IQI Committee Uses Y2Q to Improve Students’ Experiences

By Chosang Tendhar, Ph.D.

The Institutional Quality Improvement (IQI) committee held a retreat on November 3rd, 2020 to discuss the results of the Medical School Year Two Questionnaire (Y2Q) completed by the 2018 Cohort. The Y2Q covers a number of domains, but the focus of the retreat was on the first two domains: Medical Education Experiences and Educational Environment.

The retreat had four purposes. (1) To gain an overall sense of our students’ perceptions of the constructs covered in the Y2Q; (2) To identify strengths of our school and areas for improvement based on the review of the results of the Y2Q; (3) To identify quality improvement projects; and (4) To brainstorm ideas to improve overall experiences of our students.

The retreat participants were divided into two groups. They were asked to discuss the results of the Medical Education Experiences and Educational Environment sections of the survey, respectively. The discussions were guided by the four purposes. Active participation from the members resulted in rich qualitative data. Results of a rigorous qualitative analyses of the data was presented at the monthly IQI committee meeting.

Three quality improvement projects were identified.

The first project involves developing an instructional educational video that addresses what mistreatment is and how to report it, using the existing resources within the HMH, My Success department. This project will be undertaken by the Office of Student Affairs and Well-being (SAW).

The second project identified was to increase training for new and continuing faculty centered around the topic of respecting diversity. This project will be a collaboration between the Office of Faculty and Office of Diversity and Equity.

The third and final project was to assess and further understand what outside online resources students are using in the Phase 1 curriculum, and what is driving these choices. This project will be

A Multi-Tiered Approach to Curricular Feedback

By Ron Silvis, Ed.D.

The Hackensack Meridian School of Medicine has adopted an ethos of bi-directional feedback between students, staff, and faculty dating back to the matriculation of our first cohort in July 2018. Since the first class began, the school has grown tremendously and so have the number of student organizations, curriculum committees, and staff and faculty involved in helping the innovative curriculum grow and advance.

The 2020 cohort, as part of their orientation, were provided insight into the various levels of curricular feedback they can provide, its purpose, and the most data-driven ways to advance their thoughts and ideas.

Dr. Silvis Ed.D. (Phase 1 Director), Dr. Zepf D.O. (Asst. Professor of Medical Sciences), and Dr. Josephs M.D. (Asst. Professor of Medicine) conducted the orientation session on curricular feedback, which is part of the larger Professional Identity Formation (PIF) group led by Professor Caryn Loffman.

The objectives of the session were to inform students on the various platforms they have to provide feedback about the curriculum, to explain the purpose of each platform, and to explore techniques for providing constructive feedback in a qualitative and quantitative format. According to Prof. Loffman, “developing proficiency in both delivering and receiving feedback is a critical component to creating deliberate practice which is tied to physician success.”

One of the outcomes is to help students streamline the flow of feedback to and from the School of Medicine via the proper channels in order to strengthen programs and improve the overall student experience. The PIF-steering committee meets bi-weekly and follow-up sessions are currently being developed to advance the orientation session.

Professor Loffman stated, “we want to make constructive feedback part of the culture of the School of Medicine which includes review, assessment, and continuous follow up.”
a collaboration between the Office of Medical Education and representatives from the Library.

Leaders of those units that were assigned quality improvement projects will present their implementation plans and seek feedback from the members of the IQI committee in subsequent meetings.

The successful implementations of these projects will have a huge potential impact on the overall experiences of the student body.

**Tracking and Evaluating Educational Program Objectives**

*By Keith Metzger, Ph.D.*

The Educational Program Objectives (EPOs) represent the outcomes of our curriculum - they are the specific competencies that our students are expected to achieve by graduation. The EPOs are central to the SOM curriculum, driving all elements of curricular development, implementation, evaluation, and enhancement. They cover the domains of Patient Care, Knowledge for Practice, Practice-Based Learning and Improvement, Interpersonal and Communication Skills, Professionalism, Systems-Based Practice, Interprofessional Communication, and Personal and Professional Development.

