## University of Central Florida College of Medicine M1/M2 Minutes

Meeting Date: 01/12/2018 Start Time: 3:04p Adjourn Time: 4:37p

Chair: Dr. Kibble

Attendance: Phil Bellew, Dr. Kibble, Dale Voorhees, Alisha Corsi, Jason Day, Dr. Verduin, Bee Ben Khallouq, Amanda Blom, Dr. Gorman, Dr. Peppler, Dr. Lambert, Dr. Gros, Dr. Berman, Dr. Kay, Dr. Selim, Dr. Daroowalla, Dr. Harris, Dr. Simms-Cendan, Dr. Kauffman, Allison Kommer, Dr. Davey, M1 rep, Dr. Asmar, Andrea Berry, Dr. Castiglioni, Dr. Dil, Dr. Ebert, Nadine Dexter, Dr. Hernandez, Dr. Topping

Agenda Item	Discussion	Decisions
Approval of	•	<ul> <li>Approved</li> </ul>
minutes		
Announcements	Dr. Gorman sole module director of Endocrine/Reproductive Systems	•
	Dr. Rahman joining leadership team in FIRE module as co-director	
LCME/curriculum	Better than average. Final report from committee is pending	•
reform update	<ul> <li>Finances (standard, not a going concern for UCF COM)</li> </ul>	
	<ul> <li>Fair/timely summative assessment (clerkship grade/computer tech issue)</li> </ul>	
	<ul> <li>Student evaluations committee</li> </ul>	
	<ul> <li>Chair for admissions committee process</li> </ul>	
	<ul> <li>Diversity of student/faculty representation</li> </ul>	
	<ul> <li>Curriculum structure makes electives difficult to take in a timely manner</li> </ul>	
	Sufficiency of faculty	
	<ul> <li>Feedback/annual evaluations for affiliate and volunteer faculty</li> </ul>	
	Preliminary step 1 data for class of 2019:	
	<ul> <li>Mean of 229 (national mean is 230), 2 failures</li> </ul>	
	<ul> <li>Curriculum, faculty, and student entrance statistics largely haven't changed</li> </ul>	
	<ul> <li>Pilot project/feasibility study: let 10 students take step 1 after year 3 rather than</li> </ul>	
	year 2 (some schools are already doing this).	

	•	<ul> <li>Recognizing at-risk students, turnaround time for SEPC near end of M2</li> <li>Possibility of making step 1 not a requirement for M3</li> <li>Benefit of having foundational knowledge from studying for step 1 prior to clerkships, refreshing knowledge just before M3 vs synthesizing in clerkships</li> <li>Logistics issue, whether mean scores will significantly change, impact on low-performing students</li> <li>Ideas to improve curriculum process</li> <li>Short term changes to clerkships, task force creation for long term improvement to whole curriculum</li> <li>100% military and ophthalmology match rate</li> </ul>	
Student report	•	M2: Finished GI/Renal, performance was strong.  o Examplify: graphs in images helped  M1: Dissection week, meeting regarding professionalism issues, student goals (grades vs knowledge and interpersonal skills)  o Is reporting in Promobes adequately capturing professionalism issues	•
Examplify issues	•	New version: exam user experience (for all schools using it)  o Freezes, navigation lag  o Additional time added for exams  o Students need to upgrade to 64 bit version, assessment can make a mock exam version available	•
Scheduling in r25	•	Increased scheduling conflicts, M3 scheduling in COM rooms  Some M3 practical exams will happen during P1/P2 time, which can influence how HB and Systems modules can alter schedules  M1/M2 start scheduling in September, a year before the rooms will be used.  Class attendance and room utilization (15 students in a room for 120)  Set consistent course template pattern to ease planning	•
Small group task force update	•	Reviewed student comments Faculty focus groups Task force is going back to literature for recommendations/best practices	•

<ul> <li>through on their own time when ready.</li> <li>Social interaction/appropriateness of method for students today</li> <li>Values/beliefs/attitude regarding learning are not consistent even with 10 years ago, necessity of adjustment for faculty/students alike</li> </ul>	•
S-4 optional small groups: application of material covered elsewhere. Same style/setup as previous mandatory sessions, low attendance, high engagement among those who attended/faculty involvement. Some didn't like the cases, many were happy to work	