**Chobanian & Avedisian SOM Medical Education Committee**

**MINUTES | 11.10.2022 | 4:30-6:00 PM | Zoom Meeting**

|  |  |
| --- | --- |
| **MEETING CALLED BY** | **Priya Garg, MD** |
| **MINUTES BY** | **Abigail Zielinski** |
| **ATTENDANCE** | **At end of document** |

**4:30-4:35 | MINUTES AND ANNOUNCEMENTS |** Priya Garg, MD

|  |  |
| --- | --- |
| **DISCUSSION** | * Minutes approved * New M1 representatives Kevin Senanayake and Angela Sohng introduced |

**4:35-5:00 | OUTCOMES OF RESIDENCY MATCH |** Angela Jackson, MD

|  |  |  |  |
| --- | --- | --- | --- |
| **DISCUSSION** | Dean Jackson presented various match statistics – contact her ([hjackson@bu.edu)](mailto:hjackson@bu.edu) if you would like the slides.  **Presentation**   * Career development/residency application preparation steps for students * The number of positions available and filled in 2022 increased, but the number of applicants (US MDs, DOs, international applicants) increased more * Match 2022: all virtual interviews, away rotations allowed but only 1/specialty, ERAS Supplemental Application piloted by IM, Surgery, Derm   + Definite issues with the supplemental app – took much longer than advertised – but 14 specialties are using it for 2023 * Gradual increase in ROL, students must apply to more programs now than 10 years ago * Percent of programs citing each factor and mean importance rating for each when deciding who to interview   + 90% cite Step 1 score, any USMLE failed attempt is rated most important so decision making may change now that USMLE has gone pass/fail * Interpersonal skills & interactions during interview/visit are most important in ranking applicants * Neurosurgery, orthopedic surgery, otolaryngology, plastic surgery, vascular surgery have more seniors ranking the specialty first than there are positions * Rates of students who put specialties as their only choice & didn’t get matched * Mean number of research experiences – but there’s no definition of “research experience,” so be cautious in interpreting this * BU 2022: we did well in early match. NRMP match: 14 didn’t match, all except for 3 found a position or extended school, 2 of those went into research and 1 to non-clinical work * Percentage of students categorized as each MSPE word – exceptional, outstanding, excellent, very good, good – even “very good” and “good” students generally match * Tracking data around AOA membership and match * It’s a very individualized decision to rotate away, but it may boost matching in locations you rotated away in (ex: ortho) * Moving forward   + SOAP is not a reasonable backup plan – getting harder and harder   + Still uncertainty with the ERAS SuppApp   + Dual applying – easier now most interviews are virtual, so if students are going into very competitive specialties or have academic challenges, we may encourage it   + Realistic advising   + Preparing for and having enough interviews seems to be the key   **Discussion (39-48 minutes in Zoom** [**recording**](https://bostonu.zoom.us/rec/share/ta9ZezQPzyk1tnD2WLqUCREmWbaBqb1mQQbM8tSBCt2aqp-S3ID1WV08dPkXKy3J.oKMQ4xr0CWdDCrbR?startTime=1668114730000 Passcode: JS%7T@yK)**)**   * There is a survey of how residents are doing run by AAMC, not a high rate of return, we check to see if issues in performance could be predicted by MSPE but by and large our students do well * Number of applications seems like routinely 40 – excessive   + Yes, but unless everyone stops over-applying across the board, we’ll disadvantage students * Is recommending dual applications making the situation worse?   + No perfect plan, but since we know SOAP is a poor option, for some students we suggest they dual apply. Unless we have a national strategy to decrease applications, we can’t do much else. No one is recommending 30 interviews, but applications, yes * Anecdotally, the supplemental application was useful this year (Dr. Tulsky) | | |
| **CONCLUSIONS** |  | | |
| **ACTION ITEMS** | | **PERSON RESPONSIBLE** | **DEADLINE** |
|  | |  |  |

