

October 24, 2018

Veronica M. Catanese, MD, MBA LCME Co-Secretary and Senior Director, Accreditation Services Association of American Medical Colleges 655 K Street NW, Suite 100 Washington, DC 20001-2399 Barbara Barzansky, PhD, MHPE LCME Co-Secretary and Director, Undergraduate Medical Education American Medical Association 330 North Wabash Avenue, Suite 39300 Chicago, IL 60611-5885

Dear Drs. Catanese and Barzansky:

Southern Illinois University School of Medicine is proposing the development of a four-year, rural primary-care based education track in Southern Illinois. We want to expand our efforts to prepare physicians for practice in rural areas. This rural track, also known as Lincoln Scholars Program, will operate as a parallel track to SIU's current program.

The required notification is attached. Please contact me or the staff member on this project, Beth Collier with questions. She may be reached at 217-545-3625 or by email, mcollier@siumed.edu.

Sincerely,

Jerry Kruse, MD, MSPH

Dean and Provost, SIU School of Medicine Chief Executive Officer, SIU Medicine Professor of Family & Community Medicine

Professor of Medical Education



CLASS SIZE INCREASE & NEW OR EXPANDED REGIONAL CAMPUS NOTIFICATION FORM

Please use this form to notify the Liaison Committee on Medical Education (LCME) of a class size or enrollment increase if the increase is occurring in conjunction with the creation or expansion of a regional campus. The criteria for class size increases are 1) if the entering class will increase by 10% or greater or by at least 15 students OR if there is a cumulative increase of 20% or more over three years and/or 2) the school accepts a total of at least 10 transferring students into any year(s) of the curriculum in any given academic year. A medical school with a regional campus is a school that has two or more campuses, with each campus offering one or more complete years of the medical education Program.

Schools planning to create or expand a regional campus should first contact the LCME Secretariat at lcme@aamc.org before submitting the notification form. There may be a Secretariat consultation to the developing campus by the LCME Secretariat.

SUBMISSION INSTRUCTIONS

Please email <u>lcmesubmissions@aamc.org</u> a dated and signed cover letter from the medical school dean addressed to the LCME Co-Secretaries and the completed notification form in a single PDF.

The cover letter and notification form must be submitted in time for the LCME to review the information prior to implementation of the change. Notification forms are reviewed as part of regularly scheduled LCME meetings. Use the table below to determine when the notification will be reviewed.

Date Form Received	Date Notification will be Reviewed by the LCME
August 2 – December 1*	February LCME meeting
December 2 – April 1*	June LCME meeting
April 2 – August 1*	October LCME meeting

^{*}If the 1st of these months falls on weekend or holiday, submission will be accepted the next non-holiday business day.

It is advised that you do not include hyperlinks within the document(s) of the submission. If a reference to a website is necessary, create an appendix with a table of contents and include PDFs of the webpages and/or screenshots.

Date of Submission	October 29, 2018
School Name	Southern Illinois University School of Medicine
Date or academic year change will become effective	June 2020

Name and title of the Program official submitting	Jerry Kruse, M.D., M.S.P.H.
the information	Dean and Provost
	Dean and Trovost

Please complete the following questions with as much detail as possible. Expand the available space, as needed.

OVERVIEW

Please provide the location (e.g., City, State) of the regional campus.

Southern Illinois University proposes to expand its current medical school enrollment with a rural, primary care-based physician education track located in far southern Illinois. The "Lincoln Scholars Program (LSP)" will add eight medical students per year to SIU's current enrollment of seventy-two medical students (a total of 32 additional medical students at capacity, increasing total enrollment to 320). The additional students will be located at the medical school's current Carbondale campus (at Southern Illinois University Carbondale) for the entire medical education curriculum. The Lincoln Scholars Program will be designed to produce primary care physicians well prepared for rural practice.

The Lincoln Scholars Program will operate as a parallel track to SIU's current program. Currently, SIU matriculates 72 first-year medical students who complete Year 1 of their studies on the university's main campus in Carbondale, Illinois, and then relocate to the medical school's Springfield, Illinois. campus for Year 2 through Year 4. The current Program will continue this practice for the current track. The new LSP track will enroll 8 students per year who will remain in Carbondale for all four years of their medical school experience.

The Lincoln Scholars Program is justified by the continuing need to prepare physicians for practice in rural areas of the country such as that in far southern Illinois. While efforts nationally have focused on increasing the supply of physicians and some have attempted to address the need for physicians in rural areas, the number of new physicians opting for rural practice significantly lags behind those choosing to practice in other areas. This continues the traditional problem of ineffective health care provider distribution.

One of the features of the new Program will be to embed the Lincoln Scholars rural track students in a rural clinic setting with a primary care mentor. This embedding will be initiated at a very early stage to provide a longitudinal learning experience, with the objective of producing primary care physicians who will practice in rural Illinois.

The learning issues and graduation objectives of the LSP will be the same as those for the current Program. The schematic below depicts the differences in the schedule between the two programs. However, the LSP track curriculum will feature the following additional curricular components at a minimum:

- extended experiences in rural locations;
- rural health skills lab:

- summer experiences in rural hospitals;
- assignment to a "rural" mentor;

Depiction of Schedule Differences Traditional vs Lincoln Scholars

- "non-cognitive" components of leadership and public speaking;
- integrative medicine and opportunities for personal growth and wellness;
- basics of health policy;
- a team learning environment with SIU physician assistant students, a rural physician mentor and other SIU health care students, such as nursing, clinical pharmacy and behavioral health.

The LSP students will use the student support services already in place on the Carbondale campus. Committees, governance structures, and faculty policies already exist in the current curriculum and will be amended, as needed, to fully incorporate the LSP track.

Through these innovations, the Lincoln Scholars Program will prepare primary care physicians uniquely qualified to practice medicine in rural areas such as southern Illinois.

