



# EDUCATIONAL QUALITY IMPROVEMENT STRATEGIC PLANNING COMMITTEE

## Meeting Minutes

**Date & Time:** June 6, 2024 PST | 4:00 PM - 5:30 PM PST

**Location:** Zoom <https://uw-phi.zoom.us/j/5962096962>

**SharePoint:** <https://uwnetid.sharepoint.com/sites/EQI/EQISPC/>

**EQISPC Webpage:** <https://education.uwmedicine.org/eqi/educational-quality-improvement-strategic-planning-committee-eqi-spc/>

**Minutes Taken By:** Rhea Fagnan

<p><b>Attendees:</b> Darryl Potyk (Co-Chair), Mark Whipple (Co-Chair), Sara Kim (ex-officio), Cindy Hamra, Kristen Hayward, Michael Campion, Ali Ravanpay, Karen Segerson, Matt Lumsden, Sam Fredman, Skyler Smith, Sarah Busch, Heather McPhillips</p>
<p><b>Regrets:</b> Mike Spinelli, Tania Bardyn, Kiran Gill, Bessie Young, David Sherman, Davia Loren, Maggie Phillips, Leonida Radford</p>
<p><b>Staff:</b> Rhea Fagnan, Jung Lee</p>
<p><b>Quorum:</b>      Yes <input checked="" type="checkbox"/>      No <input type="checkbox"/>      (A quorum is 50%+1 of the voting membership or 10)</p>
<b>Committee Business</b>
<p><b>Meeting Minutes:</b>          March and April minutes were approved via e-vote.           May minutes were voted on and approved.</p>
<b>EQI Updates</b>
<ul style="list-style-type: none"> <li>○ Dr. Kim announced upcoming dates regarding the LCME Site Visit:             <ul style="list-style-type: none"> <li>▪ <b>LCME site visit:</b> March 2 – 4, 2026</li> <li>▪ <b>Kick-off event:</b> September 18, 2024, at the Urban Horticulture Center</li> </ul> </li>   <li>○ Dr. Kim discussed the new committee structure for the upcoming accreditation cycle. All co-chairs have been selected and have accepted their roles. There will be seven self-study committees, each led by department and clinical chairs. These committees will have dual responsibilities: reviewing and evaluating accreditation content and identifying potential high-risk areas for citations while recognizing the school's strengths and weaknesses. Each committee will consist of 20-30 members, and charge letters will be sent out soon.</li>   <li>○ There will be a recruitment effort for students to lead the Independent Student Analysis (ISA).</li>   <li>○ All Data Collection Instrument (DCI) materials have been distributed, with the goal for units to have 70% of the DCI completed by the end of June.</li> </ul>

## Discussion Items

- **LCME Accreditation (Element 1.1 Strategic Plan & Continuous Quality Improvement) and UWSOM Medical Student Education Program Strategic Plan**
  - Drs. Potyk and Whipple discussed the committee's responsibility for overseeing the implementation of the strategic plan. Dr. Potyk emphasized that the strategic plan should be a living document, reviewed and implemented periodically.
  - Discussion: focused on identifying areas where the Strategic Plan has been implemented.
    - **Strategic Priority 5:** "Support faculty and staff education and lifelong learning across the region to optimize teaching outcomes, and foster recruitment, retention, and recognition."
      - **Examples:** For Faculty: "CLIME grand rounds, clinical teaching certificates, and a CQI certificate opportunity through the Center for Scholarship in Patient Care, Quality, and Safety, Stern Fellow, Executive Coaching Program for Faculty, Faculty Development Programs led by Office of Faculty Affairs, UWSOM Wellness Program led by Dr. Anne Browning, awards such as WWAMI Pro (for both faculty and staff), WISH program for inter-professional development programs
      - Departments may have their own programs such as dept of Surgery has all department-wide, half day education retreat.
      - Regional campuses may have their own programs. E.g., Montana has faculty development program once or twice per year. (An inventory of these should be undertaken.)
      - For Staff: a year-long School of Medicine mentoring program and POD courses
      - **Challenges:** recognizing and promoting faculty members in their regional medical education program, particularly those outside of Seattle.
      - Staff retention, with suggestions that staff should have opportunities to advance within their own unit rather than seeking employment elsewhere
- **Guest: Dr. Heather McPhillips (Associate Dean for Curriculum)**
  - Dr. McPhillips discussed how the Curriculum Office has integrated the UWSOM Medical Student Education Program strategic plan into their work. She emphasized incorporating the mission statement and strategic priorities into the curriculum committee's agenda and other focus groups. Significant revisions to governance policies and procedures have been made, including restructuring the curriculum for the E-22 class, adding an integration week per term, and advocating for a third-party resource for students. Additionally, an Innovations and Curriculum Design and Delivery work group was created to utilize learnings from the pandemic and student feedback.
  - Dr. McPhillips discussed ongoing curriculum improvements using a continuous quality improvement (CQI) approach and an equity lens, aligning with the strategic plan. She highlighted positive student feedback and the goal to create an annual report card for the curriculum committee. This report will include incoming data, priority areas, process measures, and outcomes.

