# 2019 AAMC Central and Southern GSA/OSR Joint Regional Spring Meeting Sessions

# Submission ID#586665

Effective Practices for Developing Policies on Good Standing

Submission Type: Topic Presentations/Small Group Discussions Submitter: Teresa Cook – Keck School of Medicine of USC

#### **Presenters**

Teresa L. Cook, M.Ed.

Role: Lead Presenter

Barbara Gadzinski

Role: Co-Presenter

#### Topic

Student Records

• Policies on Good standing

#### Background/Significance

The standing of a medical student (both professional and academic) is monitored throughout the medical education continuum. Good standing is required for progression, financial aid, clinical placement, visiting student electives and the transition to residency. An effective good standing policy will define good standing, how it is lost, how it is remediated, and the implications for enrollment, the residency match and licensing. Good standing policies are used by institutions to remain compliant with their policies, state and federal laws, and national residency matching program requirements. The Committee on Student Records (COSR) recently revised their document on good standing to include effective practices related to satisfactory academic progress and professionalism.

#### Learning Objectives

1. Participants will learn about the requirements for good standing as it relates to the Department of Education's Satisfactory Academic Progress and implications for financial aid

2. Participants will be able to develop good standing policies that have clear, objective criteria

#### **Session Methods and Format**

Review of Effective Practices for Developing Policies on Good Standing Document (COSR AAMC)--5 minutes Breakout session--Participants will break into small groups to review sample good standing policies and determine what modifications should be done to bring policy in alignment with Effective Practices--15 minutes Breakout session reports--small groups will select leader to report their group's findings back to the large group. Presenter will facilitate discussion--10 minutes Discussion and Wrap Up--10 minute

1 of 69

#### Birds of a Feather – Student Records and Financial Services

Submission Type: Panel Discussion Submitter: Julie Brim – Ohio State University College of Medicine

#### Presenters

Christine McDonough Role: Lead Presenter Julie Brim Role: Facilitator Barbara Gadzinski Role: Facilitator **Topic** 

Student Records

#### Background/Significance

The Birds of a Feather Session will provide a joint discussion forum for administrators in the areas of Financial Aid and Records. This interactive session will address topics that impact both areas. Some of the topics to be discussed include nonstandard enrollment, use of independent study modules, and repeated coursework. For each of these topics, the facilitators will lead the discussion on how these cases are treated both from a Records and a Financial Aid perspective. An outcome for this session could possibly be the development of a listserv for records and financial administrators to collaborate and share best practices on-going.

#### Learning Objectives

To discuss common issues in nonstandard enrollment, use of independent study modules, and repeated coursework in relation to financial aid regulations.

Learn effective practices regarding how to remain compliant with financial aid regulations for unique enrollments statuses.

Build collaboration among the records and financial aid communities

#### **Session Methods and Format**

Small group discussions.

# Apples & Oranges: Challenges of Ensuring Comparable Student Service Experiences across Regional Medical Campuses

Submission Type: Panel Discussion Submitter: Corey Koperski – Michigan State University College of Human Medicine

#### Presenters

Corey M. Koperski, M.S. Role: Lead Presenter Joseph F. Drazkowski, M.D. Role: Co-Presenter Lanita Carter, Ph.D. Role: Co-Presenter Kathryn Martin, PhD Role: Facilitator

#### Topic

Other: Student Affairs Services

#### Background/Significance

Medical schools with regional campuses have the responsibility of ensuring comparable educational environments and experiences across all campuses. Regional campuses are faced with various challenges including class size, available comparable resources, and faculty size and ability. Medical schools must ensure that regional campuses provide comparable opportunities, educational environments and outcomes. Regarding student affairs services, availability and comparability across regional campuses must ensure that students feel supported with access to equal resources and opportunities to be successful.

#### Learning Objectives

Recognize and discuss how student services may vary across campuses but still be successful.

Explore and identify potential best practices to address challenges regarding student services that may be uniquely inherent to regional campuses.

Examine approaches/solutions to enhance student experience perception and desirability of regional campus experiences.

Discuss ways to maintain and bolster student collegiality despite distance and barriers. Identify methods to address challenges of consistent communication from main campus to regional campuses.

#### **Session Methods and Format**

This session is a panel discussion focused on four specific challenges in maintaining comparable student services across regional medical school campuses, and innovative approaches used to ensure comparability at three different institutions. A 5-minute presentation by a moderator will provide a brief overview of the prevalence of regional campuses at medical institutions, and introduce four challenges regional campuses frequently encounter. Four panelists will discuss the challenges with questions posed by the moderator. Thirteen minutes will be devoted to each challenge. Challenges to be discussed are "Student perception of

and satisfaction with regional campus assignments," "How do you provide resources and student services where they may not exist, are limited, or not identical to other campuses?" "Fostering and maintaining collegiality across distant campuses," and "How medical schools optimize effective communication across all locations." The panel discussion will be followed by 18 minutes for questions/discussion from the audience.

#### Experience

Corey Koperski- Director of Student Programs for the Grand Rapids Community Campus at Michigan State University College of Human Medicine; collaborates with 7 regional campuses; Member-at-Large for CGSA. Joseph Drazkowski- Associate Dean of Student Affairs at Mayo Clinic Alix School of Medicine, AZ ; helped conceptualize, plan and implement Student Affairs services at a new branch campus in a successful and established medical school.

Lanita Carter- Director of Medical Education and Student Services at UAB School of Medicine Huntsville Regional Campus; immediate past chair of GRMC.

Kathryn Martin- Associate Dean for Regional Campuses at Medical College of Georgia; chair-elect of GRMC. Medical student TBD.

## FERPA: What the Registrar Needs You to Know!

Submission Type: **Topic** Presentations/Small Group Discussions Submitter: Barb Gadzinski – University of Cincinnati College of Medicine

#### Presenters

Barb Gadzinski, BA Role: Lead Presenter Teresa Cook, M.Ed. Role: Co-Presenter Alisha Corsi Role: Facilitator Julie Brim Role: Facilitator

Student Records

#### Background/Significance

The Family Education Rights and Privacy Act (FERPA) guides the medical school registrar/records administrator in their responsibility of managing student records and protecting student privacy. Every day operations in the medical school have FERPA implications including release of residency match results, student remediation for professional and academic reasons, academic and career advising, development release of the medical student performance evaluation (MSPE) given recent changes to the NRMP residency match agreement for schools, and even printing of the commencement program. This interactive session will engage participants in a discussion on possible solutions for when policy (FERPA and institutional) and practice (we have always done it this way!) collide.

#### **Learning Objectives**

1. Participants will learn about their role in the management and protection of student information under FERPA.

2. Participants will become familiar with key terms and what they mean.

3. Participants will learn how to interpret the FERPA law and how to apply it in everyday standard operating procedures at their institution.

4. Participants will learn effective practices for managing institutional expectations with students' rights to privacy.

## **Session Methods and Format**

Introduction of speakers and topics: 5 minutes

Overview of FERPA and implications: 15 minutes

Presentation of FERPA related scenarios in a medical school and group discussion: 45 minutes Wrap up: 10 minutes

Innovations and Emerging Issues in the Match: TexasSTAR and participation of osteopathic students

Submission Type: Panel Discussion Submitter: Kathleen Kashima – University of Illinois College of Medicine

#### Presenters

Kathleen Kashima, PhD Role: Lead Presenter Angela P. Mihalic, MD Role: Co-Presenter Anita Pokorny, M.Ed. Role: Co-Presenter Kim Peck, MBA Director of Career Advising Michigan State University College of Osteopathic Medicine Role: Co-Presenter

## Торіс

Student Personal and Professional Development - Career/ Match

## Background/Significance

The culture of the Match has become unhealthy; some attribute this to the silo effect. The Committee on Student Affairs (COSA) and the AAMC have been encouraging collaboration among those involved with the match to create a healthier match culture. Program specific information is needed to address applicant concerns about not matching and attempts to avoid the SOAP. This session will present a collaborative innovation, TexasSTAR (Seeking Transparency in Application to Residency), and an emerging issue, osteopathic students joining the match. In 2018, 69 medical schools in the U. S. (including 13 Central region schools and 30 Southern region schools) collected data from students via the Texas STAR survey. By July 2020, the ACGME, the AACOM and the AOA will merge to have a single GME accreditation.

## Learning Objectives

1. Describe the factors related to over-applying to residency programs and its impact to programs, students, and overall costs.

2. Learn about TexasSTAR as a collaborative approach to address over-application and the information it provides to enhance the transparency behind which students are more likely to get interviews at various programs.

3. Share effective practices with regard to incorporating data available into advising for residency application.

4. Understand the implications of having osteopathic residency programs join the NRMP for allopathic students

## Session Methods and Format

Panel Discussion

- 1. Introductions (2 minutes)
- 2. Background of the need for collaboration (Kashima 5 minutes)
- 3. TexasSTAR- Overview and demonstration (Mihalic 25 minutes)
- 4. Osteopathic students competing in the NRMP match- Q&A (Pokorny and Peck 25 minutes)
- 5. Open Discussion and Q&A with participants (15 minutes)
- 6. Closing/Takeaways (5 minutes)

#### Experience

Kathleen J. Kashima, PhD serves as the Chair for the COSA and has worked over 20 years in medical student affairs at the University of Illinois College of Medicine.

Angela P. Mihalic, MD serves as the Chair of the SGSA, and the Dean of Medical Students and Associate Dean for Student Affairs at the University of Texas Southwestern Medical School, and has worked in students affairs for 10 years.

Kim M. Peck, MBA is the Director/Advisor for Career Guidance at Michigan State University College of Osteopathic Medicine, and has worked in student affairs for over 13 years.

Anita Pokorny, M.Ed. is the Assistant Dean of Students at Northeast Ohio Medical University and has over 29 years of experience in medical student affairs. She currently serves as the Chair elect of the GSA and is a past chair of the COSA.

## Submission ID#588363 Guiding Struggling Students Toward Success Pre-Conference Workshop Submission Type: Workshops

Submitter: Dawn Bragg – University of South Dakota, Sanford School of Medicine

#### Presenters

Michael Kavan, PhD Role: Lead Presenter Tammy Salazar, PhD Role: Co-Presenter

#### Topic

Student Personal and Professional Development

- Beyond Step scores and ward performance: redefining student success (resilience
- professionalism
- attainment of competencies)

#### Background/Significance

Student affairs professionals and medical educators have the responsibility to guide, mentor and counsel students through their medical education. However, there are few resources or training available to our professionals to help with addressing the issues of the struggling student.

#### Learning Objectives

At the conclusion of this workshop, participants will be able to:

Identify what causes capable students to struggle academically during medical school. Describe why common student coping strategies are ineffective in the medical school environment. Recognize ineffective academic approaches utilized by struggling students in the medical school environment.

Share successful practices, tools, and strategies for improving how medical school personnel respond to struggling students.

#### **Session Methods and Format**

The target audience for the workshop includes deans and directors that work in student affairs and undergraduate medical education. Additional audiences that may also benefit from the workshop include: academic support personnel, financial aid, registrar, curriculum coordinators, and other personnel who work directly with medical students.

