

# Patient Care Phase Committee Minutes

Date	December 9, 2024
Time	4:00 – 5:30PM PT
Attendees QUORUM REACHED: Patient Care Committee.	Patient Care Committee: Academic Chair: Kris Calhoun; Executive Chair: Joshua Jauregui Voting Members: See below
Regrets	Voting members: See below
Guests: Patient Care and Explore and Focus Committee	Julie Bould, Serena Brewer, Michael Campion, Esther Chung, Kellie Engle, Sara Fear, Meghan Filer, Gina Franco, Doug Franzen, Jerome Graber, Max Griffith, Geoff Jones, Karla Kelly, Sara Kim, Jung Lee, Erik Malmberg, Carmelita Mason Richardson, Megan Mast, Heather McPhillips, Vicki Mendiratta, Alexis Rush, Doug Schaad, Kristen Seiler

# Patient Care attendance: Quorum: 10

Paul Borghesani	Х	Megan Glenski (E22	Х	Karen McDonough (Themes		Alicia Scribner (OB	Х
(Psych faculty)		Seattle)		Rep.)		faculty)	
Matthew Cunningham (PEAC representative)	x	Joshua Jauregui (Co- Chair- non voting member)	X	Haley Pang (E22 Seattle)	X	Lena Sibulesky (Surgery faculty)	x
Kristine Calhoun (Academic Co- Chair)	X	Max Keyes (FM Admin)		Rylie Pilon (E23 Wyoming)	x	Paula Silha (Spok. Faculty)	
Amy Dettori (Peds faculty)		Toby Keys (FM faculty)	х	Michael Santiago (EM faculty)	х	Judi Sullivan (MT admin)	x
David Horn (OTO faculty)		John McCarthy (Rural Programs faculty)	Х	Devin Sawyer – Asst Dean Western Washington	x	Jenny Wright (IM faculty)	X

1. Approve November Meeting Minutes		
Minutes reviewed and first and second motion accepted.		
⊠ DECISION REQUIRED?	[15] VOTES FOR	[0] VOTES AGAINST
Decision: Approved November meeting minutes.		



# 2. Clinical Assessment update (Dr. Jauregui)

# Discussion

# 1. Competency-Based Medical Education (CBME) Framework

- CBME prioritizes:
  - Patient-centered outcomes during training.
  - Evaluation through a framework of competencies and workplace-based assessments (WBAs).
  - Development of essential skills for residency and practice.

# 2. Project Timeline

- 2022: Formation of a workgroup to establish goals and secure governance approvals.
- **2023-2024**: Design phase with subgroup structures and implementation strategies.
- 2025: Trial year (soft launch) for WBAs in six core clerkships during the patient care phase.
- **2026**: Full implementation of the pass/fail grading system utilizing Entrustable Professional Activities (EPAs).
- **2027**: Expansion to include explore and focus phases.

# 3. Workplace-Based Assessments (WBA)

- Usability prioritized for students and preceptors.
- Six EPAs selected for pilot with an entrustment scale for evaluation.
- WBAs will initially be graded for completion only, requiring a minimum of two per week.
- Draft grading policies to be finalized by January/February 2025 after consultation with clerkship directors.

# 4. Implementation Concerns

- Emphasis on smooth rollout and quality assurance.
- Anticipated challenges with training educators and establishing the infrastructure.
- Planning ongoing evaluation strategies to ensure program effectiveness.

# 5. Additional Resources

- QR codes and online resources provided for faculty and students to explore the new system.
- Website available for detailed updates on clinical assessment changes.

#### Decisions

#### Next Steps:

- Subgroups to finalize WBA grading framework and policies for committee review in January/February 2025.
- Continued work on educator development and resource creation for the 2025 trial year.

DECISION REQUIRED?	[] VOTES FOR	[0] VOTES AGAINST

3.	Patient Car	e OSCE Report (Dr. Calhoun)	
Patient Care OSCE Overview			
	Goals:		
	0	Assess clinical skills, reasoning, and provide feedback.	



- Identify curriculum strengths and weaknesses.
- Structure:
  - **Foundations 1 OSCE** (Spring, Year 1): Formative.
  - Foundations 2 OSCE (Fall, Year 2): Preparatory for clinical phases.
  - **Patient Care OSCE** (Post-Patient Care Phase): Summative and graduation requirement.

