I. Minutes

The minutes from the October 21, 2015 meeting were not brought forward for approval. A quorum was not present to approve.

II. Practical Issues

A. Discussion around Emory Box access, receipt of committee emails, etc. Make sure from a practical perspective everyone has what they need with Box.
   - Hughes have you gotten access? {Lechowicz}
   - No not as yet. I got the invitation but something pressing came up and I left it. {Hughes}

B. Action Item/Follow Up: n/a

C. Exhibits (see attached): n/a
### III. Student Update

**Ryan Smith**

**A. Student Representative provided an update to the committee.**

- Dr. Stoddard presented a new clerkship evaluation tool to gather feedback from students. Most students have issues with the grade skewing and the new tool should have better descriptions and scoring. The students really liked it. {Ryan}
- Dr. Falls attended to get feedback on the flipped classroom as they are working on doing that in parts of the curriculum. {Ryan}
- The Student Committee is trying to work on a publication about the student committee on ECC. {Ryan}
- Anything we can do to help? {Lechowicz}
- No I don’t think so. Nothing jumps out at this time. {Smith}

**B. Action Item/Follow Up: n/a**

**C. Exhibits (see attached): n/a**

### IV. Review of proposed Scholarship and Discovery 4 year Curriculum

**Mary Jo Lechowicz, MD**

**A. Discussion around the Scholarship and Discovery Curriculum Schema and proposal for Scholarship and Discovery curriculum.**

- Is there a relationship of this to EBM? {Dressler}
- Yes EMB will be a part of it. A part of what happened between August and now is the Becoming a Doctor taskforce completed their suggestions, which included closing the umbrella of Becoming a Doctor. Evidence Based Medicine will no longer be a part of Becoming a Doctor. But it naturally falls into this progression of what we are trying to do. {Lechowicz}
- So are they functioning in parallel? {Dressler}
- The proposal is that it would be a part of this. {Lechowicz}
- Can you give me the one sentence version of what SoCRATES is? {Hughes}
- So to provide students with research design and statistics. {Powers}
- SoCRATES was devoted more to the Discovery Project. {Fajman}
- It basically extracted pieces from the MSCR curriculum. {Powers}
• Gordon can you clarify your scheme? {Lechowicz}

• So [let us look at] the first year, Foundations, what is now Evidence Based Medicine. In terms of Basic Concepts we weren’t going to change much of that. {Churchward}

  What is new is “how do you formulate a research question?” The idea is that we start first semester with EBM because the course itself goes through healthy human and the systems, and the ways in which it is taught and the confidence of those that teach it, the students don’t necessarily see the relevance at that stage [in the first year] so we are going to make it somewhat relevant at that stage. {Lechowicz}

• Is there somewhere where we are going to talk about qualitative research? {Pettitt}

• So I was asked in 24 hours to make a summary statement for this. {Lechowicz}

• I would make it 3b the Principles of Qualitative research. {Pettit}

• Sure. I want us to think across the curriculum as well. {Lechowicz}

• You were including a lot of stuff on the research and scholarship side as there was not a lot in the EBM course. {Dressler}

• I am talking about qualitative methods specifically, like grounded method, etc. {Pettit}

• That specifically is not taught. {Dressler}

• We have to be mindful of hours as well in terms of the Executive Committee. I do want this to be the pie in the sky and then we can revisit things. What we want to ensure, from a scholarship perspective, is that it includes humanities. Those are topics we can talk about today and where those go best. We have not asked to come together with all of the hours of what we are going to do. In terms of curriculum, we have to get it passed first. {Lechowicz}

• I think the question is, “What should every student know and what should be available to students interested in those areas?” {Hughes}

• I agree and disagree because they should have some rudiments. They have to know what constitutes the principles. Like what constitutes a good survey or a bad survey. {Pettit}