The workshops format is very interactive and will engage participants through a variety of presentation formats. Expert facilitators will guide participants through discussions and practical exercises intended to give participants new strategies to take back to their institutions. In addition they will have the opportunity to engage with their colleagues across institutions as they consider different scenarios. Participants will receive a tool-kit to help them work through scenarios and also as a reference at their institutions. This workshop will be four hours in length.

This workshop was co-developed by AAMC and Drs. Kavan and Salazar, and has been recommended by the

GSA Steering Committee and GSA PDI Regional Teams as a pre-conference offering at all three 2019 GSA Regional Meetings.

The workshop was initially offered at AAMC Continuum Connections, the joint national meeting of the Group on Student Affairs (GSA), Group on Resident Affairs (GRA), Organization of Student Representatives (OSR), and Organization of Resident Representatives (ORR) in Orlando, Florida from April 28-May 1, 2018. Post-workshop evaluations indicated that the workshop was exceptionally well-received by participants.

# "Per policy (student) is referred for dismissal": an interactive case-based workshop to discuss challenging issues

Submission Type: Workshops Submitter: Kathleen Kashima – University of Illinois College of Medicine

#### Presenter(s)

Kathleen Kashima, PhD Role: Lead Presenter Michael Kavan, PhD Role: Co-Presenter Charles Pohl, MD Role: Co-Presenter T. Austin Witt National Delegate on Student Affairs Quillen College of Medicine Role: Co-Presenter Medical Student

#### Topic

Other: Review policies/procedures

#### Background/Significance

Emotions and frustrations are often high when a student's worst fear happens: being referred for dismissal from medical school. In this workshop, the presenters set the stage for discussion by sharing information on the dismissal process along with the challenges and mistakes made in handling these student cases. Policies have been rewritten. Decisions have been overturned. Promotions Committee members have quit. Effective approaches to handling these cases involve well-written policies and involvement of key medical education and student affairs staff members. The role of student engagement in the process along will also be discussed. Participants will work together on case examples.

#### **Learning Objectives**

Understand basic policies and procedures necessary to dismiss a student Understand that the process of dismissal and determining the circumstances to dismiss may be complicated Understand the importance of employing a collaborative student affairs team approach and engaging the student.

#### **Session Methods and Format**

Workshop format Kashima Introduction (5 minutes) Witt Issues from student perspective (10 minutes) Kavan Issues from promotions committee, college policies (10 minutes) Pohl Issues from university counsel and university perspective (10 minutes) Case presentations (5 minutes) Small group discussions (20 minutes) Large group review (10 minutes) Closing/Takeaways (5 minutes)

#### Experience

Kashima- Senior Associate Dean of Students, has worked over 20 years in medical student affairs overseeing student affairs offices for a multi-campus medical school and deans office ex-officio representative to college committee on student promotions.

Kavan - Associate Dean for Student Affairs and has served on the Advancement Committee for 22+ years. Pohl - Twenty years of overseeing student affairs for medical college (vice dean) and more recently for university (vice provost), serving as a member or guest of the colleges committee on student promotion. Witt- Three years of service as an OSR Representative to Quillen College of Medicine and 2 years of service on the OSR National Administrative Board as the Student Affairs Delegate and COSA liaison

#### **Community Engagement Through Multiple Mini Interviewing**

Submission Type: Topic Presentations/Small Group Discussions Submitter: Melanie Prusakowski – Virginia Tech Carilion School of Medicine

#### Presenter(s)

Melanie K. Prusakowski, MD Role: Lead Presenter Ron Bradbury, MA Role: Co-Presenter Kelsey Daniel, MS Role: Co-Presenter

#### Topic

Recruitment and Admissions

• Admissions changes in admissions protocols and waitlist management

#### Background/Significance

This session will explore the use of community members as interviewers in the medical school application process. Use of community members who are motivated to be trained and participate in the application interview process has provided us with a large, diverse group of interviewers with a vested interest in the next generation of medical professionals who will serve the community. The implications have proven more far-reaching than simply how the school is marketed and how competitive applicants are recruited.

#### Learning Objectives

Participants will be able to:

- Enumerate the potential benefits of including community members in the admissions interview process

- Describe a successful process for recruiting and training community multiple mini interviewers

- Identify characteristics of community interviewers best suited to successfully participate in multiple mini interviews

- Discuss potential risks and benefits of this type of community engagement

#### **Session Methods and Format**

Our session will discuss the ability to create good will with the community, our tactics for recruiting community interviewers, the logistics of training and scheduling community interviewers, and the feedback received from interviewers and applicants. Additionally, we will explore some of the unforeseen pros and cons of community involvement in the interview process, with special attention to diversity and strategic development. Presenters will share presentation time equally. Participants will be engaged by presenting data and/or ideas and then allowing for audience feedback, questions, and ideas.

#### Experience

Melanie Prusakowski, MD has served as Assistant Dean for Admissions for 3 years, with previous experience serving on the Medical School Admissions Committee, interviewing candidates for medical school, Emergency Medicine Residency Selection Committee, and as an alumni interviewer for her undergraduate institution.

Ron Bradbury has worked in medical school admissions for almost 3 years, with decades of experience in education.

## Encouraging Compassion: Students Supporting an Environment of Collegiality and Care

Submission Type: Panel Discussion

Submitter: Stacy Schmauss - Wake Forest School of Medicine of Wake Forest Baptist Medical Center

#### Presenters

Stacy Schmauss, EdD Role: Co-Presenter Julie Johnson Role: Lead Presenter

## Торіс

Student Personal and Professional Development

• Humanism in Medicine

## Background/Significance

Beginning in LAUNCH, their first course, incoming medical students are exposed to a breadth of students, faculty, staff, administrators, and community members. These encounters are intentionally designed to incorporate lived experiences, narrative, and a format for exploring relationships with all. This process is begun with segments called Voices from the Field, where practicing physicians detail their career path and current responsibilities with extensive question and answer time. Additionally, the use of a Human Library event helps to connect students with a variety of community members in an informal, small group discussion format. These activities are augmented by highly purposeful, and varied, groupings of students to ensure that the potential for relationship development is realized in their class cohort as well. In recent years, we have seen increases in student-directed groups and related activities with distinct connections to humanism. Faculty, staff, and a student representative will discuss the development and focus of such a group, as well as the longitudinal work being done to maintain these efforts.

## Learning Objectives

Describe dedicated humanistic elements of the curriculum and co-curriculum Discuss the emergence of the student group, the Fellaship Explore opportunities to further engage students and faculty in humanistic endeavors devoted to peer support

## Session Methods and Format

Each panelist will speak to their involvement with humanism efforts at the school. 20 minutes will be allocated for introductions and descriptions of current practices. Following that, a mock "Humans of New York" exercise will be used in small groups to demonstrate one of the activities utilized in student programming that serves to draw attention to the need for empathy and perspective in medicine. This exercise will be followed by discussion and close with questions.

## Experience

Dr. Schmauss co-directs the initial course (LAUNCH) that provides a foundation in humanism as well as mentors the student group that will be described.

Ms. Johnson oversees all student group activities --including the Gold Humanism group

## Promoting Student Success: Supporting Acclimation Through a Novel Curricular Element

Submission Type: Workshops Submitter: Stacy Schmauss – Wake Forest School of Medicine of Wake Forest Baptist Medical Center

#### Presenters

Stacy Schmauss, EdD Role: Co-Presenter Marcia Wofford, MD

Role: Lead Presenter

## Торіс

The Medical School Environment

• Creative academic support with limited resources

#### Background/Significance

In response to a heightened need identified by students and faculty alike, Wake Forest School of Medicine instituted a curricular element rooted in relational academicsLAUNCHfor incoming medical students. It was created to support and encourage early acclimation to the unique learning environment of medical school as well as the profession itself. It intends to provide a solid foundation for those entering the demanding medical curriculum by giving students the opportunity to enhance their understanding of themselves and each other, form bonds with their classmates, explore principles of self- and peer care and consider how they want to approach the new way of life that they will experience as they enter a profession of service and life-long learning. This panel will include faculty that will speak to the intentional design, implementation, and evolution of the course as well as lasting benefits within the learning environment.

## Significance:

Innovative curricular element Widespread approach that engages a variety of faculty, administrators, and staff Demonstrable evaluative success and student satisfaction and engagement that has led to autonomous student group development

## Learning Objectives

Describe the development and design of LAUNCH Discuss the significance it has for students Illustrate the holistic curricular and co-curricular efforts utilized with small group exercises and explanations

## **Session Methods and Format**

15 minutes will be allocated for shared introductions. Following that, we will walk participants through 3 exercises we use in LAUNCH to create cohesion and acclimation (15 minutes each).

After each exercise, we will debrief in our small group as well as the large audience. Questions and discussion will close the session.

#### Experience

Both presenters are co-course directors of the curricular element being described. Dr. Wofford created the course.

## Emphasis on Now: Using Reflection to Promote Wellness Among Medical Students

Submission Type: Topic Presentations/Small Group Discussions Submitter: Adrienne Edge – Medical University of South Carolina College of Medicine

#### Presenter(s)

Adrienne M. Edge, M.Ed. Role: Lead Presenter Christopher Bunt, MD Role: Co-Presenter Myra Haney Singleton, EdD Role: Facilitator

## Торіс

The Medical School Environment

- Student/staff wellness
- resilience
- and burnout

#### Background/Significance

Medical student burnout is on the rise across the country. While students are always focused on their academic performance, they are also being bombarded by current events that can distract this focus and negatively impact their mental and emotional well-being.

As part of our Student Wellness curriculum, the Medical University of South Carolina developed the Emphasis on Now (EON) program. EON utilizes panel discussions and facilitated small group sessions to encourage reflective practice amongst our students. Panelists and small group facilitators are drawn from attending physicians, residents and staff in the College of Medicine. Each of the sessions encourages the students to reflect on their own feelings about an important issue (e.g. Implicit Bias, Imposter Syndrome, School Shootings), learn about how others have handled these feelings and share their own thoughts and strategies for mitigating issues in the future.

## Learning Objectives

Our session will engage participants through an interactive dialogue, helping attendees realize the impact of this type of program on the emotional and mental well-being of their students, learn ways to foster support and participation from faculty, staff and residents and ultimately adapt this model for their institution.

#### **Session Methods and Format**

5 minutes: Review of MUSCs student wellness data
20 minutes: Introduction to Emphasis on Now program model
5 minutes: Recommendations on how to foster faculty and resident involvement
20 minutes: Interactive development of personal program development plans (steps to take to develop and implement this program on participants campus)
25 minutes: Question and answer period (Can occur during/after each block of session as well)

Handouts will be given to highlight the components of the program and steps to take for development and implementation

#### Experience

Adrienne Edge serves as the Director of Student Support and Wellness for the MUSC College of Medicine and works to provide academic support to and promote resilience and well-being among students.

Dr. Christopher Bunt serves as the Assistant Dean of Students and the military medical advisor for the MUSC College of Medicine.

Dr. Myra Haney Singleton spearheaded the development of the MUSC Student Wellness Program and has nearly 20 years of experience working to support the academic, mental and emotional well-being of medical students.

