UNMC College of Medicine (COM) Curriculum Committee (CC)

Procedures

Purpose: This document outlines procedures by which the CC performs oversight of the COM curriculum and related policies as outlined in the COM Bylaws and CC Charter.

Guiding principles:

- All procedures are consistent with LCME requirements.
- All procedures incorporate appropriate representation from stakeholders.
- The governance process encourages continuous improvement of the curriculum.
- All COM students have equal access to an equivalent curriculum designed to achieve defined program learning objectives.
- Processes leading to decision-making are based on open discussion, transparency, shared governance, and iterative consensus development.

Functions: The CC functions are as follows:

- Revise, formulate, propose, and approve COM Program Objectives
- Approve new curricular components or substantive modifications to the curriculum
- Approve changes to course objectives
- Ensure that critical knowledge, skills, and attitudes are being adequately assessed throughout the curriculum
- Review all required courses and clerkships on a regular basis
- Review and approve internal and external course offerings
- Review summary internal and external measures of curriculum effectiveness
- Approve and amend academic policies to include graduation requirements
- Respond to regulatory bodies such as the LCME
- Align curriculum content and implementation with UNMC and COM strategic plans

Officers: The selection and terms of the Chair and Vice Chair of the CC are outlined in the COM bylaws and CC charter. Expectations of the Chair and Vice Chair are as follows:

- Chair and establish agendas for the bi-monthly meetings of the CC
- Provide oversight to the activities and outcomes of the Subcommittees including:
    - Appoint subcommittee chairpersons and members
    - Present subcommittee reports to full CC as outlined
    - Assign tasks and responsibilities to subcommittees and monitor progress of assigned initiatives and projects assigned to or created by the subcommittees
- Organize and lead a biennial (every other year) CC retreat with presentation of a final report including proposed action items to the CC
- Serve as a member of the Curriculum Implementation Team subcommittee and Administrative Oversight Quality Committee (AOQC)

- Develop a written annual report of the CC activities to present to general faculty
- Present annual report of the CC to Faculty Council and other updates as requested
- Participate in LCME-related subcommittees and activities as requested
- Participate in ad-hoc task forces as requested

Subcommittees: There are four standing CC subcommittees. All at-large members are expected to serve on at least one subcommittee or task force. Additional subcommittee members are appointed by the subcommittee chairs and may include faculty, residents, fellows, or students outside of the CC. All subcommittees are charged with challenging the status quo and should continuously seek to optimize the learning outcomes of the students.

- *Curriculum Implementation Team*—responsible for developing and implementing the plans, policies, and instructions generated by the CC under its authority. Concerns and problems raised by the block and clerkship directors and the CST are brought back to the CIT for solutions via their respective phase directors. The CIT also policy and procedure prior to presentation to CC for action. The CIT is chaired by the Associate Dean for Medical Education. Membership includes the Associate Dean for Learning Environment and Strategy, Chair and Vice Chair of the CC, Phase Directors, Director of the Office of Medical Education, Director of Clinical Skills, and Director of Clinical Assessment. Other members may be invited by the Subcommittee chair as needed.

- *Outcomes Subcommittee* - reviews outcomes data indicating student performance in required courses, national examinations, residency match, graduation rate, AAMC benchmark data and other internal/external sources to assess accomplishment of program objectives and other outcome measures determined by the Curriculum Committee and pursuant to relevant LCME elements. The Subcommittee will make recommendations to the Curriculum Committee intending to improve performance of selected outcomes quarterly. The Subcommittee will also be tasked with mapping and monitoring curricular elements in relation to Entrustable Professional Activities. The Subcommittee is led by two co-chairs who are current members of the Curriculum Committee and are appointed by the CC chair. Other members of the subcommittee include the Associate Dean for Medical Education, two additional at-large CC members, one student and others as appointed by the sub-committee co-chairs.

