

Foundations Phase Committee Minutes

Date	September 26, 2023
Time	9:00 – 10:30AM PT
Attendees	Academic Chair: Matt Cunningham; Executive Chair: Edith Wang
☐ QUORUM REACHED:	Voting Members: Cassie Cusick, Elizabeth Parker, Gerald Groggel, Holly Martinson, Leo Wang, Madelyn Boslough, Matt Cunningham, Michael Stephens, Natasha Hunter, Rebekah Burns, Shannon Uffenbeck
	Guests: Emmanuel Wright, Meaghan O'Gilvie, Julien Goulet, Max Kullberg, Gerald Tolbert, Michael Campion, Ceradwen Tokheim, Stefan Wheat, Kristen Hayward, Martin Teintze, Esther Chung, Meredith Pothoven, Jordan Kinder, Jung Lee, Janelle Clauser, Desiree Jones, Christine Rizkalla, Cat Pittack, John McCarthy, Jeff Seegmiller. Alyssa Stephenson-Famy, John Wilford, Karla Kelly, Cynthia Sprenger, Doug Schaad, Gerry Groggel, Kristine Calhoun, Jerome Graber, Brian Krabak
Regrets	Voting members: Amanda Kost, Natasha Hunter, Elizabeth Parker, Madelyn Boslough

Agenda

	ITEM	LEAD	TIME	ATTACHMENT	ACTION
1	Introduce New Member	Matt Cunningham	2 min		Discussion
2	Approve June minutes	Matt Cunningham	5 min	Attachment B	Decision
3	Announcement: Voted Passed for following Action Items E-Vote: 1)Exam Rescheduling Policy – Foundations Phase 2)MBB Block Objectives, CVS lessons learned, May Minutes, Planetary Health Endorsement	Matt Cunningham	2 min	N/A	Discussion
4	Triple I Recommendations	John McCarthy MD Cynthia Sprenger	50 min	Attachment C	Decision
5	Muscles, Joints, Bones & Skin Lessons Learned	Brian Krabak	20 min	Attachment D	Discussion
6	 Changes to Winter Quarter. Step 1 Dedicated Study Time 	Edith Wang	15	Separate Attached File	Discussion



1. New Member Introduction			
Discussion : The new Foundations Phase Committee Member was introduced.			
☐ DECISION REQUIRED?	[] VOTES FOR	[] VOTES AGAINST	
Decision: N/A			

2. Approve Meeting Minutes

Discussion: Concerned were voiced concerns about the courses/instruction taken away from the foundations phase to add Planetary Health Curriculum. It was requested that we go back to the meeting recording and see whether it states that the Foundations curriculum is zero-sum and was reflected in the discussion or not, and if so, to make that part of the minutes.

Quorum was not met, the vote was postponed until the meeting video is reviewed and the MM(s) are updated, then e-Vote will be cast.

Decision: The Foundations Phase Committee will cast an e-vote to approve the June meeting minutes after reviewing the June Committee meeting video. Confirming specific language regarding Planetary Health Endorsement.

3. Exam Reschedule Policy – Foundations Phase E-Vote/ MBB Block Objectives, CVS Lessons Learned, and Planetary Health Endorsement

Discussion: Policy passed by E-Vote, 8/9/23

Foundations Committee discussed making changes to the Exam Reschedule Policy over the summer and implemented changes at the beginning of FMR.

Policy Changes

- In addition to emergencies, students will be allowed to reschedule an exam for personal events once per term (3x total during Foundations).
- Anatomy pin tests may not be rescheduled.
- The policy would be effective immediately for both E22 and E23 students.
- An attestation form is required prior to the start of the exam (minimum 2 weeks prior to exam date for personal events).
- The intent of the attestation form is to centralize the initial process to allow for rapid approval of the request and tracking. It mirrors the new process we have in the Patient Care and E&F phases. The form will be immediately sent to the appropriate foundation dean and delegated administrator for awareness.
- The policy was reviewed and is approved by Foundations Deans at all WWAMI campuses, Associate Dean for Student Affairs and Associate Dean for Curriculum, Assistant Dean for Basic Science Curriculum and Director of Educational Evaluation

Notes from meeting:



It was suggested to alter the policy to allow for Pin Test rescheduling by one day. Proposing that postponing the pin test by one day is manageable and allows for more flexibility for students.

The committee agrees to save this topic for future meetings to determine if the committee will vote for another policy change.

MBB Block Objectives, May Minutes, and CVS Lessons Learned

These action items were passed during an e-vote.

Planetary Health Endorsements:

Planetary Health Endorsement discussion was had in June, which quorum was not met. Motioned passed via e-vote.

☑ DECISION REQUIRED?	[] VOTES FOR	[] VOTES AGAINST	[] VOTES ABSTAIN	
Decision: The Foundations Phase Committee approved action items				

4. Tripple I Recommendations

Discussion:

The Foundations Phase Committee created a workgroup to determine whether Tripple I will remain a requirement or will it be optional for students.