#### Enrollment Management in Medical Schools: Using Data to Drive Effective Decision-Making

Submission Type: Topic Presentations/Small Group Discussions Submitter: Christina Grabowski – University of Alabama School of Medicine

#### Presenter(s)

Christina J. Grabowski, PhD Role: Lead Presenter Steven Gay, MD Role: Co-Presenter

## Торіс

Recruitment and Admissions

• Admissions policies/ practices the evolving political/legal context

#### Background/Significance

The concept of Enrollment Management has long been associated with recruitment and retention efforts for undergraduate colleges and universities. While medical schools already have ample applications and relatively high retention rates compared to most undergraduate schools, the concept of enrollment management is emerging in medical education. Using data-driven, evidence-based decision-making in the recruitment, selection, retention, and graduation of students shows promise for enabling schools to meet institutional and national goals aimed at creating a physician workforce poised to meet the diverse health care needs of our communities.

In this session, two medical schools will share experiences with enrollment management. One medical school enrollment leader will outline setting up a multi-disciplinary task force to systematically study data for effective decisions in admissions, student success/support, and curricula. The other medical school admission dean will share a predictive analytical tool used in their mission-aligned admissions process.

## **Learning Objectives**

Understand the importance of a multidisciplinary approach to enrollment management Create guiding principles to ensure enrollment management practices mirror institution-specific mission Consider how data can be used to better identify which students might matriculate using predictive analysis

#### **Session Methods and Format**

20 minutes Christina Grabowski Setting up an enrollment management program/plan 20 minutes Steven Gay Example of a predictive analysis tool for scholarship distribution in line with mission 10-15 minutes table discussions participants share info about existing studies being conducted on participant campuses

10-15 minutes table discussions - studies participants would like to engage in on their campuses; create action items

## Experience

Christina Grabowski leads recruitment, admissions, registration, records, scholarships and enrollment management as the Associate Dean for Admissions and Enrollment Management at the University of

Alabama at Birmingham School of Medicine.

Steven Gay is the Assistant Dean of Admissions at the University of Michigan Medical School and Associate Professor of Internal Medicine at Michigan Medicine.

## Mental Prep for Step at the Ohio State University College of Medicine

Submission Type: Topic Presentations/Small Group Discussions Submitter: Megan Sayres – The Ohio State University College of Medicine

#### Presenter(s)

Megan C. Sayres, MS Role: Lead Presenter Lora Eberhard, MS, LPCC Role: Co-Presenter Kelly-Ann Perry, M. Ed Role: Co-Presenter

## Торіс

The Medical School Environment

• Creative academic support with limited resources

#### Background/Significance

Preparing for the high stakes USMLE Step 1 examination is one of the most stressful milestones of medical school due to the significant impact that scores have on career trajectory. Due to this pressure, many students develop significant anxiety symptoms that interfere with test preparation and performance. In a systematic review conducted by Dyrbye, Thomas and Shanafelt (2006), studies indicated that US and Canadian medical students experience a significant amount of psychological distress compared to the general population. Anxiety and depression levels fluctuate throughout the course of medical school; however, a majority of students report more mental health problems while in medical school than they did before beginning medical school (Dyrbye et al., 2006). Specifically, at The Ohio State University College of Medicine, there was a number of students self-reporting intense anxiety and stress which resulted in some students requesting a delay in sitting for the Step 1 exam.

There are few studies on mental health interventions for medical school. Therefore, the Mental Prep for Step program was piloted in 2018 to develop a curriculum and understand the feasibility of such an intervention within the medical school setting.

## Learning Objectives

Participants will be able to help manage anxiety symptoms related to USMLE Step 1 examination preparation and performance.

Participants will gain knowledge surrounding particular interventions that could be tailored for their specific institution.

Participants will gain skills derived from evidence based treatments (i.e., Cognitive Behavioral Therapy and Acceptance and Commitment Therapy) for managing test anxiety and general anxiety.

#### **Session Methods and Format**

Powerpoint/Prezi format

10 minutes-Introductions of speakers and history of how this program started

40 minutes-Types of interventions that include that are not limited to: student panels, kick off workshop,

practice day support, group curriculum 10 minutes-Outcomes and Future Directions with small group discussions 15 minutes-Q&A

#### Experience

Lora Eberhard MS, LPCC Personal Counselor, The Ohio State University College of Medicine Lora has 15 years' experience with working with students in academic settings.

Kelly-Ann Perry, M. Ed. Academic Counselor, The Ohio State University College of Medicine Kelly-Ann has over a decade with expertise in academic intervention and study skills.

Megan Sayres, MS Director of Student Engagement, The Ohio State University College of Medicine Megan comes with 8 years with working with students in a variety of student affairs areas.

## Submission ID#594122 Evidence-Based Care of the LGBTQ Patient Using The eQuality Toolkit

Submission Type: Workshops Submitter: Laura Weingartner – University of Louisville School of Medicine

#### Presenter(s)

Laura A. Weingartner, PhD, MS Role: Lead Presenter Emily Noonan, PhD, MA Role: Co-Presenter Amy Holthouser, MD Role: Co-Presenter Suzanne Kingery, MD Role: Co-Presenter Susan Sawning, MSSW Role: Co-Presenter

## Торіс

Diversity, Inclusion, and Social Justice

- Empowering students and creating the climate and context for success
- Educating with compassion and empathy
- particularly around important contemporary topics like #Metoo and WhiteCoats4BlackLives

## Background/Significance

LGBTQ patients experience significant health/healthcare disparities, but few providers have been trained to provide effective, inclusive patient care. This skill-oriented workshop teaches participants best-practice LGBTQ clinical skills and introduces multiple training resources developed through eQuality, the integrated LGBTQ curriculum at the University of Louisville School of Medicine (ULSOM). This workshop features a new LGBTQ clinical skills training manual, The eQuality Toolkit, that will be available for participants to implement at their own universities to improve LGBTQ patient care.

## Learning Objectives

After the session, participants will be able to:

- 1. Identify heteronormative/cisnormative biases in patient care settings
- 2. Communicate inclusively when taking a patient history
- 3. Provide fundamental gender-affirming care
- 4. Consider LGBTQ-specific needs for preventive care recommendations
- 5. Integrate social determinants of health for care recommendations

## **Session Methods and Format**

The majority of this session is dedicated to small group discussion to apply The eQuality Toolkit clinical skills manual to case scenarios. After each scenario, the entire workshop group debriefs to provide feedback and address participant questions. Brief, limited didactic instruction provides an overview and framework. Patient

cases referenced in the schedule below are adapted from clinical skills training previously piloted with medical students.

Minute: Activity:

0-5: Welcome and presenter introductions
5-10: Brief overview of LGBTQ health disparities in clinical settings
10-20: Small-group role play of inclusive patient introduction using sample language - All presenters facilitate
20-30: Debrief as large group AH
30-40: Facilitated small groups in a case-based application of preventive care recommendations -All presenters facilitate
40-50: Debrief as large group EN
50-60: Facilitated small groups in a case-based application of gender-affirming care recommendations -All presenters facilitate
60-70: Debrief as large group SK
70-75: Discuss logistics and implementation barriers to LGBTQ clinical skills LW

## Experience

All speakers co-authored The eQuality Toolkit.

Amy Holthouser, MD is Senior Associate Dean for Undergraduate Medical Education and steered the integration of inclusive eQuality content into the medical student curriculum at ULSOM.

Suzanne Kingery, MD is Associate Professor of Pediatrics and Endocrinology and specializes in genderaffirming care.

Emily Noonan, PhD is Research Manager in Undergraduate Medical Education and has lectured in medical anthropology and delivered LGBTQ health trainings at ULSOM.

Susan Sawning, MSSW is the Director of Medical Education Research at ULSOM and serves as principal investigator of the LGBTQ clinical skills research project.

Laura Weingartner, PhD is Research Manager in Undergraduate Medical Education at ULSOM and has managed the LGBTQ clinical skills training and research through eQuality.

# Leadership and Relationship Development for the Medical School Registrar using the GSA Professional Development Initiative

Submission Type: Topic Presentations/Small Group Discussions Submitter: Teresa Cook – Keck School of Medicine of USC

#### Presenter(s)

Teresa L. Cook, M.Ed. Role: Lead Presenter Alisha Corsi Role: Co-Presenter

#### Topic

Student Records

• Technology and Privacy

## Background/Significance

Note: This is a professional development session for registrars and records professionals, however, the subtopic which must be selected does not provide an option that option or a similar one.

Registrars and records professionals have an important role in the continuum of medical education, from admission to the transition to residency. The most important responsibility of the registrar is the protection of student privacy. As such, it is critical for the registrar to take a leadership role in the development and enforcement of institutional policies related to the management of student information. Registrars are content experts of the Family Educational Rights and Privacy Act (FERPA) and have the knowledge and skills to lead their institutions on policy development and enforcement. This interactive session will engage records professionals in how to use the GSA PDI Performance Framework to successfully maximize and apply their knowledge and leadership skills at their institutions.

## Learning Objectives

Learning Objectives (3 bullets)

1. Participants will learn how to use the GSA PDI Performance Framework to seek out and embrace new and challenging situations

2. Participants will be able to create and leverage opportunities to build bridges with other medical education offices (student affairs, curriculum, graduate medical education)

3. Participants will better understand the role of the registrar/records professional in the context of disciplinary proceedings; curriculum development, delivery and renewal; management of student enrollment status; and policy development and enforcement.

## **Session Methods and Format**

Sessions Methods and Format:

Introduction of Topic and Speakers 5-minutes

Brief overview of GSA PDI Performance Framework Common Areas of Leadership and Relationships-10 minutes

Case Study--Small groups will review a case study presenting a challenge related to student information

management. Small groups will use the GSA PDI to develop solutions and share with the large group 25 minutes

Wrap and next steps 5 minutes

#### Experience

Teresa Cook, M.Ed., Director of Student Affairs and Registrar at the Keck School of Medicine of USC, with 25 years' experience in higher education administration and currently serves as the Chair of the AAMC Committee on Student Records.

#### AAMC Twitter Bootcamp

Submission Type: Workshops Submitter: Benjamin Vega – University of Missouri-Columbia School of Medicine

#### **Presenter(s)**

Benjamin S. Vega

Role: Facilitator Medical Student

#### Avani K. Patel

Role: Facilitator Medical Student

Jacob Bailey

Role: Facilitator Medical Student

#### Aaron D. Gray, MD, MD

Role: Lead Presenter

#### Торіс

Student Personal and Professional Development

- Beyond Step scores and ward performance: redefining student success (resilience
- professionalism
- attainment of competencies)

#### Background/Significance

The social media habits of medical students are somewhat unknown and undocumented in Medical Education literature, despite the pervasive nature of social media in students' everyday lives. Though social media can make a very positive, or very negative, impact on a medical student's career, they are largely untrained in effectively utilizing this technology. In July 2018 the University of Missouri conducted a Twitter Bootcamp. The Twitter Bootcamp was created not only as a means to teach medical students how to meaningfully engage with the social media platform but also to study the effect of a focused intervention on their social media habits. As a result of the boot camp, attendees' engagement with Twitter increased by 633%(tweets) and more than 25% (followers). Further, 83% of attendees felt more comfortable using Twitter following the workshop. This workshop aims to re-create this Twitter Bootcamp for attendees at the AAMC Regional Meeting.