Students Lincoln Scholars Traditional CY=calendar With Physician Assistant Students year JUN CY1 Hematology, GI & Cardiology JUL CY1 AUG CY1 Immunology, Infectious Disease, mid AUG CY1 Cardiology, Pulmonology & Respiratory & SEP CY1 Rheumatology Renal OCT CY1 Rurai mid OCT CY1 Mentor Neurology, Clinic NOV CY1 Behavioral, mid NOV CY1 Musculoskeletal Neuro. DEC CY1 Muscular & JAN CY2 OB/GYN. Behavioral FEB CY2 Urology & Endocrine MAR CY2 mid MAR CY2 Endocrine. Renal, Endocrine. APR CY2 Reproduction Metabolism. & GI Nutrition MAY CY2 Break mid MAY CY2

	<u>Traditional</u>
JUN CY2 JUL CY2 AUG CY2	Remediation or MPEE or Break
mid AUG CY2 SEPT CY2 OCT CY2	Hematology, Immunology & Infection
mid OCT CY2 NOV CY2 DEC CY2	Cardiology, Respiratory & Renal
JAN CY3 FEB CY3 MAR CY3	Neuro, Muscular & Behavioral
APR CY3 MAY CY3	Endocrine. Reproduction & GI
JUN CY3 JUL CY3	Remediation or USMLE Prep, Step 1 & Break
AUG CY3 SEP CY3 OCT CY3 NOV CY3 DEC CY3 JAN CY4 FEB CY4	Int Med, Fam Med, Peds, Neuro, Emer Med, Surgery, Psych, OB/GYN Clerkships & Break
MAR CY4	Summative Clinical Competency Exam
mid MAR CY4 APR CY4 MAY CY4 JUN CY4	Personalized Education Plan, USMLE Step 2
JUL CY4 AUG CY4 SEP CY4 OCT CY4 NOV CY4 DEC CY4 JAN CY5 FEB CY5 MAR CY5 APR CY5	Electives

Lincoln Scholars	
Int Med, Peds, Neuro, Emer Med, Surgery, Psych, OB/GYN Clerkships & Break	Family Med Continuity Clinic
Summative Clinical Competency Exam	-
Review Sessions, USMLE Prep, Step 1	
Personalized Education Plan, USMLE Step 2	
Electives	

MAY CY5

Total Number of Enrolled Students in the Academic Years Following the Planned Increase (Includes both Current Track and LSP Track – All SIU) Year One of the Year Three of the Year Two of the Year Four of the Curriculum Curriculum Curriculum Curriculum 72 Current 72 72 72 Enrollment (before increase) 72 80 72 72 Academic Year* (2020-2021) Academic Year 80 80 72 72 (2021-2022)72 Academic Year 80 80 80 (2022-2023)80 80 80 Academic Year 80 (2023-2024)

Provide a projection of the number of students who will be located at the regional campus. If instruction will not be offered in all curriculum years, leave the corresponding, enter "N/A" in those cells. Copy this table if more than one new or expanded regional campus is being proposed.

Number of students to be enrolled at the regional campus during each academic year (start with the first academic year in which students will be enrolled)

(Includes both Current Track and LSP Track – Carbondale Regional Campus Only)

Curriculum Year	Academic Year 2020-2021	Academic Year 2021-2022	Academic Year 2022-2023	Academic Year 2023-2024
First Year *	80	80	80	80
Second Year	0	8	8	8
Third Year	0	0	8	8
Fourth Year	0	0	0	8

^{*}First-year enrollment on the Carbondale regional campus includes the current track's 72 Year 1 students plus the new 8 students enrolling in the Lincoln Scholars Program track. Once the current track's 72 students complete Year 1, they relocate to the Springfield campus for Years 2-4.

^{*}Start with the first academic year the class size increase would go into effect.

1. EDUCATIONAL FACILITIES

Complete the sections below that are relevant to the educational Program at the regional campus. In the responses, include both information about planned future instruction and instruction that has been ongoing at an existing regional campus. If a section is not applicable, enter "N/A".

a. Complete the following table describing the educational space to be used for required courses in the pre-clerkship curriculum, expanding the number of rows as necessary:

Building: Lindegren Hall/Carbondale (currently used	for Year 1 s	tudents)
Year Constructed: 1953	Year of Last Major Renovation: 2013-2014	
Type of Room ¹	Seating	Main Educational Use(s) ²
	Capacity	
Auditorium (traditional program and LSP)	198	examinations and lectures
Lecture Room (traditional program and LSP)	80	examinations and lectures
Histology Laboratory (taught in sections smaller than	75	histology instruction and testing
75; traditional program and LSP). While the class size	1	and the same
will grow to 80 with LSP students, they will not be	1	
utilizing the Histology Laboratory at the same time as	1	
the tradition Year 1 students.		
Gross Anatomy Laboratory (traditional program and	100	gross anatomy/neuroanatomy
LSP)		instruction and testing
Tutor Rooms (10) (traditional program)	9	group discussion and mini-cases
Title B. (2) (19)	(per room)	
Tutor Rooms (2) (traditional program)	15	group discussion and mini-cases
Professional Davidson and Laboratoria (7) (1.11)	(per room)	
Professional Development Laboratories (7) (traditional program and LSP)	7	clinical skills exam rooms
	(per room)	(training and evaluation)
Professional Development Laboratories (3) (traditional	4	clinical skills exam rooms
program and LSP)	(per room)	(training and evaluation; objective
		structured clinical exams -
		OSCEs)

Building: Lindegren Hall/Carbondale (sp	pace vacated by Physician	Assistant Program in 2019)	
Year Constructed: 1953	Year of Last Major Renovation: 2013-2014		
Type of Room ¹	Seating	Main Educational Use(s) ²	
	Capacity		
Lecture Room (LSP)	40	examinations and lectures	
Tutor Rooms (5) (LSP)	8	group discussion and mini-cases	
<u></u>	(per room)		

Building: Life Science III/Carbondale		
Year Constructed: 1993	Year of La	st Major Renovation: N/A
Type of Room ¹	Seating Capacity	Main Educational Use(s) ²
Auditorium (traditional program and LSP)	102	examinations and lectures

