

Curriculum Committee Minutes

Date	February 7, 2022	
Time	4:00 – 5:30PM	
Co-Chairs	Mark Whipple, Sherilyn Smith	
Attendees	tendees Academic Co-Chair: Sherilyn Smith	
☑ QUORUM REACHED: 15	Voting Members: Audrey Mossman, Cindy Knll, Courtney Francis, Elizabeth Buhler, Eric LaMotte, Esther Chung, John Willford, Kris Calhoun, Laura Goodell, Leanne Rousseau, Matt Cunningham, Peter Fuerst, Ryan Richardson, Zach Gallaher Guests: Frank Batcha, Kellie Engle, John McCarthy, Edith Wang, Jaime Fitch, Brenda Martinez, Ceradwen Tokheim, Cynthia Sprenger, Eric Kraus, Carmelita Mason-Richardson, Erin Gunsul, Gina Franco, Heather McPhillips, Heidi Combs, Julie Bould, Karla Kelly, Kathy Young, Kelley Goetz, Laura Yale, LeeAnna Muzquiz, Margie Trenary, Martin Teintze, Meghan Kiefer, Misbah Keen, Nick Cheung, Scott Baily, Doug Paauw, Darryl Potyk, Amanda Kost, Jenny Wright, Paul Borghesani, Sara Kim, Sylvia Zavatchen, Ruth Sanchez	
Regrets	Voting members: Ben Trnka, Carolyn Bell	

Agenda

	ITEM	LEAD	TIME	ATTACHMENT	ACTION
1	Approve January Minutes	Sherilyn Smith	2 min	Attachment A	Decision
2	 Announcements: Disclaimer on <u>Credit Limit in a</u> <u>Specialty Policy</u> expires CUSP Admissions Program is being managed by Office of Healthcare Equity Academic Co-Chair recruitment 	Kellie Engle / Jessica Wheeler	3 min		Announcement
3	PEAC Recommendations for Clerkship Grading	Matt Cunningham	40 min	Attachment B	Discussion / Decision
4	WRITE Program	Frank Batcha / Amanda Kost	45 min	Attachment C, D	Discussion / Decision

Next Meeting: March 7, 2022



1. Approve January Minutes				
Discussion: The January minutes were reviewed.				
☑ DECISION REQUIRED? [13] VOTES FOR [0] VOTES AGAINST				
Decision: The Curriculum committee approved the January meeting minutes.				

2. Announcements

Announcements:

1. Disclaimer on Credit Limit in a Specialty Policy will expire at the end of the current clerkship year

In May 2021 Curriculum Committee approved a temporary change for the 2021-2022 clerkship year for away rotation credits (one per student per specialty). The Coalition for Physician Accountability (COPA) is a group that issues guidance for medical schools nationwide and this disclaimer was to keep in line with their guidance for the 2021-2022 clerkship year.

2. CUSP Admissions Program is being managed by Office of Healthcare Equity

There was previous talk that the Community-Focused Urban Scholars Program (CUSP) might update its structure to become a pathway (requiring approval by Curriculum Committee). This program is not changing structure and will continue to be an admissions program, but has moved under the Office of Healthcare Equity

3. Academic Co-Chair recruitment

Dr. Sherilyn Smith will be retiring in summer 2022, the Curriculum Committee will need a new Academic Co-Chair. Curriculum Committee bylaws stipulate the Academic Co-Chair will be selected form faculty members who have served for at least one year. In the event of multiple candidates, a vote of the Curriculum Committee members will choose the next co-chair. Academic Co-Chairs are expected to serve a three-year term. Duties include:

O Working with the Executive Co-Chair (the Associate Dean for Curriculum) to set agendas, lead meetings, ensure adequate and appropriate documentation of meetings and decisions, convene task forces and special groups as needed, serve as liaisons to the phase committees (Foundations, Patient Care, and Explore & Focus Phase Committees), report recommendations to the Vice Dean for Academic, Rural and Regional Affairs and by extension the Faculty Council on Academic Affairs (FCAA) and provide updates to the Medical School Executive Committee (MSEC).

If you meet the criteria and are interested in serving as the Curriculum Committee Academic Co-Chair, send an e-mail to the Curriculum Team at somgov at uw.edu.

3. PEAC Recommendations for Clerkship Grading

Discussion: In January 2021, Curriculum Committee reviewed grading criteria for the nine required clerkships (i.e., how the clinical assessments and final exam are combined into a final grade) and noted the large number of differences across clerkships. The committee discussed whether these differences are necessary or beneficial, either from the perspective of assessment validity or from the perspective of a student trying to navigate their required clerkships.