Annual data review

- o Summative Behaviors and Attitudes rubric data
- o Institutionally - developed program director and graduate surveys Phase 1,2, and 3 cumulative class performance, including overall pass rates, performance on internal assessments, shelf exam scores (including topic histograms) and assessments as mapped to block objectives Graduation results

- MATCH data
- Specialty placement AAMC GQ/Y2Q survey data
- USMLE data (including topic histograms)

- *Course Review Subcommittee—*performs reviews of required COM courses in all phases of the curriculum. The subcommittee will review relevant data provided by the Office of Medical Education, Phase Directors and others to identify course-specific and systematic issues. Subcommittee members will report summary results and resultant recommendations to the CC at least three times annually. The Subcommittee is composed of a Chair and Vice-Chair who is an active at-large member of the Curriculum Committee and who is appointed by the Curriculum Committee chair. Other members include the Phase Directors, the Associate Dean for Medical Education, three at-large CC members, and other faculty as appointed by the chair.

- *Phase 1 Exam Review Committee—*review examination/item statistics from each preclinical block examination and perform peer review of a selected number of questions to ensure alignment with established performance standards. Following review, they suggest item edits to individual faculty members and block directors for inclusion in the next iteration of the examination and monitor the future performance of these questions. This subcommittee is chaired by the Director of Student Assessment who also selects members from the faculty at large.

- *Ad hoc committees* —The CC Chair may create *ad hoc* committees and task forces as necessary.

- *Task force* – A task force of the University of Nebraska College of Medicine Curriculum Committee is defined as a working group of appointed individuals convened to review and provide a recommendation to the Curriculum Committee on a specific content area or objective in a time delineated fashion. Convening a task force will be determined by vote of the CC. Following completion of the specified task, the group will be disbanded.
    - The task force leader will be appointed by the Chair and Vice Chair of the Curriculum Committee with expertise in specified areas of knowledge or practice.
    - Funding for task force leaders may be requested from the College of Medicine commensurate with the expected time commitment.
    - The task force leader will provide quarterly written progress reports to the CC and present their ongoing work or overall recommendations to the CC at least annually.
    - The task force will present their formal recommendations to the CC in the timeframe specified on convoking.

- o The task force members will be recruited by the task force leader with input from the CC leadership.
- o Each task force will have at least one voting member of the CC.
- o Each task force will have at least one student or trainee representative.

With the exception of the Phase 1 Exam Review Committee and Curriculum Implementation Team, subcommittee membership terms shall be 3 years in duration with the possibility of one renewal for a total of 6 years of service. Service terms are staggered to provide continuity.

Subcommittee leadership is composed of a Subcommittee Chair and Vice Chair. The Vice Chair is selected from the committee membership through self-nomination with appointment approval from the CC Chair and Vice Chair.   The term of the Chair is three years with the Vice Chair assuming the position of Chair at the end of the Chair's term with a new Vice Chair appointed. In the vacancy of the Chair before completion of the term, the Vice Chair will assume the Chair position for the remainder of the scheduled term and a new Vice Chair is appointed. In the vacancy of the Vice Chair before completion of the term, a new Vice Chair is appointed. Members can serve as Chair and Vice Chair for a maximum of one term each. Fulfilling vacancies does not count towards this term limit.

The Subcommittee Chair and Vice-Chair are voting members of the CC.

Meetings — Meetings of the CC will occur for two hours every other month with subcommittee meetings occurring on opposite months with dates determined by their chairs.

<u>Standing CC meetings</u>—The Chair and Vice Chair are responsible for setting the agenda. Reports and motions from standing and *ad hoc* committees will be placed on the agenda when received two business days before a meeting or at the discretion of the Chair and Vice Chair. Motions from subcommittees will not require a second. Any CC member may request that an item be placed on the agenda; such items must be submitted to the Chair/Vice Chair at least two business days before the meeting.