The workgroup was charged with the following:

- If Triple I should be optional or required
- How to enhance to make high value.
- Increase funding or reduce cost to make easier.
- How do costs compare to other schools
- If optional, how to finance and financial aid implications.
- If optional, how to ensure scholarship.
- If required, should WAIVER be created.

Triple I Workgroup's Findings

The workgroup completed an equity research tool which brought up the following questions.

- 1. **SCOPE:** What is the decision to be made and the scope?
- 2. **STAKEHOLDERS/AFFECTED PARTIES:** Who is potentially impacted? What relevant data are available? What demographic data are available and should be considered?
- 3. **DECISION MAKER:** Who makes the final decision?
- 4. **EQUITY AND COMMUNITY CONTEXT:** Whose voices are present and whose are missing? Impact on known inequities? Potential unintended consequences?
- 5. **ANALYSIS AND DECISION PRCESS:** Analysis of key alternatives?
- 6. **IMPACT:** Impact on goal of UW Medicine as an anti-racist organization?

Other Notable Findings

• Implications of optional vs required for tuition assistance (6 credits required to receive financial aid; remember MHSII will remain a required summer course, 3 credits).



- URM student panel: undue financial burden placed on disenfranchised students; lack of support during entire process.
- GME panel and what is expected (generally support RUOP/research as long as meaningful; more programs going to holistic review of residency applications; concern that with most things being P/F, including 3rd year clerkships now, more emphasis will be on scholarly activities).
- Research panel: educational endeavor vs work endeavor (majority of faculty not able to pay a stipend).
- What happens to Triple programs if it becomes optional:
- RUOP would have to pay tuition (to be covered by malpractice insurance).
- GHIP would have reduced tuition (FRILA credits, ~\$500).
- SoD/SoI can be done without paying tuition (exception: competitive summer research programs that provide a NIH stipend often require proof of enrollment in at least 6 credits of summer medical courses—this includes UW MedStAR program as well as programs outside of UW).

Other School's Practices

- 20/21 provide stipends, but at 19/20 schools these are competitive stipends (range from 15-60 students; most around 20 funded students); only one school gave all students who participated in research a stipend (\$2500; 60-80 students out of 112 total students).
- Sources of funding: school itself, NIH grants (R25s), a few used work studies.
- Amounts range from \$1000-\$6000; mean amount is \$3000.
- 2 schools required research and charged tuition; at others enrolling in a course allows students to receive financial aid; most schools that responded had optional /competitive programs (but not tuition).
- Some have courses leading up to summer program.
- Percent of students participating in summer research at each school is around 40-55%.

Pros of Triple I Being Required

- Model is currently based on required, don't need to change financials.
- Students who need it get financial aid; if optional, have 3 credits to pay for.
- Allows completion of health pathways.
- Scholarship is something all students have available.
- Maintains scholarship as part of what UW produces.
- Allows for distinguishing self from other students on residency applications.
- Students who change mind as to value won't have regrets about not doing it.
- Scholarship is required; high risk for some students who put off doing scholarship until 3rd and 4th year; risk of expansion, not graduating.
- Tracking students has been significant concern; don't need to do if required.

Pros for Triple I Being Optional

- Potentially lower tuition overall (many votes for this as a pro).
- Potentially more free time.
- Freedom of choice and determining own destiny.
- Advantage to people who don't need/want financial aid for summer.
- Advantage to people who already have an MPH or a PhD in biomedical field.
- Some preceptors/mentors consider Triple I am burden.
- Less competition for good sites to do research.



• More motivated students doing the work.

Votes (15 Votes) Within Tripple I Workgroup on Action Item (Keeping Tripple I Required vs Optional)

Required: 66.7% Optional: 26.6%

Impact of Provided Information on Voting Members Decision

Yes: 73% No: 27%

Funding Considerations

- There is inequity in disenfranchised students not having the same financial resources to complete their education (no financial scholarships for summer quarter).
- This is more dramatic for DACA students.
- Curriculum team working with Development and Student Affairs to work on ways to increase funding for summer research.
- Consider equity in funding across venues, not just Triple I.

Waivers

The workgroup we believe that Curriculum should consider waivers for students who demonstrate adequate biomedical scholarship prior to medical school.

- Curriculum Committee would need to determine the benchmarks to meet waiver.
- Prior benchmarks were: 1) PhD or Master's in biomedical field or MPH and 2) a first author publication in a peer-reviewed journal.
- Around 10 students/year met these requirements previously.
- Waiver = full waiver, not just meeting course requirements, but Triple I registration and tuition payment would not be necessary.
- Financial implications for waiving requirement should be considered.

Consensus Priorities

- Clear outlines of costs and requirements presented to students ahead of time.
- Emphasis on utility of Triple I for both students and faculty; this is a learning experience, not just research.
- Need more money for economically disadvantaged students; scholarships extended into the summer quarter.
- Need high quality options such as IRB and stats seminars and guidance on writing project proposals.
- The issue of Triple I is complex due in part to the complexity of our school.

