



**CEC Agenda**  
**September 6, 0700-0830am**  
[Zoom link](#)

**700-710**

**Welcome**

**Fallert**

Approval of [August minutes](#)

Add name of Delegate voting member in this spreadsheet :

[CEC voting members/MSPE comment process](#)

From CEC [charter](#):

*"Each voting member should name one alternate who will attend in the member's place, have voting capacity and be counted towards a quorum for calling the meeting to order approving minutes and all recommendations requiring a vote."*

CEC leadership transition

CEC chair transition: Dr Hobday interim chair Oct

From CEC charter:

"The committee chair will serve a three year term and will be elected by committee members from committee membership. The committee chair will appoint a vice-chair with the same term who will be expected to chair the meeting in the chair's absence."

*Proposed motion: CEC takes nominations for CEC chair through ~9/13 and conducts an election asynchronously through ~9/20, with the new chair assuming the position from November of 2024 through July of 2027. This length of term would be nearly 3 years, and would allow for the July transition that we have used in the past.*

**710-720**

**MSEC Update**

**Wyman**

**Old Business:**

720-735

Roles in Curricular Components

Fallert/Oppedisano

[Proposal](#)

Feedback incorporated. FC meeting to add input.

**Would like CEC to consider a motion to recommend this to MSEC**

735-750

Credit recommendation:

Murray

**Proposal: Increase total credits required for graduation to 92 credits**

**Required credits: 74**

**Elective credits:18**

Supporting documents from 8/2 CEC:

[Credit Requirement Proposal Slides](#)

[Credit requirement proposal Spreadsheet](#)

New supporting document from Dr Murray

[Outpatient Selective Update](#)

**New Business:**

750-805 MSPE comments: Process needs standardization Fallert/Nikakhtar  
Question: what is current for submission of MSPE comments through Medtrix  
What is included (Frequent CSA, Mid CSA, final CSA)?  
Please use the [CEC voting member/MSPE comment](#) spreadsheet to enter your method in column E

805-815 Annual Clerkship Reviews process Fallert  
Format: 8 minute small group feedback in breakout rooms  
**Presenting Clerkship responsibility:** Complete SMART goals on ACR 1 week before presenting week, and prepare a 1-2 minute presentation on their plans for implementation for 2025-26.

**Non-presenting Clerkship responsibility:** review presenting clerkship ACR and SMART goals (to be sent with agenda) and come with questions/comments

Preliminary schedule

**Oct: IM, Peds, Value, FM**

Nov: Surgery, Psych, Neuro, HELIX, and RPAP

Dec: OB, ICU, EM, FLIIC, and Hybrid

815-820: conclusion

Next meeting: October 4th

Anticipated topics:

RCE completion update (Proffitt)

Quantity and quality of feedback: goal >90% (see August meeting)

ACR reviews

November 1

EPA entrustment: update from ACE team

ACR reviews

Quantity and quality of feedback

**Element 6.2 Required Clinical Experiences**

The faculty of a medical school define the types of patients and clinical conditions that medical students are required to encounter, the skills to be performed by medical students, the appropriate clinical settings for these experiences, and the expected levels of medical student responsibility.

**Element 8.3 Curricular Design, Review, Revision/Content Monitoring**

The faculty of a medical school, through the faculty committee responsible for the medical curriculum, are responsible for the detailed development, design, and implementation of all components of the medical education program, including the medical education program objectives, the learning objectives for each required curricular segment, instructional and assessment methods appropriate for the achievement of those objectives, content and content sequencing, ongoing review and updating of content, and evaluation of course, clerkship, and teacher quality. These medical education program objectives, learning objectives, content, and instructional and assessment methods are subject to ongoing monitoring, review, and revision by the responsible committee.

**Element 8.4 Evaluation of Educational Program Outcomes**

A medical school collects and uses a variety of outcome data, including national norms of accomplishment, to demonstrate the extent to which medical students are achieving medical education program objectives and to enhance the quality of the medical education program as a whole. These data are collected during program enrollment and after program completion.

**Element 9.7 Formative Assessment and Feedback**

The medical school's curricular governance committee ensures that each medical student is assessed and provided with formal formative feedback early enough during each required course or clerkship to allow sufficient time for remediation. Formal feedback occurs at least at the midpoint of the course or clerkship. A course or clerkship less than four weeks in length provides alternate means by which medical students can measure their progress in learning.