



Foundations Phase Committee Minutes

Date October 23, 2023

Time 4:00 – 5:30PM PT

Attendees *Academic Chair: Matt Cunningham; Executive Chair: Edith Wang*

QUORUM REACHED: *Voting Members:* Amanda Kost, 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, Max Kulberg, John Wilford, Jeff Seegmiller, Kellie Engle, Meghan Kiefer, Jung Lee, Esther Chung, Jordan Kinder, Julien Goulet, Karen Mcdonnold, Martin Teintze, Micheal Campion,

Regrets *Voting members:*

Agenda

	ITEM	LEAD	TIME	ATTACHMENT	ACTION
1	Approve September minutes	Matt Cunningham	5 min	Attachment A	Decision
2	Announcements E-vote: June E-vote Approval	Emmanuel Wright	5 Min		Discussion
3	Step 1 Policy Changes	Edith Wang	20	Attachment B	Discussion
4	Step 1 Advanced Study Course	Edith Wang	20	Attachment C	Discussion
5	Foundation End-of-Phase Reports 2023	Matt Cunningham	20	Attachment D	Discussion
6	Planetary Health Phase 2 Endorsement	Edith Wang	10	Attachment E	Decision



1. Approve Meeting Minutes

Discussion: The committee reviewed the previous meeting's minutes.

DECISION REQUIRED?

[10] VOTES FOR

[0] VOTES AGAINST

Decision: The Foundations Phase Committee approved the September meeting minutes.

2. Step 1 Policy Changes

Discussion: The group was presented with proposed policy revisions to improve USMLE Step 1 preparation for medical students, based on feedback from various stakeholders. The revision includes a four-week consolidation course with question-based content reviews, stress management, test-taking and study strategies, and personalized advice based on a practice exam.

Step 1 Policy Statement

Students who are scheduled to enter Patient Care Phase in spring quarter must sit for the USMLE Step 1 exam on or before March 1* of the same year. MSTP students must sit for the USMLE Step 1 exam on or before March 1 after completing Foundations and prior to entering graduate school.

Short-Term Step 1 Extension and Policy Statement

Students may request an extension of one week (March 8 or earlier) under the following circumstances:

1. Personal Illness
2. Personal/Family Emergencies: Examples of emergencies may include, but are not limited to accidents, hospitalizations, or death of a close family member.

Procedure:

1. The student must complete the Step 1 Short Extension Attestation Form before March 1st (see link). The attestation form will be forwarded to the student's Foundations Dean.

Long-Term Extension Policy

Students who are not yet academically ready (as defined below) to sit for USMLE Step 1 by March 1 or have not taken USMLE Step 1 by March 8 for any reason will complete their scheduled Spring quarter Patient Care rotations and will have their Summer A and B rotations dropped to provide additional dedicated study time.

The term "academically ready" refers to those with either a documented NBME CBSSA (National Board of Medical Examiners Comprehensive Basic Science Self-Assessment) test score which suggests >90% probability of passing or those with a written statement from a Learning Specialist indicating they are considered ready to take Step 1.

Students enrolled in spring quarter clerkships with long-term Step 1 extensions are discouraged from taking Step 1 during this time, as it takes focus off clinical learning and performance. Attendance and



Absentee Policy — Clinical Phases Policy requirements apply during this time.

Procedure: Long Term Delay Policy Timeline

1. Students who did not take Step 1 for any reason by March 8 and sit for USMLE Step 1 after March 8 may contact the registrar (somreg@uw.edu) and the Assistant Dean for Student Development (adminsa@u.edu) after they have taken and passed their Step 1 exam to request the addition of next quarter clerkships.
2. Students who need to delay taking Step 1 beyond summer quarter will have the following impact on their Patient Care schedule: † ‡
 - a. If not taken by September 1st, Autumn A will be dropped
 - b. If not taken by the end of Summer B, Autumn B will be dropped
 - c. If not taken by the end of Autumn A, Winter A will be dropped
 - d. If not taken by the end of Autumn B, Winter B will be dropped, and the student will be referred to Student Progress Committee.

The workgroup also proposed a new policy for students who have completed Foundation Phase by Spring Quarter must sit for the USMLE Step 1 exam on or before March 1 of the same year. The proposed policy includes a one-week extension for students who are academically read to sit for Step 1 at the student’s request. With long-term extension policy for students who are not academically ready to take the exam. The group discussed the impact of delaying clerkships on students' clinical skills and equity. Suggestions were made to remove the language “passed” to allow student to complete current quarter of clerkships” and set a retake deadline of the end of the next quarter.

