

Patient Care Phase Committee Minutes

Date	February 13, 2023			
Time	4:00 – 5:30PM			
Patient Care Co-Chairs	t Care Co-Chairs Kris Calhoun; Joshua Jauregui			
Attendees	Academic Chair: Kris Calhoun; Executive Chair: Joshua Jauregui			
☑ QUORUM REACHED: YES, 12	Voting Members: Abena Knight, David Horn, Devin Sawyer, Jenny Wright, John McCarthy, Leslee Kane, Matt Cunningham, Mike Spinelli, Paul Borghesani, Paula Silha, Toby Keys Guests: Bekah Burns, Kellie Engle, Scott Bailey, Julie Bould, Nancy Miles, Aubrey Brown, Esther Chung, Karla Kelly, Max Keyes, Misbah Keen, Eric Kraus, Alexis Rush, Amy Dettori, Carmelita Mason-Richardson, Sarah Villareal, Geoff Jones, Liya Savochka, Christine Rizkalla, Debbie Blackstone, Erin Gunsul, Gerald Tolbert, Gina Franco, Heather McPhillips, June Lee, Margie Trenary, Robin Scott, Ross Kessler, Sara Fear, Doug Schaad, Barb Doty, Sara Kim, Jordan Kinder, Vicki Mendiratta			
Regrets	Voting members: Evan Johnson, Serena Brewer			

Agenda

	ITEM	LEAD	TIME	ATTACHMENTS	ACTION
1	Approve January minutes	Kris Calhoun	5 min	Attachment A	Decision
2	Clerkship Requirement Changes for the 2023-2024 Clinical Year: • Pediatrics • Family Medicine	Bekah Burns / Misbah Keen / Toby Keys	20 min	Attachment B, C	Decision
3	Follow-up: Student Satisfaction with Healthcare Access Student Committee on Healthcare Access (SCoHA) introductions Attendance & Absentee Policy: Revisions Student Access to Anticipated Healthcare Policy	Joshua Jauregui	65 min	Attachment D, E, F	Decision



Approve January minutes					
Discussion: The committee reviewed the previous minutes.					
☑ DECISION REQUIRED?	[12] VOTES FOR	[0] VOTES AGAINST			
Decision: The Patient Care Phase Committee approved the January minutes.					

2. Clerkship Requirement Changes for the 2023-2024 Clinical Year

Discussion: Each year, the six required Patient Care Phase clerkships present changes for the upcoming clinical year to the committee for review and approval. This is a critical process for the school's continued accreditation from the Liaison Committee on Medical Education (LCME). Changes could include:

- Clerkship objectives
- Required clerkship activities
- Clinical encounters
- Mini-CEX
- Plans to recruit, add or otherwise change clerkship sites
- Assessment
- Grading System

Pediatrics and Family Medicine presented changes for the 2023-2024 clinical year, beginning on March 27, 2023. See meeting handouts for details.

Pediatrics

Required clerkship activities:

• The five Aquifer case requirement will continue, but the cases have changed (swapping out case #8 for case #1).

Clerkship sites:

A new clerkship site will be established in Walla Walla, Washington this clinical year.

Grading system:

• The clerkship will adopt a percentage weighting system for combining clinical evaluations and final exam scores into a final grade. The final grade will be 85% numerical clinical grade assigned by the site director and 15% final exam (NBME). 5% will be subtracted from the final percentage for each missing assignment at the end of the rotation. Final grade assignment will be based on the final percentage with the ranges below:

≥85.3% = honors 68.6-85.2 = high pass 51.7-68.5 = Pass <51.7 = Fail

Family Medicine

Required clerkship activities:



• A previously optional assignment on physician resiliency will become a requirement. Through case studies and readings, students will explore "self-care" and "mutual care" strategies to cope with loss and burnout.

Clinical encounters:

 Based on recent US Preventive Task Force recommendations to lower the age for colon cancer screening, the following changes will be made to the adult male and female health maintenance encounters:

FAMED Health Maintenance Adult 45 50 to 75 Female FAMED Health Maintenance Adult 45 50 to 75 Male

Clerkship sites:

- Miles City, Montana.
- Lewistown, Montana.
- Bozeman Health in Bozeman, Montana.

Grading system:

- The exam will be weighted and represent 20% of the final grade.
- The numeric points for the clinical grade will go from 60 to 80.
- We will double weight additional evaluation items on a 4-point scale:
 - Conducts the medical history using patient-centered communication with patients across the lifecycle.
 - o Performs the appropriate physical examination with patients across the lifecycle.
 - Presents well organized, appropriately focused and accurate oral case presentations for common patient presentations across the lifecycle.
 - Apply established and emerging scientific principles of clinical sciences to diagnostic and therapeutic decision making, clinical guidelines, and other aspects of evidence-based health care.
 - Produce complete and accurate write-ups for common patient presentations across the lifecycle.
- The final grade has 100 points possible (compared to 60 points in the 2022-2023 clinical year).

Other:

• The clerkship will update their Grade Challenge Policy, borrowing the language developed by Internal Medicine, clarifying that grade challenges are only appropriate when an error was made in processing the evaluation.

See meeting handouts for details.

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☑ DECISION REQUIRED?	[10] VOTES FOR	[0] VOTES AGAINST			
Decision: The Patient Care Phase Committee approved Pediatrics' clerkship changes for the 2023-2024					
clinical year					
☑ DECISION REQUIRED?	[12] VOTES FOR	[0] VOTES AGAINST			
Decision: The Patient Care Phase Committee approved Family Medicine's clerkship changes for the 2023-					
2024 clinical year					



3. Follow-up: Student Satisfaction with Healthcare Access

Discussion: At the 2018 Liaison Committee on Medical Education (LCME) accreditation site visit, the UW School of Medicine (UWSOM) received an *Unsatisfactory* citation for 12.4 "Clinical students' access to healthcare services:"

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.

In 2020, UWSOM submitted a status report to the LCME detailing efforts to improve students' access to healthcare and guidance offered by the school. From this report, UWSOM received an updated rating (Satisfactory with a Need for Monitoring).

The School monitors data on clinical student satisfaction with the adequacy of UWSOM's guidance on accessing healthcare. In 2022, the dissatisfaction rate raised. The School is taking a multi-pronged approach to address this issue. One strategy under the purview of the curriculum governance committees is updating policy language, specifically in the "Attendance & Absentee – Clinical Phases" policy. The goal of revisions would be to simplify and clarify policy language and formalize the Shool's support for student health and wellness.

The Curriculum Office, in collaboration with the Student Committee on Healthcare Access (SCoHA), is leading efforts to revise policy for the 2023-2024 clinical year (starting on March 27, 2023). The draft revisions and new proposed policy were crafted after gathering stakeholder feedback, reviewing peer medical school's policies, and discussion of how to balance the needs of all impacted stakeholders.

The committee reviewed and provided feedback on draft revisions to the Attendance & Absentee policy and a newly proposed policy on student access to healthcare in the clinical phases (see meeting handouts for details).

Committee feedback:

Concerns were raised by faculty, staff and students alike. Faculty and clerkship leaders were concerned with increasing the allowed number of absences from two to four days per clerkship and students' ability to complete clerkship learning objectives and required activities. Students requested adding language about absences for anticipated healthcare that are less than three hours.

The Curriculum Office will create a survey to send to clerkship directors and administrators to gather additional feedback. This feedback will be incorporated into additional revisions. The committee will review and vote on a final proposal in March.