Comments from the Chair

Dr. Keith Armitage, CME chair, opened the meeting by requesting approval for both the June 26, 2008 minutes (during Dr. Altose’s tenure) and the October 2, 2008 minutes. Both sets of minutes were approved as distributed. Dr. Armitage noted that questions/concerns have arisen over the recently revised CME Charge, approved at the September 22 Faculty Council meeting. Please e-mail these to either Dr. Armitage (kba@case.edu) or to the CME secretary, Ms. Lois Kaye (lsk2@case.edu) for follow-up.

Comments from the Vice Dean

Dr. Dan Ornt, Vice Dean for Education and Academic Affairs, mentioned the upcoming Block 2 exam, the first “large content” exam for the first year class. The Class of 2012 also experienced their first Clinical Immersion during Block 2. Dr. Ornt attended student presentations Friday, which concluded the Immersion week. The immersion, provided exposure to genetics testing labs, GYN surgery, pelvic and OB issues in the Skills and Simulation Center, and cancer patients. Dr. Ornt felt that the whole experience went quite well.

Dr. Ornt next addressed the student thesis. He suggested that the CME might enjoy hearing an update on the medical student thesis for the University program from Mr. Todd Fennimore, Director of the Office of Medical Student Research. Dr. Ornt wished to thank those faculty offering to serve on the Review Committee to review the final products, which are due January 15 for the University Program. Spring 2009 will mark the graduation of 1) the first University Program class to fulfill the student thesis requirement, and 2) the first College class of the five-year physician investigator program.

Dr. Armitage inquired whether all University students would pass the student research requirement. Dr. Ornt explained that the periodic assessment process—involving examination of the research proposal with explicit hypotheses and
investigative protocols seven weeks prior to the start of the student’s research block; two progress reports; and review of a summary of research constituting a “working draft” of the medical thesis before its submission—should make us aware of any problems before it is too late.

We are well into the LCME process and will bring ongoing reports to the CME as needed.

Dr. Ornt next focused on clinical programs. The LCME is very interested in the timing of grades for the clinical basic cores. This has been an established LCME goal for at least 15 years and one where we could use improvement. During the 2007-2008 academic year, the “mean” time for all departments for the percentage of students that received a grade for a clinical core “within four weeks” after the end of the core was twenty-five percent across all sites. Of course, there was a wide range—from 0% to 85%—across departments when measuring compliance with the “four week” grade delivery period. While Dr. Ornt acknowledged that the new Clinical Assessment System did cause some delay during the 2007-2008 year, everyone was using CAS and some departments managed an 85% delivery rate of “within four weeks.” The Joint Clinical Oversight Group has not yet seen these data at a formal meeting.

Dr. Andrew Fishleder suggested the need for better system accountability and delineation of responsibilities.

Dr. Ornt mentioned that we are now generating a report by site, by discipline, and by block.

Dr. Armitage suggested focusing on the non-adherents.

Dr. Martin Snider and Year IV student representative, Mr. Brandon Maughan, inquired about a USMLE Step 1 update.

Dr. Ornt replied that roughly 130 students have taken the licensure exam. In comparison with the last few years, our students are doing as well or better. However, a few students have yet to take the exam.

Curriculum Monitoring Council Update

Dr. Ornt mentioned that Block 4 recently presented its review/action plan.

CCLCM Curriculum Steering Council

Dr. Andrew Fishleder, Cleveland Clinic Lerner College of Medicine Curriculum Steering Council Chair, mentioned that the College welcomed its fifth class this year. There is now a full program of five classes at the College. The Year 1 summer program went well. The Year 5 student research thesis reports are due at the end of January. Each student has a thesis committee and a research mentor. Approximately one-third of College students are pursuing a Master’s degree. Like the University Program, the College is also spending much time preparing documentation for the LCME.

When asked by Dr. Kikano about the impact of the new tuition-free aspect on admissions, Dr. Fishleder replied that about 1400 applications were received for the 32 positions last year and they are currently only slightly ahead of that number to date. He explained that application figures may have reached a plateau, as candidates take under consideration that the College is a five-year curriculum, substantive research experience is a prerequisite, and this is a very competitive program.
Like the University Program, the College Program is now preparing Dean’s Letters for the students. Dr. Armitage added that this is the first time College students will participate in the Match. Dr. Fishleder pointed out that the College uses no grades and this may present a challenge for students. (By request, at the November 20 CME meeting, the last sentence was amended to: Dr. Fishleder pointed out that the College uses no grades and there is a question about how this will be perceived when students apply for residency.)