Concerns were voiced about students who identify as URM and what they consider makes them disadvantaged in terms of doing the Tripple I and how to address these groups of students. It was also mentioned that the funding sources from other schools where Triple is optional doesn't address the disadvantaged students because it is based on competitiveness.

The committee mentioned suggesting to extended scholarship opportunities to students throughout the summer to cover the Tripple I requirement.

☑ DECISION REQUIRED?	[5] VOTES FOR	[0] VOTES AGAINST	[1] VOTES ABSTAIN	
Decision: Endorsement of recommendations of Tripple I workgroup to keep Triple I a requirement				



5. Muscles, Joints, Bones, & Skin Lessons Learned

Discussion:

The Foundations Phase Committee discussed the changes Block Level Objectives for the Muscles, Joints, Bones, and Skin block from the lesson learned from the previous year.

Changes Made to the MJBS Block

- 1. BLO: Changes to BLOs more reflective of the content delivered in MJBS.
- 2. Threads: SLO mapping BLO may need to be corrected.
- 3. Assessment: mapping for exam questions may need to be corrected.
- **4.** Major content/session: SLO mapping BLO may need to be corrected.

Updated Block Level Objectives

E22 MJBS BLO's.

- 1. Identify the major anatomical structures of the musculoskeletal system and describe their anatomical and structure-function relationships in the human body.
- 2. Describe the normal microscopic anatomy and identify pathophysiological processes and histopathologic abnormalities of common disorders affecting the bones, joints, muscles and skin. (*This change combines 2 BLO's to 1 BLO was previously 2 BLO's #2 for normal and #3 for abnormal*)
- 3. Identify the clinically important characteristics, mechanism of action, side effects and primary toxicities of medications used for the treatment of select rheumatologic and skin disorders.
- 4. Select and interpret appropriate diagnostic tests used in the evaluation of patients with common musculoskeletal disorders rheumatologic disorders and select diseases of the skin.
- 5. Recognize and present the etiology and functional changes in anatomy that lead to diseases and disorders of the musculoskeletal system.
- 6. Describe the indications for use of treatment modalities in managing diseases and disorders of the musculoskeletal, rheumatologic, and skin systems.

FINAL BLOS for E24:

- 1. Identify the major anatomical structures of the musculoskeletal system and describe their anatomical and structure-function relationships in the human body.
- 2. Describe normal microscopic anatomy and identify pathophysiological processes and histopathologic abnormalities of common disorders affecting the bones, joints, muscles, and skin.
- Identify the clinically important characteristics, mechanism of action, side effects, and primary toxicities of medications used for the treatment of select rheumatologic inflammatory, musculoskeletal, and skin disorders.
- 4. Select and interpret appropriate diagnostic tests used in the evaluation of patients with musculoskeletal disorders, common rheumatologic disorders, and select diseases of the skin.
- 5. Recognize and present the etiology and functional changes in anatomy that lead to diseases and disorders of the musculoskeletal system.

Describe the indications for use of treatment modalities in managing diseases and disorders of the musculoskeletal, rheumatologic, and skin systems.

THREAD: A&E

Develop a Master Checklist for the entire MSK A&E anatomy labs.



Review current Anatomy Lab Overview Lectures and revise lectures to reflect overview / orientation to A&E anatomy labs.

THREAD: Path/Histo, Oncology

- Review and revise content
- Identify information presented in previous blocks.
- Develop updated content pertinent to MJBS.

THREAD: Pharm

- Update Pharm Drug List to include medications discussed during the block (i.e., topical medications)
- Revise Pharm lectures and small group sessions to reflect above content changes.

THEMES: Ableism and Derm Equity

• Change from MCQ questions to Reflective Essays to assess Theme content.

ASSESSMENT: OVERALL

• Increase the total number of exam questions from 140 to 185 to reflect depth of information and align with other blocks.

ASSESSMENT: PIN TEST

- Develop two PIN tests.
- PIN TEST 1: Content from Week 1 (Back/Neck/Pecs)
- PIN TEST 2: Content from Week 2 (upper extremity) and Week 3 (lower extremity)

ASSESSMENT: MCQ TEST

 Expand number of practices MCQ questions through available resources (e.g., daily quizzes, AMBOSS questions) to assist students in preparation for MJBS MCQ questions.

MAJOR CONTENT: MSK

Review and restructure schedule to improve flow of content delivered during the block.

MAJOR CONTENT: RHEUM / DERM

Reorganize Derm/Rheum sessions				
☑ DECISION REQUIRED?	[5] VOTES FOR	[0] VOTES AGAINST	[1] VOTES ABSTAIN	
Decision: Endorsement of the changes of MJBS course from the lessons learned.				

6. Changes to Winter Quarter/ Step 1 Dedicated Study Time			
Discussion:			
Foundations Phase Committee did not discuss this agenda item. Committee decided to table discussion			
until next committee meeting.			
☐ DECISION REQUIRED? [] VOTES FOR [] VOTES AGAINST			
Decision:	_		