Purpose:

Presenters: Brower, Richard, Cashin, Laura, Cervantes, Jorge, Francis, Mark, Fuhrman, Lynn, Gest, Thomas, Janssen, Herb, Kassar, Darine, Padilla, Osvaldo, Pfarr, Curt, Salazar, Ricardo, Salazar, Tammy, Uga, Aghaegbulam H

Note Taker: De-Lara, Veronica

Attendees: De-Lara, Veronica, Beinhoff, Lisa, Blunk, Dan, Brower, Richard, Cashin, Laura, Cervantes, Jorge, Cotera, Maria, Dankovich, Robin, Dudrey, Ellen, Francis, Mark, Francis, Maureen, Fuhrman, Lynn, Gest, Thomas, Hogg, Tanis, Horn, Kathryn, Janssen, Herb, Kassar, Darine, Lacy, Naomi, Lopez, Josev, Maldonado, Frankj, Padilla, Osvaldo, Perry, Cynthia, Pfarr, Curt, Salazar, Ricardo, Salazar, Tammy, Uga, Aghaegbulam

Guests: brittany.harper@ttuhsc.edu, carolina.blotte@ttuhsc.edu, daniel.welder@ttuhsc.edu, david.e.morris@ttuhsc.edu, douglas.weier@ttuhsc.edu, hilda.alarcon@ttuhsc.edu, justin.hartmann@ttuhsc.edu, laura.palmer@ttuhsc.edu, rima.r.patel@ttuhsc.edu

Location: MEB1140

1. Review of Prior Minutes

General Note

Minutes approved as written.

2. SCEC Rep Report

General Note

No concerns.

3. Policy Approval-Voting via email

Periodic Review of Educational Program Policies & Narrative Assessment

- Narrative Feedback Policy DRAFTv2017MAR16.docx
- Periodic Review of Educational Program Policies DRAFTv2017MAR07.docx

General Note

YR 1&2 Narrative Assessment for WCE- Encourage Narrative Assessment-Student's feedback

Conclusion

Both policies approved by CEPC committee members.

4. Systems-based practice (6.1-6.4)

General Note

- Systems Based Practice PGO Review.pptx

6.1 Describe the health system and its components, how the system is funded and how it affects individual and community health.

6.2 Demonstrate the ability to identify patient access to public, private, commercial and/or community-based resources relevant to patient health and care.

6.3
Incorporate considerations of benefits, risks and costs in patient and/or population care.

6.4
Describe appropriate processes for referral of patients and for maintaining continuity of care throughout transitions between providers and settings.

- Does the educational program have adequate learning objective linkages for each goal and its objectives? If so, by what criteria? If not, are there other curriculum or program features that promote and/or ensure fulfillment of the program objective?
  - There are linkages to all four PGOs based on information provided
  - The criteria depend on those creating the objectives

- Does the educational program adequately assess each goal and its objectives?
  - There are both formative and summative assessments for this PGO that appear adequate for this PGO.

- Would it be possible for a student to graduate from PLFSOM with deficiencies in any of the goal/competency domains?
  - No system is foolproof.
  - However, there are reasonable guards to this that are appropriate for this PGO

- Would the school know if a student were deficient in any of the goal/competency domains and, if so, how?
  - Some summative testing
  - One of the competencies assessed in the mid-clerkship and final assessment of the block rotations
  - Those receiving three needs improvement assessments in their final evaluation on this competency are referred to the GPC

- For each program goal and/or objective, how, and up to what point, is a student able to demonstrate remediation for deficiencies?
  - Summative exams can be remediated
  - Plans to address deficiencies in the block clerkship rotations can be addressed at the mid-clerkship reviews
  - Recurrent problems would go to GPC which could suggest remediation strategies

- Identify and prioritize programmatic weaknesses for each assigned objective, and for each assigned overarching goal. Provide recommendations for improvement and tracking of identified weaknesses (think CQI...plan-do-study-act cycles)
  - There is room for growth in this PGO during both the pre-clerkship and clerkship years
  - Improve our health care system
  - New activities in the intersessions planned for next year
  - There is a need for faculty development in assessing and providing appropriate feedback in this PGO
    - Awareness
    - Student ownership in this PGO
    - Assessing behaviors
      - Exceeds Expectations
      - Meets Expectations
      - Needs Improvement

See attachment for details

6. Professionalism (5.1-5.7)

General Note
Thorough assessment elements mapped to PGOs flag individual student deficiencies

- Current Program Objectives are difficult for mapping course level objectives.
- Tracking of event cards-not tightly coordinated with Professionalism-prepared by College Masters
- Expectations are communicated to students

Suggestion- Smaller core behavior
E-Portfolio- Professionalism feedback

Dr. Hogg- Consolidate Professionalism-
Dr. Francis- Bring back Peer evaluations for Professionalism

- Reflection

Horn, Kathryn
If Student were deficient and was brought to GPC- they direct how they will remediate- monthly meetings with Dr. Horn, writing a paper, reading a textbook, etc.

Francis, Maureen
Issue is with the profession itself- we don't have a definition of Professionalism that is accepted by Medical Professionals

- Intuitive, virtue-based, morality-based -- Putting Patient and others above yourself
• How to define it and measure it?
• Professional identity formation - every institution should decide on their own
• Dr. Horn - where did it come from - who support it?
  o CEPC took it to Faculty council - Have a process and explain the process

Response to feedback - what gets people in trouble with licensing boards that can be traced back to Med School

• Accountability issues - late, don't turn stuff in
• Response to feedback - accept and grow from it

General Note
Please see attachment for details.

CEPC_PGO_PROFESSIONALISM_03.20.2017.pptx

Conclusion

• Show respect for all people.
• Know ethical principles and demonstrate ethical behavior.
• Show empathy and compassion for people.
• Demonstrate honesty in all activities.

Fulfill all obligations.

7. Adjourn

General Note
Meeting adjourn 6:18pm

Parked Items

5. Interpersonal and communication skills (4.1-4.4)