COM Faculty Council
LCME Update

Chipper Griffith, MD
Vice Dean for Education

April 17, 2018
July 23, 2018
Submission of the UK COM Self-Study and Database Collection Instrument (DCI)

September 9-12, 2018
Mock Survey Visit

October 14-18, 2018
LCME Team Survey Visit

In addition:
1. LCME items during COM Clinical Chairs and Basic Science Chairs meetings
2. Practice sessions prior to mock site visit
2018 Institutional Self-Study Task Force

Chipper Griffith, MD, Chair

- Roxie Allison
- Linda Asher
- Mary Boulanger (M3)
- Donald Brown, DO
- Sarah Bugg (M3)
- Todd Cheever, MD
- Angela Dearinger, MD
- Kristy Deep, MD
- Robert DiPaola, MD
- Carol Elam, EdD
- Deborah Erickson, MD
- Akin Erol (M3)
- Christopher Feddock, MD
- Helen Garces
- Robert Gaiser, MD
- Beth Garvy, PhD
- James Geddes, PhD
- Kaylee Gouge (M1)
- Alan Hall, MD
- Andrew Hoellein, MD
- Brian Jackson, PhD
- Darrell Jennings, MD

- Wendy Jackson, MD
- Gregory Jicha, MD, PhD
- Thomas Kelly, PhD
- Brandy Lawson
- Michelle Lineberry, EdD
- Bushra Manzar (M2)
- Michael Piascik, PhD
- John Ragsdale, MD
- Matthew Sanger
- Rachel Saunders, MD
- Renay Scales, PhD
- Emma Scott, MD
- Berry Seelbach, MD
- Hussain Siddiqi (M1)
- Arayo Sokan (M2)
- Terry Stratton, PhD
- Rebecca Todd, MD
- Anthony Weaver, MD
- Emery Wilson, MD
- John Wilson, MD
LCME Institutional Self-Study Subcommittee Chairs

• Standards 1 & 2
  • Thomas Kelly, PhD
  • Terry Stratton, PhD
• Standard 3
  • Kristy Deep, MD
  • Renay Scales, PhD
• Standard 4
  • Gregory Jicha, MD, PhD
  • James Geddes, PhD
• Standard 5
  • Darrell Jennings, MD
  • Roxie Allison

• Standards 6, 7 & 8
  • John Wilson, PhD
  • Deborah Erickson, MD
  • Michael Piascik, PhD
  • Berry Seelbach, MD
• Standard 9
  • Alan Hall, MD
  • John Ragsdale, MD
• Standards 10, 11 & 12
  • Rachel Saunders, MD
  • Andrew Hoellein, MD
  • Wendy Jackson, MD
Institutional Self-Study Timeline

2017
- September – December:
  - Self-study subcommittees draft initial responses to DCI and self-study questions.
- November – January, 2018:
  - ISA is distributed to students and final report is submitted to Task Force.

2018
- February – April
  - Self-study task force finalizes responses to self-study report.
- April – June
  - Data Collection Instrument (DCI) is finalized.
- June 15
  - Self-study report and DCI are submitted to mock site team.
- Summer 2018
  - Finalize site visit logistics.
  - Add GQ data to DCI.
- July 23
  - Self-study report and DCI are submitted to LCME.
- September 9-12
  - Mock Site Visit
- October 14-18
  - LCME Site Visit
LCME Site Visit Preparation Timeline

January 2017
Confirm LCME site visit dates.

April 2017
Designate ISA Task Force.

April 20, 2017
LCME Survey Prep Workshop

August 2017
Appoint members to the institutional self-study task force. Designate task force subcommittees.

September 2017
Distribute completed DCI sections to the self-study task force and appropriate subcommittees.

November 2017
Distribute ISA to student body

December 2017
ISA Task Force sends student survey data to FAL and begins analysis of data from ISA.

January 2018
Final ISA report is submitted to FAL. LCME issues accreditation decision.

