# CEPC Monthly Meeting

01.13.2020 05:00 PM - 06:30 PM

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TTUHSC EP Paul L. Foster School of Medicine
5001 El Paso Drive
El Paso, TX, 79905
USA
1. REVIEW OF MINUTES.

Decision

December 2nd meeting minutes approved.

2. ANNOUNCEMENTS.

3. STUDENT CONCERNS/REPORTS.

Discussion

MS2 brings up SCI curriculum grading issues. Dr. Hogg replies this was due to a change of instructors. Students feel a benchmark of 75 is too high due to the lack of clarity on the content. It will be difficult to modify it mid-course due to syllabus already being approved, however serious consideration will be given towards changing it going forward.

Dr. Cervantes questions why it was MS2's who took the survey when it should have been MS1. MS2 replies the main idea of survey was to lower the passing grade so that more students near semester 2 could start focusing toward the board exams since they already established a good baseline for USMLE material.

Dr. Hogg replies there is a high level of subjectivity in the questions, and suggests making a data driven decision.

No issues raised by first year rep.

3rd years are concerned about Alex Garcia's leaving and asks if they will hire someone else to take his place. Dr. Hogg replies he was only just been made aware of this today, but hopefully they will get someone in the interim position for now to create a smooth transition.

MS3 asks if there is a point of contact for now or is it still Alex Garcia since he will be here until the end of month. Dr. Brower replies either Javier Calzadillas, himself, or Dr. Martin, but Javier Calzadillas would be the starting point.

Dr. Brower will also be sending out an email to the students notifying them of the new point of contact.

MS4 raise no concerns.

4. 4TH YEAR CARING COMMUNICATION ELECTIVE.

 Presenter(s): Gorby, Laura, Quest, Dale

Discussion

Caring and Communication is currently offered as a two week elective but should be a three week, with one week for contract negotiating and two weeks for execution. The theme is patient care overall and how to interact with them during the loss of a loved one, serious illness conversations and communicating bad news. Students
task is to negotiate a learning proposal within the theme, identify what resources they will tap to accomplish the objectives, provide evidence that objectives were met, and provide validation criteria to show how well they met the objective.

time is factor when negotiating the contract, Lora Gorby is currently working with IT to create a canvas site so students will be able to negotiate the contract from wherever they are, and local specialists who would be willing to allow students to come and learn at their respective sites. Specifics with the objectives is an issue for students, students currently have 2 weeks to negotiate contracts and prove that they met the learning objectives.

Students are currently required to do pre work before the beginning of the two weeks. One of the aspects of the elective is to demonstrate general use of contract learning as an approach to develop and document self directed learning, the second is learning within the scope of the elective.

Dr. Hogg asks what the students are doing after the contracts have bee negotiated, Dr. Quest replies they are going to the sites and meeting with people who are going through these issues everyday, both the patients and the doctors who treat them in order to learn some easier ways of talking to patients about things like end of life goals and breaking bad news.

Most students have invested an extra week in order to complete the elective on time.

Dr. Quest requests making the elective three weeks instead of two. Dr. Francis raises the issue that they only offer two or four week electives and they cannot only give 3 credits due to throwing it off balance. Laura Gorby asks if having the students contact them a week earlier and doing some pre work is acceptable to which Dr. Francis replies students in research often have to put in pre work before the actual objectives.

Dr. Quest decides to keep the current elective time frame of two weeks.

**Decision:** Keeping the electives time frame at the current 2 week slot.

## 5. 4TH YEAR MEDICAL EDUCATION RESEARCH ELECTIVE.

**Presenter(s):** Francis, Maureen

Medical Education Research Elective.docx

**Discussion**

Dr. Francis proposes to add research elective for Medical Education. Elective would be two to four weeks and would require the student to contact and set up a mentor ship on their own, and outline objectives and goals. Dr. Mack would review objectives and goals to insure that it is not a duplication of SARP, it then gets sent to Dr. Francis who signs off on it. At the end of the elective the mentor would give the student a grade based on what outlined goals and objectives were met.