## Learning Objectives

Following the workshop, attendees will:

- 1. Learn and apply best practices in Twitter Profile Creation
- 2. Learn and apply best practices in Content Curation and Generation
- 3. Connect with scholarly journals and thought leaders in their fields
- 4. Develop familiarity and comfort using Twitter for professional development

#### **Session Methods and Format**

This 60-minute workshop will cover each of the learning objectives in turn, with scheduled breaks between each content section for attendees to practice the material on their own devices. The student facilitators will be available to attendees for help or questions during the workshop.

Example: The presenter will cover best practices in Twitter Profile Creation for 10 minutes. Then for the next 10 minutes, attendees will utilize the information presented to generate or revise existing Twitter Profiles. Then the presenter will cover content curation and generation.

#### Experience

Aaron Gray, MD attained national acclaim through his use of social media and led the University of Missouri's 1st Annual Twitter Bootcamp in July 2019.

Benjamin Vega organized and facilitated the University of Missouri's 1st Annual Twitter Bootcamp in July 2019.

Avani Patel is the former Chair of the OSR's Southern Region and has hosted numerous professional development workshops at AAMC meetings throughout her time in the Organization of Student Representatives.

Jacob Bailey presented the University of Missouri's 1st Annual Twitter Bootcamp at the Learn Serve Lead meeting in November 2018.

# I belong: Fostering a sense of belong among students identified as URM through the creation of a cross-cultural cohort program.

Submission Type: Topic Presentations/Small Group Discussions Submitter: Sacha Sharp – Indiana University School of Medicine

#### Presenter(s)

Sacha Sharp, MA Role: Lead Presenter Antwione Haywood, Ph.D Role: Co-Presenter Sylk Sotto, Ed.D, MBA, MPS Role: Co-Presenter

#### Topic

Diversity, Inclusion, and Social Justice

• Empowering students and creating the climate and context for success

#### Background/Significance

Defined as experiencing personal involvement in an environment to the point of feeling integral to how that environment functions (Hoffman et al., 2002), sense of belonging is proven to be essential for impacting persistence and overall success outcomes for students. Having a sense of belonging has shown to positively impact success outcomes for racially diverse student populations in college (Museus, 2014).

To create a sense of belonging medical schools have to develop programs and systems that engage students throughout the lifespan of their medical education career. In a partnership between Medical Student Affairs and the Office of Diversity Affairs, IU School of Medicine (IUSM) has developed a Cross-Cultural Student Success Cohort program that is meant to engage students starting prior to their first year and throughout all four years of their medical school education. The program addresses IUSMs four pillars of support for medical students academic support, career and professional development, health and wellness, and building strong connections, and focuses on assisting students identified as being underrepresented in medicine.

Through participation in the Cross-Cultural Student Success Cohort program, student gain exposure to medical school resources and personnel while also exploring topics related to developing a medical student identity, countering microaggressions with microresistance, discovering strengths, developing strong study skills, and managing well-being.

#### **Learning Objectives**

Participants of this sessions will

Discuss the importance of developing programming that promotes a sense of belonging for students from populations considered URM

Identify strategies for establishing a continuum of programming that is devoted to URM success

Explore potential barriers to developing programs for URM students

Discuss other possible interventions for developing a sense of belonging and foster success among URM

students.

#### **Session Methods and Format**

- 1. Review the concept of building a sense of belonging among medical students
- 2. Presentation of Cross-Cultural Student Success Cohort program
- 3. Group Discussion: Sharing programming ideas and intervention strategies

#### Experience

Sacha Sharp, M.A., serves as Associate Director of Career Development and Cultural Inclusion at IU School of Medicine and brings extensive experience to her role as a doctoral candidate in Educational Leadership and Policy Studies.

Antwione Haywood, Ph.D. is the Assistant Dean of Student Affairs and Clinical Assistant Professor of Radiation/Oncology with the IU School of Medicine with 15 years of experience in higher education.

Sylk Sotto, Ed.D. serves as the Vice Chair for Faculty Affairs, Development, and Diversity; and Assistant Professor in the Department of Medicine at IU School of Medicine.

#### A Call for Critical Race Theory in Medicine - A Surgeon's Approach

Submission Type: Topic Presentations/Small Group Discussions Submitter: Rashad Sullivan – Wake Forest School of Medicine of Wake Forest Baptist Medical Center

#### Presenter

Rashad J. Sullivan, MD

Role: Lead Presenter

#### Topic

Diversity, Inclusion, and Social Justice

- Educating with compassion and empathy
- particularly around important contemporary topics like #Metoo and WhiteCoats4BlackLives

#### Background/Significance

Critical race theory can be defined as a framework or set of basic perspectives, methods, and pedagogy that seeks to identify, analyze, and transform those structural and cultural aspects of society that maintain the subordination and marginalization, Through the lens of critical race theory we are able to evaluate not only our societies pledge and commitment to eliminating the inequality but also critically evaluate the shortcomings of our professions ability to deliver a higher standard of patient care, for all patients and its inability to wholly address the alarming lack of diversity in medicine throughout all medical specialties, and the failure to create a supportive environment In this session, we will discuss how we systematically apply critical race theory in the field of medicine to teach, learn, train and practice medicine? What can we learn from critical approaches and applying a critical lens to our daily work? Surgery provides an important context, as we have applied new approaches to decrease errors and improve patient safety. Similarly, can we apply a critical lens to better serve patients and create more inclusive environments for physicians and staff?

#### **Learning Objectives**

Participants will be introduced to the basic tenets of critical race theory.

They will discuss how to apply these tenets in a systematic way to help frame their perspective. Participants will learn how to engage their institutions to encourage diversity in the and advocate for supportive measures by their institution for successful outcomes for those who are traditionally underrepresented.

#### **Session Methods and Format**

Introduction: 15 mins Presentation: 15 mins Question/Answer: 30 mins Application of Principles: 15 mins

Presenter will provide background and Critical Race Theory and introduce basic concepts of this theory and it application to the field of medicine as a tool to implement change for equality of people of color and individuals from diverse backgrounds. The presenter will provide examples of how critical race theory can be useful the guide policy and curriculum for medical education. Time will be dedicated to participant engagement to not only ask questions to also to share their experiences and reflect on their personal awareness of these issues.

Using the shared experiences of the participants the presenters will effectively show them how to apply the principles of critical race theory to their everyday life.

#### Experience

Rashad J. Sullivan, MD PGY4 - The first African American Orthopedic Surgery Resident in his program at Wake Forest Baptist Medical Center in Winston Salem, North Carolina

# When Bad Things Happen: Preparing Medical Students to Thrive After Adverse Events Curriculum Innovation with Videos and Discussion

Submission Type: Topic Presentations/Small Group Discussions Submitter: Eva Waineo – Wayne State University School of Medicine

#### **Presenters**

Eva Waineo, M.D.

Role: Lead Presenter

#### Swapna Musunur

Role: Co-Presenter Medical Student

Edward Walton

Role: Co-Presenter Medical Student

#### Kathryn Deeds

Role: Co-Presenter Medical Student

Diane Levine, M.D.

Role: Co-Presenter

## Торіс

Student Personal and Professional Development

• Humanism in Medicine

#### Background/Significance

Adverse Events (AE) are a concern for trainees and an important concept to address early in student education (1). A recent medical student study found strong interest in curricula on this topic (2).

#### **Learning Objectives**

1. Appreciate the professional and personal impact of AE on medical students

2. Describe methods and impact of a 1 hour curriculum intervention on preclinical students

3. Discuss how medical schools could better prepare students to continue to thrive after AE including the roles of both faculty and student affairs staff

#### **Session Methods and Format**

This session will describe an interactive curriculum for 2nd year medical students to prepare them for AE before the start of clerkship year which was developed by a group of faculty and students and presented at AAMC Learn Serve Lead 2018. This curriculum explored the impact of AE on physicians with the goal to improve students understanding of the professional and personal effects of AE on health care providers, availability of resources and support. It utilized case based learning, small group discussion led by local physicians, and videos of local physicians describing their own experiences with AE.

Analysis of quantitative and qualitative feedback showed statistically significant increase (p < 0.0001) in domains of confidence and awareness. 90% of students agreed this was helpful for their future work as a physician. This 1 hour innovation had significant impact on students confidence in coping with AE, recognition of a struggling colleague, ways to report error, and awareness of resources.

Participants will learn the methods and impact of this innovation and have opportunities to discuss impact of AE on students, role of student affairs, and ways to prepare students to thrive after AE at own institutions.

## Outline:

Introductions/Background of AE and impact on health care provider (5min)

Development of innovation (10min)

Description of implementation of innovation and video clips (10min)

Sharing student feedback and analysis (10min)

Participant discussion of AE impact on students and available student affairs resources followed by sharing discussion outcomes in large group (15min)

Participant discussion of adapting information at own institutions to improve student wellbeing (15min) Conclusions and questions (10min)

## Experience

Eva Waineo MD is Director of Health and Wellness at WSUSOM and Psychiatry Course and Clerkship Director.

Swapna Musunur, Edward Walton, and Kathryn Deeds are fourth year medical students at WSUSOM who worked with Drs. Levine and Waineo to develop this innovation.

Diane Levine MD is Vice Chair for Education and Internal Medicine Clerkship Director at WSUSOM.

Development and Implementation of a Longitudinal Wellness Curriculum for the Largest Single-Campus Medical School in the U.S. (1200 Medical Students)

Submission Type: Topic Presentations/Small Group Discussions Submitter: Eva Waineo – Wayne State University School of Medicine

#### Presenters

Eva Waineo, M.D. Role: Lead Presenter Michelle Eventov Role: Co-Presenter Medical Student Reba John Role: Co-Presenter Medical Student Kathleen Connors, LMSW, ACSW Role: Co-Presenter Margit Chadwell, M.D. Role: Co-Presenter

## Торіс

The Medical School Environment

- Student/staff wellness
- resilience
- and burnout

#### Background/Significance

Studies of North American medical students show higher prevalence of anxiety and depression than agematched peers. One longitudinal study found 11% of students admit to suicidal thoughts in the past year. Burnout impacts clinical practice, including increase in medical errors and health care cost and reduced empathy, patient satisfaction, and physician productivity. This calls for widespread change to make wellness a priority at medical schools.

Multiple steps led to the development of an innovative, longitudinal, interactive wellness curriculum that spans the entire 4 years of medical school education at the largest single-campus medical school in the U.S. The curriculum addresses wellness as part of the professional identity formation of medical students throughout their pre-clinical and clinical education.

This session will focus specifically on the establishment of wellness summits that were designed to integrate wellness into the medical education curriculum at the Wayne State University School of Medicine. The format of the summits was inspired from the structure of medical conferences and allows student choice for meaningful wellness activities and small group sessions despite participation of the entire class size of 300.

Preliminary data shows that students value these summits. Participants attending the session will learn ways to implement wellness changes in the medical school curriculum.