February 2019
LCME sends accreditation letter to school officials.

August 2017
ISA Task Force meets to begin compiling survey questions.

September 2017
Review and analyze relevant sections of completed DCI and prepare report.

January – April 2018
Self-Study Task Force prepares the self-study summary report and corrective changes are implemented.

July 23, 2018
Submit LCME survey package.

August 2018
Submit 1st set of updates to survey team.

September 2018
Submit 2nd set of updates to survey team.

October 14-18, 2018
LCME site visit. Send all updates compiled during site visit to survey team and LCME Secretariat.

March 2019
LCME sends accreditation letter to school officials.

June 15, 2018
Submit LCME survey package to mock site team.

July 2018
Review survey team roster.

May /June 2018
Update DCI, DCI appendices and self-study summary with current information. Receive SEFT account info and instructions.

August 2018
 ISA Task Force sends student survey data to FAL and begins analysis of data from ISA.

September 2017
Assign sections of the DCI for completion by appropriate people/groups.

January – April 2018
Self-Study Task Force prepares the self-study summary report and corrective changes are implemented.

August 2017
Assign sections of the DCI for completion by appropriate people/groups.

September 2017
Review and analyze relevant sections of completed DCI and prepare report.

August 2017
Appoint members to the institutional self-study task force. Designate task force subcommittees.

September 2017
Distribute completed DCI sections to the self-study task force and appropriate subcommittees.

November 2017
Distribute ISA to student body

December 2017
ISA Task Force sends student survey data to FAL and begins analysis of data from ISA.

January 2018
Final ISA report is submitted to FAL. LCME issues accreditation decision.

February 2019
LCME sends accreditation letter to school officials.

August 2017
ISA Task Force meets to begin compiling survey questions.

September 2017
Review and analyze relevant sections of completed DCI and prepare report.

January – April 2018
Self-Study Task Force prepares the self-study summary report and corrective changes are implemented.

July 23, 2018
Submit LCME survey package.

August 2018
Submit 1st set of updates to survey team.

September 2018
Submit 2nd set of updates to survey team.

October 14-18, 2018
LCME site visit. Send all updates compiled during site visit to survey team and LCME Secretariat.

March 2019
LCME sends accreditation letter to school officials.

June 15, 2018
Submit LCME survey package to mock site team.

July 2018
Review survey team roster.

May /June 2018
Update DCI, DCI appendices and self-study summary with current information. Receive SEFT account info and instructions.

August 2018
 ISA Task Force sends student survey data to FAL and begins analysis of data from ISA.

September 2017
Assign sections of the DCI for completion by appropriate people/groups.

January – April 2018
Self-Study Task Force prepares the self-study summary report and corrective changes are implemented.

July 23, 2018
Submit LCME survey package.
LCME Standards
12 Standards with 93 Elements

Standard 1: Mission, Planning, Organization and Integrity
Standard 2: Leadership and Administration
Standard 3: Academic and Learning Environments
Standard 4: Faculty Preparation, Productivity, Participation and Policies
Standard 5: Educational Resources and Infrastructure
Standard 6: Competencies, Curricular Objectives and Curricular Design
Standard 7: Curricular Content
Standard 8: Curricular Management, Evaluation and Enhancement
Standard 9: Teaching, Supervision, Assessment and Student and Patient Safety
Standard 10: Medical Student Selection, Assignment and Progress
Standard 11: Medical Student Academic Support, Career Advising, and Educational Records
Standard 12: Medical Student Health Services, Personal Counseling and Financial Aid Services
1.1 Strategic Planning and Continuous Quality Improvement

• A medical school engages in ongoing planning and continuous quality improvement processes that establish short and long-term programmatic goals, result in the achievement of measurable outcomes that are used to improve programmatic quality, and ensure effective monitoring of the medical education program’s compliance with accreditation standards.