The Curriculum Committee then approved a charge to the Program Evaluation and Assessment Committee (PEAC):

Each required clerkship uses a slightly different method to both calculate the clinical numerical grade, and then combine the clinical numerical grade with the final exam score to come up with the final numerical grade for the clerkship. After examining these methods, the rationale (and benefit to the school) for retaining these differences in grading method is unclear. Grading differences also add unnecessarily to the cognitive load experienced by the students as they navigate the eight required clerkships. The Curriculum Committee charges PEAC to recommend a single method of determining clinical numerical grade and final numerical grade that can be used across all required clerkship departments. Details about what is considered in-scope for this charge are listed below:

In-scope:

- Best practices for calculating the clinical numerical grade
- How the clinical numerical grade is combined with the exam score to create a final numerical grade
- Performance standards for exams (e.g., threshold for passing, threshold for honors)
- Percent honors awarded across clerkships

In addition, the Curriculum Committee advised PEAC that recommendations for standardization should be developed through an equity lens, looking at the impact that current grading procedures have on students who are from underrepresented minority groups (URM; African American/Black, Latino/Hispanic of any race, American Indian or Native Alaskan, Native Hawaiian/Other Pacific Islander). PEAC began work on this project in February 2021. PEAC collected information about core clerkship grading from other medical schools (38 in total). From this information, PEAC developed a set of questions that would be the basis for any potential recommendations for grade standardization (See Appendix B in the meeting handouts).

After discussing PEAC's recommendations, the committee decided they need to hear from the Patient Care Phase Committee and clerkship directors before voting to approve any recommendations.

See meeting handouts for details.

9			
☑ DECISION REQUIRED?	[15] VOTES FOR	[0] VOTES AGAINST	
Decision: The Curriculum committee approved referring PEAC's recommendations for the standardization			
of required clerkship grading to the Patient Care Committee for further discussion and input			

4. WRITE Program

Discussion: Curriculum Committee continued discussion on WRITE 2.0. See January 2022 meeting minutes for details of previous discussion and approvals.

The timeline for WRITE 2.0 to launch by Winter Quarter 2023:

- 1. "MEDLIC" course prefix was approved at the University of Washington (UW) level
- 2. MEDLIC course 1 (601) and course 2 (602) applications must be submitted March 15, 2022 to the UW School of Medicine (UWSOM) for approval and then submitted to the UW Curriculum Committee by April 1, 2022
 - a. Course applications require: learning objectives, assessment plan, and supporting materials (such as a syllabus)



3. Inpatient courses (3-6 weeks in length) must be submitted to the UW Curriculum Committee by Mary 6, 2022.

The WRITE team presented the program's new learning objectives, and assessment plan for review and approval by Curriculum Committee:

WRITE Objectives (mapped to UWSOM Program Level Objectives and Entrustable Professional Activities (EPAs) where appropriate)

- 1. Obtains a complete medical or behavioral health history for patients across the lifecycle using relevant communication skills. (*PC.02*) (*EPA 1*)
- 2. Perform the appropriate physical or mental status examination with patients across the lifecycle. (*PC.02*) (*EPA 1*)
- 3. Constructs a differential diagnosis and supports the most likely medical or behavioral diagnosis for patients across the lifecycle. (PC.05) (EPA 2)
- 4. Applies medical knowledge to interpret diagnostic and screening tests. (PC.04) (EPA 3)
- 5. Develops and communicates appropriate medical and behavioral health management plans for patients across the lifecycle. (PC.06) (EPA 4)
- 6. Applies medical and behavioral health knowledge to propose diagnostic and treatment plans across the lifecycle. (KP.01, KP.05, KP.08, KP.11) (EPA 3)
- 7. Produces accurate, complete and organized write-ups for patients across the lifecycle. (CS.04) (EPA 5)
- 8. Presents organized, accurate, and appropriately focused oral case presentations for patients across the lifecycle. (CS.02) (EPA 6)
- 9. Communicates effectively and compassionately with patients, caregivers, and families from a broad range of socioeconomic and cultural backgrounds across the lifecycle to mitigate health inequities. (CS.01, CS.05, CS.06) (EPA 1, EPA 3)
- 10. Demonstrates demeanor that puts patients, families, and members of the health care team at ease. (PD.07) (EPA 1, EPA 3, EPA 9)
- 11. Coordinates patient care within systems that are rural and potentially resource limited. (SB.01-.02) (EPA 9)
- 12. Identifies gaps in knowledge, attitudes, and skills and applies clerkship feedback to improve practice. (PB.03, PB.05) (EPA 7)
- 13. Locate, appraise, and assimilate evidence related to patients' health problems. (PB.06) (EPA7)
- 14. Communicates and works effectively with other health-care professionals as a member of the team. (IP.03) (EPA 9)
- 15. Use the knowledge of one's own role and the roles of other health professionals to appropriately assess and address the medical and behavioral health care needs of patients across the lifecycle. (IP.02) (EPA 9)
- 16. Demonstrate appropriate professional and ethical behaviors. (PR.01-.06)

The EPAs that will be assessed in WRITE

- EPA 1: history and physical exam
- EPA 2: differential diagnosis
- EPA 3: diagnostic and screening tests
- EPA 4: orders and prescriptions
- EPA 5: documentation