## Learning Objectives

Appreciate importance of wellness in physicians and medical students

Describe process used to integrate and expand wellness in the curriculum at the largest US single campus medical school

Describe components of wellness summits that allow student choice while sharing core information Discuss ways medical schools can better prepare future physicians to thrive in the medical profession

## **Session Methods and Format**

Topic presented by faculty and students. Participants engaged with anonymous polling, small group discussion of ideas and solutions.

Introductions/Background of student wellness and medical school setting structure (5min) Identification of curricular gap (5min) Development of curricular Intervention - Hiring Director of H&W, proposal design modeled after medical conferences, curricular approval, development of assessments (10min) Implementation of Wellness Innovation (5min) Format of Summits (10min) Early Evaluation/Feedback (5min) Participant discussions of wellness at own institution, challenges, solutions (15min) Sharing discussion outcomes with focus on solutions (10min) Conclusions/questions (10min)

## Experience

Eva Waineo, MD, Director of Student Health and Wellness, Psychiatry Clerkship and Course Director. Michelle Eventov and Reba John, medical students on Wellness Task Force engaged in developing curriculum.

Kathleen Connors, LMSW, ACSW, counselor and member of Wellness Task Force.

Margit Chadwell, MD, Associate Dean of Student Affairs and Career Development.

# When Students Stumble; A Case Study of a Struggling Student

Submission Type: Topic Presentations/Small Group Discussions Submitter: Ralph Manuel – University of Mississippi School of Medicine

#### Presenter(s)

Ralph Manuel, PhD Role: Co-Presenter Carol Elam, EdD Role: Lead Presenter Sara Gottesman Role: Co-Presenter Medical Student

Olivia Mittel, M.D.

Role: Co-Presenter

# Topic

The Medical School Environment

• Creative academic support with limited resources

# Background/Significance

While the majority of medical school students progress with minimal difficulties, there are students who struggle during medical school (Ferguson, James, & Madeley, 2002). Being able to diagnose the possible issues or causes and identify strategies to help the student can hinge on a combination of understanding the literature and working with the student (Cleland, Knight, Rees, Tracey, & Bond, 2008; Winston, 2015). Similar to medicine, learning to work with others to diagnose and treat student issues is a skill that is can be developed and used.

# Learning Objectives

To better prepare medical educators to work with struggling students.

To increase the skill set of medical educators in determining additional information needed to make a proper assessment, diagnoses and individual educational plan for an underperforming medical school student.

# **Session Methods and Format**

Presenters will handout a Case Study of a student who is struggling. In small groups, attendees will collaborate and identify what questions and information is needed to make a diagnoses. After receiving additional information on the case, attendees will work with others to identify what options might work best for the student. Presenters will then provide a literature review and have a current student share perspective on the case.

The session will begin with an overview of the session and a very brief case outline of a struggling student. In small groups, the attendees will spend 10 minutes working collaboratively to identify what additional information is needed to diagnose the possible reasons the student is struggling and underperforming. After 10 minutes, the remaining information concerning the case will be given to the small groups. The small groups will then work together to diagnosis the reasons for underperformance, identify strategies to deal with the root

causes of the issue and provide an individual educational plan for the student (10 minutes). Presenters will ask two of the small groups to present their small group diagnoses and plan to the larger group. One speaker will then provide a literature review and a current medical school student will give thoughts on the case.

# Experience

Ralph Manuel - Dean of Admissions Olivia Mittel - Dean of Student Affairs Stephen Wheeler - Dean of Admissions Carol Elam- Dean for Medical Student Education Sara Gottesman - Medical School Student

# (79) Submission ID#594975 Taking Education to the Next Level: Utilizing Tutors to Improve Tutoring Submission Type: Topic Presentations/Small Group Discussions Submission Status: Complete Submitter: Kristin Richey – Indiana University School of Medicine

Presenters Kristin Richey, M. Ed. Role: Co-Presenter Antwione Haywood, Ph.D Role: Co-Presenter Abigail F. Klemsz, MD, PhD Role: Lead Presenter Jason Hoard, BS Role: Co-Presenter Medical Student

# Topic

Student Personal and Professional Development

- Beyond Step scores and ward performance: redefining student success (resilience
- professionalism
- attainment of competencies)

# Background/Significance

U.S. medical schools often enlist the help of medical student tutors to teach and mentor their peers. Medical student tutors have a unique perspective on medical education. As they work with other students, they often develop innovative teaching strategies. In an effort to improve medical student education and provide professional development opportunities for tutors, the Assistant Dean for Student Affairs, the Assistant Dean for Academic Advising, and the Learning Strategist at the Indiana University School of Medicine (IUSM) created an elective course for medical students entitled Advanced Meta-Cognition and Medical Knowledge. As part of the elective, students with an interest in medical education and learning theory are encouraged to develop a project that focuses on interventions to improve medical student learning at IUSM. Since starting the elective in 2017, student projects have included a formalized training program for IUSM tutors, a study strategies session focused on practical study tips, and an approach to clinical vignettes teaching tool to improve test-taking skills. Medical student tutors play a vital role in the academic advising process. Elective courses can be designed to advance their knowledge as well as utilize their experience to improve academic advising and create more opportunities to help medical students succeed.

#### Learning Objectives

- 1. Describe the historical context of creating an elective for tutors
- 2. Explain the projects tutors completed in their elective

3. Develop a plan for implementing a similar course at their institutions

# **Session Methods and Format**

Historical context 15 minutes lecture and group discussion Demonstration of projects 30 minutes video, lecture and group discussion Develop a plan 15 minutes group discussion Questions 5 minutes

# Experience

Kristin Richey is the Learning Strategist at the IU School of Medicine and has worked in higher education for 14 years.

Antwione Haywood is the Assistant Dean for Student Affairs at the IU School of Medicine.

Abilgail Klemsz is the Assistant Dean for Academic Advising and an Associate Professor of Clinical Pediatrics at IU School of Medicine.

Jason Hoard is a fourth year medical student and tutor at the IU School of Medicine applying to med-peds.

# Effectiveness of Student-Led Initiatives to Improve Medical Student Wellness

Submission Type: Topic Presentations/Small Group Discussions

Submitter: Komal Safdar - Virginia Commonwealth University School of Medicine

# Presenter(s)

Komal S. Safdar, BS

Role: Lead Presenter Medical Student

# Alper Dincer, BS

Role: Co-Presenter Medical Student

Wei-Li Suen, BM, MM

Role: Co-Presenter Medical Student

Nicole M. Deiorio, MD

Role: Co-Presenter

Christopher Woleben, MD

Role: Co-Presenter

# Торіс

The Medical School Environment

- Student/staff wellness
- resilience
- and burnout

# Background/Significance

While medical schools have begun to address high rates of depression in medical students, well-being still remains at the forefront of discussion. We believe student-led surveying and initiatives may be more effective at promoting discussions and creating effective methods of addressing student wellness. To test this, we emailed a 39-question survey concerning student wellness (including the PHQ-9 depression screening tool), student-administration relations, and curriculum/Step 1 preparation effectiveness. The incidence of depression and correlations between risk factors were calculated. The survey response rate was unprecedented with nearly all students responding. We believe the combination of the survey being student-led, as well as having relevant and personalized questions to the class, led to an improved response rate and an increased willingness to engage in the discussion concerning student wellness. The results were subsequently discussed with several deans at the school of medicine and university to implement solutions. All data and results were presented by the student leaders to the class.

# Learning Objectives

Objectives: 1) To describe our student-led interventions 2) To initiate discussion and awareness of mental health issues. 3) To create meaningful changes to improve the well-being of medical students.

Implementation: We suggest that other class leaders survey their classes on wellness, student-faculty relations, and solutions. The results should be analyzed and presented to the class and administration to make meaningful changes and improve wellness among medical students.

# Session Methods and Format

1. Background (30min): The lead presenter and two co-presenters will start with a traditional powerpoint presentation to talk about what led to creating the survey, how the results were interpreted and delivered to the class, and changes that came from it.

2. Polling the Audience (10min): We will administer the PHQ-9 survey to the class in addition to polling their interest in knowing what their results are.

3. Discussion (30min): We will have an open discussion on why we did the poll, why student led initiatives are effective or ineffective, and how to use them to make changes.

4) Conclusion/Future Directions (10min): We will end by summarizing our main points and final suggestions for other medical schools to implement.

5) Questions (20min).

# Experience

Komal Safdar: co-creator of survey, collaborated with Deans, presented results to the class.

Alper Dincer: co-creator of survey, collaborated with Deans, presented results to the class.

Wei-Li Suen: co-creator of survey, analyzed data, collaborated with Deans, presented results to the class.

Dr. Deiorio: collaborator for implementing solutions

Dr. Woleben: collaborator for implementing solutions

# Submission ID#595034 Ensuring Success through Individualized Performance Improvement Systems

Submission Type: Workshops

Submitter: Leah Robinson - Wayne State University School of Medicine

# Presenter

Leah M. Robinson PhD

Role: Lead Presenter

# Topic

Student Personal and Professional Development

- Beyond Step scores and ward performance: redefining student success (resilience
- professionalism
- attainment of competencies)

# Background/Significance

Individualized Learning Plans (ILPs) are used to monitor and track the training and competencies of medical residents and practicing physicians in an effort to maintain sharp clinical skills and promote the Accreditation Council for Graduate Medical Education (ACGME) mandate that physicians become lifelong learners. Better trained physicians mean highly qualified teams of skilled physicians are providing better quality care and an effective health care system that positively impacts patient outcomes. ILPs increase accountability from both educational and governmental institutions on program outcomes and competency assessment (Irby & Wilkerson, 2003). The application of ILPs in U.S. pediatric residency training programs found that (a) the use of a performance monitoring system is important and should be explored; (b) writing down goals with a plan is significant to goal attainment and; (c) ILPs have the potential to help learners develop individualized goal-directed learning plans based on strengths and weaknesses (Li et al., 2009).

This presentation provides a qualitative description of the development and use of individualized learning plans in a pre-medical post-baccalaureate program (PPB) using a performance measurement, management, and improvement framework (Guerra-López and Hutchinson, 2013) as the conceptual basis. ILPs are an input, process, and output. By adopting a performance support tool for students aspiring to get into medical school, students proactively develop a continuous improvement approach to building skills necessary to be successful in medical school, in their medical residency, and in providing high caliber medical care.

# **Learning Objectives**

Describe a scalable framework for performance planning, monitoring, and improvement Identify five key components of an individualized learning plan Describe the relationship between goal setting and planning, monitoring, and improvement Describe the impact of ILPs at the undergraduate and graduate medical education level

#### **Session Methods and Format**

Introduce the Performance Planning, Monitoring, and Improvement Model and Individualized Learning Plan (ILP) through 20 minute lecture with PPT slides.

20 Minute Small Group Activity: participants will create an ILP from the sample student profile and ILP and asked to report out.