• COM Continuous Quality Improvement Office:
  • Chipper Griffith, MD
  • Chris Feddock, MD
  • Terry Stratton, PhD
  • Emery Wilson, MD
  • Linda Asher
  • Brandy Lawson
COM Continuous Quality Improvement

2014

- July-August: Led comprehensive review sessions covering 12 standards involving over 40 COM faculty and staff including representation from Faculty Council
  - Precipitated by introduction of newly formatted LCME standards
  - Introduced idea of continuous quality improvement review expectation
  - Identified major areas of concern (7), specific elements requiring attention (16), and additional elements to monitor (11)
  - Shared with COM leadership and assigned to appropriate individuals for action and follow-up

- September-November: Reviewed findings and areas of concern related to the medical school curriculum with COM Curriculum Committee

2015

- March: Presented findings from mid-cycle review to Council of Chairs and Faculty Council
  - Distributed presentation to department chairs to be shared with their respective department faculty

2016

- January: Reviewed major areas of focus with OME leadership to determine current status and update areas of strengths and weaknesses in preparation for the arrival of the newly appointed dean
- April: Reviewed current status of LCME standards with Dean DiPaola
- May-September: Reviewed LCME standards related to comparability, faculty integration and governance, student admissions and affairs in anticipation of campus expansion
- October-December: Developed tactics to incorporate quality improvement processes into the college’s strategic plan

2017

- January-April: Conducted intensive review of 12 standards/93 elements involving over 40 faculty and staff including representation from Faculty Council
  - Generated 173 tasks including major areas of concern and immediate action
- June: Appointed Assistant Dean for Quality Management to officially lead continuous quality improvement process
- September: Initiated LCME institutional self-study
Standard 1: Mission, Planning, Organization and Integrity

- A new strategic plan was developed for college (COMMITS) that aligns with UK and UKHC strategic plans to support UK COM’s mission, vision and values. (1.1)
- Continuous Quality Improvement (CQI) process integrated into UK COM strategic plan. (1.1)
- Faculty have a direct opportunity to participate in UK COM governance (faculty portal). (1.3)
- UK COM Rules of the Faculty were updated and revised. (1.5)
Standard 2: Leadership and Administration

• Discussions regarding best practices for integrating regional faculty are occurring to strengthen faculty relationships within UK COM departments. (2.6)
Standard 3: Academic and Learning Environments

- The associate dean for diversity and inclusion was hired by UK COM in August, 2017. (3.3)
- UK COM Admissions Committee updated list of professional attributes. (3.5)
- Student mistreatment policy was revised. ISA (conducted in Fall 2017) indicates a better understanding of the policy and procedures for reporting mistreatment. (3.6)
Diversity of Graduates by National Comparison

- % of Total Graduates for Black or AA:
  - 2014: 3.6%
  - 2015: 3.5%
  - 2016: 3.4%
  - 2017: 3.0%
  - 2018: 3.5%

- % of Total Graduates for Hispanic/Latino:
  - 2014: 0.7%
  - 2015: 0.5%
  - 2016: 0.8%
  - 2017: 1.6%
  - 2018: 1.5%

National Percentile:

- 2014: 0.0%
- 2015: 0.5%
- 2016: 1.0%
- 2017: 1.5%
- 2018: 2.0%
Diversity of Faculty by National Comparison

Percentage of Total Faculty:
- Women: 33%, 33%, 33%, 35%, 36%
- URM: 5%, 5%, 5%, 6%, 6%

Year Data:
- 2014: Women 5%, URM 5%
- 2015: Women 5%, URM 5%
- 2016: Women 5%, URM 5%
- 2017: Women 6%, URM 6%
- 2018: Women 6%, URM 6%

National Percentile Range:
- 0% to 100%

Legend:
- % Women
- % URM
- Percentile Women
- Percentile URM
UK COM Diversity 2017-2018

• Students
  • 45% women (versus 42% historically; M1 class is 50% women, first in UK COM history)
  • URM: 9.8% (versus 4-5% historically; 12.1% in M1 class)