Concerns were addressed by the committee about the origin of the short-term and long-term extensions within the policy. In which it was explained some students were scheduled to take their Step 1 Exam while attending their transitions to clerkships or also needing to schedule their exam while enrolled in their transition to clerkship course, which created logistical difficulty for staff and students when rescheduling the Step 1 Exam. The changes also allow for student more study time to better prepare. Which should help mitigate the amount of reschedules and make it easier to manage the reschedules by applying more consistent guidelines on how to manage Step 1 Exam reschedule.

More discussion was conducted about the Long-Term Extension Policy:

“Students who are not yet academically ready (as defined below) to sit for USMLE Step 1 by March 1 or have not taken USMLE Step 1 by March 8 for any reason will complete their scheduled Spring quarter Patient Care rotations and will have their Summer A and B rotations dropped to provide additional dedicated study time”.

The Long-Term Extension Policy details what happens when students who haven’t taken the Step 1 Exam by March 8th will drop both summer course to have more time to prepare for the Step 1 Exam. Benefits for the students were highlighted as well as the benefits these changes have on clerkship rotations to help mitigate their late drops. Student who drops Summer A and B may be at risk to expand their graduation timeline. The advanced study course offers elective credits to help mitigate these concerns.

<input checked="" type="checkbox"/> DECISION REQUIRED?	<input type="checkbox"/> VOTES FOR	<input type="checkbox"/> VOTES AGAINST
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Decision: The Foundations Phase Committee discussed the details of the changes being made to the Step 1 Policy

3. Step 1 Advanced Study Course

Discussion: The committee discussed the details of the Step 1 Advanced Study Course

Consolidation Study Course Details

Delivery: Online/Distance Learning

Dates: Jan 2-Mar 1, 2024

Course Length: 9 Weeks

Course Structure Weeks 1-4

- January 2-26 Question-based content review, stress management, test taking and study strategies.
- by January 29: All students take CBSSA Step 1 practice exam (purchased by the school), provided personalized advice based on score.

Course Structure Weeks 5-9

- Independent study, take exam.
- Supported study with regular tutor/faculty check-ins (2x per week), assigned bank questions and topics to review

The Step 1 Advanced Study Course is design to help prepare students for the Step 1 Exam by teaching students:

- stress management
- study strategies
- test taking strategies

Concerns were addressed about who will be conducting the weekly check-ins, which the committee is still developing the check-in staff list and will inform the committee at a future meeting.

DECISION REQUIRED?

[] VOTES FOR

[0] VOTES AGAINST

Decision: The Foundations Phase discussed details of the Step 1 Advance Study Course.

4. Foundation End of Phase Reports

Discussion: The committee discussed the Foundations Blocks End-of-Phase Report.

The data that was presented highlighted the final grades of each block based on the following fields:

- Mean of the Block Grades
- The Highest Percentile of Grades
- The Lowest Percentile of Grades
- The Number of Fails
- The passing Threshold Represented in Percentages
- The Number of Students

NOTE: 70% is the normal passing threshold for each Block, but the threshold may be lowered based on the difficulty of the exams within that Block.

Data from the reports supports the following:

- Every Block's Average Score is below the cohort that came before it.



- The E-21 Cohort Scored lower on block exams despite no major changes to exams.
- Average scores vary from Block to Block.
- The E-21 Cohort had more block fails than Cohorts E-19 and E-20
- Students who fail Block or Threads fail the Step 1 Exam at a higher rate vs student who scores are closer to or above the median score.
- More students failed to achieve competency in the E-21 cohort compared to the E-19 and E-20 cohorts.
- The percentage of Thread questions in the Step 1 Exam is higher in the E-21 cohort compared to the E-19 and E-20 cohort.

Item Statistics

Item Statistics was divided into three sections (Physicians Task, Application and Recall, and Item Difficulty). Physician tasks were divided into three major categories, medical knowledge and scientific concepts, diagnosis, and management. The physician task data supports that the same ratio of medical knowledge and diagnosis questions in the Step 1 Exam. There are no Management questions in the Step 1 Exam. There is more application question in Step 1 Exam vs Recall questions. Item difficulty was determined by the number of students who answer questions correctly. This data can be used to help Block directors adjust the exam difficulty for the upcoming cohorts.