Discuss impact of ILPs in medical education in the literature and in current research conducted by the presenter with PPT slides. (15 minutes)

Discuss barriers and challenges to successful completion of ILPs at the individual and programmatic level using PPT slides. Solicit possible solutions from audience. (15 minutes)

Question/Answers (5 minutes)

# Experience

Leah Robinson's career in higher education includes more than 10 years developing curriculum, teaching, and counseling in post baccalaureate, undergraduate, and graduate medical education.

# Submission ID#595055 Strategies for Diagnosing and Remediating Gaps in Clinical Competence Submission Type: Workshops Submission Status: Complete Submitter: Carrie Bohnert – University of Louisville School of Medicine

Presenter(s) Carrie A. Bohnert, MPA, CHSE Role: Lead Presenter Erica Sutton. MD

Role: Co-Presenter

# Topic

Student Personal and Professional Development

- Beyond Step scores and ward performance: redefining student success (resilience
- professionalism
- attainment of competencies)

#### Background/Significance

As medical education moves toward a competency model, medical educators and student support staff need new tools for identifying and remediating gaps in clinical reasoning and competency. Preparing learners to meet EPA and milestone requirements compels us to consider cognitive, processing, and motor skills in addition to knowledge. Remediation plans based on knowledge acquisition are ill-suited for these new metrics of performance.

This workshop will explore the use of performance data to diagnose learner gaps, along with an array of remediation activities. Participants will practice diagnosing and developing remediation plans for sample learners.

#### **Learning Objectives**

- 1. Describe methods for diagnosing gaps in clinical reasoning and competency
- 2. Describe methods for remediating gaps in clinical reasoning and competency
- 3. Design remediation plans specific to learner needs

# **Session Methods and Format**

Session methods are based on Knowles Andragogy and Kolb's Experiential Learning Cycle.

Based on andragogy, the module will begin by drawing connections to participants prior experiences with diagnosing and remediating gaps in clinical reasoning and competence. The course will spend minimal time on didactic content delivery and move quickly into problem-centered activities on diagnosing gaps and developing appropriate remediation plans.

In just 90 minutes the course is unable to implement Kolb's experiential learning cycle in its entirety. Instead it will focus on the left side of the cycle: concrete experience and reflective observation. The final activities

require learners to reflect on their learning. This compact reference of the learning cycle is designed to simulate the process of designing remediation plans specific to each learners gaps in clinical reasoning and competence.

- 10 minutes Introductions
- 15 minutes Brief didactic on diagnosis of gaps in reasoning and competency
- 30 minutes Small group exercise
- 15 minutes Brief didactic on strategies for remediating gaps in reasoning and competency
- 30 minutes Small group exercise
- 20 minutes Reflection and next steps

# Experience

Ms. Bohnert is a standardized patient (SP)-based simulation educator who presents and publishes on the use of simulation to teach and assess clinical skills, build awareness of human trafficking awareness, and develop competence in LGBTQ healthcare.

Dr. Sutton is a surgeon, medical educator, and non-profit director who frequently presents and publishes on minimally invasive surgery techniques, simulation, and surgery education.

# Building community: Hear examples and brainstorm with other students on ways to enhance student support at your school

Submission Type: Topic Presentations/Small Group Discussions Submitter: Zoetta Hildreth – University of Iowa Roy J. and Lucille A. Carver College of Medicine

#### **Presenter(s)**

Zoetta L. Hildreth, OSR

Role: Lead Presenter Medical Student

Wade Gutierrez, OSR

Role: Co-Presenter Medical Student

Sraavya Akella, OSR

Role: Co-Presenter Medical Student

# Topic

The Medical School Environment

- Student/staff wellness
- resilience
- and burnout

# Background/Significance

Medical students mental health and wellness are greatly improved through strong community support within their school, both from other students and faculty. Effective community structure can be difficult to establish in a way that students find useful and meaningful. By sharing some of the practical details about the learning community structure at our school, we can help other students identify strategies for development and implementation of beneficial community structure at their home institution.

# **Learning Objectives**

1. Learn about one schools established learning community structure to observe what aspects tend to be most successful.

2. Identify which components of presented community programming, events, etc. could be useful at your school.

3. Work together with other students to brainstorm implementation or new ideas for establishing or expanding community structure at your home institution.

# **Session Methods and Format**

1. Introductions: introduce speakers and the relevance of the topic (5 min)

2. Presentation: community structure at lowa - pros and cons (15 min)

3. Small group discussion: participants break off into groups of 8-10 to discuss which aspects of the presented community structure may be useful to implement at their school, or brainstorm new ways to build new or

improve their existing community infrastructure (30 min)

4. Large group discussion: participants come back to a large group to share what was discussed and ways they plan to build community (15 min)

5. Closing: wrap up and questions (10 min)

# Experience

Zoe Hildreth is a second year MD candidate at the University of Iowa Carver College of Medicine. She, as well as all co-presenters, are OSR representatives that actively engage with the learning community programming at the University of Iowa CCOM on a regular basis.

# Innovative Secondary Applications: How Portfolios and Video Interviews Will Transform Your Admissions Process

Submission Type: Topic Presentations/Small Group Discussions Submitter: Heather Wright – Carle Illinois College of Medicine

#### Presenters

Heather D. Wright, MS Role: Lead Presenter Nora Few, PhD Role: Co-Presenter

# Topic

Recruitment and Admissions

• Admissions changes in admissions protocols and waitlist management

# Background/Significance

With over 840,000 applications annually, medical school admissions offices often rely on quantifiable aspects of an application in order to process the large volume of applications they receive. However, schools still want to learn more about the interpersonal attributes a candidate possesses. Currently, institutions depend on interviews to evaluate candidates. All the while, research has shown that unstructured and semi-structured interviews can be fraught with racial and gender bias. Interviewing candidates also creates an expense for the institution and the applicant. In an era of digital opportunity, one must ask themselves: "Isn't there a better way to do this?".

In 2017, Carle Illinois College of Medicine created a new type of secondary application. Rather than ask an applicant to write an additional essay, Carle Illinois asked applicants to create a portfolio that featured three artifacts that reflected the Carle Illinois values. As a competency based admissions process, applicants could also upload evidence of competence in our core curricular areas. Last, applicants were asked to respond to five questions in a standardized video essay. With this information, Carle Illinois was able to eliminate in-person interviews.

Using survey data, we will share what they've learned from our non-traditional secondary application and suggest how other might do the same.

# **Learning Objectives**

The purpose of this session is to explore two new tools for medical school admissions.

At the end of this session, participants should:

- 1. Understand how standardized video essays can generate helpful information for the admissions decision.
- 2. Evaluate how one institution implemented video essays.
- 3. Analyze the use of portfolios in undergraduate medical education admissions.
- 4. Determine if video essays or portfolios would be a useful tool in their process.
- 5. Utilize a scoring rubric to score a portfolio sample.

#### **Session Methods and Format**

5 min - Introduction
5 min - Literature Overview
5 min - Portfolio Overview
15 min - Live Video Essay (We will ask an audience member to demonstrate)
5 min - Sample Portfolio (Audience will review physical portfolios)
15 min - Score a Portfolio (Audience will score a portfolio in small groups, network, and discuss how they could apply this)
10 min - Q&A

# Experience

Dr. Nora Few is the Director of Admissions at Carle Illinois, and has over 20 years experience in medical education.

Ms. Heather Wright is the Director of Recruitment at Carle Illinois College of Medicine. Her dissertation research is focused on equity and justice in medical school admissions.

# Medical Student Education on Interpersonal Violence

Submission Type: Topic Presentations/Small Group Discussions Submitter: Audrey lane – University of North Dakota School of Medicine and Health Sciences

# Presenter(s)

Audrey R. lane

Role: Lead Presenter Medical Student

Leigh Moyer

Role: Co-Presenter Medical Student

# Topic

Diversity, Inclusion, and Social Justice

- Educating with compassion and empathy
- particularly around important contemporary topics like #Metoo and WhiteCoats4BlackLives

# Background/Significance

Interpersonal violence, including domestic abuse, child abuse, and elder abuse, is alarmingly common and it impacts the healthcare provided by physicians of all branches of medicine. Current LCME accreditation standards dictate The faculty of a medical school ensure that the medical curriculum includes instruction in the diagnosis, prevention, appropriate reporting, and treatment of the medical consequences of common societal problems.(LCME, 2018). Intimate partner violence alone is an alarmingly common societal problem with an estimated prevalence of 1 in 3 women. (WHO, 2013). Approaches to interpersonal violence education vary; sometimes including Problem Based Learning, Standardized Patient Interaction, Lecture based, and more (Hamberger, 2007). This session should facilitate comparison, idea exchange, and hopefully result in optimization of the inclusion of interpersonal violence in medical curriculum.

# **Learning Objectives**

Within small groups, participants will discuss how to best prepare future doctors to screen for, encounter, and respond to interpersonal violence using the following prompts serving as a guide:

1. What approaches to incorporating Interpersonal Violence Education are included in your curriculum (i.e. Problem Based Learning, Standardized Patient, Faculty given lecture, Community based advocate lectures, Survivor Testimony etc.) Does your school have any unique approaches?

2. What varieties of interpersonal violence does your curriculum cover (i.e. child abuse, elder abuse, intimate partner abuse, etc.)?

3. Is attendance at your interpersonal violence education mandatory or optional? How does your school balance educating all students about interpersonal violence with the need to be sensitive to students who may have triggers?

4. Do students at your school receive training during pre-clerkship years, during clerkships, or both?

5. Does your school asses student learning on the topic of Interpersonal Violence? If so, how?

# **Session Methods and Format**

First, a brief introduction ( < 10minutes) identifying current strategies and challenges. The majority of the session will be spent in small groups discussing how to best prepare future doctors to provide interpersonal violence sensitive care. With fifteen minutes remaining, well request a representative share the main take-aways from the small discussions with the entire group.

# Experience

Audrey Lane has attended multiple small group sessions at the past two AAMC meetings, has facilitated educational seminars in a variety of contexts, and is passionate about the topic area.

Leigh Moyer - Has attended multiple meetings and presented at the regional spring meeting in 2017.

# Incorporating Business and Leadership Training into Medical School Education to Prepare Tomorrows Doctors for the Continually Evolving Healthcare Enterprise

Submission Type: Topic Presentations/Small Group Discussions Submitter: Jamaal Richie – University of Louisville School of Medicine

#### **Presenters**

Jamaal Richie

Role: Co-Presenter Medical Student

#### Kevin R. Kwan

Role: Co-Presenter Medical Student

#### Brad Sutton, MD, MBA

Role: Co-Presenter

#### In Kim, MD, MBA

Role: Facilitator

#### Topic

Student Personal and Professional Development

- Beyond Step scores and ward performance: redefining student success (resilience
- professionalism
- attainment of competencies)

# Background/Significance

National policy changes in recent years have mandated that physicians have a functional understanding of the business of medicine. Reimbursement is increasingly tied to value and thus, awareness of cost-effectiveness, quality and safety are critical. A 2013, the AAMC Medical School Graduate Questionnaire indicated more than a quarter of graduates felt their instruction in concepts pertaining to the business of medicine was inadequate. Unfortunately, few medical schools have integrated formal instruction into their undergraduate medical curriculum to address this need.