Building: Family Medicine/Carbondale		
Year Constructed: Estimated completion June 2019	Year of Las	t Major Renovation: N/A
Type of Room ¹	Seating Capacity	Main Educational Use(s) ²

Anatomy Lab (PA students)	40	gross anatomy/neuroanatomy instruction and testing
Tutor Rooms (6) (PA program and LSP)	(per room)	group discussion and mini-cases
Lecture & Learning Lab (PA program and LSP)	60	examinations and lectures
Professional Development & Exam Laboratories (6) (PA program and LSP)	4 (per room)	clinical skills exam rooms, instruction, assessment (training and evaluation)
Professional Development Lab Observation (6) (PA program and LSP)	3 (per room)	clinical skills observation

¹Includes lecture hall, multidisciplinary lab, conference room, small-group discussion room, etc. If several rooms of similar type and seating capacity are used, indicate the total number of such rooms in parentheses.

²Includes lectures, small-group discussion, dissection, slide study, wet lab, simulations, clinical skills practice or testing, etc.

b. Describe any additions/modifications to the availability of academic space to accommodate the class size increase.

The addition of the Lincoln Scholars Program medical students will coincide with the opening of an additional academic and clinical building in Carbondale for the Family Medicine Program. This facility will house the Family Medicine residency, along with the teaching and training facilities for the Physician Assistant master's Program. This space was designed with the consideration of bringing a stand- alone rural medical student training Program to the Carbondale area. Therefore, this building will be able to provide supplemental space to the Lincoln Scholars students for tutor groups, clinical skills instruction and assessment, along with anatomy lab.

The Physician Assistant Program currently occupies space in the Lindegren building on the main Carbondale campus that is contiguous to the current track's first-year medical student teaching space. This will allow for space that will be vacated by the Physician Assistant Program to be repurposed as needed for the additional Lincoln Scholars medical students. Study rooms and learning resources areas will be available 24/7. SIU Morris Library, the university's main library complex, is directly adjacent to Lindegren Hall and is available for all students.

c. Describe and evaluate the adequacy of other physical facilities, including library resources, information technology or services, clinical skills learning and evaluation areas, and study space, which would accommodate the proposed increase in class size.

There will be two facilities available for clinical skills training in Carbondale after the opening of the Family Medicine building in 2019: the existing professional development laboratory in the Lindegren building, and the new exam rooms in the Family Medicine building.

The existing Lindegren professional development laboratory (PDL) area has seven examination rooms. This longitudinal suite of fully functional patient examination rooms allows faculty to observe medical students in standardized and real patient encounters via one-way glass in the doors. Its examination rooms are fitted with equipment, beds, communication and observation capabilities to allow students to conduct "doctoring" activities under either direct observation in the room or indirect observation through a one-

way window. These rooms are also used for formal assessments of clinical examination skills of the medical students.

The new PDL area being built in the Family Medicine facility will include six updated, state of the art rooms that can function as both clinical exam rooms for the residency Program and teaching laboratories for medical and physician assistant students. These rooms will be equipped with observation capabilities. The Lincoln Scholar students will have access to the new state of the art "synthetic" and electronic anatomy facility at the new Family Medicine building.

Library resources, information technology services and support, and study space will be available on the SIU Carbondale campus (particularly in Lindegren Hall and the SIU Morris Library) as well as at the new Family Medicine building. Information technology services will be coordinated between these locations.

2. INSTRUCTIONAL STAFF¹

a. Describe additional hiring that is planned, including a timetable for recruitment, to support the proposed increase in class size and new or expanded regional campus.

The current administrative staff will be augmented with funds from the Lincoln Scholars Program. Although this Program will dovetail into the main structure of the medical school, there will be some staff that are dedicated specifically to this Program. Two, full-time support staff for curriculum and student affairs will be hired and dedicated to the Lincoln Scholars Programs. A faculty director will be responsible for overseeing the Lincoln Scholars Program. The existing director of doctoring would continue to be responsible for the current track of 72 first-year students and an additional director will be devoted to the Lincoln Scholars. An assistant clerkship director will be brought on to coordinate the clerkships with the department clerkship directors, and an additional position will be hired to assist with administrative tasks.

Projected Faculty/Staff additions	<u>Year</u>
Support staff, curriculum & student affairs	2019
Tutor group instructors	2019
Faculty Director	2019
Doctoring Director	2019
Family Medicine faculty/fellows	2019 through 2021
Assistant Clerkship Director(s)	2020
Support staff, Clerkships	2020
Other clinical faculty	2020 through 2022

b. Using the table below, and expanding the number of rows as necessary, list each required course and clerkship that would increase instructional staff to accommodate the proposed increase in class size and the additional new or expanded regional campus.

Explanatory note for Table 2b: Clerkships will be supported by a combination of paid and volunteer faculty. There will be 8 clerkships, with the expectation that there would be a 1:1 ratio, clinical supervisor/student. An assistant clerkship director will be assigned for each Lincoln Scholars' clerkship. That assistant clerkship director may in some cases also serve as clinical

supervisor. All assistant clerkship directors will report to their specialty clerkship director on the main campus. Assistant clerkship directors may also serve as clinical supervisors. Estimated 0.67 FTE is required for clinical supervision. This FTE calculation is based on 8 students rotating through each clerkship for a 4 week period.