**5:00-5:30 | CURRICULUM REDESIGN UPDATES |** Molly Cohen-Osher, MD

|  |  |  |  |
| --- | --- | --- | --- |
| **DISCUSSION** | Dr. Molly Cohen-Osher presented curriculum redesign changes and lessons learned since the last meeting.   * Changes made based on student feedback   + PDFs provided for all SLG’s, and slides used in class so students can annotate   + KSA due dates moved to Tues/Wed or Mon/Tues (As much as possible)   + Open morning scheduled once a week for guided self-learning/extracurricular (As much as possible)   + Sessions without teamwork are now optional and recorded, and application sessions are marked mandatory   + Best practices being shared forward with faculty   + Using application sessions more effectively with more breadth of topics and complexity, as well as better pacing   + Updated grading table for PISCEs     - Professional responsibilities, assessment of learning, assessment for learning   + New schedule format created for students - posted on BB * Growth edges   + Uniformity of TBL     - Simultaneous response     - Growth mindset     - Pacing   + Bringing in Faculty to TBL as facilitators – M4s, post-docs, etc. are great, but content experts would be really valuable   + Best practices in SLGs   + Preparation of SLGs in advance with time for editing     - So hard, so if you have a few months, try and start now     - Students don’t want less detail but want to know what details are important for imminent applications and what they can think about in depth later   + Session Overview documents   + Defining content deliver vs application – marking mandatory more clearly   + Spot checks on attendance   + Planning to be there for integrated cases in LEADS weeks following module   + Fine tune integration of longitudinal content   + Timing of LPA (first 3-week LPA is coming up) * New things – 158 submissions of Uworld question completion reports, feedback from AMEs about improved reasoning ability now versus in the past, OEQs and grading * Many processes we are using to evaluate curriculum * PSEP, SACs, monitoring LPA performance, course director meetings for integration, course directors getting faculty feedback, EQI * Lessons learned   + Students are preparing for class!   + KSA completion/timing   + Working with students on making mistakes out loud   + Need more longitudinal teams training (sessions now planned)   + Mandatory sessions need to include teamwork, content delivery needs to be recorded and optional   + Appropriate amount of detail in SLGs -> well-prepared students -> valuable learning at application time   + Overdetailed SLGs -> inadequately prepared/frustrated students -> applications feel like a waste of time because they need more time to study * Mock weekly schedules for ‘23-’24 when there are two PISCEs classes   + Vote on this schedule approved – 14 yes, 1 no, 0 abstaining * Neuro, Psych, and Behavioral Medicine changes   + Now: 1 week of Neuro in F2, 3.5 weeks of Neuro and 1.5 of Psych in Neuro/Psych   + Proposed change: decompress F2 Neuro – reduce cranial nerve content, 4 weeks of Neuro and 2 of Psych in Neuro/Psych, Transitional Clerkship goes from 3 to 2 weeks   + Vote on this change approved – 14 yes, 1 no, 0 abstaining | | |
| **CONCLUSIONS** |  | | |
| **ACTION ITEMS** | | **PERSON RESPONSIBLE** | **DEADLINE** |
|  | |  |  |

**5:30-5:55 | ECS ELECTIVES EVALUATION UPDATES |** Anand Devaiah, MD

|  |  |  |  |
| --- | --- | --- | --- |
| **DISCUSSION** | Dr. Anand Devaiah presented on the elective evaluation feedback process.  **Presentation**   * Elective feedback summary * Feedback process has changed over time * Priority for onboarding and QA process has been the required courses * Electives phased in over time * Now able to screen and provide feedback to the course directors and administrators * Steps taken – ECS and MEC * Data acquisition and anonymity protection   + Electives have fewer participants and less feedback, n>5 responses standard, current and year over year data compared * Screening tool developed   + Easily see course performance across the electives   + Identify key metrics for performance * Screening tool results reviewed, discussed in ECS   + Calculated percentage of responses giving the highest 2 scores on each question – threshold of 80% or better   + 39 questions spanning different types of electives * Overall performance correlates with a few key assessment questions * Screener tool output example – fragment of table * 101 electives assessed in 2021-22 (those that were taken; we have more in the catalogue) * Categorized electives: review of scores only, follow up with course directors, <5 respondents but met or exceeded scores in key assessments, <5 respondents and needs follow up * Course director, admin, and department chair will receive a message with either a PDF with summarized evaluation (>5 respondents) or qualitative summary (<5) * If follow up is needed, appointment set up with ECS chair, discuss areas for attention * 3 electives did not meet thresholds for any key assessments * 21 electives did not meet threshold for one or more key assessments but otherwise scored highly * Next steps – minor adjustments to screener tool, ongoing work with directors, review our process, recognize high-performing electives   **Discussion**   * The 3 underperforming electives are still running, so have we heard back? What’s the follow-up?   + Sending out communications now, but have taken a look to make sure there is nothing critical. Since we do have relatively low numbers, we want to do due diligence with course directors, then consider if we need to intervene more majorly. * Suggestion that across all required courses they write an action plan - if there's not a plan/willingness to improve then there’s a reason to not enroll students   + Potential for robust feedback. And concern also depends on reason for low performance – does there just need to be more structure, or is there an ATM adjacent issue? | | |
| **CONCLUSIONS** |  | | |
| **ACTION ITEMS** | | **PERSON RESPONSIBLE** | **DEADLINE** |
| Send out feedback, ensuring MSE directors are included | | Anand Devaiah | End of calendar year |
| Provide Dr. Devaiah a self-assessment form for course directors | | Priya Garg | ASAP |

**5:55-6:00 | COMMITTEE UPDATES (PCS, CCS) |** Gwynneth Offner, PhD; Sonia Ananthakrishnan, MD

|  |  |  |  |
| --- | --- | --- | --- |
| **DISCUSSION** | * PCS: similar curriculum redesign presentation; trying to think about integration in advance as a committee, not just among course directors * CCS: clerkship lottery; elective sign ups; personal days in clerkships; basic science integration in clinical years – maybe ECS students could get involved | | |
| **CONCLUSIONS** |  | | |
| **ACTION ITEMS** | | **PERSON RESPONSIBLE** | **DEADLINE** |
|  | |  |  |

**Attendance:** Priya Garg, Sonia Ananthakrishnan, Vonzella Bryant, Michael Cassidy, Molly Cohen-Osher, Paige Curran, Anand Devaiah, Elizabeth Ferrenz, David Flynn, Angela Jackson, Patrick Mabray, Gwynneth Offner, Karen Symes, Louis Toth, Asher Tulsky, Susan White, Elizabeth Yellen, Tony Joudi, Rachel Ingraham, Xaver Audhya, Kevin Senanayake, Angela Sohng, Jack Dalton, Isaque Rezende, Abigail Zielinski