

Annual Report of the USF Morsani College of Medicine (MCOM) Curriculum Committee

September 2012-August 2013

Overview

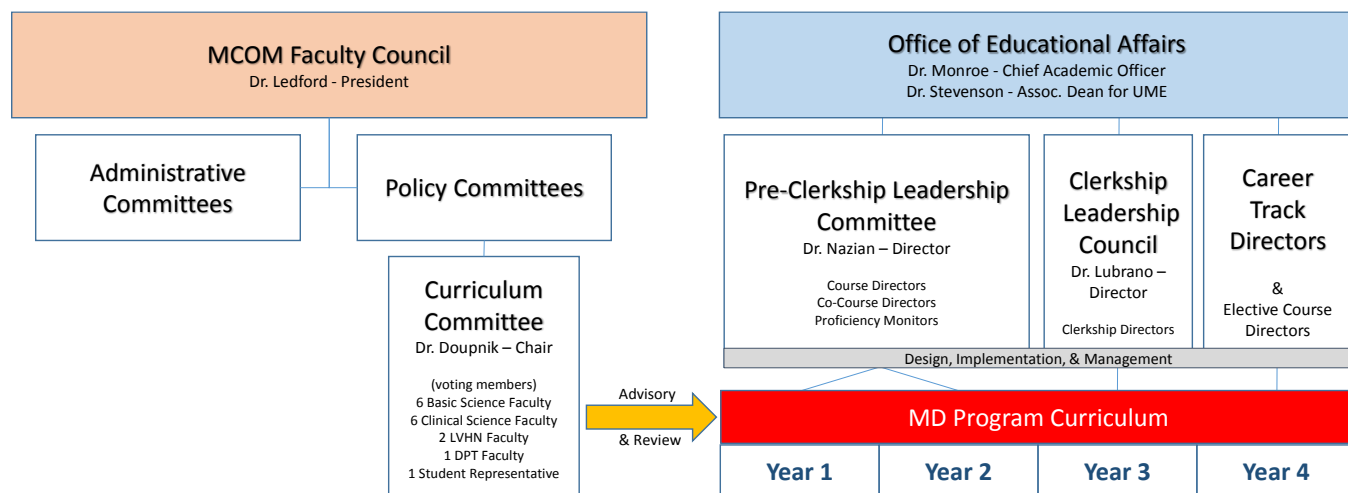
As stipulated in the Faculty Council Bylaws, the Curriculum Committee reviews, advises, and makes policy recommendations to the MCOM Dean on program curricula leading to the MD degree (both CORE and SELECT) and the DPT degree.

The 4-year MD degree program is administered centrally via the Office of Educational Affairs (OEA). The OEA has established faculty committees comprised of course and clerkship leaders that are responsible for the design, implementation, and management of the curriculum along the four instructional years of the program. The organizational structure is shown below in relation to the advisory role of the Faculty Council Curriculum Committee. Some faculty members on the Curriculum Committee are also Course directors, and therefore serve in both capacities.

The 3-year DPT degree program is administered centrally via the School of Physical Therapy & Rehabilitation Sciences (SPTRS), and reports directly to the MCOM Chief Academic Officer via the SPTRS Director (not shown below). A separate SPTRS Curriculum Committee plans and manages the DPT program curriculum, however there is MD/DPT inter-professional education designed into Year 1 of each program that is regularly reviewed by the MCOM Curriculum Committee.

Serving as *ex officio* non-voting members of the Curriculum Committee were;

- The MCOM Chief Academic Officer - Dr. Alicia Monroe
- The Associate Dean for Undergraduate Medical Education - Dr. Frazier Stevenson
- The Associate Dean for Education Affairs at Lehigh Valley - Dr. Alan Otsuki
- The Director of the SPTRS - Dr. Sandy Quillen
- The Director of the Pre-Clerkship Leadership Committee (Years 1 & 2) - Dr. Stan Nazian
- The Director of the Clerkship Leadership Council (Year 3) - Dr. Barbara Lubrano



The Curriculum Committee met monthly this past year with 1 cancellation in June. Meeting agendas and minutes were posted regularly to the Faculty Council website for communication to the broader MCOM faculty.

Review of Courses and Clerkships

Year 1

The Committee ‘approved in principle’ a proposal from Dr. Nazian (Pre-clerkship Director) to re-structure BMS6640 Medical Sciences 1 (aka Course 1) into 3 separate courses running side-by-side during the first 8-9 week block of Year 1. The rationale for the proposed changes included past difficulty in integrating the existing material into a single course, and addressing the different biochemistry and molecular biology backgrounds for entering MS1 and DPT students.

