

Committee on Educational Policy and Curriculum
SUNY Downstate College of Medicine
May 25, 2011
Seminar Room 2-1

Agenda

Old Business

- Accept minutes of April 28 meeting
- Role of CEPC document accepted by Executive Committee and submitted to Office of Education (Dr. Pamela Sass)
- Review new draft of Guidelines to Faculty to Write Elective Proposals
- Anyone interested in tabulating responses to MS4 survey?

New Business

- Lists of recommended electives for each specialty
- Request for a calendar outline for Office of Education

Next Meeting is Thursday June 30 4PM Dept of Cell Biology Seminar Room 2-1

CEPC Google site <https://sites.google.com/site/sunydownstatecepc/>

Education Policy and Curriculum Committee (CEPC) Roster:

Dr. Lee Eisner, Chairman (Cell Biology)
Dr. Yaacov Anziska (Neurology)
Dr. Mert Eroglu (Emergency Medicine)
Dr. Sabina Hrabetova (Cell Biology)
Dr. Jenny Libien (Neurology and Pathology)
Dr. Steven Ostrow (Radiology)
Dr. Rikki Ovitsh (Pediatrics)
Dr. Katherine Perkins (Physiology and Pharmacology)
Dr. Bram Trauner (Medicine)

Mr. Murray Echt MS1
Ms. Sue Hahn MS1
Ms. Melissa Lozanno MS1
Ms. Kristin Twomey MS1
Ms. Celina Brunson MS2
Ms. Michelle Lobo MS2
Mr. Elvedin Lukovic MS2
Mr. Darrin Wong MS2
Ms. Alaina Burns MS3
Mr. Daniel Cucco MS3

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OUTLINE OF CEPC PRIORITIES AND RESOURCES

The CEPC is charged by the Executive Committee to monitor curriculum content, teaching methods and educational policy in all curricular units and clinical clerkships. This may include:

1. integration, consistency and quality of basic science and clinical education offered by the COM,
other sources of feedback besides what is listed below?
2. methods of assessing student knowledge, clinical competence and progress through the four years,
How does this overlap the job of Student Admissions and Promotions Committee?
 1. *Data on length of time it takes faculty to submit student evaluations* **SAPC?**
 2. *Progress report on effectiveness of New Innovations* **SAPC?**
 3. *Forms and methods used to assess students* **SAPC? AND CEPC?**
3. methods of assessing teaching and course/clerkship effectiveness, **High priority**
 1. *Forms used to evaluate blocks and clerkships – Review in June before academic year begins*
 2. *Block and Clerkship evaluation reports* **annually**
 3. *Minutes/Summary of Student Liaison Committee meetings with block directors, Academic Dean,....* **Receive soon after the SLC has met with Stan Friedman**
4. availability and quality of faculty development offered at the COM, **Low priority**
Get Progress Report annually from Faculty Academy and Office of Education
5. inclusion of all competencies and special subject threads in the curriculum, **Low priority**
Get Progress Report every 6 months during preparation for new curriculum
6. LCME standards for the basic science and clinical curriculum of the medical students, **Low priority**
Get Progress Report annually from LCME steering committee
7. class cohort performance on all NBME/USMLE exams, **High priority**
 1. *USMLE Step 1 and 2 data annually*
 2. *USMLE Step 1 subject specific data annually*
 3. *Clerkship shelf exam data annually*
8. adequacy of instruction on research methodology and access to research opportunities, **Low Priority**
Get Executive Committee Research Subcommittee to create a webpage listing SUNY Downstate center-wide opportunities for students
9. quality of educational resources and support from educational computing and technology, **Low Priority**
Get Progress Report annually on ECT issues raised by Block and Clerkship Directors
10. educational policies of the COM as stated in the Student Handbook, **High Priority**
 1. *Submit CEPC suggestions for revisions of SH as they arise to Office of Education? Dean of Students? Executive Committee?*
 2. *See draft of Student Handbook before printing with all suggested revisions highlighted.*
 3. *New Student handbook has to be created for revised curriculum*
11. approval and quality of clinical and non-clinical electives offered through the four years, and
Write Elective Guidelines for faculty submitting proposals
Role taken over by Office of Education in new curriculum
12. effectiveness of the administration and leadership of all curricular units. **High priority**
Annual survey of pre-clerkship (and clerkship) teaching faculty?
Meet with teaching faculty block by block?

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GUIDELINES FOR FACULTY ON ELECTIVE PROPOSALS

Requirements for All Electives

1. Elective course should be a structured and supervised learning experience.
2. Specific written goals and objectives for students should be included in the course catalogue description.
3. Clinical elective descriptions must give detailed information on expected patient contact. Student clinical responsibilities should be defined at an appropriate developmental level.
4. An elective must be designated as a reading/writing, clinical or research elective
5. Students must be registered for a clinical elective before any patient contact can occur. However, students may register later for non-clinical non-credit electives at a time to be decided by the faculty sponsor, but no later than mid-way through the course.
6. Before the start of an elective the faculty sponsor should email registered students where they should go on the first day of the course.
7. The elective proposal must be associated with a specific COM basic science or clinical department and signed by the departmental Chairman. The sponsor should have a faculty appointment at Downstate.
8. The faculty sponsor must confirm that risk waivers from students attending overseas or wilderness electives have been signed at the Registrar.
9. Each student must complete and submit to the Registrar a course evaluation at the end of each elective in order to receive a grade or Pass.
10. Approval of new electives is valid until implementation of the new Downstate curriculum. Electives will be re-evaluated at that time by the Office of Education.

Non-Credit Electives for MS1 & MS2

1. Non-credit electives can extend over multiple months.
2. Students in non-credit electives can only receive a grade of EPass based on fulfillment of attendance and participation requirements set by the sponsor. If the student has not withdrawn before 50% of the course has passed and the student does not fulfill the course requirements, the student will receive an EFail.
3. MS3 and MS4 students have the option of registering for non-credit electives, e.g. Brooklyn Free Clinic.

For-Credit Electives for MS3 & MS4

1. For-credit electives may be offered for 2 weeks, 4 weeks or both to fit between and rotate with clerkships and sub-internships. It is expected that the student will spend at least 30 hours/week.
2. Most clinical MS3 and MS4 electives require at least one prerequisite clerkship for students to enroll and this should be noted in the course description.
3. Teaching methods and methods of student assessment should be clearly described in the proposal.
4. Student assessments for all MS3 and MS4 electives should be based on multiple criteria that may include observation, reading assignments and discussion, literature reviews, patient interaction, conference participation, written papers, published abstract or paper, or oral presentations.
5. Students are assessed and graded on a scale of Honors, High Pass, Pass, Incomplete Fail.
6. Extramural (away) electives require that the student meet any additional requirements imposed by the external institution.

Career Exposures Opportunities (CEOs) are NOT electives and students do not register for them.

- . Career Exposures Opportunities are non-credit experiences offered by departments to MS1 and MS2 students that usually include less than 10 hours of clinical observation. They are aimed at introducing first and second year students to clinical specialties and sub-specialties. These are not graded and do not appear on a student's transcript. The student should not be allowed to carry out clinical procedures during a CEO because of institutional liability issues, but nevertheless should have faculty supervision as in all credit-bearing clinical electives.