

Year 1 Curriculum Advisory Committee Meeting

Tuesday, August 14, 2018

Present: J. Cheatwood, J. Daniels, J. Davie, L. DiLalla, A. Johnson, D. Klamen, J. MacLean, S. Merideth, P. Narayan, E. Niederhoffer, S. Shea, A. Sutphin, R. Weilbaecher

Proxy: S. Shea for C. Anderson

S. Shea called the meeting to order at 8:45 a.m.

Minutes

The August 7 minutes were approved as distributed.

Announcements

J. Cheatwood shared that MPEE students and mentors received payment following delays resulting from a new accounting system. B. Tuthill was helpful in navigating the new system, and the process should be smoother next year. MPEE presentations will be held Friday, August 31, at 10 a.m. via videoconference to Lindegren Hall room 205.

S. Shea announced that K. Carlson is leaving the SOM at the end of August.

J. Cheatwood clarified from the August 7 minutes that Faculty Council has voted upon the revised promotion and tenure document; it awaits a vote by the faculty in general.

There are openings to serve on the EPC. Those interested should contact S. Tischkau. C. Li's position as Y1 basic science representative is one of the openings. The EPC also discussed programmatic assessment, the Y2 HII Unit calendar, and a series of workshops to be held this year. The Teaching and Learning in Medicine Symposium will be held April 26, 2019.

S. Shea reported for C. Anderson that she has enough mentors for all students.

CRR Unit

E. Niederhoffer reported that the unit is underway and going smoothly. The mid-unit exam will be sent to faculty for review soon. Exam deadlines are earlier this year because of the new testing software.

Advisors/Coaches in Y1

The EPC requests that faculty advisors be called coaches. J. Daniels believed last year's coaching program went well. There was one incident when a faculty member became overly involved with a student, but that student was not his/her advisee. He reminded coaches that students with health issues or intense personal problems should be referred to him. The lists will be distributed once all coaches have been identified.

Y2 will have coaches this year for the first time.

CARE/MPEE Sites

S. Shea, J. Cheatwood, and C. Anderson have discussed concerns with CARE and MPEE sites. Originally, students could work on a project anywhere in the world. Some years ago, E. Constance eliminated the option for international projects due to a variety of concerns and problems.

Projects involving patient care or contact require legal affiliation agreements, which are becoming increasingly difficult to secure. One agreement involved 45 hours of faculty time, including legal counsel. As a result, S. Shea proposed that beginning this academic year CARE and MPEE projects involving patient care/contact be limited to SIU SOM sites and sites for which we already have affiliation agreements (including SIH). Projects

that do not require affiliation agreements, e.g. those that involve business, research, software development, literature searches, and the like, would not be restricted.

J. Cheatwood concurs with the plan though he has some reservations about the restrictions. The plan will be voted upon at the September meeting, but he will present MPEE to the students later this month according to the proposed plan.

Lincoln Scholars Update

According to J. Daniels, the Lincoln Scholars (LS) curricular track has been made a priority by the Dean. The plan is to continue to have 72 new medical students in Carbondale as part of a traditional track and to have eight students per year in the LS track, with LS students spending all three or four years of medical school in the Carbondale area. LS students will be in the regular SOM applicant pool and will have to go through a secondary application and interview process (in Carbondale) in order to apply for LS.

D. Klamen and a working group was brought in to design the curriculum. The proposal will be submitted to the LCME in December. It will be reviewed and implemented, but evaluation of LS will not take place until the next regularly scheduled site visit. The Board of Trustees and IBHE will likely have to approve the program as well. LS likely will have a separate director and support staff.

The LS program will have little impact on Y1 faculty as the students will be joining PA tutor groups and, with some modifications, will essentially be progressing with the PA curriculum for the first one and a half years. There will be doctoring supplements, and LS students will spend a full day each week with their mentor, who will be located outside of Jackson and Williamson counties. LS students will take the same examinations as the traditional track students. Mentors will be physicians in established primary care practices; they will receive training and some reimbursement. LS students will have the same mentor for their entire medical school career.

The last half of the LS second year will be spent in intensive basic science study, including uncued ePBLMs, to prepare them for Step 1. This portion of the curriculum may involve interactions with Y1 basic science faculty. The third and/or fourth years will involve clinical clerkships, student clinics, some electives, and continued work with their mentor. Students who opt for primary care residencies in the region will have the perk of being exempted from the residency match and beginning practice after only three years of medical school.

The SIUE College of Pharmacy and SIUC School of Social Work will be involved in the curriculum. F&CM will be built up in order to help support LS, and a program in southwestern Indiana will be involved [no name provided].

The goal of LS is to provide more primary care physicians in underserved counties. Additional residency slots may be developed to offer to LS students, and loan repayment plans may be developed to encourage these students to remain in the local communities to which they are assigned.

With regard to failsafe measures for LS students, D. Klamen noted that at least initially no at risk students will be admitted to the program. If there are students for whom LS does not work out, returning the following year in the traditional track will be an option. In addition, because programmatic assessment will be used, if students are deemed unready to take Step 1, they will either delay taking the exam or move to the traditional track. The progress of LS students will be monitored very closely.

The LS students will be housed with the PA students in the new building, which has no library. They and the PA students will have access to the Medical Resource Center in Lindegren and may require different and additional resources. J. Daniels noted repeatedly that LS has a tight budget.

F&CM PCTE Activity Update

S. Shea reminded the committee that two hotspotting teams are being created in Carbondale this fall. S. Shelton and K. Waldyke are the faculty coaches. Interested medical students will be added to the teams after the CRR mid-unit exam. The goal of hotspotting is to identify the “superusers” of emergency departments and reduce those visits with education and intervention. SIH is participating in the program, and significant cost savings are anticipated. SIU is one of four sites in the country for the program.

As part of the Primary Care Training Enhancement (PCTE) grant, there will be three interprofessional experiences during the upcoming academic year: one each on poverty stimulation, geriatrics, and domestic violence. Medical students will be required to attend only those that are a required part of the curriculum; all others will be optional.

L. DiLalla suggested that students who opt to attend these experiences as well as PPR should receive a certificate to be included in their red files. Such an incentive might improve participation rates.

Next Meeting

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

The meeting was adjourned at 9:42 a.m.