In the proposal, one course entitled “The Musculoskeletal System” would focus exclusively on musculoskeletal anatomy, cell biology, and physiology for both DPT and MS1 students. A new course called “Cancer Biology” would cover biochemistry, molecular biology, cell biology, and genetic principles applied to cancer in clinical medicine. The new Cancer Biology course would be offered only to MS1 students. The third course (Medical Biochemistry) would be for DPT students only, and would focus on biochemistry and molecular biology concepts tailored to their entry knowledge background and preparing them for relevant content encountered in subsequent Year 1 courses. There would be some degree of overlap (i.e. shared lectures/sessions) for the latter 2 courses. At the time of this report all 3 courses were being implemented for AY 2013-14.

Year 2

The Curriculum Committee reviewed the following Courses and Clerkships this past year. For each individual course review, 2 committee members (a basic and clinical science faculty) were assigned to perform the review based on a Course Summary Report completed by the Course Director, and submitted with supporting materials (course syllabus, student course evaluations, etc.). Both faculty reviews were then presented, discussed, and approved with modifications by the full Committee. Final recommendations were then forwarded to the Course director(s) and OEA leadership for follow-up consideration.

The following Preclerkship courses that were launched under the new integrated and interdisciplinary curriculum in AY 2011-12, were reviewed for the first time having 2 years of experiential data.

- BMS6041 Medical Sciences 5 – Hematology, Immunology, Microbiology, Oncology
- BMS6042 Medical Sciences 6 – Cardiology, Pulmonology, Nephrology, Gastroenterology
- BMS6043 Medical Sciences 7 – Psychiatry, Neurology, Endocrinology, Men’s & Women’s Health
- BMS6826 Doctoring II
- SELECT Years 1 & 2 (*in progress at the time of this report*)

In general, all courses were well received by the students. Identified issues recommended for follow-up centered on an unevenness in the density of material presented; 1) within Course 6, 2) between courses (Course 6 being the most dense and Course 7 being the least), and 3) between the Year 2 and Year 1 courses (Year 2 being more dense than Year 1). Efforts were underway by the Preclerkship

leadership to better balance the density of material for AY 2013-14. Students also expressed a need for more USMLE STEP 1-style questions on the course tests to aid their preparation. For Doctoring II, better integration of ethics, humanities, and basic science material with the clinical problem solving cases and didactics was identified.

Lastly, feedback from the teaching faculty for all the courses was lacking in the Committee's review materials, where only Course Director and student input was available. Implementation of the E-value faculty feedback surveys (approved by the Committee 10/2012) should begin in AY 2013-14 to improve faculty input on the courses and clerkships that they teach in.

Year 3 – USF Tampa

An external review of the Primary Care & Special Populations Clerkship was evaluated in September 2012, and together with the previous years' external reviews of the Med-Peds and Neuropsych clerkships, the Committee recommended the formation of a Workgroup to re-structure the Year 3 Clerkships with the following goals; 1) preserve and improve clerkship integration, 2) incorporate recommendations from external clerkship reviews where possible, and 3) optimize alignment with the new Lehigh Valley Year 3 clerkship curriculum approved in 2011/2012.

The following clerkship structure received broad support among the Workgroup and Year 3 Clerkship directors. This re-structuring plan, which includes two 2-week electives (not included below), was approved by the Dean to be implemented in AY 2013/14.

USF-Tampa

- BCC6173 : Introduction to Clerkships (1 week)
- BCC7184 : Primary Care Clerkship (8 weeks)
- BCC7110 : Adult Medicine Clerkship (8 weeks)
- BCC7185 : Maternal, Newborn, and Pediatric Care Clerkship (8 weeks)
- BCC7164 : Surgical Care Clerkship (10 weeks)
- BCC7154 : Psychiatry/Neurology Clerkship (10 weeks)
- BCC7000 : Doctoring III (longitudinal, Friday PM)

The Committee also reviewed and approved a new course called Doctoring III, designed to build on the skills of Doctoring I and Doctoring II and focus on advanced communication and values-based practice. The course will include small groups, journal clubs, seminars, service learning projects, and self-reflections on Friday afternoons across the 3rd year.

Year 3 – USF Lehigh Valley

The Committee reviewed all clerkship proposals and syllabi to be initiated at Lehigh Valley in AY 2013-14. The LVHN curricular framework (alternating 3 week inpatient/3 week outpatient blocks) was approved in AY 2011-12, and committee reviewers focused on whether the new USF Lehigh Valley clerkships were sufficiently 'comparable' to the existing USF Tampa clerkships with regard to learning objectives and assessments. All of the following LVHN clerkships and courses were approved.

