

Foundations Committee Minutes

Date	June 28, 2022
Time	9:00 – 10:30AM
Co-Chairs	<i>Edith Wang, Matt Cunningham</i>
Attendees	Academic Chair: Matt Cunningham; Executive Chair: Edith Wang
<input type="checkbox"/> QUORUM REACHED: NO	Voting Members: Cat Pittack, Gerry Groggel, Leo Wang, Mike Stephens, Tasha Hunter, Rebekah Burns Guests: Mark Whipple, Julie Calcavecchia, Nicholas Burwick, Kate Weaver, Julien Goulet, Michael Champion, Heather McPhillips, Gerald Tolbert, Esther Chung, Jung Lee, Jordan Kinder, John Willford, Peter Fuerst, Teresa Jewell, Martin Teintze, Karla Kelly, Doug Schaad, Bruce Silverstein
Regrets	Voting members: Amanda Kost, Cassie Cusick, Libby Parker, George Hodges, Holly Martinson, Isabela Covelli, Madelyn Boslough, Ruxandra Ionescu, Shannon Uffenbeck, Vicky Le

Agenda

	ITEM	LEAD	TIME	ATTACHMENTS	ACTION
1	Approve May minutes	Matt Cunningham	5 min	Attachment A	Decision
2	Announcements: <ul style="list-style-type: none"> • E-votes approved: <ul style="list-style-type: none"> ○ April minutes ○ FMR Themes BLO ○ Educational delivery workgroup charge ○ Integrations Weeks' structure and learning objectives • Summer break • Zoom-only through 2024 	Matt Cunningham / Edith Wang	5 min		Announcement
3	Foundations OSCE Results	Mark Whipple	20 min		Discussion
4	Foundations of Clinical Medicine (FCM) Lessons Learned	Julie Calcavecchia	20 min	Attachment B	Decision
5	Blood & Cancer Lessons Learned / Cancer, Hormones and Blood	Nicholas Burwick / Tasha Hunter / Kate Weaver	30 min	Attachment C, D	Decision

1. Approval of May Minutes

Discussion: The committee reviewed the May meeting minutes.

<input checked="" type="checkbox"/> DECISION REQUIRED? MOVED TO E-VOTE	[12] VOTES FOR	[0] VOTES AGAINST
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Decision: The Foundations committee approved the May meeting minutes.

2. Announcements

E-votes Approved

Quorum was not reached at the May meeting. The following motions were approved via e-vote on May 23, 2022:

- April meeting minutes
- FMR Themes Block Level Objective: “THEME: Identify key structural factors related to health justice, equity, diversity, inclusion and anti-racism in healthcare as well as key features and strategies of health systems improvement.”
- Educational delivery workgroup charge: See May meeting minutes
- Integrations Weeks’ structure and learning objectives: See May meeting minutes

Summer Break

The governance committees will take a summer break. No meetings will be scheduled in July or August. Meetings will resume in September 2022.

Zoom-only through 2024

The governance committees will continue via zoom-only for the next two years. This approach supports equitable participation in meetings for regional and Seattle-based members.

3. Foundations OSCE Results

Discussion: The committee reviewed the 2021 OSCEs (Objective Structured Clinical Examinations) data.

The OSCEs are a graduation requirement. The main goals of the OSCEs are to:

- Assess and provide feedback on clinical skills and clinical reasoning as students move through the curriculum
- Identify strengths and weaknesses in the curriculum

Two OSCEs are administered during the Foundations phase (Foundations OSCE I and Foundations OSCE II) and one OSCE is administered during the Patient Care phase. Foundations OSCE I is lower stakes and provides an opportunity for students to get familiar with the exam’s structure and for their College mentor to see where they are. The students are assessed and evaluated, but there is not a requirement to pass. Foundations OSCE II is more summative.

There is a three-point grading system: Exceeds Expectations (EE), Meets Expectations (ME), and Needs Development (ND). Students who do not meet the standard on either part must either remediate with a college faculty (Foundations OSCE I or II) or retake the exam (Patient Care).