Course or Clerkship Title	Number of New Staff ¹	Instructional Responsibilities of New Staff ²	Location of Staff (Regional Campus)
Clerkship, Family Medicine	Up to 2 FTEs, mix of full and part-time faculty,	Clinical supervision	Southern Illinois Healthcare (SIH) Hospitals* and SIU Carbondale family medicine clinic
Family Medicine Longitudinal 3 year experience	3 full or part-time faculty, 3 fellows	Clinical supervision	SIU Carbondale family medicine clinic
Clerkship, Emergency Medicine	Up to 1 faculty FTE ^	Clinical supervision	SIH Hospitals*
Clerkship, Internal Medicine	Up to 1 faculty FTE ^	Clinical supervision	SIH Hospitals*
Clerkship, Pediatrics	Up to 1 faculty FTE ^.	Clinical supervision	SIH Hospitals* and outpatient clinics
Clerkship, Neurology	Up to 1 faculty FTE ^	Clinical supervision	SIH Hospitals* and outpatient clinics
Clerkship, Obstetrics & Gynecology	Up to 2 faculty FTEs ^	Clinical supervision	SIH Hospitals* and outpatient clinics
Clerkship, Psychiatry	Up to 1 faculty FTE ^	Clinical supervision	SIH Hospitals* and outpatient clinics
Clerkship, Surgery	Up to 1 faculty FTE ^	Clinical supervision	SIH Hospitals* and outpatient clinics
	^May be SIU full or part- time employed or community-based faculty.		*Southern Illinois Healthcare includes Memorial Hospital in Carbondale, St. Joseph Hospital in Murphysboro and Herrin Hospital in Herrin and SIH outpatient clinics in the surrounding areas
Doctoring	8 part-time community-based faculty	Clinical supervision for rural experiences	Surrounding rural areas of Carbondale
Year 1 and Year 2 Tutor Groups	2 FTE Instructors	Small group precepting	Carbondale

^{&#}x27;Includes full-time, part-time, and community-based (volunteer) faculty, residents, graduate students, and others with teaching responsibilities.

²Includes lectures, small-group precepting, lab or clinical supervision, etc.

c. Describe the opportunities for faculty development that will be available for faculty at the regional campus, whether provided on site or at another location (e.g., at or through the central campus).

To train new faculty for the program, all Problem-Based Learning (PBL) faculty will go through the existing tutor training at the main campus, which consists of self-review of a book by Howard Barrows and a DVD demonstrating the complete PBL process. Supplemental training will be done by PBL faculty in Carbondale. New tutors will observe seasoned tutors before taking a group themselves. SIU residents all participate in our Residents as Teachers program, including residents located on the Carbondale campus. New community-based faculty are trained around clerkship objectives, on-the-fly feedback assessment form and giving oral feedback to learners. The clerkship directors in each department manage this training. Any new employed faculty have access to a variety of new faculty development programs offered through our education and curriculum offices. For ongoing faculty development, the Carbondale area has numerous, extensive continuing medical education Programs offered through southern Illinois medical organizations, hospitals and SIU School of Medicine. The medical school has started new CME Programs with teleconferencing capabilities, along with a newly organized Center for Human and Organizational Potential (CHOP). CHOP was developed to address faculty support, professional growth and mental health issues that may affect a health care provider.

d. For each required course or clerkship that is NOT increasing the number of instructional staff either at the central campus or regional campus, provide a brief assessment of the adequacy of current faculty or other instructional staff to accommodate the proposed increase in class size.

The fact that the current track's Year 1 is already in place on the Carbondale campus will allow SIU to tap into those resources. The addition of eight Year 1 students in the LSP will not place an undue burden on existing faculty in Carbondale. Year 2 will be delivered with the addition of tutor staff, but we will also tap into faculty available on the Springfield campus to develop and deliver content via electronic or teleconferencing means as necessary. We will be supplementing staff for all years and intend on supplementing some small faculty additions for Year 3 clerkships with community faculty. Electives will be offered using existing staff at both campuses. Year 4 will be integrated with existing clinical faculty and electives.

e. Describe any changes to student-faculty ratios or group size for dissection, lab supervision, smallgroup discussions, etc., that would result from the proposed increase in class size/new or addition/expansion of the regional campus.

First-year Lincoln Scholars students will be in two additional tutor groups will be composed of 4 physician assistant and 4 medical students. When Lincoln Scholars students move to the second year, they will move to one self-contained tutor group of 8 medical students. A fulltime or combination of part-time tutor group faculty will be added. Sufficient faculty/staff are available for the additional 8 students in anatomy, histology and other lab settings.

f. Briefly describe any changes in the number of standardized patients that would be needed to accommodate the proposed increase in class size/new or expanded regional campus.

Standardized patients are already in use on the Carbondale campus for both the current track's Year 1 medical students and the physician assistant students. With the small number of students added per class (8), this will not have significant impact on the number of standardized patients needed.

g. Describe the availability of resident physicians at the clinical facilities associated with the new/expanded campus. Will each student have the opportunity to interact with residents during a required clinical experience?

The Family Medicine residency Program in Carbondale has a 5-5-5 residency Program with a sports medicine fellowship slot. First-year medical students on the Carbondale campus in the traditional Program do not have any clinical experiences in this residency Program. The Lincoln Scholars students will be placed in rotations with the family medicine residency. Along with this, there are SIU residents in Carbondale for general surgery, with planning for emergency medicine. Lincoln Scholars will also have experiences with these residencies.

3. CLINICAL FACILITIES

a. List the clinical teaching sites that will be used for required clinical clerkships and check (X) which clerkships: will be offered at the site.

		Used For Required Clerkships In						
Facility Name and Campus	Fam. Med.	Int. Med.	Emerg Med.	Neurol.	OB/Gyn.	Ped.	Psych.	Surg.
Memorial Hospital – Carbondale	X	X	X	Х	X	X	X	X
St. Joseph Murphysboro	X							
Herrin Hospital	X	X	X	X		X	X	X

b. For each new inpatient facility noted in the preceding table, provide the following information:

Facility Name and Campus	No. of	Avg. Daily Occupancy	No. of Admissions/	No. of Outpatient	No. of ER Visits/Yr.
	Beds	Rate	Yr.	Visits/Yr.	
Memorial Hospital – Carbondale	146	91%	7,346	117,475	32,985
St. Joseph Murphysboro	25	19%	408	74,173	9,374
Herrin Hospital	77	78%	5,559	166,133	28,508

c. For each inpatient clinical teaching site, provide the average number of students per clinical rotation in each discipline with a required clinical clerkship at the site.