USF-Lehigh Valley

- BCC6173S : Intro to Clerkships SELECT
- BCC7184 : Primary Care Clerkship
- BCC7110 : Adult Medicine Clerkship
- BCC7185 : Women's Health and Pediatric Care Clerkship
- BCC7164 : Surgical Care Clerkship
- BCC7154 : Psychiatry/Neurology Clerkship
- BCC7231S : SELECT Year III

Of note during the Committee review process, faculty reviewers regularly noted deficiencies and variability in both the LVHN and Tampa clerkships syllabi. It was recommended that a 'template clerkship syllabus' be developed and applied across all clerkships for consistency and completeness. This standardization would facilitate future reviews of the clerkship curricula by both internal and external reviewers.

Year 4

A new 4th year Patient Safety Education Program (PSEP) proposal from Dr. Jeff Fabri and Dawn Schocken was approved. The program is a 1-day required workshop to be scheduled multiple times during the 4th year in ensure availability for all MSIV's.

The 4th year curriculum at LVHN is currently under development, and will be presented to the Committee in 2013-14 for review.

Review of Curricular Integration

MD Program Objectives:

New MD Program objectives were reviewed and approved (see Addendum), and will replace the previous USFCARES program objectives. The new MD program objectives align with AAMC-developed core competency domains for undergraduate medical education. All required course and clerkship content across the 4-year curriculum will be 'mapped' by the OEA using these program objectives. This will 1) ensure all program goals are being met, 2) help to identify curricular gaps and redundancies, and 3) be in compliance with LCME requirements.

Comprehensive Assessments:

New comprehensive year-long assessments were approved for student progression within the Preclerkship curriculum and were implemented in AY 2012/13.

- Year 1 Comprehensive Exam (in-house) – taken at the end of Year 1, a passing grade is required for progression to Year 2.
- NBME Comprehensive Basic Science Exam, taken at end of Year 2 with an option for up to 3 re-takes. Benchmark scores determine student readiness for taking the USMLE Step 1 exam.

Discipline-based Proficiencies:

The six discipline-based proficiency areas that have been tracked for each student longitudinally via computer-based testing in both Year 1 (molecular, structural, functional) and Year 2 (immunology/

microbiology, pathology, pharmacology), were recommended to be re-aligned with the new MD program objective for 'Core Biomedical Sciences' (mk1) within the Medical Knowledge domain that includes the following areas;

- Molecular/Cellular Biology, Immunology, Biochemistry and Genetics
- Anatomy, Histology, and Embryology
- Normal Cellular, Organ, and Systems Physiology
- Pathophysiology of Common Diseases
- Pharmacology
- Microbiology

Cumulative student performance for these core biomedical science areas (measured via tests item analysis) would be used by Course directors for student advising purposes, but would no longer require a 'discipline-specific' passing score at the end of the year for year-to-year progression. Passing scores in each of the Preclerkship Medical Science courses and end-of-the-year comprehensive exams would instead demonstrate competency within the core biomedical sciences 'Medical Knowledge' domain (mk1). Following 3 years of collected data by the Preclerkship leaders, the year-long proficiency monitoring was found to be duplicative with the individual Medical Science course grading and also difficult to remediate. The recommended change was approved.

Medical Ethics Curriculum:

A new longitudinal Ethics curriculum (spanning Years 1-3), developed by Dr. Fred Paola, was reviewed and recommended for implementation in AY 2013-14. The new ethics curriculum is integrated largely within the Doctoring courses, and addresses previous deficiencies identified in PharmFree content and will also meet current LCME standards.

4th Year Curriculum:

Lastly, a proposal was presented by Dr. Stevenson outlining a revised format for the 4th year curriculum. All students must select and complete a career Track, where 2 months must include approved clinical electives and no more than 5 months can be dedicated to one specific area. Inclusive to this, all students must also complete a Track-approved 'Return to Basic Science' course selective. Two months remain available for interviews and board study. The proposal was approved.

Review of Program Outcomes

The Committee reviewed a number of MD and DPT program outcomes and benchmark metrics at its annual retreat (cf. material posted on Faculty Council website). Some highlights are listed here;

MD Program

- Year 1 Comprehensive Exam performance (c/o 2016)
 - 159 students passed (98%), 3 passed after remediation, 1 failure
- NBME Comprehensive Basic Science Exam performance (c/o 2015)
 - 197 avg. score (for 1st time takers)
- USMLE STEP I (c/o 2015)
 - 96% pass rate (140/146) with 4 students still pending.