Dr. Armitage felt the lack of grades would not be a problem, as residency directors tend to look at NBME scores and comments. All medical students take Board exams. Comments are useful in flagging someone who is dysfunctional in a clinical setting.

**Flexible Program Update**

**Dr. Kent Smith** noted that, despite the timing of the PeopleSoft conversion which caused the Registrar’s Office to be without all necessary resources, students demonstrated interest in **Type A electives**. Another upsurge is anticipated for January enrollment. Some College students opt to take electives as well.

Dr. Armitage invited Dr. Smith to bring a “buffet” listing of elective offerings to the CME at a future meeting.

**Health Sciences Library Update**

**Mrs. Ginger Saha**, Director of the Cleveland Health Sciences Library, has finished **journal renewals**. She and her staff are still open to **suggestions for new titles**.

Since 1976, Mrs. Saha has been active in educating faculty, staff, and students about correct use of **copyrighted** materials. Please contact Mrs. Saha (vmp2@case.edu) or her staff with any copyright questions: i.e., correct interpretation of the “Spontaneity” provision in the Fair Use Doctrine to make paper copies one time; requests for Library licensing of electronic resources; and legal use of material from books. Mrs. Saha differentiated between sending a link to a resource via e-mail as complying with copyright rules, whereas, sending a PDF file via e-mail usually does not. To find out more contact Mrs. Saha.

**Academic Computing Update**

**Dr. Irene Medvedev**, Director of Academic Computing, was happy to report she and her staff have received no major complaints and are preparing for next week’s exam.

**New Business**

Dr. Armitage turned over the meeting to past CME Chair, **Dr. Murray Altose**, to comment on the revised **CME Charge**, passed in its initial revised format by the Faculty Council September 22. Dr. Altose explained the intent was to revise the charge “to reflect current realities” but acknowledged some areas were overlooked. Dr. Altose suggested contacting Dr. Terry Wolpaw, Dr. Dan Anker, or other CME members. Dr. Ornt mentioned that the Charge must revert to Dr. Anker should it need to go back to Faculty Council. Earlier in the meeting, Dr. Armitage also encouraged questions/concerns to be e-mailed either directly to him (kba@case.edu) or to the CME secretary (lsk2@case.edu) for follow-up.
Dr. Ornt provided background for the decision to create an **attendance policy for students in the first two years**. The manner in which IQ Groups function and the organization of the Clinical Immersion along with a request for consistency from the Student CME last year precipitated the formalization of an attendance policy. Dr. Ornt believes that this is a reasonable policy, but he acknowledged that the implementation of an attendance policy is not a concept universally supported among faculty and students at the School of Medicine. Attendance at IQ Groups and Clinical Immersion activities is required. We recognize that competing urgent issues arise. Therefore, the concept of three “flexible days,” allowing three unexplained absences, is incorporated into the policy. Dr. Ornt explained that considerable debate had ensued over the need to formalize an attendance policy. In clinical activities, for example, attendance has always been required.

Dr. Armitage agreed that students should get the message early in their careers where they are going.

Dr. Ornt recalled much latitude in attendance in the old curriculum, especially in regard to lecture. Now, with faculty participation in so many teaching activities, it is devastating when students do not show. By contrast, in clinical activities, students have always been expected to be there. The student must negotiate any absence with his/her attending if something happens.

Dr. Altose suggested holding the preclinical students to the same expectations as clinical students.

Dr. Ornt replied that during a 40-week year, students need some flexibility, for example: time to attend a friend’s wedding. We do not want to put the onus of attendance on the IQ Faculty. We have seen flexible attendance policies at other medical schools. We are currently working on an online system. For now, we continue to keep records on paper attendance forms.

Dr. Ernsberger mentioned that as an IQ Group facilitator, he has the responsibility of completing a weekly attendance form indicating any absences and the reason(s) if known.

In answer to a question, Dr. Ornt clarified that illness does **not** count as a flexible day.

Dr. Fishleder mentioned that the College is struggling with the same issue. Students are required to attend everything. Attendance qualifies as a professional issue. How do you monitor that?

If a University Program student does not pass an IQ Group due to professionalism issues, especially attendance, he/she meets with the Society Dean. Sometimes a student must meet with the Committee on Students to come up with a plan.

Respectfully submitted,

Lois Kaye
Secretary to the CME