Note for Table 3c: With 8 students per class and 8 required clerkship rotations it is expected that not more than 1 student at a time would be in a clerkship. In special circumstances there may be 2 students per rotation. The clinical teaching site may vary depending on faculty used for clinical supervision.

		Average No. of Students per Rotation						
Facility Name and Campus	Fam. Med.	Emer. Med.	Int. Med.	Neurol.	OB/Gyn.	Ped.	Psych.	Surg.
Memorial Hospital Carbondale	1	1	1	1	1	1	1	1
St. Joseph Hospital Murphysboro	1							
Herrin Hospital	1	1	1	1	1	1	1	1

d. For *existing* clinical teaching sites, briefly describe any change in the number of students per clinical rotation and the numbers of faculty members or residents that would be required to accommodate the proposed increase in students per rotation.

The clinical sites proposed for the Lincoln Scholars students are not currently being used for the first-year students now taught in the traditional Program. Therefore, these are all additional students at these sites.

e. For each required clerkship, provide a brief assessment of the adequacy of patient volume and mix to accommodate the students at the regional campus.

The patient volume for each of these rotations is consistent on a per student basis with what is available for the current track's students at the Springfield campus. With only one to two students per clerkship, this will provide an immersive experience for the student with a dedicated faculty mentor.

In addition to this, as part of the Lincoln Scholars Program, the Carbondale FCM residency is proposing to add up to 3 non-ACGME post residency experiences and a geriatric fellowship. This will add faculty and fellows to enhance the educational experience.

4. STUDENT SERVICES

Provide a brief narrative assessment of the capacity of each of the following student service areas for students at the regional campus, including any anticipated changes in how and by whom the services are provided. Note if these resources will be available on site and/or through the main campus. Assess the capacity of the student services to handle the increase in class size.

Financial aid

Financial aid is currently managed by the SIUSOM Office of Student Affairs. The Student Affairs Office has full-time staff and an Assistant Dean of Students at the Carbondale campus. These services are adequate to handle the additional students.

Student health

The SIU Carbondale campus has a fully staffed Student Health Center. The students are given ID cards and coded access to safe.SIU.edu. This gives all the information they need to access the University's health and safety resources. The students are given the option of using their own, their parent's, or the SIU student insurance, if they need to use outside resources. All primary care, mental and preventive health care needs are easily accessed using the above-mentioned resources.

Personal counseling

This is available through the SIU Carbondale Student Health Center and the SIUSOM Office of Student Affairs. The students have 24/7 access to these services with little or no wait time. These services are part of the Student Health package.

Tutorial assistance

Each student is given a faculty mentor that they are required to meet with on a weekly basis. There are tutorial sessions that are scheduled with faculty on a regular basis. Most of the Lincoln Scholars curriculum is done without formal lectures (PBLM, etc) to resource sessions and scheduled specifically to plug gaps in knowledge. The Dean's Office offers Academic Coaching and Study Strategy sessions.

Career advising

This is done through the SIUSOM Office of Student Affairs by appointment. It should be noted that all of the services listed in this section are available to both the Springfield and Carbondale sites equally. We have had the advantage of having the split campus since our inception as most of these services are already developed.

5. APPLICANT POOL

a. Complete the following table with data on the entering class in each of the years indicated below. [This item applies to schools increasing the size of the entering class.]

	Four years	Three years	Two years	One year	Current
	prior	prior	prior	prior	year
Applications ¹	1,312	1,337	1,274	1,211	1,194
Interviews	326	316	243	267	284
Acceptances	145	156	128	139	130
Matriculants	72	72	71	71	71

¹Include only the number of admissions applications considered by the admissions committee.

b. Complete the following table with data on newly matriculating students in each of the years indicated below. [This item applies to schools increasing the size of the entering class.]

Average	Four years	Three years	Two years	One year	Current
	prior	prior	prior	prior	year
Total GPA	3.69	3.65	3.7	3.6	3.65
MCAT BS	10	10			
MCAT PS	9.5	9.5			
MCAT VR	9.8	9.4			
MCAT WS	NA	NA	NA	NA	NA
MCAT CPF			127	127	126
MCAT CAR			126	126	126
MCAT BBF			127	127	127
MCAT PSF			127	127	127

c. Describe whether the class size increase is likely to have impact on the geographic scope of the applicant pool and on student diversity.

The purpose of this Program is to increase the number of students eventually settling and practicing medicine in deep southern and western Illinois. Our admission process will require the students to fill out a supplemental application for the LSP and participate in interviews for it. We expect greater diversity and more students from rural areas in our Lincoln Scholars track.

6. FINANCIAL SUPPORT

a. Summarize the funding that will be available to support the class size increase, including any increase in revenue that will be provided by government sources, the parent university, or other sources to accommodate the proposed increase in class size and new regional campus.

Additional tuition received from the 32 new students will go towards funding the Lincoln Scholars. No new permanent funding from non-tuition sources will be needed for Lincoln Scholars. Hospital partners will be providing bridge funding as needed during start-up. No funds from the current 'traditional' track students will be redirected for Lincoln Scholars.

b. Provide an assessment of the expected impact of the proposed increase on scholarship support, including any projected increases in institutional funding for need-based and merit-based scholarships, and the sources for such additional funding.

It is expected that since students that apply to this Program may be from economically disadvantaged areas, we plan on providing scholarship support in the same ratio as that we provide our traditional class.

7. CURRICULUM STRUCTURE AND DELIVERY

a. Will the curriculum at the regional campus be the same as or different from that on the main campus? If different, please describe the major differences.