Dr. Nino asks how much the students are going to be able to accomplish in the 2 to 4 weeks, to where Dr. Francis replies there's all different parts of the research students will take part in and that's why the objectives are up to the mentor since they know the timelines, Dr. Nino asks if the 4 weeks have to be consistent to which Dr. Francis replies yes.

Dr. Danovich asks if there's some type of documentation for the research electives and how do we know what the students are learning to which Dr. Francis replies the mentor keeps track and documents what they are doing and save the forms.
Dr. Hogg motions for approval.

Committee approves new elective.

6. INSTITUTIONAL 2020-2025 STRATEGIC PLAN - INTEGRATION WITH UME.

Presenter(s): Hogg, Tanis

Discussion

Central committee was put together in the fall as well as sub committees which included 4 members from each school.

The first objective that was created was to enhance enrollment to which PLFSOM came up with:

- Increase number of annual college recruitment
- Increase number of secondary applicants
- Optimize CRM admissions platform
- Increase schools enrollment to 150 first year students by 2025.

Increasing class size and utilizing better resources will help to grow and retain students.

Dr. Nino asks if they are looking into the quality of students and not just quantity, Dr. Hogg replies it will become more of a challenge as they increase the class size but they don’t want to recruit students who will be at great risk, and by recruiting by 5% more each year will help to control the quality of incoming students.

Resources needed for the clerkship phase would be 8 to 10 additional small group rooms

- 2 new college suites
- 8 additional DME faculty and offices
- 5 additional program coordinators
- Additional libraries
- Additional preceptorship faculty
- More funds for SARP program
- More student scholarships

Clerkship's will need:

- 15% growth of full time clinical faculty with attention to current/anticipated bottlenecks.
- 150 additional community faculty
- 1 additional clerkship director
- 4 additional program coordinators

Dr. Francis states the current bottlenecks are in Pediatrics inpatient, Pediatrics wards, Pediatrics specialties, and with growths in the class size internal medicine wards would require new sites, as well as OB/GYN labor and delivery, Psychiatry will need another inpatient site. Surgery is already over crowded and will need more space.
Having been looking at sites outside of El Paso for students to rotate to for the different clerkship's. Currently the off site locations are voluntary, but in the future a lottery system will need to be implemented due to growing class sizes.

MS3 says it is not uncommon and has interviewed with other schools who operated this way.
Dr. Francis mentions housing at off site locations will be paid for, Dr. Furhman asks if we will pay additional community faculty, Dr. Hogg replies we havent been able to so far but traditionally schools have not paid community faculty, but do certain incentives from tech. Osteopathic schools are starting to offer large sums of money for community faculty however, so this might change for PLFSOM.

Growth must be slow in order to stay within the rules of the LCME to avoid an application process. Dr. Cervantes asks about repeating students to which Dr. Hogg replies yes he expects to see more repeats, but that is expected with a larger class.

Enrollment management plans include

- Expand the matriculation of students who align with the institutional mission
- More student scholarships and financial support for additional outreach and pipeline programs
- Forster student success through proactive student services programming, with a 4 year graduation rate of 85% by 2025 and a 5-6 year graduation rate of 95%
- Develop and implement a real time student performance to help identify at risk students
- USMLE step 1 first time pass rate at or above nationally benchmark average projections based on AAMC MCAT Validity report
- Additional students services and affairs support as well as a new lead analyst in Office of Med Ed

Would also like to develop manual invasion medical education award that will recognize individuals who make significant contributions to the school of medical education.

Mari asks if it includes residents teaching to which Dr. Hogg replies yes, Mari suggests giving a cert or award to those who taught so they can put on their portfolio to which Dr. Hogg replies yes they will come up with something to give more recognition.

Dr. Hogg mentions that they don't want this growth to negatively impact the student learning environment and they hope this is will be beneficial.

Dr. Padilla asks what does firecracker do exactly, to which Dr. Hogg replies it tracks students real time to ID struggling students and also give weekly tests and tracks weaker areas based on the results in order to give more content to the student in the area they are struggling in.

Dr. Hogg asks if any students have used firecracker yet to which MS2 replies at first they were but have started switching over to Eworld or other programs.

7. OPEN FORUM.

8. ADJOURN.

Discussion
Meeting adjourned at 6:30.