**Adjourned:** 5:30pm

## ALIGNING CURRICULUM QI WITH STRATEGIC PLAN AND EQI – DR. MCPHILLIPS’ PRESENTATION



### CURRICULUM GOVERNANCE ALIGNMENT

Mission Statement and Strategic Priorities on every Agenda

Curriculum Committee

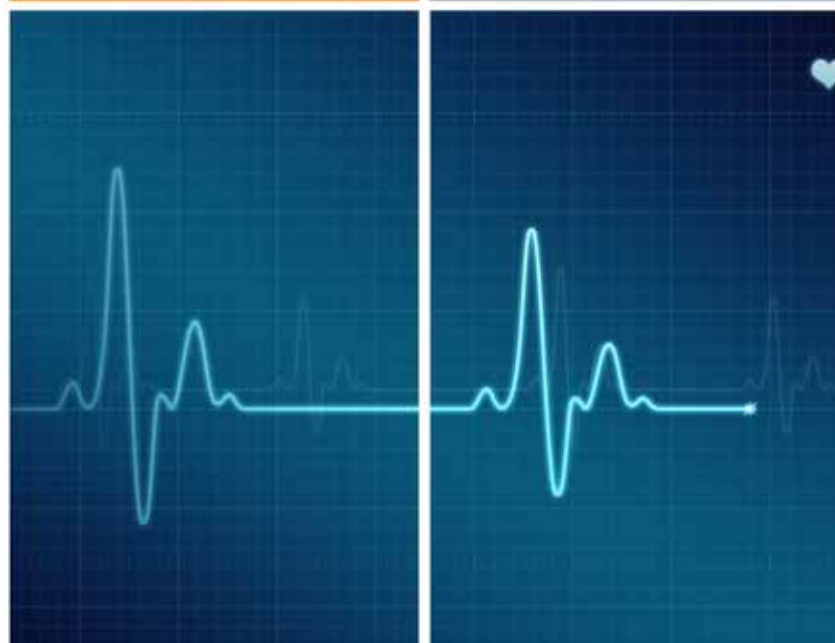
Foundations

Patient Care

Explore and Focus

Revising current governance policies and procedures

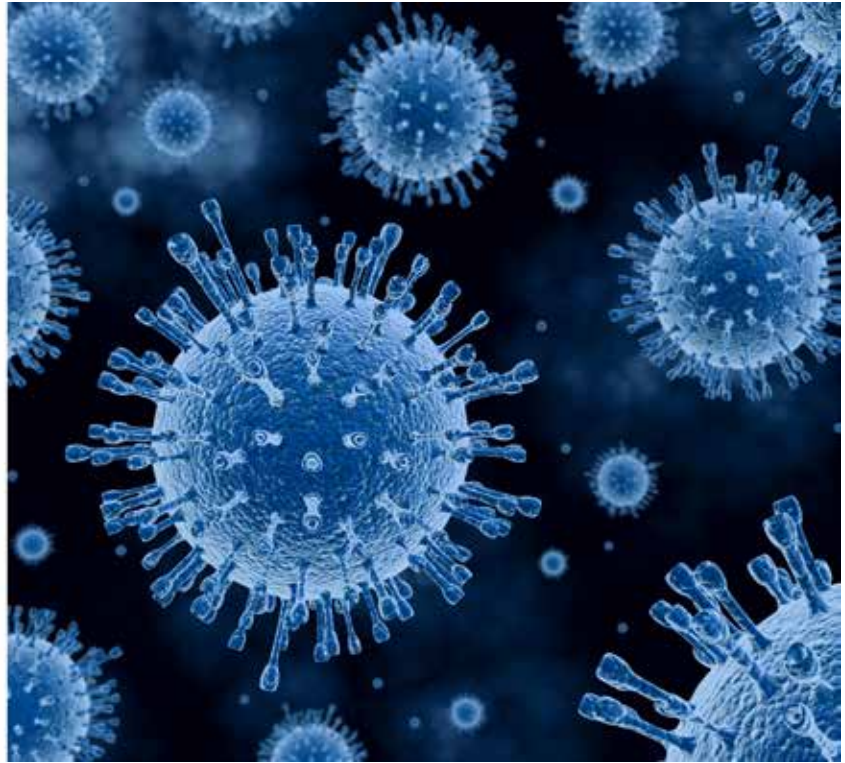
Revised MEPOs



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## FOUNDATION PHASE INNOVATIONS

- Restructure curriculum for E-22 class to comply with national standards
- Integration weeks (one per term – 3 in Foundations Phase, now courses)
- Triple I workgroup, research access improvements, potential for alternative path
- Step 1 policy changes, preparedness, consolidation
- AMBOSS integration, school provided
- Innovations in Curriculum Design and Delivery Workgroup
- Medicine, Health and Society and Themes (student advisory group, community expertise, new planetary health theme)
- Artificial Intelligence Symposium, 2 active working groups in admin, teaching
- New AI curriculum summer 2024 (MHS II)



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## INNOVATIONS IN CURRICULUM DESIGN AND DELIVERY

- Recommendations Phase 1:
  - Active Learning Pedagogy (flipped classroom), longitudinal faculty, faculty development
    - Performance differences between smaller sites and sites with longitudinal faculty and Seattle despite similar MCAT, GPA
  - Student support and success: Early identification of students in difficulty, improve academic support integration, improve support around remediation