The Lincoln Scholars Program will constitute a parallel curriculum to the current, traditional track. The curriculum at the regional (expanded Lincoln Scholars students in Carbondale) expansion will be somewhat different than the rest of the current SIUSOM curriculum (currently with Year 1 in Carbondale and Years 2-4 in Springfield). However, the learning issues and graduation objectives will remain the same for all students. The major differences are as follows:

- i. Lincoln Scholars will work with physician assistant students in problem-based learning groups, versus the regular curriculum, in which PBL groups are comprised of only medical students.
- ii. Lincoln Scholars will be introduced to a clinical setting more deeply, right from the start of the first year. For example, while first and second year students in the regular curriculum have mentor-physicians to which they are assigned, they go out to clinical sites 4 hours every other week (on average). Lincoln Scholar students will be assigned a full clinical day weekly right from the beginning of medical school. They will also be assigned a "Patient Family" whom they will follow for the rest of their medical student careers.
- iii. Lincoln Scholar students will finish the first two years of the medical school curriculum by May of their second year. They will accomplish this by starting earlier than regular students (June versus August), having more intensive and longer-lasting tutor group sessions in Year 1 (5 hours 3 times per week versus 3 hours 3 times per week in the regular curriculum). During this time they will also be assigned a community health project linked to their "Patient Family's" specific needs.
- iv. In Years 3 and 4, Lincoln Scholars will work on a community (population health) project, rotate through 7 Core clerkships (as their regular curriculum counterparts do), with a Family Medicine continuity clinic. After this work, the Lincoln Scholars will take a summative Clinical Competency Examination with 14 uncued standardized patient cases (just as their regular counterparts do). From August to December there will be intensive Step 1 preparation which will include small group learning (Problem Based Learning with uncued cases), resource sessions for difficult topics, and practice Step 1 examinations. Students will take Step 1 of the Boards by December of Year 3. In Year 3 they will also participate in Personalized Educational Plan (PEP) focused on rural clinical settings. (Their counterparts do 15 weeks of PEP also). The fourth year may be taken up with rural electives, or the possibility exists for high-performing Lincoln Scholars students to graduate at the end of their third year.
- b. Will the didactic portions of the curriculum at the regional campus be delivered solely by on-site faculty, by central-campus faculty (e.g., by videoconferencing or other forms of distance learning), or by a combination of on-site and central-campus faculty? Describe, in general, how the content will be delivered.

The didactic portions of the curriculum at the expanded regional campus will be delivered onsite by current regional campus faculty (in Year 1 of the Lincoln Scholar curriculum) and by videoconferencing to the main campus in Springfield in Year 2. Please be aware, however, that the didactic portion of both the regular and Lincoln Scholar curricula are small compared to the other active learning modules that are occurring on-site. In the third year of the regular curriculum, there are no didactic lectures being done currently; rather, there are video-taped need-to-know sessions for students to view when they see a corresponding case. This will also be true in the Lincoln Scholars' curriculum. c. Describe, in general, how students will be assessed at the regional campus. Will the assessment methods be the same as or different from those at the central campus? How and by whom will grading for students at the regional campus be handled?

The Lincoln Scholars will be assessed in the same manner as the students in the regular curriculum. For example:

- i. Students will take multiple choice examinations identical to that of students in the regular curriculum (though the order of the questions may be altered).
- ii. Students will be assessed using standardized patients and OSCEs on the same skills as their regular counterparts, with standards set by faculty from Carbondale and Springfield, as is currently done.
- iii. Students will be formatively assessed as they move through the online, video-based Critical Clinical Competency training videos, just as their traditional counterparts.
- iv. Students will be required to pass the Head-to-Toe screening physical examination as their counterparts. Standards are set and students are evaluated in the same manner as their counterparts.
- v. Students will be required to take and pass the same Summative clinical competency examinations as their counterparts (same chief complaints). This exam's standards and pass levels are set by a Clinical Competency Committee, which is made up of SIUSOM faculty.
- vi. Students will be required to take and pass Step 1, and take Step 2 to graduate, just as their counterparts.
- vii. On-the-fly assessment narrative forms will be used to observe student's clinical performance just as is done with their counterparts.

Student exams will be graded by the same faculty as do so now. (Year 1 Carbondale faculty for Year 1 Lincoln Scholar students, Year 2 Springfield faculty for Year 2 Lincoln Scholar students, etc.) Grade results and promotion/dismissal/repeat recommendations will move through a Lincoln Scholars' Student Progress Committee, which will report recommendations to the SIUSOM's Student Progress Committee for deliberation and decision. (This body provides deliberation for the regular students as well.)

8. CURRICULUM GOVERNANCE

a. How will faculty at the regional campus be incorporated into the medical school committee structure? Is there a requirement (for example, in the bylaws) that certain committees will have representation from the distributed campus?

Since this proposal repositions the medical school's Carbondale campus to be a regional one, the curriculum governance structure is already in place. All meetings of a curricular nature already occur in Carbondale, usually by a videoconference up to Springfield (main campus). These include Admissions Committee, Educational Policy Council (to which all year curriculum advisory committees report), and the Student Progress committee. With the Lincoln Scholar's expansion, a Lincoln Scholars' subcommittee of each of these parent committees will be formed, and they will meet by teleconference with those committees monthly. Al! final decisions about curriculum admissions, and student progress will continue to be made through those parent committees as is done currently.

b. Describe how the distributed campus will be incorporated into the curriculum governance structure. How will the curriculum at the campus be managed?

Please see the answer to 8a above. The curriculum of the Lincoln Scholars' will be managed by a Lincoln Scholars Director (a faculty member on the Carbondale campus). This faculty member will report to the Dean and the Senior Associate Dean for Education and Curriculum about curricular matters, just as all years do currently. (There are Year1-Year 4 Directors for the regular curriculum currently, with the Year 1 Director located in Carbondale.)

c. If the curriculum at the regional campus will be the same as that at the main campus, describe the means by which comparability of educational experiences and methods of evaluation will be ensured.

The Lincoln Scholars Program's curricula will be managed in a parallel manner to the regular curriculum in all years (please see the answers to 8a and 8b above). Since the Carbondale campus is already a site for our regular Year 1 students, the Lincoln Scholars' Director will work closely with the other Year Directors (especially the Year 1 Director). In addition, the Senior Associate Dean sits on the Year Advisory Committees currently, and will sit on the Lincoln Scholars Advisory committee as well. The Senior Associate Dean also makes regular trips to Carbondale currently. As for evaluation; please see the answers to question 7c.

d. If the curriculum at the regional campus will be a separate parallel curriculum, describe the means by which the ultimate authority of the medical school's chief academic officer will be ensured.

