Patient Care Committee Minutes

Date	April 11, 2022
Time	4:00 – 5:30PM
Patient Care	Kristine Calhoun
Co-Chairs	
Attendees	Academic Chair: Kristine Calhoun
QUORUM REACHED: 10	 Voting Members: Abena Knight, Devin Sawyer, Evan Johnson, Jenny Wright, John McCarthy, Jordan Schroeder, MaKenna Stavins, Mike Spinelli, Serena Brewer Guests: Heather McPhillips, Karla Kelly, Michael Campion, Judy Swanson, Sylvia Zavatchen, Amanda Kost, Vicki Mendiratta, Scott Baily, Margie Trenary, Jung Lee, Geoff Jones, Frank Batcha, Erin Gunsul, Eric Kraus, Julie Bould, Sarah Wood, Kristina Dzara, Kelley Goetz, Esther Chung, Doug Schaad, Jordan Symons, Carmelita Mason-Richardson, Barb Doty
Regrets	Voting members: David Horn, Leslee Kane, Matt Cunningham, Paul Borghesani, Paula Silha, Toby Keys, Wesley Steeb

Agenda

	ITEM	LEAD	TIME	ATTACHMENT	ACTION
1	Approve March minutes	Kris Calhoun	5 min	Attachment A	Decision
2	Announcements: A. E-votes approved: -January and February minutes -New Pediatrics site for Olympia LIC: South Sound Pediatrics -New Pediatrics site for Olympia LIC: Olympia Pediatrics B. Recruit new academic co-chair C. Clerkship Huddles D. Curriculum Committee 4/4 vote on PEAC grading recommendations E. Introduce Kristina Dzara, Assistant Dean for Educator Development, Directorship of CLIME and Teaching Scholars	Kris Calhoun / Jessica Wheeler	10 min	Attachment B, C	Announcement
3	Medicine Clerkship Application (WRITE Inpatient)	Jenny Wright	10 min	Attachment D	Decision
4	WRITE Site Application: Moses Lake	Geoff Jones / John McCarthy	10 min	Attachment E	Decision
5	Pediatrics Clerkship Application (WRITE Inpatient)	Jordan Symons / Abena Knight	10 min	Attachment F	Decision
6	Learning Environment	Sylvia Zavatchen / Julie Bould	15 min		Discussion

UW Medicine

1. Approve March minutes

Discussion: The committee reviewed the March minutes.

☑ DECISION REQUIRED? MOVED TO E-VOTE

[] VOTES FOR

[] VOTES AGAINST

Decision:

2. Announcements

Announcements:

A. The following e-votes were approved:

- o January and February minutes
- New Pediatrics site for Olympia LIC: South Sound Pediatrics (included in handouts)
- New Pediatrics site for Olympia LIC: Olympia Pediatrics (included in handouts)

B. Recruit new academic co-chair

The Patient Care Committee will need a new academic co-chair to start in November 2022. Committee bylaws stipulate the Academic Co-Chair will be selected from faculty members serving a second term by expressed interest. Academic Co-Chairs will serve a two-year term. Duties include:

Working with the Executive Co-Chair (the Assistant Dean for Clinical Education, currently vacant) 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 <u>somgov@uw.edu</u>.

C. Clerkship Huddles

The weekly clerkship huddles (originally established for clerkship directors and administrators to discuss emerging COVID-19 issues in 2020) will transition meetings to every other month for 6 months and then to quarterly meetings. The goal is to schedule these meetings during working hours (8-5PM). Curriculum staff will reach out next week to clerkship directors and administrators with a scheduling poll to complete for potential one-hour meetings to occur during the day.

D. Curriculum Committee 4/4 vote on the Program Evaluation and Assessment Committee's (PEAC) grading recommendations

The Explore & Focus Phase Committee requested amendments be made to the Curriculum Committee's votes on PEAC's required clerkship grading recommendations to reflect the required clerkships in the Explore & Focus Phase. Curriculum Committee approved the following on April 4, 2022 (revisions in purple):

- The final exam weight can be different by department and the cap should be set and approved by the Patient Care Committee and Explore & Focus Committee (for implementation starting with the 2023-2024 clerkship year).
- UWSOM There should be set a uniform standard for passing final exams, based on national percentile. This standard should be set and approved by the Patient Care Committee and Explore & Focus Committee

E. Introduce Kristina Dzara, Assistant Dean for Educator Development, Directorship of CLIME and Teaching Scholars

Dr. Dzara started in her UWSOM leadership roles this month, including directorship of both the Center for Leadership and Innovation in Medical Education (CLIME) as well as the Teaching Scholars program. Her work will focus on supporting educators from the classroom to the bedside, both in skill development and in educational scholarship.

3. Medicine Clerkship Application (WRITE Inpatient)

Discussion: The committee reviewed the clerkship application for the Internal Medicine, inpatient portion of the WWAMI Rural Integrated Training Experience (WRITE). Students will participate in the care of hospitalized adult patients, refining their skills in history-taking and physical examination, while learning to care for a variety of illnesses. The course is designed for the WRITE program and didactic teaching will highlight patient management in rural areas.

Clerkship objectives include:

- 1. Diagnose and manage common diseases encountered in general internal medicine.
- 2. Select appropriate medical therapy, including diet, activity modification and drugs.
- 3. Recognize major organ system failures and when transfer to medical centers which can deliver a higher level of care is indicated.
- 4. Perform a comprehensive medical history and physical examination.
- 5. Produce complete write-ups and concise oral case presentations in the inpatient setting.
- 6. Select appropriate laboratory tests, radiologic examinations, and procedures, to assist in delineating patients' problems.
- 7. Construct differential diagnoses and be able to support the most likely diagnosis based on history, physical exam, and laboratory findings.
- 8. Recognize systems-based issues important to the practice of rural medicine including limited access to specialty care, facilities, and equipment.
- 9. Act professionally throughout the clerkship as described in the professionalism benchmarks for medical students.