  - Curriculum infrastructure: cross-block consistency, address short falls in faculty FTE
- Currently working on Phase 2 through 3 small working groups





## STEP I PREPAREDNESS

- Problem: Step I delays lead to downstream effects
  - 2023 – 30+ late drops of Spring A clerkships
  - Many students delaying past spring without clear policy due to COVID disruptions
  - 69% took by March 15 in E2I (compared 80% E22)

## E22 CLASS CURRENT STATE

	Total	CBSSA >50	CBSSA < 51	CBSSA unknown
Total	268	209 (78%)	45 (17%)	14 (5%)
By March 9	215 (80%)	193 (92%)	12 (27%)	10 (71%)
By April 24	232 (87%)	199 (95%)	22 (49%)	11 (78%)
Pass of takers	221 (95.3%)	196 (98.5%)	15 (68%)	10 (91%)
Fail of takers	11 (4.7%)	3 (OMS 1) (1.5%)	7 (32%)	1 (9%)
Not yet taken	36 (13%)	10 (5%)	23 (51%)	3 (21%)

## STRATEGIC PLAN AND FOUNDATION PRIORITIES

1 - Optimize governance structure and align resources to meet regional needs

2 - Foster collaborative and innovative regional medical education

3 - Become inclusive and antiracist that dismantles oppression

4 - Instill a CQI culture

5 - Support faculty and staff education to optimize teaching outcomes

Supporting students with different trajectories and different resources through early identification, step 1 preparation and policy improvements (2, 3, 4)

Delivering curriculum at 6 different sites – aligning resources, best practices, longitudinal faculty may be key for Seattle (2, 5)

Enhancing integration of content across blocks, CQI on integration weeks (4, 5)