Course Evaluations

Blocks as a whole rating data indicates that score are high on average for most Blocks. Block ratings vary between sites and the Blocks themselves. Thread ratings are also high throughout all threads. Term 3 ratings in pharmacology lower due to some student confusion on where to find content for that Block.

FCM Milestones

FCM Milestones have 5 Domains (Communication and Interviewing, Physical Exams, Oral Case Presentation, Reasoning, and Write-Up). Each Domain has a number of Milestones, totaling 11 Milestones for FCM. Across the 5 domains, 91% of students have met all 11 Milestones within the FCM. The FCM is considering making the content more rigorous to ensure that more students are achieving Milestone success before entering their clinical phases.

Foundations 2 OSCE

There are 3 stations for the E-21 cohort's Foundations 2 OSCE. There were 90% of students got one needs development rating on those 3 stations and nobody got more than one. In terms of what is a consequential result on this, a student who gets needs development on two out of the three stations would have to undergo a remedial OSCE exam again, before they would start their clinical rotations the following spring. Students are performing quite well on this, all of the E21 students got through the OSCE without needing to remediate.

End of Phase Survey

Students are asked to rate their satisfaction based on the following categories.

- Clinical Skills Instructions
- Utility of Program Objectives to Support Learning
- Overall Student Workload
- Opportunities for Self-Directed Learning
- Access to Student Academic Records
- Quality of Pre-Clerkship Phase
- Unscheduled Time for Self-Directed Learning
- Coordination/Integration of Content



- Clarity of Politics for Advancement/Graduation
- Responsiveness to Student Feedback
- Education Related to Interprofessional Collaborative Skills
- Education to Diagnosis Disease.
- Education in Disease Prevention
- Education in Health Maintenance
- Education in Caring for Patients from Different Backgrounds
- Education to Manage Disease

Data supports that students are more satisfied with some curriculum compared to others, with expected low student satisfaction rates in Education to Manage Disease due to lack of management content taught within the Foundations Phase. Data supports high student satisfaction rates with the Fairness of Summative of Assessments, Quality of Formative Feedback, and Quantity of Formative Feedback.

Program Objectives

As a part of LCME accreditation we must indicate how we determine students are meeting program objectives. Data was compiled from the various sources to inform the committee how many students have been considered to have achieved the objective by these measures from Foundations Phase. Things that are added into the report include essay questions OSCE data and other program objectives to include FCM data. There are 61 program objectives that are condensed into eight categories.

DECISION REQUIRED?	[] VOTES FOR	[0] VOTES AGAINST
Decision: The Foundations Phase Committee was presented the Foundation End of Phase Report		

5. Planetary Health Phase 2 Endorsement

Discussion:

The Foundations Phase Committee charged a workgroup to provide recommendations to the Foundations Committee about Planetary Health. The committee members discuss the need to integrate Planetary Health into the curriculum but acknowledge the challenges of doing so without disrupting the existing curriculum. They suggest working with block directors to find ways to incorporate it without displacing too much content and offer resources to help facilitate this process. While some members express support for the proposal, others express hesitation due to the number of changes being discussed and the need for further discussion among more directors. The proposal is met with a call for more discussion before involving more block leads.

- History, and risks of climate changes effect on healthcare resources, demographics and facilities were presented to the committee.
- Development of Climate Change awareness into medical school curriculum can provide understanding of risks to human health.
- The UW is a part of the GCCHE who mandates the curricula as well as shares resources and educational opportunities.

Planetary Health Report Card has 5 metrics:

- Curriculum
- Interdisciplinary Research



- Community Outreach and Advocacy
- Support for Student-Led Initiatives
- Sustainability

UW Past Report Cards and Commitments

- 2021 PHRC report: UW SOM scored in the bottom quartile among 62 US Schools of Medicine. Worst score for curriculum metric.
- December 2021: UWSOM Curriculum Committee votes to recognize climate change as an important curriculum aspect, implement in E-22 curriculum and beyond.
- Summer 2022: Charge to create Planetary Health Workgroup

Recommendations:

- Student engagement with planetary health content should be a requirement, rather than a self-driven process. We recommend incorporating planetary health concepts into small group case-based exercises in both the foundational science curriculum and the required Themes in Medicine course.