The ultimate authority of the medical school's chief academic officer will be ensured since all the parent committees mentioned previously (Educational Policy Committee, Student Progress Committee, and Admissions Committee) will be in charge of those functions for the Lincoln Scholars Program as well. These committees are attended by the Senior Associate Dean for Education and Curriculum, who reports directly to the Dean.

9. ADDITIONAL SUPPORTING DATA

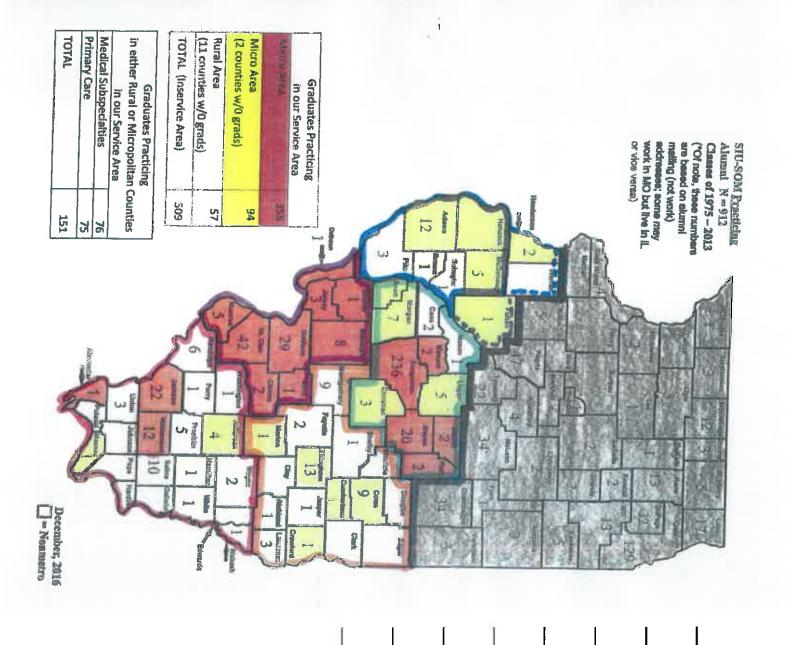
Note any other relevant data that you think the LCME should take into consideration when evaluating the adequacy of resources to support the proposed increase in class size as a result of a regional campus.

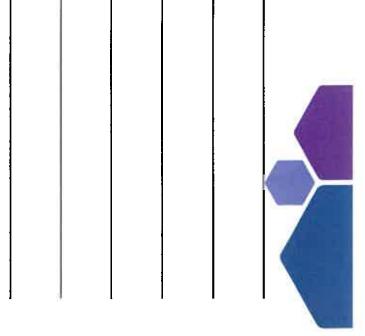
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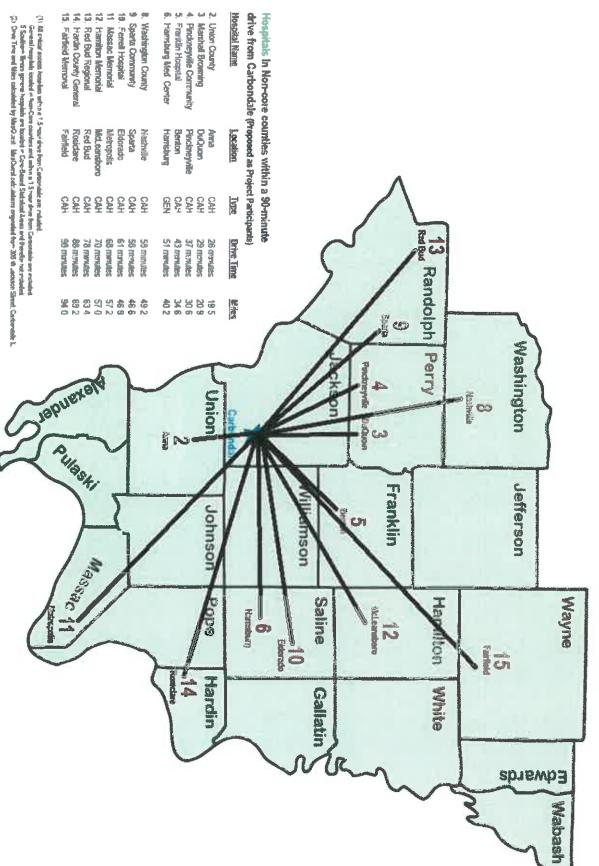
LINCOLN SCHOLAR PROJECT