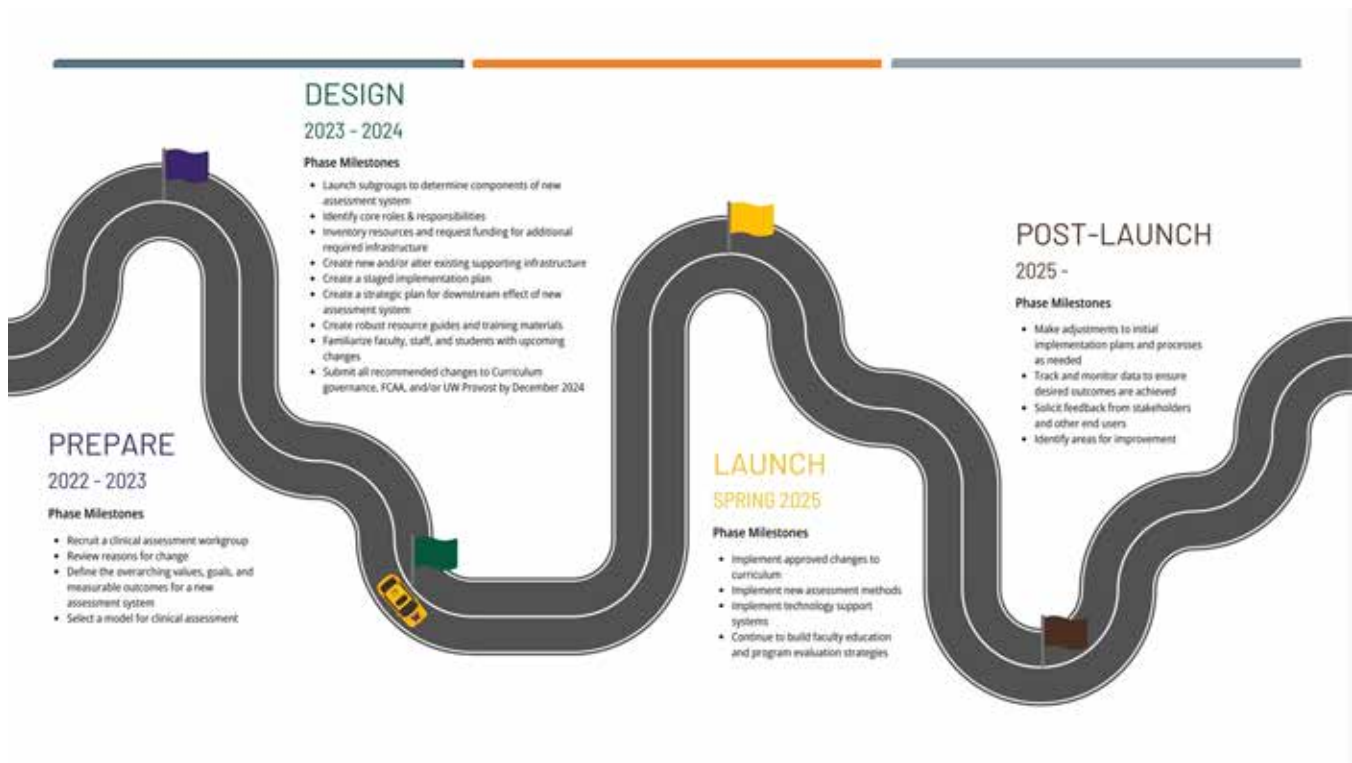
Themes and Medicine, Health and Society (2, 3, 4, 5)

Move TRUST students to Integration Week 2 for 2025



## CLINICAL PHASE

- **Clinical Assessment Workgroup – Pass/Fail and CBME framework**  
[Clinical Assessment System Change - UWSOM Intranet \(uwmedicine.org\)](#)
- Kaiser Partnership
- Student Access to Healthcare policy revision, improvement
- Clerkship review process improvements
- Clinical Integration Weeks (4 weeks total) including Professional Identity Formation
- Transition to Residency improvements



25% FTE position for Director of UW/Kaiser medical education partnership begun in Summer 2023 – Carl Morris, MD

- Added inpatient, outpatient Internal Medicine rotations
- New pediatric inpatient experience at SCH with Kaiser hospitalists
- Pediatrics 4<sup>th</sup> year electives outpatient
- Possible Gyn elective for 4<sup>th</sup> year
- Exploring potential of SeaMar as a partner in Kaiser GME, may have UME opportunities

## STRATEGIC PLAN AND CLINICAL PRIORITIES

1 - Optimize governance structure and align resources to meet regional needs

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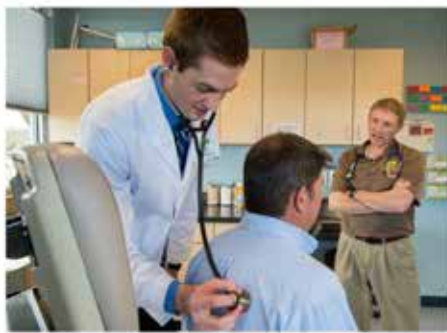
4 - Instill a CQI culture