# **Learning Objectives**

-Lessons learned of past and present initiatives for curriculum improvement and successful methods of incorporating business and leadership training during undergraduate medical education.

-Review of current success at the University of Louisville School of medicine in providing business and leadership competency using a distinction track model to alleviate additional cost/time burden experienced in other models.

# **Session Methods and Format**

Objective 1 (20 minutes): Assess the current economic landscape of healthcare and critical gaps in current medical education curriculum models to effectively prepare emerging leaders.

Objective 2 (20 minutes): Discussion of opportunities for students and clinical educators to increase innovation in healthcare by development of skillsets that enhance business acumen and leadership skills.

Objective 3 (20 minutes): Evaluate current innovative trends in curriculum development and institutional programs that provide business acumen, competency and leadership development to medical students.

# Experience

Dr. Brad Sutton, MD, MBA: University of Louisville School of Medicine Assistant Dean for Health Strategy and Innovation Director, Center for Health Process Innovation Co-Director, Distinction Track in Business and Leadership Co-Director, MD-MBA Program

Dr. In K. Kim, MD, MBA: University of Louisville School of Medicine Associate Director, Center for Health Process Innovation Co-Director, Distinction Track in Business and Leadership Co-Director, MD-MBA Program

Jamaal Richie, 3rd year Medical Student in Distinction Track in Business and Leadership

Kevin Kwan, 3rd year Medical Student in Distinction Track in Business and Leadership

# Submission ID#595757 Increasing the Student Services Presence in the Medical Education Literature

Submission Type: Panel Discussion

Submitter: Amy Addams – AAMC

# Presenter(s)

Christina J. Grabowski, PhD

Role: Lead Presenter

C. Alexander Grieco, MD

Role: Co-Presenter

Toni Gallo

Role: Co-Presenter

**Topic** 

Other:

# Background/Significance

Scholarship and publishing align with the guiding principles and Leadership behaviors outlined in the GSA Professional Development Initiative Framework. There are multiple benefits to publishing and disseminating ones work in the scholarly literature, including:

Contributing to the knowledge and practice base for student services specifically and medical education broadly, in direct support of the GSA Professional Development Initiative guiding principles

Providing data and evidence for others to learn from, build on, and use to make persuasive cases at their own institutions

Pursuing personal and professional growth, recognition, and advancement, in alignment with the GSA Professional Development Initiative Leadership behaviors

Reinforcing the value, relevance, and applicability of programmatic, evaluation, and other work done by student services professionals to medical education.

Achieving success in the way of scholarship dealing with student affairs requires awareness of the resources available and the appropriate venues for publication. Through a combination of personal narrative, presentations from the AAMCs two peer-reviewed journals, and individual and group activities, this session will explicate multiple pathways to publishing ones work and offer concrete tools and resources to support participants efforts.

# Learning Objectives

Explain the benefits of publishing ones work in peer-reviewed journals in terms of alignment with the GSA Professional Development Initiative

Describe the difference between the AAMCs two peer-reviewed journals and general processes for submitting for publication

Identify and access the tools and resources available for publishing in Academic Medicine and MedEdPORTAL

Use a job aid to conceptualize an article topic, identify potential collaborators, and draft a timeline

# **Session Methods and Format**

Review the benefits of publishing, connection to the GSA PDI, and presenter experience (10 m) slides,

personal narrative

Overview of publishing in Academic Medicine (15 m) slides

Overview of publishing in MedEdPORTAL (15 m) slides

Discussion about additional strategies, tools, and resources (10 m) slides, discussion

Individual activity (15 m) use a job aid to begin mapping out an article, including topic, potential collaborators, resources and support(s), timeline

# Experience

Dr. Grabowski has co-taught/facilitated in the GSA PDI virtual classroom series and been through the experience of publishing admissions research in peer-reviewed journals.

Dr. Grieco is an associate editor for MedEdPORTAL as well as the CGSA representative on COSDA

Ms. Gallo is the senior staff editor for Academic Medicine

# Submission ID#595911 New Student Orientation: Promoting Well-being and Resiliency from Day One

Submission Type: Workshops Submitter: Kristen Heath – Indiana University School of Medicine

# Presenter(s)

Kristen Heath, MS Role: Lead Presenter Emily C. Walvoord, MD Role: Co-Presenter Antwione Haywood, Ph.D Role: Co-Presenter Rebekah Roll, BS Role: Co-Presenter Medical Student Kelly Matthews, MSEd

Role: Co-Presenter

# Topic

The Medical School Environment

- Student/staff wellness
- resilience
- and burnout

# Background/Significance

It is imperative to incorporate programming that fosters wellness and promotes resiliency in medical school training. By starting the medical education journey with intentional programming that makes student wellness a priority, medical schools can better set the stage for a successful future for their students. Much of IUSMs statewide new student orientation is planned around the eight dimensions of wellness. During this interactive workshop, attendees will learn about the IUSM statewide orientation program, the Wellness Model that frames the work, and how to use their existing resources as well as designing new programming to create comprehensive wellness programming for their own institution.

# Learning Objectives

Participants will:

o Learn about the IUSM Wellness curriculum, eight dimensions of wellness, and Statewide Orientation program

o Work to create a wellness-driven orientation program to support student well-being and success o Gain perspective from medical students and administration on effective wellness programming, including success and continued challenges.

# **Session Methods and Format**

Brief didactic presentations will be interspersed with interactive activities to include (10 mins):

o Small groups will utilize a worksheet to review how their own schools currently addresses wellness during orientation, determining what dimensions are addressed and what gaps exist (15 mins)

o Ideas for addressing each of the 8 dimensions of wellness during orientations will be generated by all using a brainstorm carousel (10 mins)

o Individuals will design new orientation plans and discuss in small groups with a large group debrief (25 mins) Students will participate in all small group discussions and during the debriefs will share reactions to the ideas generate (15 mins)

# Experience

Antwione Haywood, Ph.D., is the Assistant Dean of Student Affairs and Clinical Assistant Professor of Radiation/Oncology with the IU School of Medicine.

Kristen Heath, MS, is a Lead Advisor and the Statewide Wellness Coordinator at the IU School of Medicine Kelly Matthews, MSEd, is a Lead Advisor at the IU School of Medicine where she advises medical students and has coordinated the Family & Friends Orientation program for the last 3 years.

Rolando Gabriel Gerena is a second year medical student who serves as the c/o 2021 Class President and as an Orientation Leader at the IU School of Medicine.

Rebekah Roll is a second-year medical student, and first generation college student, at the IU School of Medicine.

Emily Walvoord is the Associate Dean for Student Affairs and a Professor of Clinical Pediatrics at IUSM.

# Using Principles of Enrollment Management to Increase Gains from Holistic Review

Submission Type: Topic Presentations/Small Group Discussions Submitter: s. Elizabeth "Liz" White – Association of American Medical Colleges

# Presenter

S. Elizabeth White, MAEd

Role: Lead Presenter

# Topic

Recruitment and Admissions

• Admissions changes in admissions protocols and waitlist management

#### Background/Significance

The AAMC provides tools and resources to aid schools with enhancing diversity and inclusion in medicine through holistic review. Many medical schools utilize a holistic admissions process, applying multiple factors at each stage of admissions. Members of the Advancing Holistic Review (constituent) Advisory Committee have developed a four-point, conceptual framework to address existing knowledge/practice gaps relating to enrollment management. Specifically, it is not enough to simply make offers to a wider array of candidates if they do not matriculate in the end. The presenters of this session will introduce the framework; the context for understanding the applicant as an active agent within the marketplace of medical schools; and the principles of enrollment management that can assist with maximizing the benefits of a holistic admissions process. This practical framework--comprised of Mission, Market, Means and Metrics--enhances understanding of enrollment management principles from both the applicant and school side, thus enabling schools to maximize yields from its holistic admissions process and to continue to increase diversity in medicine.

# **Learning Objectives**

1. Apply the AAMC's four core principles of a holistic admissions process.

2. Gain a working knowledge of the enrollment management framework of Mission, Market, Means and Metrics as it relates to medical school admissions to achieve a more effective "yield."

3. Comprehend the interrelationships of the areas of the framework and how they impact applicant decisionmaking.

4. Apply the framework to school-specific cases through discussion and critical analysis.

# Session Methods and Format

-Review holistic review (10 min) - slides

-Applicant pathways quiz. Can you guess where they matriculated in the end? (10 min) - interactive matching game in small groups or cell phone quiz

-Enrollment Management Framework (30 min) - slides

-Applying the framework (20) - small group discussions using case examples of schools, map the 4Ms and their strategies (handout)

Large group discussion & debrief (20 min) - facilitator leads the debrief discussion intended to help inform and refine the framework, identify tools and resources schools need to more strategically apply enrollment management practices and field questions and discuss future directions.

# Experience

Liz White is a seasoned instructional design and learning and engagement professional who has been an integral contributor to the development and implementation of the AAMC's holistic review body of work from early in its development.

One or more constituent co-presenters/facilitators will be selected who have deep experience in the development and implementation of holistic admissions processes while applying effectively the principles of enrollment management.

# Promoting and Supporting Diversity in Medical School The Case For Holistic Student Affairs

Submission Type: Topic Presentations/Small Group Discussions Submitter: C. Alexander Grieco – Ohio State University College of Medicine

# Presenters

C. Alexander Grieco, MD Role: Lead Presenter Ann-Gel Palermo, DrPH, MPH Role: Co-Presenter Daniel Teraguchi, EdD Role: Co-Presenter Princess Currence, MSW Role: Co-Presenter

# Торіс

Diversity, Inclusion, and Social Justice

- Holistic support to match holistic review admissions efforts
- Empowering students and creating the climate and context for success

# Background/Significance

Promoting and advancing diversity in medical education is critically dependent on supporting medical students across the continuum of their journey. Holistic review, as a widely accepted and implemented practice for admissions, has enabled a broader and more inclusive evaluation of applicants, promoting a diverse medical student body. Once matriculated, students who are under-represented in medicine(URiM) or disadvantaged(DA) or who find themselves in both categories disproportionately experience the stresses and challenges inherent to medical education. In general, existing student affairs (SA) practices reflect what was a historically narrow focus of medical education on the socially, culturally, and economically privileged student, and are not designed to center URiM/DA students or the social determinants of their educational success. Thus, while the admissions process for URiM/DA students is far more equitable than in the past, the depth and accessibility of resources to support them after matriculation may not be. The authors propose a model for holistic student affairs (HSA) through which medical schools will be able to develop and integrate new SA practices that center and advocate for URiM/DA students with the same fidelity as the holistic admissions practices that supported their admission.

