



Minutes
Central Group on Education Affairs
Curriculum Special Interest Group
Spring Conference – Omaha, Nebraska
Saturday, March 19, 2011
12:45-1:30 P.M.

Convener: Floyd Knoop (*for* Nehad El-Sawi) called the meeting to order at 12:45 P.M.

1) Welcome and Introductions – all members present provided an informal introduction to themselves. An attendance list is available at the end of this document.

2) Annual Meeting Update and Discussion

a) The members were provided a document from the CGEA Business Meeting at the AAMC Annual Meeting on November 9, 2010, in which participants were asked to respond to the following question:

“Think about the challenges or issues on the horizon in your work. What programs or activities could CGEA offer to help you meet the challenges or issues in your work?”

b) The above responses were intended to assist CGEA members, sections and SIGs in developing programs and activities for the CGEA Spring Meetings. The numerous responses were categorized by Janet Riddle, Member-at-Large.

3) Past Sessions

a) Curriculum SIG sessions at past CGEA annual meetings were provided as outlined in the following document:

Title	Speakers
Longitudinal, Integrated Clerkships: A successful Model for Clinical Education	Lori Hansen, Univ. of South Dakota Kathleen Brooks, Univ. of Minnesota Roger Shauer, Univ. of North Dakota Gwen Hallas, Univ. of North Dakota
Planning Transitions in the Sea of Change	Daniel Wolpaw, CWRU-SOM Amy Wilson-Delfosse, CWRU-SOM
IQ+: Integrating Medical Sciences and Patient Care in a Core Clerkship Curriculum	Daniel Wolpaw, CWRU-SOM Amy Wilson-Delfosse, CWRU-SOM
Strategies of Integration of Basic, Clinical and Information Sciences: Opportunities and Challenges	Edward Finnerty, Des Moines Univ. Fredrick McCurdy, Texas Tech Regional Univ. Terrance Burton, Univ. of Wisconsin
Sustaining Curriculum Renewal: Leadership and Scholarship Lessons Learned	Michael Hosokawa, Univ. of Missouri-Columbia William Jeffries, Creighton University Nehad El-Sawi, KCUMB
Revision of a medical School Curriculum using Delphi Method	Kimberly Hoffman, Univ. of Missouri-Columbia Michael Hosokawa, Univ. of Missouri-Columbia Linda Headrick, Univ. of Missouri-Columbia

4) The categorized responses provided by Janet Riddle (see above) and past SIG sessions were discussed in detail by the Curriculum SIG members present.

a) The following items were identified as important from the Riddle report:

- i. Dealing with curricular transformation – best practices
- ii. Best practices for competency based education
- iii. Workshop on new ways to integrate basic science and clinical science in the M3/M4 years
- iv. More strategies of how you teach clinical activities and integrate with basic science
- v. Logistics on early clinical experiences for M1/M2 students – clinician recruitment; objectives; building patient panel; logistics of contacting student when “their patients” are admitted to the hospital

b) The following items were discussed as potential priorities by participants:

- i. Discussion of the details of LCME requests and the Carnegie Foundation Report on Education
- ii. Elective course on Basic Science in the 3rd/4th year – add case-based learning days/modules [suggestion – ½ day/week/clerkship; students could write cases at the end]
- iii. Integration of the curriculum
- iv. Competency-based curriculum
 - v. Assessment of how students reflect on the Carnegie Report
- vi. Create a “Survey” on responses to the Flexner 2.0 Report

- vii. Scholarship and co-curricular activities
 - viii. Changes in the 2 + 2 curriculum
 - ix. Interprofessional health and education
 - x. Flexner 2.0 Report – how to best disseminate these ideas
- 5) The group discussed the challenge of making major changes to the curriculum. It can be difficult to get buy-in from current educators, as they may feel it is not necessary to change things since they are "working fine like they are." David Way from Ohio State spoke about the need to be as transparent as possible. When his curriculum change advisory committee finished their work, prior to being dissolved they went to the head of each department to present what their recommendations were going to be. In that meeting they discussed how these changes will impact each department and what they needed specifically from each dept. Other ideas presented regarding helping to get buy-in for curricular change: organized retreats, large displays of new curriculum plans, a celebration to kick-off a new era of a curriculum.
- 6) New Business – the participants mentioned thoughts and concepts on curriculum evaluation. A future meeting might also include 'visionaries' that would discuss the future of medicine in America and how the curriculum can and should adapt to meet impending changes
- 7) Adjournment – the meeting adjourned at 1:30 P.M.

Minutes respectfully submitted by Floyd Knoop, Convener. Assistance provided by Scott Haight.

Participants:

1. **Floyd Knoop**, Ph.D., Creighton University School of Medicine, email: knoop@creighton.edu
2. **David Way**, M.Ed., Ohio State University Medical College, david.way@osumc.edu
3. **Scott Haight**, MSIV, Saint Louis University, email: sjh3333@gmail.com
4. **Thomas Hansen**, M.D., Creighton University School of Medicine, email: ThomasHansen@creighton.edu
5. **Gary Beck**, M.A., University of Nebraska College of Medicine, email: gbeck@unmc.edu
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7. **Kathleen Watson**, M.D., University of Minnesota, drwatson@umn.edu
8. **Robert Noiva**, Ph.D., Oakland University William Beaumont School of Medicine, noiva@oakland.edu
9. **Melissa Quearry**, M.P.A., University of Kansas School of Medicine, email: mquearry@kumc.edu
10. **Susan Lenocho**, M.A., University of Iowa College of Medicine, email: susan-lenoch@uiowa.edu