to do so in MyProgress. N. Henry shared that what L. DiLalla described has happened before, and asked whether tutors could review the TGAs before releasing them to students, also noting that tutors should emphasize that if students are not willing to say something in group, they should not write it in the TGAs. B. Bany recommended releasing both MU and EOU TGAs after the exams. L. DiLalla agreed and noted that the point of TGAs is to learn how to give both positive and negative feedback professionally and constructively, and suggested more discussion about this in each unit but also noted that the new TGAs are very long so there is a lot to review. A. Pond explained that she describes the MU TGAs in advance, initiates the discussion herself, and starts with positive feedback. N. Weshinsky noted that he starts each unit's first unit meeting with recommendations and reminders, and can also add additional TGA discussion.

Next Meeting

The next meeting will be held on Tuesday, May 11 at 8:30 a.m.

The meeting was adjourned at 9:36 a.m.