Four workgroup subgroups developed for curriculum proposal:

1. **Group 1: Philosophy/ Mission Statement**, Develop mission and philosophy statement, learning objectives for Planetary Health curriculum.
2. **Group 2: Review** where climate change and planetary health content currently exists in the required elective curriculum. Identify topic areas in the curriculum where climate change and Planetary Health content could be added or amended to augment sustainable healthcare.

Recommendations

- Excel Database of curriculum elements and gaps with recommendations
- Recommendations: Make Planetary Health a Theme
- Blocks: incorporate sessions on planetary health aspects of each block
- FCM: Teach environmental history (“Social E”), ROP workshop, culinary medicine mentor dinner.
- Integration Week
- Medicine Health and Society
- Pathway Program
- Clerkships

3. Group 3: Recommend Assessment Methods.

Assessment of the Planetary Health Curriculum will be performed to:

- Establish iterative improvement of the curriculum based on student and faculty feedback
- Evaluate student competency with stated curriculum learning and objectives
- Ensure approximation to evolving national standards and external metrics (PHRC)

4. **Group 4: Faculty Education**, Recommend how faculty will be recruited and onboarded to teach this content as well as how to integrate and develop Regional Partners.

SubGroup 4 Recommendations

- Renew charge and admin support to begin implementation
- Create position and recruit Themes Director (s) to implement and oversee curriculum (0.3 FTE)



- Engage affiliate faculty at UW and in regions
- Faculty development and resource materials

- The excel spreadsheet from Workgroup Subgroup Group 2 was presented and navigated with the committee to help staff use the report.
- Faculty discussed where the curriculum could be incorporated into the current curriculum and how to fully integrate the content.
- This planning is potentially for 2024 curriculum.

The Planetary Workgroups overall ask of today's Foundations committee is to review and approve the following:

- Mission Statement
- Philosophy Statement
- Preclinical Learning Objective's
- Making Planetary Health a Theme
- Incorporating sessions of planetary health aspects of each block
- FCM: Teach environmental history ("Social E"), ROP workshop, culinary medicine mentor dinner.

A meeting to include Block and Thread directors was recommended to understand how those who have already incorporated the subject into their lessons has been done.

The Foundations Committee was presented with the culmination of a year's worth of efforts by the Planetary Health Work Group, which was tasked with integrating planetary health into medical school curricula. The group proposed a longitudinally integrated curriculum that addresses the increasing demands on students and faculty and developed four subgroups to complete their objectives. The group discussed their recommendations for incorporating planetary health into the medical curriculum, including making it a theme, incorporating sessions on planetary health in all four years, and developing a planetary health pathway. They also discussed the importance of faculty engagement and education to equip educators with the tools and resources to teach this content effectively. They suggested working with block directors to find ways to incorporate it without displacing too much content and offered resources to help facilitate this process. The following concerns were communicated after the presentation with the following resolutions:

Concerns

- Integrating Planetary Health concepts into Sessions
- Integrating Global Health concepts into curriculum
- Will the MHS theme sessions that address climate change be altered to incorporate new Planetary Health content?
- Ensure that curriculum is overlapping content that is currently used.
- Adding embryology content into course packs.
- What old material will be taken out if new material is added.

Resolutions



- Working with block directors for specificity of how to incorporate Planetary Health and Global Health concepts into curriculum.
- Using free curriculum with questions and learning objective for integration into each block
- Using small groups and lectures as integration tools
- The MHS content will augment the object to fully integrate planetary health into all block curricula.
- The GCCHE has separate concepts for each block with different questions with planetary health topics to reduce redundancies.
- Continual coordination between Block Directors to improve integration practices.
- Taking advantage of the expertise within the workgroups to enable widescale integration.
- Appointing a Planetary Health Themes Director to manage and enable an efficient integration process.
- Continual work with Block Directors to decide what could be incorporated into the blocks.
- Adding Planetary Health content to blocks that is not assessed.

See meeting handout for details

DECISION REQUIRED?

VOTES FOR

VOTES AGAINST

Decision: The Foundations Phase Committee approved The Planetary Health Workgroup in June to endorse the concept of integrating Planetary Health in the Foundation Blocks in FCM and move forward with discussions with Block directors in the region. The committee agreed that this is the same as a phase 2 endorsement.