## 2024 Patient Care OSCE Outcomes

- 243 students assessed:
  - 241 met expectations.
  - 2 required remediation, successfully completed in November 2024.
- Performance improvement:
  - Only 2 students required remediation compared to 7 in 2023.
  - 221 students met expectations across all cases.

#### Challenges

- Lack of a standardized patient manager for nearly two years.
- Variability in clinical rotation timing creates gaps in case representation (e.g., emergency medicine and neurology).

## **Planned Improvements**

- Developing a more rigorous OSCE library to ensure case diversity and representation.
- Expanding assessment to include unrepresented clerkships.
- Enhancing integration with Foundations OSCEs to better align with milestones.
- Addressing logistical challenges in OSCE delivery and management.

#### Petition Process

- New grievance process being developed to align with University of Washington regulations, allowing students to petition OSCE outcomes.
  - Challenges include balancing fairness and mitigating conflicts of interest.
  - Discussions emphasized the need for transparent and efficient procedures.

#### **Future Directions**

- Exploring video and audio recordings for all OSCE cases to improve reviewability and transparency.
- Incorporating assessments that address gaps in current clinical evaluation systems.
- Committee acknowledged the need for:
  - Continued refinement of the OSCE program.
  - Development of the grievance/petition process.
  - Improved alignment of OSCE assessments with clinical competencies and clerkship evaluations.

DECISION REQUIRED?	[] VOTES FOR	[0] VOTES AGAINST
Decision:		

4.	Patient Care End of Phase Report (Dr. Cunningham)				
Background					
	• <b>Purpose:</b> Review of OSCE outcomes, clerkship performance data, and assessments for both				

traditional and WRITE 2.0 clerkships.



# Focus Areas:

- o Student performance in clinical and final grades.
- Feedback on the effectiveness of clerkship structures and evaluations.
- o Updates on accreditation-related healthcare guidance.

#### Discussion

## **OSCE** Program

- Patient Care OSCE:
  - Total of 243 students assessed; 241 met expectations, 2 remediated successfully.
  - Improved performance over previous years (fewer students needing remediation).
  - Trends: Students excel in some cases (e.g., pediatric febrile seizure) while struggling in others (e.g., migraine physical exams and documentation).
  - Planned improvements: Expand case library and align assessments more closely with competencies.

# **Clerkship Grades and Performance**

- Grades Overview:
  - Honors percentages vary by clerkship; final grades incorporate exams and additional assessments.
  - 5 Failures remain rare but can result from low clinical grades combined with poor exam performance.
- Trends:
  - Students perform better in later rotations, reflecting growing clinical competency.
  - Transition to pass/fail model aims to address timing and specialty order concerns.

# **Demographic Disparities**

# • Race/Ethnicity:

- Underrepresented in Medicine (URiM) students generally achieve fewer honors than peers.
- Disparities present in clinical and final grades as well as exam scores.
- Gender:
  - Some gender differences noted, particularly in Ob-Gyn, Pediatrics, and Psychiatry.

# Exam Scores

# • Performance:

0

- Students generally score at or slightly below the national average.
- Fail rate increased slightly in the past year.
- WRITE 2.0 Students:
  - Perform similarly to traditional students, with minor differences across some clerkships.
  - Exam timing adjustments considered to improve student experience.

# WRITE 2.0 Program

- Grade Distribution:
  - Clinical grades in WRITE 2.0 clerkships align with traditional counterparts.
  - Shorter inpatient rotations (e.g., 3 weeks) may limit student ability to demonstrate mastery.
- Assessment:
  - Use of EPA (Entrustable Professional Activities) ratings for grading.
  - We may be seeing grade inflation in some areas.



# **Clerkship Evaluations**

- Feedback:
  - Students rate clerkships highly across domains such as learning environment and faculty teaching.
  - New questions added to assess access to healthcare during clerkships.
- Health Services:
  - Majority of students reported being able to access healthcare when needed.
  - Site-level feedback used for quality improvement on healthcare-related issues.
- **Evaluation Revision:** Plan to overhaul clerkship evaluation questions to ensure clarity and actionability.
- Next Steps:
  - Expand OSCE library to better represent all clerkships.
  - Continue monitoring demographic disparities and WRITE 2.0 outcomes.
  - Adjust exam scheduling for WRITE 2.0 students to reduce stress and improve alignment.

DECISION REQUIRED?	[] VOTES FOR	[0] VOTES AGAINST	
Decision:			