



MEDICAL STUDENT EDUCATION COMMITTEE

Minutes

Tuesday, April 15, 2025

3:00 PM - 5:00 PM

I. Welcome & voting items (5 mins)

Nersi Nikakhtar

A. [March Minutes](#)- [Voting link](#)

- The March minutes are **approved**

II. Review of Outcomes for the Foundations Curriculum (30 mins) - Element 8.3

Jess Blum & James Nixon

A. [Serve Foundations Phase Outcomes Overview](#)

- Jess provides an overview of the serve curriculum.
- Outcomes of the curriculum are discussed, including course passes and failures (not seeing any more failures than in the legacy curriculum) and student evaluations (vast majority are positive).
- Discussion surrounding why Endro/repro was the only course that had student satisfaction discrepancies between campuses.

B. [CS and ECE](#) review

- James presents an overview of the early clinical experience and clinical skills training for medical students.
- Students are assessed using Entrustable Professional Activities (EPAs) in the clinical environment. Data shows students demonstrated good growth across EPAs over the year, indicating development of key clinical skills like taking histories, performing exams, and giving oral presentations.

C. The committee proposes bringing back endocrine data as soon as it's available to test their hypothesis about structural issues. The group also suggests more frequent comparisons for the new St. Cloud campus. They consider implementing

a structured accountability process for courses performing poorly, similar to residency programs, including check-ins before and during courses. The committee discusses the need for clear metrics and goals for improvement. They note that courses have been successful at self-correcting based on student satisfaction, but suggest looking more closely at defined learning outcomes and assessment data.

III. Step 1 delay discussion (30 mins) - Element 8.4

Michael Kim, Betsy Murray

A. Background materials:

- [Update on Step 1 Outcomes for CY 2025](#)
- [Academic Progression Policy](#)
- [Approach to Step 1 Delays Procedure](#)
- Lane schedules for class of [2027](#) and (draft) [2028](#)
- Betsy discusses the issue of a large cohort of students (approx 150) experiencing delays in their Usml Step 1 exams and notes the Serve curriculum was built for students to have sat for their Step 1 exam before Bridge (last week of February).
- The approach to Step 1 delays is discussed which could include registration holds and vacating occupied capacities.

B. Discussion of causes and potential curricular and policy solutions

- Addy provided context about the class of 2026, who had different scheduling and step 1 options due to capacity constraints. The large number of students delayed was more due to the approach taken for this group rather than their academic progress
- Flex Time will be more evenly distributed for the CO2028 and beyond.
- Michael highlights changes in the Medical school's prep strategies including extending the Uworld subscription, integrating Uworld into the curriculum, and adding a dedicated course for independent study. Michael also addressed challenges faced by the class of 2027, including logistical issues with the exam season and student distrust in the preparation process. He

proposed strategies to improve student engagement; enforcing attendance, increase resources for tracking and individualized learning plans, and shift the focus towards preparation before starting the program.

- The need for more engagement in the co-curricular course is emphasized.
- Suggestion to utilize small group sessions as a space to provide consistent advice and guidance on study prep.
- The conversation ended with a request for hard data on student performance to inform future decisions.

IV. Policy Review & Approval (10 mins) - Element 9.9

Joe Oppedisano

- Tabled until next meeting

V. ACR update (15 mins)

Claudio Violato

- Tabled until next meeting

Next Meeting:

May 20, 2025 (zoom)

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.

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.

9.9 Student Advancement and Appeal Process

A medical school ensures that the medical education program has a single set of core standards for the advancement and

graduation of all medical students across all locations. A subset of medical students may have academic requirements in addition to the core standards if they are enrolled in a parallel curriculum. A medical school ensures that there is a fair and formal process for taking any action that may affect the status of a medical student, including timely notice of the impending action, disclosure of the evidence on which the action would be based, an opportunity for the medical student to respond, and an opportunity to appeal any adverse decision related to advancement, graduation, or dismissal.