• Yes, but I think we need to be clear about which ones everyone needs to know and what some students may be interested in.
• When you say literature view in each module, who is going to be talking about quality of literature review in each module? {Pettit}
• Under the guise of EBM it had been discussed that we have some journal club type of things, with the idea of students getting more practice and it being more applicable. With BAD we tended to have a more narrow scope. {Lechowicz}
• So who is going to be guiding those other sources on where to look for other types of literature? Are librarians going to be there? {Pettit}
• I think you bring up a good point. The searching training that we currently offer is limited and is pushed to the medical librarians. We could include more clinicians and other expertise. {Dressler}
• There is a huge universe of other sources that they never use. But I wonder if under literature review we could place something on searching. {Pettitt}
• In the first year, that has always been an opportunity for someone to lead in a different way. It has been something students have had a hard time wrapping their minds around. Hughes do you have thoughts on that in terms of the alternative? {Lechowicz}
• Well it depends on what you want to teach. I just don’t think you want to teach students everything on Ethics literature, etc. So we want to identify things of interest. {Hughes}
• I have seen some places where they have a certain set of didactics that every student uses and then they have other modules online, and then students define what things are relevant as they get into their studies. I think it is something we can consider as we get them detailed exposure. {Powers}
• I have seen PubMed where they show lists of certain things you can search for. {Pettitt}
• How do you train your trainees? If you get out of medical literature there is a bunch of stuff out there. Especially with some of the stuff that is not medical. I was stunned. We tend to go look at the medical literature. We get stuck in that paradigm. So maybe we just give them a list. {Pettitt}
• Yes a module. {Powers}
• You can’t do scholarship if you can’t access the literature right. {Churchward}
• I actually think it would go better in the electives. {Churchward}
• So they do electives in the third semester of medical school ... maybe there is a time we could return to this. {Churchward}
• I think what you mention there make sense. There should be a rudimentary portion about what I need to use to research. Those two stages would be helpful. {Smith}
• Proposal development foundation would be an outcome of the foundation elective. Formulate a question for their proposal as the outcome of their elective regardless of whatever else was required. {Churchward}
• But this would not necessarily be tied to a Discovery project. {Powers}
• No, we didn’t think that would be possible. We think of it as an opportunity to have them think about how to ask a question and approaches they would use to develop a proposal. Then we could bring in any or all methods depending on the Elective project. {Churchward}
• I don’t know enough about what electives are offered and how students see them. {Hughes}
• I do know there are a lot of electives as groups and there are one-on-one electives. {Churchward}
• They are a mix. Some students use as observers and two of my students are doing great research and they are sophomore electives. {Dressler}
• There is a very wide variety. {Smith}
• We want to equalize that. {Churchward}
• It is the appeal of the elective as free time and free books from the library. {Fajman}
• One output is a paper. {Powers}
• That puts a damper on it to me. {Fajman}
• What would be the continuation of what you have done? {Churchward}
• It is actually a nice idea for a social medicine or humanities elective when you think about it. {Dressler}
• They don’t have to do this. They just have to formulate an idea.
• To me it just takes away the enthusiasm of what you call an elective, which implies I have a choice. {Fajman}

• When you take an elective in college it isn’t a free for all. {Fajman}

• If you choose an elective, you should choose something that adds value to you and your career. {Dressler}

• We shouldn’t offer an elective that isn’t relevant. {Fajman}

• You must carry out an elective, fifteen contact hours with the faculty member, and there must be a tangible output. {Churchward}

• I would argue as part of this curriculum you need to go to some medical literature and even with the mentor ask what is this, reflect on the literature, and then ....{Dressler}

• There aren’t many opportunities in the existing curriculum to explore; only in the second and fourth years. So I think there is a funnel that is funneling different people into choices that may not be their interest. {Hughes}

• The way I am hearing this is that it is an opportunity to get students to think about “where is the question in here”, and about how to advance this, and have them start questioning everything that they do. That’s the way so many things get advanced. We are asking them to think about what they have done on the elective and where is the opportunity for the research question, and what is the question. {Pettit}

• Part of the goal here is to have students always ask questions. {Dressler}

• So if we are going to include the M2 electives then just take them out. But if we are going to include it in this curriculum, why not have them think about how they would advance. They [students] have an opportunity to look at something they were just doing and question it/review it. {Pettit}

• I am a little bit torn because I did originally agree with Dr. Fajman about it putting a damper on things. I think as long as the frame is the point that you won’t have to carry it out. It can be tangentially related to what your elective was if it is framed in that way that it isn’t a research elective but the end product is a research proposal. So that we can get you [the student] to think critically,
then that would be okay. {Smith}