All course and clerkship objectives, as well as our assessments are mapped to specific EPOs. By utilizing a variety of assessments (student performance on OSCEs, examinations, clinical evaluations, licensing examinations, etc.) we are able to assess if the School of Medicine is meeting our EPOs.

One of the responsibilities of the Office of Institutional Effectiveness and Assessment (OIEA) at the School of Medicine is taking the mappings described above and leading the process of evaluating whether we are meeting the EPOs. They ensure that the assessments are properly linked to EPOs and use the results of these assessments and linkages to determine whether the school is meeting its goals. In Phase 1 of the curriculum, most of the EPOs that are assessed link to the first two Competencies, Patient Care and Knowledge for Practice. With the addition of data-rich assessments from the clerkships in Phase 2, we anticipate that there will be broader representation of Competencies and EPOs in this mapping and assessment process.

These data can be used to compare various aspects of the curriculum, including courses or phases. Beyond incorporation of more assessment data to show a broader representation of EPOs, there are a number of steps that the Office of Institutional Effectiveness and Assessment will take to further analyze these data. This includes working with the Office of Medical Education to establish standards of achievement for these EPOs and integration of this data into the School of Medicine Institutional Evaluation Process, which is a comprehensive look at whether the School is meeting its educational goals.

**A Collaborative Approach to Improve Large Group Active Learning**

*By Michael Giuliano, M.D. and Elizabeth Koltz, Ed.M.*

A new approach to faculty development for large group active learning (LGAL) was launched this year. While the Office of Faculty’s faculty development was always closely aligned with the Office of Medical Education’s curriculum development, efforts were expanded, became more deliberate, and resulted in a more focused approach with cross-departmental expertise.

This fall, a working group made up of Basic Science Course Directors, (Jennifer Zepf, D.O., Anthony Payne, Ph.D.) Office of Medical Education leaders (Keith Metzger, Ph.D., Ron Silvis, Ed.D., Beth Koltz, Ed.M.,) and Faculty Development leaders and trainers (Michael Giuliano, M.D., Joe Martinelli, M.A.) came together to address some LGAL challenges. This new approach not only created a new faculty development series, but also helped link other efforts more cohesively.

The working group began by reviewing course director feedback and student feedback and interviewing front line clinical teaching faculty. The working group then created a needs assessment to analyze the data. It became clear early on that there was an immense variation in the way LGALs were delivered ranging from old style “lectures” requiring no student preparation, all the way to fully active teaching activities requiring students to have a working knowledge of the pre-work. The working group also surveyed the faculty development efforts that had already been implemented. As expected, these efforts were inconsistent and varied in content.

After discussion with key stakeholders, the working group developed a program around four critical areas; (1) the selection and use of pre-work, (2) the development of active learning exercises to utilize the information in the pre-work, (3) the facilitation skills within the online environment and (4) creating high-quality multiple-choice questions for assessment.

Four one-hour sessions were developed and delivered, each consisting of an initial thirty minutes of content review followed by thirty minutes of application of content in small group breakouts. All members of the group take a role in teaching a portion of the session. Participants were encouraged to bring their session content to work on in class. The initial series was presented on serial Monday afternoons in September and October. It will be repeated at least 3 times during the year as live/zoom interactive sessions. They will also be videotaped and made available on the faculty development website.

The working group also examined how to integrate and link the previously developed and distributed active learning tip sheets, the annual course kickoff meetings and the LGAL faculty development series. A voluntary peer observation session was added to provide feedback on the application of the topics taught.

Currently the outcome measures planned for the program include student feedback on the quality and consistency of LGALs. We will also be working with course leaders on their assessment of LGALs within their SSR. This overall quality improvement project is a perfect example of what is possible when all stake holders in curriculum join to improve educational outcomes.

Our next series will be offered on Jan. 11th, Jan. 25th, Feb. 1st and Feb. 8th.