- EPA 6: oral case presentations
- EPA 7: clinical questions
- EPA 9: interprofessional team care

Instructional Strategies (mapped to MedBiquitous instructional methods)

- IM02: Clinical experience Ambulatory
- IM03: Clinical experience Inpatient (as available by setting)
- IM13: Lecture (Prerecorded modules on how to prepare Oral Case Presentations (OCP) and writeups for pediatric and adult patients and those with behavioral health or reproductive health concerns)
- IM31: Patient presentation Patient
- IM08: Discussion, Small Group (Small group discussion and debrief of student OCPs)
- IM06: Demonstration (depending on setting and clinical care)
- IM24: Service-Learning Activity (required community engagement project or service-learning hours with reflective component)

Assessment Strategies (mapped to MedBiquitous content)

- AM01: Clinical documentation review
 - Required clinical encounters
 - o Write-ups
- AM11: Oral patient presentation
 - o Formal oral case presentation (two of each)
 - Pediatric care
 - Adult ambulatory care
 - Reproductive health
 - Behavioral health
- AM02: Clinical performance rating/checklist
 - Workplace-based assessments of EPAs
- AM10: Narrative assessment
- AM16: Research or project assessment
 - o Community engagement or service-learning project
- AM13: Peer assessment
 - o Peer feedback using a structured form for the required formal OCPs
- AM17: Self-assessment
 - o Pre- and post-Ottawa levels for EPAs for Course 1 and Course 2
- AM08: Exam nationally normed/standardized, subject
 - o Family Medicine NBME exam



Assessment strategies linked to learning objectives

Strategy	Learning Objectives
AM01: Clinical Documentation Review	LO1, 2, 3, 4, 5
AM11; Oral Patient Presentation	TO 8
AM02: Clinical Performance Rating/Checklist	All
AM10: Narrative Assessment	All
AM16: Research or Project Assessment	LO 11
AM13: Peer Assessment	LO8
AM17: Self-Assessment	LO 1-15
AM08: Exam - Nationally Standardized, Subject	LO 1, 2, 3, 4, 5, 6, 9, 13, 15

Evaluation Details

- Components that must be completed
 - Required clinical encounters
 - o Oral patient presentations
 - o Write-ups
 - o Service-learning/research project
 - o Peer assessments
 - Self-assessment
- Narrative assessment will be the comments in the evaluation
- Components that contribute to the grade
 - Checklist/workplace-based assessment
 - o NBME Family Medicine Exam

Using competency-based assessment in a letter grade environment

Based on a study out of Minnesota, the WRITE 2.0 team developed a potential grading framework. Ultimately, the advisory board would make entrustment decisions.

- Honors: Meeting entrustment in all WRITE EPAs across both contexts of encounter
 - o Type of visit: acute, chronic, preventive
 - o Type of patient: adult, pediatric, behavioral health, reproductive health
 - o Setting: outpatient, inpatient, nursing facility, etc.
- High Pass: Meeting entrustment in all WRITE EPAs across one of the two contexts (type of visit, patient, setting)
- Pass: Meeting entrustment in all WRITE EPAs

Inpatient Course Discussion

The Committee discussed the timeline for a Winter Quarter 2023 launch and how to proceed with the inpatient courses. There are two options for the inpatient components:

- Use variable credit and enroll students in existing clerkship (no applications needed)
- Create new standalone courses that would be approved by Patient Care Committee (submitted to UW Curriculum Committee by May 6, 2022)

The 3-week inpatient courses currently used for WRITE are:

- Psychiatry: PBSCI 665 P-WRITE Basic Psychiatry Clerkship Seattle (at Harborview Medical Center)
- Pediatrics (PEDS uses two sites for WRITE students)
 - o PEDS 665 P-WRITE Pediatric General Clerkship Seattle (at Seattle Children's Hospital)
 - PEDS 648 P-WRITE Pediatric General Clerkship Everett (at Everett Clinic)



• When Medicine was a part of WRITE we used MEDRCK 601- P-WRITE Medicine Clerkship — Seattle (at Seattle Area Sites)

Considerations for new courses:

- Applications must be submitted and through UWSOM-level approvals by May 6, 2022 (UW Curriculum Committee meeting is scheduled for May 31, 2022).
- Considerations for having a unique inpatient Internal Medicine/Pediatrics/OBGYN/Psychiatry course and having WRITE students at more than one site:
 - o Create unique course numbers for each of the possible sites
 - o Use one course number for the inpatient WRITE experience at all sites

The WRITE team will look into which approach should be taken for the new courses and report back to Curriculum Committee after discussions at the Patient Care Committee.

☑ DECISION REQUIRED?	[14] VOTES FOR	[0] VOTES AGAINST		
Decision: The Curriculum committee approved WRITE's new learning objectives				
☑ DECISION REQUIRED? [14] VOTES FOR [0] VOTES AGAINST				
Decision: The Curriculum committee approved WRITE's assessment plan as a pilot				