• 145 faculty recruited
  • 11% URM, versus 5.5% historically
  • 36.5% women (unchanged)
Standard 4: Faculty Preparation, Productivity, Participation and Policies

• Academy of Master of Educators delivers educational faculty development opportunities to faculty at all campuses. (4.5)

• COM Council of Chairs meetings will be reformatted in 2018 to directly align with the council’s charge in the COM Rules of the Faculty and function in concert with COM Faculty Council as the medical school’s executive committee. (4.6)
Standard 5: Educational Resources and Infrastructure

• Plans for identifying funds for a new College of Medicine building were included in the 2018-2024 College of Medicine Strategic Plan. (5.4)

• UK Medical Center Library renovation will be completed in Summer 2018. (5.8)

• COM IT reports to the COM dean to solidify dedicated technology resources and support. (5.9)

• Student lounge space and access to computers has been improved at Good Samaritan Hospital. (5.11)
Education Space Updates

Dean Office moved to Pav H 2015
• Critical for student impression of accessibility of student affairs, deans, IT, curriculum staff, admissions, etc.

HG 611 (M1 classroom)
• 2013 classroom renovation with tiered seating & wireless communication
• 2017 audiovisual components updated

Library Phase 1
• 2018 new layout seating increase from 100 to 156 (renovating 7,000 gross square feet)
• Anatomage Room - virtual anatomy table seating for 8
• Conference space

Library Phases 2-4
• Completion of the computer lab, library personnel offices, HVAC upgrades
• First floor renovation (to include moving the digital anatomy table to the first floor)
• Multi-purpose room

Medical Science
• MS 233 Study Space Renovation 2,722 NSF, mixed seating, ~90 study spaces
• Added four small group teaching study rooms (MN 02 seating 12 each)
• 2019 MN342 and 442 renovation including upgrading the projectors

COMLC
• 2018 new cameras and microphones to enable regional campus communication

UK Simulation Center
• 2018 1,897 NSF dedicated to COM; 6,394 total NSF

CTW014 (M2 classroom)
• 2018 audiovisual upgrades - desk microphones and larger TV monitors
Standard 6: Competencies, Curricular Objectives and Curricular Design

• A system for monitoring, assessing, and reporting program-level objectives was established. (6.1)
• Strategies to incorporate self-directed learning into the curriculum were expanded. (6.1)
• Innovative ways to restructure preclinical and research electives as well as scholarly concentrations are being explored. (6.5)
• Student service learning opportunities are more clearly communicated by COM Student Affairs. (6.5)
Standard 7: Curricular Content

• Societal topics for curricular inclusion were developed and approved by the Medical Student Curriculum Committee. (7.5)

• Targeted societal problems have been strategically integrated into COM learning objectives. (7.5)

• Formative and summative assessment of students’ ethical behaviors during pre-clerkship training was formalized. (7.7)
MD 839: Entrustment in Clinical Medicine

• Small groups to teach topics
  • Informatics, health systems
  • Ethics, palliative care
  • Patient safety, post-acute care
  • Pre-AI curriculum: hand-offs, consult requests, admit orders

• Procedure/skill practice and assessment
  • Physical exam: breast, pelvic, rectal
  • Bag mask ventilation, chest compressions, ACLS
  • Suturing, NG tube insertion, peripheral IV, etc.