- We are just asking people to ask a question. Where is the inquiry here? How does this apply? How could this be better? It can be fun. I think we should make it fun. {Pettit}
- So what I heard is that it needs to be not very encumbered. The goal was to have people not be in the mindset of picking multiple choice and regurgitating stuff back. The philosophy is to build some other ways for the ways we think physicians should think. It was never with the idea of taking flexibility away. That could be our next steps to make it not cumbersome but to create guidelines. {Lechowicz}
- I think we could find out how many people would find this interesting to add on to their course. If it is important to do, you need to find a good rationale and build in people who say this is good and an important thing to do. {Hughes}
- Would this be a place where in the small groups, during the elective periods, where people would talk and develop ideas about what they are doing? {Pettit}
- Who would you imagine reviewing these and talking with the students? {Fajman}
- We had talked about having a set bunch of faculty who would do that. {Lechowicz}
- How is this different from becoming part of a Discovery project? {Hughes}
- It has a lot more detail to it. {Lechowicz}
- The original idea is that this would be a preparatory activity so that when it came time to do Discovery they would have some experience, so that when they did their Discovery project it would be improved. {Churchward}
- This is more of a concept: how do I go about figuring out or how do I propose. You just develop your question and develop it in a format and exercise so you get a feel for it. I wouldn’t anticipate people would peruse this with the same expectation that they would for five months. {Powers}
- But we would give some type of feedback to help them as if they were moving forward. {Lechowicz}
- So that was Foundations and it is six o’clock. With that in mind,
some things to think about from the student perspective in the marrying of the elective is that it would be something that you [the student] are interested in and where the field could go next. We could look at a true independent learning exercise where people could do anything and create a proposal themselves. That may be a little bit more involved with a background, a literature review, and then a proposal. {Lechowicz}

- Well one thing in the electives currently is that there is a problem with what the end product is. You do have to have an end product but with some it is a test and with others a paper. In some ways uniformity helps. For the most part, it may even the playing field and cause less consternation. I think the first one you described is less additional work instead of adding on a whole new project. {Smith}
- What do you think about bring that to the student committee and see if there are other things that we are not thinking of? {Lechowicz}
- Sure. {Ryan}
- So that was Foundations and I think that is where much of the enhancements are going to be. I think the questions about Applications [Phase] are awaiting the details of the intercessions so there’d be some possible room for some kinds of things in 2017. {Lechowicz}
- I think 5b you can take out the question mark and put a period. I think they should be getting that earlier. {Pettit}
- So have you worked with David about the intercessions in terms of getting them in the earlier period? {Lechowicz}
- No because I thought all this other development was very unclear and I don’t know what to ask for when? All these people were grabbing for time. {Powers}
- I think what you think you need. {Churchward}
- Although I thought there was something that happens in orientation. (Lechowicz)
- I think we all agree that the question mark should turn into a period. The how and mechanism can be sorted out later. The other thing was journal club, and could be done based on interest or subspecialty specific. {Lechowicz}
So like in Discovery, everyone interested in Surgery we could have once a month have a journal club for Surgery? {Dressler}

Yeah. Or, you can look and decide if you don’t know what you want to do. {Lechowicz}

So just a reminder from the other committee I am on. When there is a longitudinal course, it has to go through the Transition and Integration committee for review. {Powers}

We have been communicating with Jaffar all along, and he said it was similar. {Lechowicz}

I didn’t realize this was a course we were talking about. {Hughes}

It is one possible construct. {Lechowicz}

B. Action Item/Follow Up:
   • Continued Development of proposal

C. Exhibits (see below):

1. Basic Concepts
   a. What is now Evidenced Based Medicine (In the First year)
      i. Basic introduction to study design
      ii. Library Sessions (How to look up)
   b. How do you formulate a research question?
   c. Introduction to different types of scholarship

2. Literature Review in Each Module in Human Disease
   a. Human System related
   b. Social medicine related
   c. Clinical Quality related
   d. Humanities related

3. Basic Research Design lecture and Small Group
   a. The anatomy of how a concept becomes a clinical trial

4. Proposal Development
   a. Didactics building on asking the question used for their foundations elective and skills for Discovery proposal

5. Introduction to Discovery
   a. Socrates v. 2.0 an enhanced version that is connected to the rest of the curriculum
b. Discovery Lectures now placed much earlier in applications? One in Orientation and others in early intercession to give students additional time to explore discovery projects and proposal writing

6. Research Ethics
   a. Additional online or other teaching forms to enhance Citi certification

7. Career or Interest Concentration Journal Clubs
   a. Surgery, IM, EM, OB, Peds, surgical subspecialties

8. New ideas?

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<th>V. Other Announcements etc.</th>
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<tbody>
<tr>
<td>A. Announcements and suggestions mentioned.</td>
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<tr>
<td>• We will not have a meeting in December. {Lechowicz}</td>
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<td>• Do you want to think about hour and a half meetings that start at 4pm? Because typically we have been running later. {Fajman}</td>
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<td>• I cannot consistently do Wednesday at 4pm. {Powers}</td>
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<td>• We will have to figure that out. I am open for suggestions. {Lechowicz}</td>
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| B. Action Item/Follow Up: n/a |

| C. Exhibits (see attached): n/a |

The meeting was adjourned at 6:22pm.
Respectfully Submitted,
Sherice Allen-Henry, MS