# Learning Objectives

1. Discuss the potential disconnect between holistic admissions and student affairs practices experienced by URiM/DA students

- 2. Define holistic student affairs and its rationale in medical education
- 3. Design an initiative for centering the experience of UriM/DA students through HSA

# **Session Methods and Format**

(Brief presentations alternating with small and large-group discussions)

Introduction/ Session Plan-[2m.] Presentation 1:SA and URiM/DA Students-[3m.] Activity 1:Individual Reflection-[5m.] - When are points/periods of challenge experienced disproportionately by URiM/DA students along the "student timeline"? Small group/Table Share-[5m.] Presentation 2:Rationale for HSA-[5m.] Activity 2:Small group/Table-HSA Practices-[10m.] -List specific needs of URiM/DA students during medical education. -Which existing SA practices meet these needs? -What must be added to meet these needs more equitably? Large group report-[10m.] Presentation 3A:Barriers/Opportunities-[5m.] Presentation 3B: HSA Framework-[5m.] Activity 3: Small group/Table: 4-Rs (Recruitment/Retention/Resources/Research)-[10m.] -Construct an HSA initiative through one assigned R -Identify key stakeholders for successful implementation -Present your initiative as a proposal to your institution's leadership Large group report-[10m.] Conclusion/Questions/Answers-[5m.]

# Experience

C. Alexander Grieco,MD, is the Special Assistant to the Vice Dean of Education for OSUCOM. Ann-Gel Palermo, DrPH,MPH, is the Associate Dean for Diversity and Inclusion, IcahnSOM Daniel Teraguchi, EdD, is the Associate Dean of Student Affairs at Washington State University Elson S. Floyd COM.

Princess Currence, MSW, is the Curriculum and Education Manager, RushMC.

#### Submission ID#598859 Academic Support in Medical Student Affairs: A Three-Part Model Submission Type: Topic Presentations/Small Group Discussions Submitter: Christine Corral – Rush Medical College of Rush University Medical Center

#### **Presenters**

Christine R. Corral, PhD Role: Lead Presenter Dijana Demirovic, MEd Role: Co-Presenter

# Topic

The Medical School Environment

• Creative academic support - with limited resources

#### Background/Significance

The national medical school dialogue is rife with queries about academic support for medical students among many other topics. The Medical Student Affairs team at Rush Medical College has developed a comprehensive academic support program. Distinctive to this program is its tripartite effort engaging Medical Student Affairs, Assessment and Senior Leadership to support students prior to failure. While in its inaugural year, the program is in place to identify/monitor student academic progress utilizing analytics, provide more direct advising and coaching to facilitate student engagement. Our presentation will focus on the three stages of Rush's Academic Support Model which includes general support, enhanced support and remediation.

#### Learning Objectives

Participants will be exposed to a sample academic support model that can be referenced for framing/customizing their own model of implementation. Participants will engage in dialogue to identify successes and limitations for implementing academic support resources. The participants will establish a network of institutions implementing similar academic models for on-going collaboration.

The presenters want to share their model and dialogue with participants implementing or considering implementation of similar models including measures of success with students, key stakeholders, as well as limitations and opportunities with such models.

#### **Session Methods and Format**

The presenters will share a 30-minute presentation on Medical Student Affairs current academic support model. Following this presentation, the presenters will engage attendees in a "pair and share" to discuss academic support resources/ models they presently have in place, challenges, and opportunities they've encountered in the development/ implementation of their academic support resources that may benefit the larger group. The discussion will wrap up with a 15-minute question/answer session.

#### Experience

Ms.Demirovic offers 10 years of experience in providing academic, social and emotional support for students and graduates in secondary and post-secondary education (including undergraduate and professional school populations). Dr. Corral offers 20 years of experience as a higher education administrator in both student and

academic affairs leading career/professional development, alumni relations, and academic support for students and graduates at all degree levels.

# Am I really qualified to be here? Exploring the impact of Imposter Syndrome on training and careers in medical education

Submission Type: Topic Presentations/Small Group Discussions Submitter: Kateena Addae-Konadu – Case Western Reserve University School of Medicine

#### Presenters

Kateena L. Addae-Konadu, MD, PhD, MsC Role: Lead Presenter

Sonia Carlson, MD, MS Role: Co-Presenter

Alexandra Castillejos, BS Role: Co-Presenter Medical Student

Stephenson-Famy Alyssa, MD Role: Co-Presenter

Kimberly Gecsi, MD Role: Facilitator

# Topic

The Medical School Environment

- Student/staff wellness
- resilience
- and burnout

# Background/Significance

The term Imposter Syndrome (IS) describes a phenomenon in which an individual believes they have achieved success by fooling others into believing they are intelligent and capable. They live in fear that they will be discovered as intellectual frauds, and this fear has been shown to cause psychological distress. First described by Clance and Imes in 19781, Imposter Syndrome is marked by six potential characteristics including the imposter cycle, the need to be special or the very best, superman/superwoman aspects, fear of failure, denial of competence and discounting praise, and the fear of guilt about success. It has been shown to be associated with burnout, depression, anxiety, and low self-esteem.

IS is likely to be present among high achievers including medical students with a particular higher prevalence among female learners. Even though for the first time, females represent 50.7% of medical school marticulants in 20172, women continue to be significantly underrepresented in medical leadership. We hypothesize that IS may impede learning for trainees and contribute to the gap in women leadership especially in Academic medicine by undermining confidence and career advancement. The purpose of this session is to provide participants with the tools to recognize learners with IS and to develop strategies to address Imposter tendencies in a medical teaching environment.

# **Learning Objectives**

- 1. Define IS and its characteristics
- 2. Recognize how IS can impede learning and career advancement
- 3. Develop strategies for addressing imposter tendencies
- 4. Identify and support learners who may suffer from IS

#### **Session Methods and Format**

(15 minutes) Define and present literature review on IS, its characteristics, tools for identifying individuals, and strategies to address Imposter tendencies.

(20 minutes) Small group discussion: Several cases of IS will be used to spark discussion. The group will also be encouraged to share their own personal stories and experiences.

(20 minutes) Large group discussion: Each table will be encouraged to share their insights from the small group discussions. Key learning points from the prepared cases will be highlighted. Experiences from participants will be documented and used to help refine questions on an upcoming national survey of OB/GYN residents and physicians on IS.

(5 minutes) Wrap up and review of session, final questions.

# Experience

- 1. Kateena Addae-Konadu- 4th year OB/GYN Resident
- 2. Sonia Carlson- 2nd year OB/GYN Resident
- 3. Alexandra Castillejos- 4th year Medical Student
- 4. Alyssa Stephenson-Famy, MD-Associate Professor, OB/GYN Associate Residency Program Director
- 5. Kimberly Gecsi MD Associate Professor, OB/GYN Residency Program Director

# Submission ID#598900 Navigating the Pathway for Learners with Disabilities: The AAMC/UCSF Report Submission Type: Topic Presentations/Small Group Discussions Submitter: Lisa M Meeks, PhD

#### **Presenters**

Lisa M. Meeks. PhD Facilitator Lina Mehta, MD Role: Co-Presenter Charlotte O'Conner MEd Role: Co-Presenter Nicole Taylor Role: Co-Presenter Samantha Schroth Role: Co-Presenter **Medical Student** Molly Fausone Role: Co-Presenter Medical Student Hilit F. Mechaber, MD Role: Co-Presenter

#### Topic

Diversity, Inclusion, and Social Justice / Learners with Disabilities

#### Background/Significance

This session comes on the heels of the national report by the AAMC/UCSF and is an emerging and timely topic for student affairs and student experience community trying to navigate this nuanced and critical topic that impacts decision making and affects institutional policies and practices. This report sheds light on both the supports and barriers present in UME and provides considerations for medical education programs to improve institutional practice.

Schools are often faced with novel challenges and look to the AAMC for guidance. This session will provide best practices, and encourage dialogue in a meaningful way that addresses recruitment and admissions, flexibility in the curriculum, support for students who more time to reach competencies and the intersection of disability and diversity, wellness, and career advising.

This session will take participants through three cases that touch on the most salient questions UME administrators have about working with learners with disabilities. The panel will review the legal mandates for disability determination, the interactive process and the process for determining reasonable accommodations. Participants will leave this talk feeling empowered to access resources that support informed decision making on this highly nuanced topic.

#### Learning Objectives

Upon completion, participants will be able to:

- Articulate known mechanisms of inclusion and barriers for learners with disabilities in UME and how to incorporate this into your diversity and inclusion agenda.
- Gain an understanding of the interactive process and best practice for determining reasonable accommodations.
- Apply knowledge of federal regulations regarding patient safety to assess complicated cases involving learners with disabilities where administrators express concern regarding patient safety.

# **Session Methods and Format**

Panel reviewing three cases representing an amalgamation of cases from across the US.

5 Panelists (including two learners)

In this dynamic 360 approach to reviewing cases of learners with disabilities. The panel will dissect cases pointing participants to considerations in the report and AAMC resources for schools working to improve inclusion of learners with disabilities.

# Experience

**Facilitator:** Lisa M Meeks, PhD CO-PI/lead author AAMC report, International expert in medical education and disability.

**Role: Admissions:** 

Lina Mehta, Case Western Reserve School of Medicine, Associate Dean of Admissions, author of webinar and articles on the topic of inclusive admissions.

**Role: Disability Provider:** 

Charlotte O'Conner, University of Michigan Medical School, Disability Services

Role: Student Affairs Dean:

Nicole Taylor, Wake Forest School of Medicine

Assistant Dean of Student Affairs and Person with a Disability

Associate Anesthesiology Residency Program Director

#### **Role: Learners:**

Samantha Schroth, Northwestern School of Medicine, 2<sup>nd</sup> year Person with a Disability, student rep to AAMC. Molly Fausone, University of Michigan Medical School, 4<sup>th</sup> year Person with a Disability, author of several articles on the topic of disability in medical education, developer of several medical devices designed for physicians with disabilities and telemedicine.

#### **Role: Student Services Dean:**

Hilit F. Mechaber, MD, FACP, University of Miami Miller School of Medicine Associate Dean for Student Services

# Submission ID# Taking a Detour: Supporting Leave of Absence and Non-Traditional Students from Matriculation to Graduation

Submission Type: Panel Submitter: Taylor Bono – University of Alabama

#### Presenters

Nicholas Van Wagoner MD, PhD Role: Co-Presenter

T. Alexander Edgil Role: Co-Presenter Medical Student

**Taylor Bono** 

Role: Lead Presenter Medical Student

#### Topic

The Medical School Environment

#### Background/Significance

Every year, students in medical schools across the country deviate from the traditional four-year route on the path to graduation. These students face specific or unique challenges including taking an unscheduled or unanticipated leave of absence, adversity with any portion of the USMLE, or repeating an academic year. At the University of Alabama School of Medicine, a student-run initiative was started in January 2016 to support the students who may have experienced one or more of these challenges, while also including aspects of professional development, mental health and wellness, and resiliency. This organization has been met with success, unexpected challenges, and opportunities for learning and improvement.

As part of this session, we will discuss the interdisciplinary efforts that have been effective while recognizing the challenges these students may have faced. At the end of this session, attendees will take away actionable items to meet the needs of these students at their respective institutions.

#### **Learning Objectives**

- 1) Demonstrate one school's novel student-led initiative to support students who experience obstacles in their medical education
- 2) Identify the unique needs of students who experience adversity in their medical education
- 3) Facilitate collaboration between institutions to address this underserved population of students

#### **Session Methods and Format**

This will be accomplished through a faculty- and student-led panel, small group discussions, and interactive discussion of this topic.

#### Experience

Dr. Wagoner - Faculty Advisor