- • Suggested CC meeting agenda

    - o Consent agenda

    - o Report from subcommittee(s)

    - o Standing agenda items (as below)

    - o Old business

    - o New business

- o Reports: Phase 1 director, Phase 2 director, Phase 3 director, Office of Medical Education

- Standing agenda items—data related to these items will be reviewed by the CC on a semi-annual, annual or biannual basis to meet LCME requirements:

  Reviewed twice a year:

  - o Comparable Clerkship experiences (Element 8.7)
  - o Patient encounter log data (Element 8.6)

  Reviewed every year:

  - o Learning Environment (Element 3.5)
  - o Resident training administered by GME (Element 9.1)
  - o Student Mistreatment (Element 3.6)
  - o UNMC Strategic Plan (Element 1.1)
  - o Key terms (Standard 7 & *ad hoc* topics)

  Reviewed every other year:

  - o Academic workload/time for independent study in Phase 1 (Element 8.8)
  - o Balance between inpatient/outpatient experiences in Phase 2 (Element 6.4)
  - o Clinical workload and effectiveness of tracking and policies in Phases 2/3 (Element 8.8)
  - o Review of required clinical skills' presence throughout the curriculum (Element 6.2)
  - o Review the linkage of course and clerkship learning objectives to the medical education program objectives (Element 8.2)
  - o Review of aggregate data from patient encounter logs for each clerkship and appropriateness of list (Element 8.6)
  - o Societal Problems (Element 7.5)

- Curriculum Committee Retreat—the CC retreat occurs biannually in even-numbered years. CC members are expected to attend as directed by the Chair and Vice-Chair. Additional individuals representing all stakeholders are invited, including course directors, residency program directors, alumni, and other UNMC faculty will be invited as determined by the Chair and Vice Chair. In addition to strategic planning, this meeting also serves as the LCME-mandated regular review of the curriculum as a whole as outlined in LCME Element 8.3 (items requiring documentation of review are designated with an asterisk below). During the sessions(s), attendees appraise the following:
  - criticality and timeliness of each COM program objective
  - adequacy of assessments to show that students demonstrate achievement of each of all COM program objectives*

- depth and breadth of coverage of relevant material within courses and clerkships assessing for gaps or unnecessary redundancies*
- variety of instructional methods associated with each COM program objective*
- emerging areas of medicine/health care or educational methods that should be considered by phase and course leaders

Curriculum Leadership

The appointment of leaders of required courses and components within the curriculum is under the authority of the Curriculum Committee to ensure alignment with strategic goals and the ability of nominees to fulfill administrative duties in an effective manner while meeting our aims of diversity, equity, and inclusion. The procedure for selecting faculty leadership positions is as follows:

- Phase 1 Block Directors, Phase 3 required Course Directors, and Coil Leaders—Vacancies are reported to the Associate Dean for Medical Education who will facilitate a College-wide call for interested faculty members. The respective Phase Director(s) review applications, conduct interviews (if needed), and provide a recommendation to the Curriculum Committee for approval.
- Phase 2 Clerkship Directors—The Phase 2 Director makes a recommendation for new clerkship directors in cooperation with departmental leadership for Curriculum Committee approval. Assistant clerkship director appointment does not require approval.
- Career Specialty Track (CST) Directors— The Phase 3 Director makes a recommendation for new CST directors in cooperation with departmental leadership for Curriculum Committee approval.
- Phase Directors—When a vacancy exists the Associate Dean for Medical Education will facilitate a College-wide call for interested faculty and accept applications from faculty members with relevant leadership experience, vets applications, interviews applicants, and forwards a nominee for Curriculum Committee affirmation.

Amendments – These procedures may be altered by the CC at any meeting by a simple majority vote. Changes do not require approval by the COM Faculty Council.

Approved by the Curriculum Committee: August 25, 2020
Approved by the Faculty Council: July 9, 2021
Approved by the Curriculum Committee: July 27, 2021
Approved by the Curriculum Committee: January 25, 2022
Revisions approved by the Curriculum Committee: May 23, 2023
Revisions approved by the Curriculum Committee: November 28, 2023
Revisions approved by the Curriculum Committee: March 26, 2024