



Explore & Focus Phase Committee Minutes

Date	October 17, 2022
Time	4:00 – 5:30PM
Co-Chairs	<i>Esther Chung; Joshua Jauregui</i>
Attendees	<p>Academic Chair: <i>Esther Chung</i>; Executive Chair: <i>Joshua Jauregui</i></p> <p><input checked="" type="checkbox"/> QUORUM REACHED: Voting Members: <i>Alson Burke, Doug Schaad, Matt Cunningham, Matt Hollon, Mike Spinelli, Ralph Ermoian, Sarah Thomson, Susan Merel, Tom Payne, Troy Johnston</i></p> <p>Guests: <i>Kellie Engle, Paul Borghesani, Aubrey Brown, Nancy Miles, Erin Gunsul, Eric Kraus, Kristina Dzara, Alexis Rush, Heather McPhillips, Ross Kessler, Sara Kim, Sara Fear, Ruth Sanchez, Megan Osika-Dass, Margie Trenary, Kristen Seiler, Jung Lee, Julie Bould, Jordan Kinder, Ivan Henson, Geoff Jones, Darryl Potyk, Claire Sandstrom, Bekah Burns, Debbie Blackstone, Gerald Tolbert, Sarah Wood, Gina Franco, Karla Kelly</i></p>
Regrets	Voting members: <i>Amanda Kost, Barb Doty, Emily Myers, Nam Tran, Roger Tatum</i>

Agenda

	ITEM	LEAD	TIME	ATTACHMENT	ACTION
1	PEDS 615 Child Abuse Pediatrics Elective approved via e-vote	Esther Chung	5 min	Attachment A	Announcement
2	Approve September Minutes	Esther Chung	5 min	Attachment B	Decision
3	Clinical Encounters Annual Report: AY 2021-2022	Erin Gunsul	10 min	Attachment C	Discussion
4	Follow-up: Grade Reviews, Challenges and Appeals in Fourth Year	Joshua Jauregui	15 min	Attachment D	Discussion
5	Follow-up – Student Satisfaction: Healthcare Access	Aubrey Brown / Nancy Miles	25 min		Discussion
6	Student course selections within single departments	Paul Borghesani / Esther Chung	30 min		Discussion



1. PEDS 615 Child Abuse Pediatrics Elective approved via e-vote

Announcement: The Explore & Focus Phase Committee approved the four-week “Child Abuse Pediatrics” (PEDS 615) elective via e-vote on October 3, 2022. The goal of this rotation is to prepare medical students entering pediatrics and other primary care fields with the skills to manage these cases in their residencies and beyond.

The rotation will consist of a combination of clinical and didactic learning and is primarily based at Seattle Children's Hospital (SCH) under the supervision of child abuse fellows and faculty. Medical students will learn about four common forms of child maltreatment -physical abuse, sexual abuse, neglect, and medical child abuse. They will learn the physician's role in the medical evaluation of abused and neglected children. They will join in our inpatient consultations for physical abuse cases at SCH and Harborview Medical Center, participating in the history-taking when appropriate. They will also join outpatient visits at the Harborview Abuse and Trauma Center, which sees children who have experienced sexual abuse, and the SCH Multidisciplinary SCAN Clinic, which sees children who have experienced abusive head trauma. They will gain skills to have difficult conversations with families and learn how to talk to children who have experienced abuse or neglect. Students will also learn about the multi-disciplinary approach to child abuse cases, by participating in radiology rounds, meeting with the King County forensic interviewers, attending case conferences with CPS and law enforcement, and observing legal testimony. These experiences will be supplemented by a curriculum of didactics and assigned readings on a broad array of child maltreatment subjects, such as fractures, bruises, abusive head trauma, sexual abuse, neglect, foster care, and medical child abuse. Students will learn about disproportionality in child welfare issues and identify strategies to mitigate bias and advocate for child and family safety. At the conclusion of the rotation, learners will be asked to lead a journal club or give a short presentation on a topic of interest.

Due to the sensitive and often legally complicated circumstances of child abuse cases, learners will be shielded from any legal responsibilities. They will not author official medical documents or directly interface with other entities involved in child abuse cases. However, they will have the opportunity to write practice consultation notes and review them with child abuse fellows and faculty. Additionally, given the emotionally challenging nature of child abuse cases, students will have the opportunity to debrief with the team to prioritize their wellness.

2. Approve September Minutes

Discussion: The committee reviewed the previous minutes.

<input checked="" type="checkbox"/> DECISION REQUIRED?	[9] VOTES FOR	[0] VOTES AGAINST
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Decision: The Explore & Focus Phase Committee approved September meeting minutes

3. Clinical Encounters Annual Report: AY 2021-2022

Discussion: The committee reviewed the clinical encounters data for the 2021-2022 academic year. This data includes the three required Explore & Focus Phase clerkships (Emergency Medicine, Neurology, and Neurosurgery). The data does not include WWAMI Rural Integrated Training Experience (WRITE)/Longitudinal Integrated Clerkships (LICs). Total completion rates for all clerkships were high



(above 95% for all required clerkships). All clinical encounters were well under the LCME's 25% threshold for alternative method.

See meeting handouts for details.