- USMLE STEP 2 - Clinical Knowledge (c/o 2014)
 - 99% pass rate (102/103)
- Residency Match (c/o 2013)
 - 95% Match rate (96/101)

DPT Program (c/o 2012)

- Graduation Rate (Students Graduated/Students Admitted)
 - 78% (28/36)
- NPTE Licensure Examination
 - 96% pass rate (27/28)
- Employment Rate (within 6 mos)
 - 100% (28/28)

Additionally, a new medical student academic achievement award at the end of the Preclerkship curriculum (Year 2) will begin with the entering class of 2017, called the “Commendation for Excellence in Medical Science”. To better recognize and reward student excellence in the first two years (within a pass/fail grading system), these new commendations will be awarded to students who consistently perform at a high level in all preclerkship coursework (Medical Science, Doctoring, and Evidence-based Clinical Reasoning courses). The Commendation will be included in the student’s Medical School Performance Evaluation (Dean’s letter) that goes out to residency program directors. This new award will complement the “Commendation in Clinical Excellence” that is awarded at the end of Year 3, and was first introduced with the class of 2013.

Looking Ahead

The USF MD program is scheduled to have its LCME re-accreditation site visit in February 2015. Review of the planning and preparations for this site visit is expected to be a significant time commitment for the Committee in the upcoming year.

Respectfully submitted September 6th 2013,



Craig Douplik, Ph.D.

Chair of the MCOM Curriculum Committee

Addendum

New AAMC Competency Domains	MCOM MD Program Objectives
Patient Care	pc1: Demonstrate patient-tailored history and physical diagnosis skills.
	pc2: Demonstrate evidence-based test ordering skills.
	pc3: Demonstrate logical differential diagnosis, critical and clinical reasoning skills.
	pc4: Demonstrate essential technical skills.
	pc5: Demonstrate evidence-based selection of appropriate therapies.
	pc6: Demonstrate patient-centered, empathetic, holistic care for patients.
Medical Knowledge	<i>Demonstrate appropriate knowledge of the following areas <u>relevant to general medical practice</u></i>
	mk1: Core biomedical sciences, including: <ul style="list-style-type: none"> • Molecular/Cellular Biology, Immunology, Biochemistry and Genetics • Anatomy, Histology, and Embryology • Normal Cellular, Organ, and Systems Physiology • Pathophysiology of Common Diseases • Pharmacology • Microbiology
	mk2: Social-Behavioral Sciences
	mk3: Informatics and evidence based medicine
	mk4: Epidemiology and Public Health
	mk5: Basics of Health Systems and Finance
Practice-based Learning and Improvement	pbl1: Self-assess knowledge gaps, set improvement goals, perform activities to accomplish these.
	pbl2: Use information technology and medical literature to inform clinical decisions.
	pbl3: Demonstrate teaching skills (e.g. of patients, peers, junior students) using principles of adult education.
Interpersonal and Communication Skills	ipc1: Communicate effectively with health science colleagues.
	ipc2: Communicate effectively and sensitively with patients, adjusting language and style in order to incorporate their knowledge, values, and culture
	ipc3: Create accurate and appropriate medical records
	ipc4: Work collaboratively as a member of a medical team with understanding of principles of handoffs and appropriate consultations.

Professionalism	p1: Demonstrate responsibility and accountability in practice.
	p2: Respond appropriately and effectively to feedback.
	p3: Demonstrate respectful and ethical behavior with patients (e.g. HIPPA), colleagues, and society (e.g. relationships with pharmaceutical and other business interests).
	p4: Engage in appropriate communications with others, respecting confidentiality.
Systems-Based Practice	sbp1: Effectively participate in and coordinate care within a variety of clinical settings.
	sbp2: Participate in investigating systems errors and implementing potential solutions.
	sbp3: Incorporate knowledge of health systems and cost of care into medical decisions.
Interprofessional Collaboration	ic1: Work with other health professionals with respect and collaboration.
	ic2: Engage in self improvement by learning from other health professionals.
	ic3: Share information with other health professionals effectively, so as to optimize team performance and patient outcomes.
	ic4: Work with other health professionals to develop effective teams in order to optimize patient outcomes.
Personal and Professional Development	ppd1: Demonstrate altruism by demonstrating service-based learning in a community setting.
	ppd2: Demonstrate self-awareness and the ability to seek help appropriately.
	ppd3: Demonstrate healthy coping mechanisms in response to stress.
	ppd4: Demonstrate flexibility in response to change.
	ppd5: Effectively manage conflicts between personal and professional responsibilities.
	ppd6: Demonstrate trustworthiness that makes colleagues feel secure in patient care venues.
	ppd7: Demonstrate an appropriate level of self-confidence that puts colleagues and patients at ease.
	ppd8: Recognize that ambiguity and uncertainty are normal parts of health care and respond by using appropriate resources in dealing with it.
	ppd9: Show leadership skills that enhance team functioning, the learning environment, and/or the health care system.