November 7, 2018









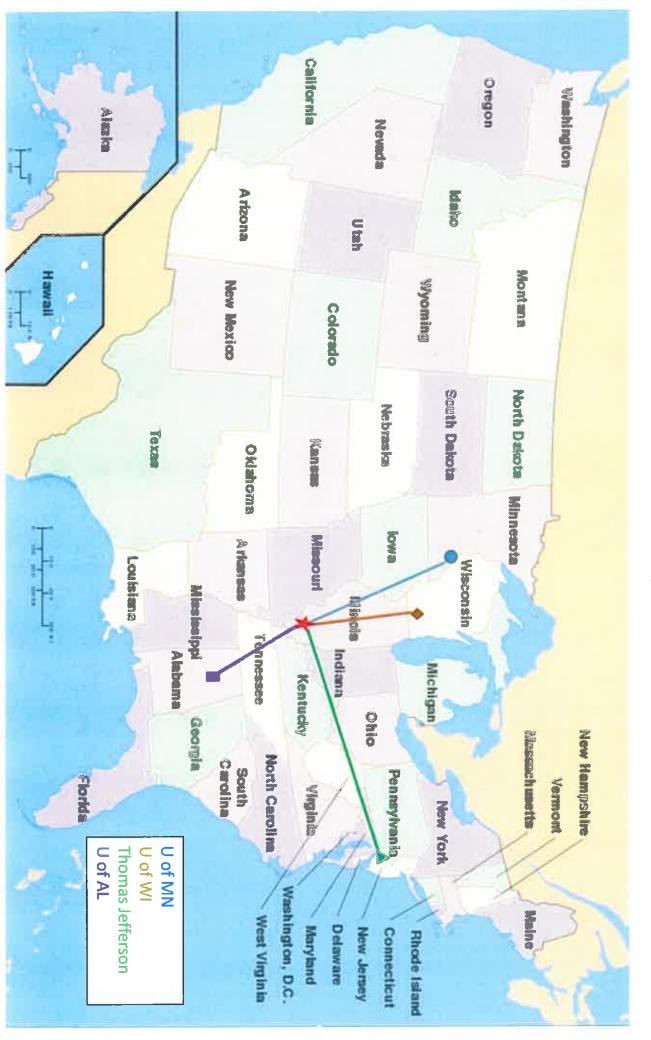
6. Hamsburg filed Center

Marshall Browning Union County

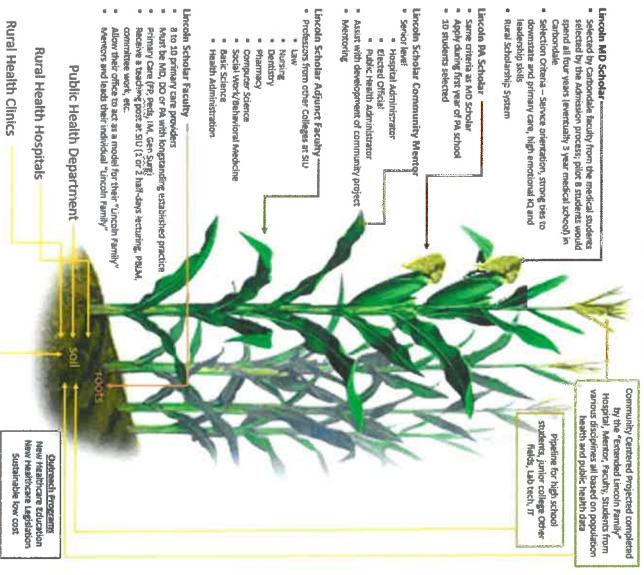




AAFP Innovative Fellowship



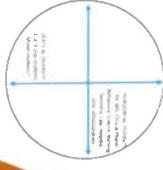
LINCOLN SCHOLAR CONCEPT Development of a Carbondale-Based Rural Medical School Curriculum A Local Organic Sustainable Model



Other Healthcare and Healthcare-related Facilities; i.e. nursing homes, public health department, law offices, behavioral health networks

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Totally Integrated Diverse Curriculum



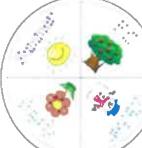
Resident Physician

and and 4th year UMD THE WASTERN

Students from other Disciplines

un Population Health Project nd Leadership in Student-run Wellness Chriic

Multidisciplinary Skill **Acquisition Retreats** Intensive



370 year LMDs* and LPAs^

Community Health project Leadership skills

Student Run Wellness Clinic

- Scribe, chrucal skills

1³² and 2³⁶ year LMDs and 1³⁵ year PA students

- EMR, expanded PBLs
- Weekly interdisciplinary PSL

*LMD's = Lincoln MD Scholars
*LPA's = Lincoln PA Scholars

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Types of Lincoln Scholar Faculty

- Clinical
- Adjunct
- Community





Duties of the Clinical Lincoln Scholar Faculty

- Lincoln Clinical Scholar = Different from Volunteer Preceptors
- Undergo background check, etc
- ✓ Agree with SIU-C and SIU-SOM policies
- Have established clinical practice (Little turnover, stable patient
- Agree to only have SIU students at practice
- Maintain Board certification
- Must agree to help mentor students, attend workshops and community retreat (other retreats optional)
- A patient at school of MYD
- CME?
- Attend graduation
- Medallion
- / Have 3 year contract



Year 1: June — May (5 units: 8 weeks each)

_	40-2	
Self-directed Learning Faculty contact	MONDAY PBL	
Lincoln Scholar Clinic	TUESDAY Lincoln Scholar Clinic	
Self-directed Learning Faculty contact	WEDNESDAY PBL	
- BLS - ACLS - ATLS - PALS - Who - Essential in vitro Tests - U/S - MSK	THURSDAY Doctoring Anatomy Histology (CCC?)	
Case Wrap-Up	FRIDAY PBL	

A M

PM



Year 2: June — August (following year) (7 clerkships: 7 weeks each)

Clerkship	Clerkship	MONDAY
PBL	PBL	TUESDAY
Clerkship	Clerkship	WEDNESDAY
Lincoln Scholar	Lincoln Scholar	THURSDAY
Clerkship	Clerkship	FRIDAY

PM

MΑ



Year 3



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Lincoln Scholar

Student Clinic

*Note: Must take Step 2 by graduation



Year 4: June – June Possible Electives

- Wilderness Medicine
- Botanical Pharmacology
- Rural Health Population Medicine
- Academic Medicine
- Fellowship Elective (Sports Medicine, OB, Behavioral Medicine, Addiction, Trauma/ED, Geriatrics)
- FP Residency Elective
- MSK Elective
- Personal and Professional Development
- Ultrasound







Local Enhancements of Medical Community

- Rural Access hospitals
- Not currently being used as a teaching site
- PA Program / Student Run Clinic
- Possible (4) Fellowships added to Family Medicine Residency
- Maternal Fetal Medicine
- Ruralist Program
- Behavioral Medicine
- Geriatrics





Proposal Clearance needed from ACGME and LCME



Pilot Program

- √ 8 students for a total of 24
- \checkmark This is in addition to the current 72 first year students





TARGET DATE FOR STUDENTS TO START