• Serial OSCEs to coach clinical skill development
  • History-taking
  • Physical exam
  • Clinical reasoning
Standard 8: Curricular Management, Evaluation and Enhancement

• COM Rules of the Faculty were updated to reflect the appropriate authority, charge and membership of the curriculum committee to adhere to LCME standards. (8.1)
• A mandatory, centralized mid-clerkship review process was implemented by the curriculum committee. (8.6)
• Major and minor student workload issues were remedied. (8.8)
Standard 9 Teaching, Supervision, Assessment and Student and Patient Safety

• Department-specific policies were developed to address clinical supervision of medical students. A mechanism for reporting any violations was added to the student portal on the Medical Student Education website. (9.3)

• The mechanism for monitoring/reporting the direct observation of patient history and physical examination during clerkship training was formalized. (9.4)

• A mechanism for central monitoring of midpoint feedback was implemented. (9.7)

• A reminder system to ensure the timely reporting of all grades was established. (9.8)
Maximum Weeks for M3 Grade Submission

- MD 830 - Peds
- MD 831 - EM
- MD 832 - Neuro
- MD 833 - Psych
- MD 834 - FM
- MD 835 - IM
- MD 837 - Surg
- MD 838 - Ob/Gyn
Standard 10: Medical Student Selection, Assignment and Progress

• COM Rules of the Faculty were updated to reflect the appropriate authority, definition of quorum, membership, and maximum length of membership terms of the COM Admissions Committee. (10.2)

• COM Rules of the Faculty were updated to reflect the appropriate role, charge and membership of the Student Progress and Promotions Committee. (10.3)

• A formal policy regarding transfer students was approved. (10.7)

• A formal policy to request an alternative educational site or curriculum assignment was approved. (10.9)
Standard 11: Medical Student Academic Support, Career Advising, Educational Records

• An assistant dean for student academic success was hired to oversee a timely and responsive system for identifying students at risk of academic difficulty. (11.1)

• The career advising system was formalized. (11.2)

• The MSPE policy was revised and the process to request an alternative writer was formalized. (11.2)

• A policy to ensure that medical student educational records are “available only to faculty and administrators with a need to know” was formalized. (11.5)

• Student appeals process was revised and updated on website. (11.6)
Standard 12: Medical Student Health Services, Personal Counseling, and Financial Aid Services

• An assistant financial aid coordinator was hired to support the increasing class size. (12.1)
• A dedicated psychologist was hired to provide mental health counseling for medical students. (12.3)
• A plan was developed to improve communication of policies to students including personal counseling and well-being programs. (12.3)
COM Education Leadership
OME 2015-2016 Dean Positions

Chipper Griffith, MD
Vice Dean for Education

Carol Elam, EdD
Associate Dean for Admissions

Todd Cheever, MD
Associate Dean for Student Affairs

Chris Feddock, MD
Associate Dean for Curriculum

Brian Adkins, MD
Assistant Dean for Student Affairs

Terry Stratton, PhD
Assistant Dean for Quality Management

John Ragsdale, MD
Assistant Dean for Clinical Education
2018-2019 Education Deans and Directors

Chipper Griffith, MD
Vice Dean for Education

Carol Elam, EdD
Assoc. Dean for Admissions

Regional Campus Initiative

Kimberly Northrip, MD
Director CECentral

Don Brown, DO
Assistant Dean Curriculum Bowling Green

Rebecca Todd, MD
Director, Curriculum RPLP

Office of Medical Education (OME) see separate slide

Katie McKinney, MD
Assoc. Dean for Graduate Medical Education

Rebecca Dutch, PhD
Associate Dean for Biomedical Education

Michael Kilgore, PhD
Assistant Dean for Biomedical Education

Todd Cheever, MD
Associate Dean Bowling Green

Tony Weaver, MD
Assistant Dean RPLP

Angela Dearinger, MD
Assistant Dean for Accreditation, GME

Asha Shenoi, MD
Assistant Dean for Learning Enviro. GME

Amy DiLorenzo, MA
Assist. Dean for Ed Scholarship & Innov. GME

Katie McKinney, MD
Assoc. Dean for Graduate Medical Education

Rebecca Dutch, PhD
Associate Dean for Biomedical Education

Michael Kilgore, PhD
Assistant Dean for Biomedical Education

Todd Cheever, MD
Associate Dean Bowling Green

Tony Weaver, MD
Assistant Dean RPLP

Rebecca Todd, MD
Director, Curriculum RPLP