4. Follow-up: Grade Reviews, Challenges and Appeals in Fourth Year

Discussion: The committee continued discussion of grade reviews and challenges in the fourth year from the September meeting. Grade reviews and challenges are handled at the department-level and are time- and work-intensive for clerkship administrators. One of UWSOM's longer-term goals is to establish best practices and improve communication to students on the grade review and challenge process.

In the shorter-term, the committee reviewed language developed by the Internal Medicine clerkship:

Grade Challenge

If you wish to dispute your final grade, the [Grade Challenge](#) form must be completed and received by our office within 4 weeks after your grade was posted.

Circumstances in which a challenge is appropriate include:

- An apparent mathematical error in computing your final grade.
- A technical problem with the evaluation process.

Circumstances in which a challenge will not be entertained include:

- Performance on the exam or the weight of exam.
- Disagreement with our grading process (e.g. how the clinical GPA is calculated and weighted).
- Disagreement with the an evaluator's assessment of your performance.
- Discrepancy between the feedback you received and the evaluation that was submitted (see [here](#) for more information).
- Disagreement with final comments vs. final grade.

Please review the UWSOM [Clinical Grade Review, Challenge, and Appeal Process](#).

Learn [How Feedback Relates to Final Grading](#)

Other departments were encouraged to use this language for consistency across clerkships and to decrease cognitive load on students.

The Student Affairs team will present an overview of the MSPE at a future meeting to further inform this conversation.

5. Follow-up – Student Satisfaction: Healthcare Access

Discussion: At the 2018 Liaison Committee on Medical Education (LCME) 2018 accreditation site visit, the UWSOM received an "Unsatisfactory" rating for the compliance standard "Clinical students' access to healthcare services" (Element 12.4): A medical school provides its medical students with timely access to needed diagnostic, preventive, and therapeutic health services at sites in reasonable proximity to the



locations of their required educational experiences and has policies and procedures in place that permit students to be excused from these experiences to seek needed care.

From the LCME in 2018: “The medical school does not systematically provide guidance to medical students on accessing personal health care services on clinical rotations across regions. ISA data show that respondent satisfaction with available health care services ranged from 30.1% to 46.8%. This low level of satisfaction was true across the regional campuses for the Foundations Phase.”

Work has been underway to improve this compliance standard. In 2020, the UWSOM received an updated “Satisfactory with a need for monitoring” rating from the LCME.

Student Affairs leadership and fourth year students followed up on their June presentation on recent efforts. The student group aims to provide peer support and student-led and student-collected data to improve student access to healthcare. This group administered a survey to clinical phase students in August 2022. The survey gathered 105 responses. Respondent demographics:

- About 42% were MS4s (graduating year 2023)
- About 58% were 26 years or older
- About 95% of respondents had health insurance (about 51% of these students had Medicaid issued insurance, which does not cross state lines).

Key takeaways:

- 60% of respondents were unaware of the Hall Health Telehealth program.
- About 26% of respondents felt unable to take time off during clerkships to access care.
- Barriers students face to taking time off for healthcare:
 - Finances (cost of health insurance, dependents not being covered)
 - Logistics (usually around Medicaid and crossing state lines, continuity of care, issues refilling prescriptions, etc.)
 - Scheduling (difficulty scheduling appointments due to not knowing their daily schedule until the first day of the rotation and not knowing the rotation schedule for the clinical year)
 - Policy (unaware of Attendance and Absentee policy, of who and how to ask for time off, and how to escalate issues when they receive pushback)
 - Culture (preceptor and administrative pushback, the team not normalizing taking time off, fear of repercussions on grades, high load of responsibilities)

Next Steps:

- The student group is actively working to:
 - Increase awareness of the telehealth program
 - Recruit new students
 - Administer internal surveys
- Action items identified by the group:
 - Review and update the Attendance and Absentee policy to clarify time off for healthcare needs



- Add healthcare access as part of end of clerkship learning environment survey (or to the clerkship site evaluation sent out via E*Value)
- Site preceptor education and development around Attendance and Absentee policy and cultural facilitators for healthcare
- Phone list for contact information for escalation with peer support
- Include information on taking time off for healthcare during clerkship orientation

6. Student course selections within single departments

Discussion: The committee followed up on a conversation held in [December 2021](#) about career exploration in the Explore & Focus phase. Faculty presented data on UW enrollment in the fourth year to address the following questions:

1. Are students exploring or focusing?
2. Are students enrolling in multiple Sub-Is and APCs in one department and limiting enrollment opportunities for other students?

1. Are students exploring or focusing?

The committee reviewed the number of students taking all graduation requirements in one, two, three, etc. departments. Over the last few years, there has been some evidence of a shift to focusing. There are a number of students enrolling in two or three departments.

2. Are students enrolling in multiple Sub-Is and APCs in one department and limiting enrollment opportunities for other students?

- No, but current enrollment trends may make it difficult for other students to reschedule.
- Most students begin their Sub-I rotations between May-July
- Students use Sub-Is and APCs/elective credit during the “bolus,” and enrollment in elective Sub-Is is not equal throughout the year.

Important notes:

- The [Credit Limit in Specialty policy](#) states: “Students are allowed to take a maximum of 32 credits of Explore and Focus phase elective clerkships in a given specialty, and these credits will be counted toward the minimum number of clinical elective credits required for graduation.”
- This data is impacted by the COVID-19 pandemic and the national limit on away rotations, which could influence when students enroll in UW APCs.