The curricular differences between this clerkship and the traditional Internal Medicine clerkship include:

- 1. The limitation of the goals and objectives to the inpatient setting and the addition of goal #8.
- 2. Assessment: a single customized NBME shelf exam (rather than two exams with a standard NBME shelf exam, as is done in the traditional 12-week clerkship).
- 3. Elimination of outpatient topics from the 'core medicine topics' taught.
- 4. Anticipate asynchronous weekly didactic teachings, allowing students more time in the hospital.
- 5. Plan to have a weekly morning report just for students in this clerkship

See meeting handouts for details.

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☑ DECISION REQUIRED?	[8] VOTES FOR	[0] VOTES AGAINST		
Decision: The Patient Care committee approved Internal Medicine's WRITE Inpatient clerkship application				

4. WRITE Site Application: Moses Lake

Discussion: The committee reviewed the clerkship application for the Family Medicine, outpatient portion of the WWAMI Rural Integrated Training Experience (WRITE). Students will work with the family physicians in

Moses Lake Community Health Center, Confluence Health, and Ephrata clinic gaining full-spectrum family medicine experience while fulfilling the requirements for the outpatient portion of WRITE.

Clerkship objectives include:

- 1. Conduct the medical history using patient-centered communication with patients across the lifecycle.
- 2. Perform the appropriate physical examination with patients across the lifecycle.
- 3. Present well organized, appropriately focused, and accurate oral case presentations for common patient presentations across the lifecycle.
- 4. Propose an initial diagnostic plan for patients with common primary care presentations.
- 5. Offer and communicate management plans for patients with common primary care presentations, including acute, chronic, and health maintenance visits, using collaborative decision making with patients.

See meeting handouts for details.

☑ DECISION REQUIRED?	[9] VOTES FOR	[0] VOTES AGAINST	
Decision: The Patient Care committee approved the Moses Lake WRITE site clerkship application			

5. Pediatrics Clerkship Application (WRITE Inpatient)

Discussion: The committee reviewed the clerkship application for the Pediatrics, inpatient portion of the WWAMI Rural Integrated Training Experience (WRITE).

Clerkship objectives include:

- 1. Apply pediatric specific medical knowledge to understand and address clinical issues
- 2. Collect both focused and comprehensive, developmentally appropriate patient histories using triadic interviewing skills.
- 3. Perform age-appropriate physical examinations on newborns, infants, and older children.
- 4. Construct appropriate approaches to common pediatric clinical problems by:
 - a. Identifying essential clinical features.
 - b. Outlining natural history of disease processes.
 - c. Creating stratified differential diagnoses.
 - d. Formulating evidence-based diagnostic and therapeutic approaches.
- Conduct healthcare maintenance visits that include the following components: childhood immunizations, assessment of child development and nutrition, and the principles of anticipatory guidance.
- 6. Discuss the effects of growth and maturation on pharmacokinetics and use this knowledge to select the appropriate treatment regimens of commonly used fluids and medications in patients of different ages.
- 7. Analyze common professional and ethical dilemmas in pediatrics.
- 8. Deliver well-organized, appropriately focused, and accurate oral patient presentations.
- 9. Write well-organized, appropriately focused, and accurate patient notes, including admission, progress, and outpatient visit notes.
- 10. Communicate with patients and families with consideration of patient age, developmental stage, and individualized family context.
- 11. Work effectively as a member of the healthcare team to coordinate care.

- 12. Elicit and recognize the perspectives and needs of families and provide care for patients within their social and cultural context.
- 13. Identify gaps in knowledge and skills and set personal and professional goals for learning.

See meeting handouts for details.

⊠ DECISION REQUIRED?	[7] VOTES FOR	[0] VOTES AGAINST		
Decision: The Patient Care committee approved Pediatrics' WRITE Inpatient Clerkship Application.				

6. Learning Environment

Discussion: Last year, the Learning Environment (LE) team conducted a survey to document LE initiatives clerkships have implemented in the last five years. These initiatives / best practices are being presented to the clinical phase committees and are also published in newsletter for the students and faculty.

The department of Neurosurgery presented their learning environment initiative: Empowerment Evaluation. This initiative's goal is to better understand the student experience using concepts from the theory of empowerment evaluations. The process involves stakeholders in an egalitarian process of review, critique, and improvement to:

- Foster greater program self-reflection
- Lead to an evidence-based model of decision-making
- Expand opportunities for students, faculty and staff to work collaboratively to improve and refine the curriculum

The Neurosurgery clerkship piloted the use of empowerment evaluations in the required clerkships in Seattle and Spokane and the elective clerkship in Seattle. Clerkship administrators led regular feedback sessions with students and gathered feedback on high yield aspects of the clerkship and areas that could be improved.

Lessons learned

- Students will advocate for change when a safe environment is provided
- Group synergy fosters better feedback
- Empowering program administration facilitates course improvement
- Simplifying logistics improves student satisfaction
- Students provide insights into the residency program as well
- During times of frequent change COVID restrictions on group meetings, OR observations, clinical encounters this tool is especially effective in responding to the needs of students
- Through this method, we can ensure "sustainable cycles of review and improvement." (Fetterman, et al).