The committee reviewed the 2021 OSCE results. Most students received EE or ME grades on the Foundations OSCEs.

4. Foundations of Clinical Medicine (FCM) Lessons Learned

Discussion: Summary of changes:

- Immersion sessions on Communication & Interviewing, Physical Examination, and Professional Identity will now occur after the first block.
- FCM workshop topics will be aligned across sites, leading to better integration with blocks.
- Update pre-class material: new physical exam videos demonstrating a trauma-informed approach.
- Update the FCM Pressbook to address concerns about finding resources across this longitudinal course.
- All sites will use ultrasound as a tool to address an existing objective, correlating physical exam maneuvers and findings with anatomic structures.
- Update framing of “Reflecting on Practice” sessions to clarify connections for medical students and physicians. Emphasize an ‘opt-in’ approach on sharing personal experience.
- Expand musculoskeletal physical exam teaching from one to two half days.
- Address trauma informed care and healing centered engagement in greater depth in the pre-class reading and in-class activities for existing Family Violence workshop.
- Inter-Professional Education (IPE) in the Foundations Phase will be consolidated in FCM rather than split across FCM and Themes, allowing for better coordination and tracking across campuses. Foundational IPE content will consist of:
 - Introduction to IPE
 - Introduction to roles and training of other health professionals
 - Interprofessional shadowing assignment
 - Interprofessional simulation
 - (Themes): One activity with interprofessional students, including a short reflection.

See meeting handouts for details.

DECISION REQUIRED? **MOVED TO E-VOTE**

[12] VOTES FOR

[0] VOTES AGAINST

Decision: The Foundations committee approved the Foundations of Clinical Medicine (FCM) Lessons Learned.

5. Blood & Cancer Lessons Learned / Cancer, Hormones and Blood

Discussion: Summary of changes:

- New Block Level Objectives for Cancer, Hormones and Blood (E-22):
 1. Describe normal hematopoietic and endocrine histology and the pathologic features of endocrine, oncologic, and hematologic diseases. (Pathology/Histology)
 2. Select appropriate medications based on their mechanism of action for the treatment of common hematologic diseases, hematopoietic and solid malignancies, and endocrine diseases, and describe potential adverse effects of these regimens. (Pharmacology)
 3. Describe the normal physiologic functions of the endocrine and hematologic systems. (Physiology)
 4. Describe the mechanisms of oncogenesis and of processes leading to diseases affecting the endocrine and hematologic systems. (Etiology)
 5. Identify risk factors and primary screening modalities for common malignancies and diseases of the endocrine system (Risk and Screening)
 6. Describe the clinical manifestations of the common hematologic diseases, hematopoietic and solid malignancies, and endocrine diseases. (Presentation)

7. Determine the best (e.g., most accurate, safest, or least expensive) method of diagnosing the common hematologic diseases, hematopoietic and solid malignancies, and endocrine diseases. (Diagnosis)
 8. Determine the best (e.g., most accurate, safest, or least expensive) method of treating common hematologic diseases, hematopoietic and solid malignancies, and endocrine diseases. (Treatment)
 9. Relate basic concepts of nutrition and metabolism to the maintenance of health and development of disease states. (Nutrition)
 10. Demonstrate effective communication by interacting with patients and/or other medical colleagues to analyze, break down, or solve clinical cases.
- Pharmacology will be taught in lecture (both in-person and pre-recorded) format and integrated into small groups and large group discussions. Out-of-class materials will be integrated into course packs for all Oncology, Hematology, and Endocrine
 - Given the increase in time, Oncology/Hematology pathology will go more in-depth. Endocrine and Hematology pathology will integrate virtual microscopy sessions.

See meeting handouts for details.

<input checked="" type="checkbox"/> DECISION REQUIRED? MOVED TO E-VOTE	[12] VOTES FOR	[0] VOTES AGAINST
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Decision: The Foundations committee approved the Blood & Cancer Lessons Learned (E-21) / Cancer, Hormones, and Blood.