5 - Support faculty and staff education to optimize teaching outcomes

Going to pass/fail with CBME model (2, 3, 5)

Clerkship site availability improvements (1, 2, 3)

Policy Improvements (1, 3)



WWAMI

**TRUST**

UW SCHOOL OF MEDICINE

Office of Rural Programs



## STRATEGIC PLAN AND RURAL PROGRAM PRIORITIES

1 - Optimize governance structure and align resources to meet regional needs

2 - Foster collaborative and innovative regional medical education

3 - Become inclusive and antiracist that dismantles oppression

4 - Insill a CQI culture

5 - Support faculty and staff education to optimize teaching outcomes

Providing Standardized Curriculum for Clinical Experiences (1, 2, 5)

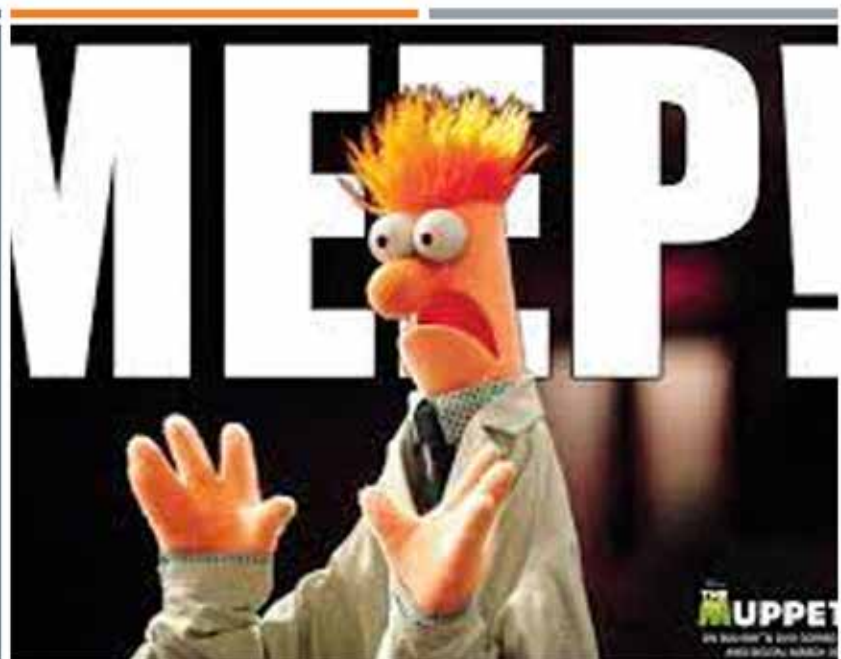
Continue EPA pilot (2, 5)

Moving TRUST residency from MHS 1 to Integration Week 2 (2, 3, 4, 5)

## MEPO REVISIONS: PURPOSE

Updates to the Medical Education Program Objectives (MEPOs) are proposed to:

- Align the program level objectives with national foundational competencies
- Streamline the number of objectives
  - 61 to 32-ish
- Ensure MEPOs are relevant and comprehensive for medical graduates
- Define desired outcomes and show evidence that students are achieving competence in the MEPOs prior to graduation.



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## MEPO REVISION PROCESS

- CLOOM Committee (Curriculum Learning Objective Oversight Committee) developed draft MEPOs after review of:
  - AAMC UME [Foundational Competencies](#)
  - AAMC EPAs [The Core Entrustable Professional Activities \(EPAs\) for Entering](#)
  - [Residency | AAMC](#)
  - AAMC DEI Competencies [Diversity, Equity, and Inclusion Competencies Across the Learning Continuum | AAMC](#)
- Benchmarking (thank you Jordan!) with multiple other medical schools
- CLOOM discussion
- Modified Delphi Method – Key Stakeholder Input



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## SUMMARY

- Curriculum improvements are very much under way
  - Using a CQI approach and an equity lens
  - Align with Strategic Plan for Medical Student Program
  - Thank you for the support of much of this work (clinical assessment, AMBOSS, Themes/MHS) – it is having a positive impact
  - Students are engaging actively and collaboratively around policies and appreciate changes
- LCME will take a lot of time and energy but also opportunity
  - New leaders, experienced Director
- Fall goal to have Annual Report Card with priority areas identified, process measures and outcomes on initiatives
  - Partnership with EQI and Assessment
- MEPOs just approved at Curriculum Committee Level