

1. review of Dr. Rao's writeups and the minutes from 5.31.
2. reiteration that last two paragraphs was the "meat" of Alan's document; Toews said that expectations of faculty should be bolded
3. Unanimous vote in favor of accepting Alan's document with inclusion of headings as something that will be included in guidelines for the first year. From here to CC1 and CC2, then to CMPC as policy statement.
4. Clarification that there are higher expectation in MS2 than MS1, but that should not impact attendance expectations (to develop habits early, to strengthen the experience of those around them).
5. Student comment: attendance will not be 100% required, so it should be reiterated elsewhere.
6. Rao's statement for discussion.
 - a. Item 1: restatement of policy already in place. Still course director's prerogative to change, but this is what is stated up front. Student note that faculty should state what they are going to test on. Rao clarifies that is what it says. Cross notes that this item starts with talking about policy; we are no longer talking about self continued courses, and so recommends item to precede this that states goal of these courses not just learning for test but for longer term goals and retention as well. Recommend item 8 should be moved to item 1 to fill that need. Student concern that it is too open for overly detailed evaluation' reassurance that is not the case. Clarify that this statement modifiable by faculty. Will change language to "testable material or other forms of assessment". Also included written assignments. With those modifications unanimous approval.
 - b. Item 2: concern that 50% inordinately high, but how do we push toward a goal without naming a number? Already have buy in for group work in CC 2. Note that might be modified in CC 1. Small group clarification needed, currently used to mean 12 to 50. Alexander stated anxiety about quantifying something we can't reach without cutting lectures. Hobgood notes that there are other ways to frame it; Harvard uses 8 person small group in larger groups (Team learning). Recommend softening language as goal, but keep as goal; useful for talking to faculty to effect change. Note that "voting with feet" not always referendum on lecture per se, but indicator of quality of lectures themselves. Recommend change to 30 – 50%. Will let language stand for CC 1 discussion. Chaney notes that ARS adds active component to every lecture in which it is used.
 - c. Item 3: clarify that STE could be part of grade. Student notes that in block 4 small group case work expected to have answers ready at beginning of class; in Block 1 given time at beginning of case conference to prepare. By setting expectation in block 4 changed student behavior to stronger preparation and group buy-in. Hobgood notes that STEs useful tool, but one thing about it is

that in order for it to be effective they need to have collaborative work around others work product. Without expectation of complex problems solving and shared review of each other's work, it doesn't work. STE use will require significant thought about putting STEs in so students don't just give everyone 3s. Logistically, tremendous resources required to put up test in AIMS before each small group, scan and post; someone has to grade it. Block 11 efficacy b/o clear grading process. Willing to entertain pilots, work with LCSF to partner with a course to develop some STEs out of existing small group work; results would allow next steps. We have resources to do some, but hesitant to open door wide and say it is the solution. Chaney agrees to pilot with Mol to Cells; even though most course don't have group product per se, work with complex issues and need the modality. Will collaborate. Students also need to learn how to score each other so there are criterion-referenced, comparable assessments. Student training and buy-in required. Learning how to judge quality of your interlocutor part of culture of medicine. Could not be done online b/o not all rooms are wireless; could do it later, but needs to be done immediately to assess right thing. Also needs to be done orally in order to develop skills of giving and receiving feedback; idea of working in training in how to do it. Word to 3c: "making attendance and participation". Student opinion that 5 question pre-test best way to ensure preparation, together with categorical my peer here / not here to take attendance and start us on path to professionalism. Alexander notes faculty reluctant to take attendance. Cross notes recommended language lists options, not limits. When ARS is able to ID student answers, could use to give extra credit quizzes in lecture: student feedback? students think good idea; make clear on course information page, 5 EC pop quizzes. But does that penalize those who learn better alone? Differentiation between how study to best on exam and long term learning that develops doctoring competence. Legitimate to evaluate on those things too. Committed to good feedback to faculty too. Consensus on item 3: straw poll is unanimous.

- d. Item 6: recommend change "can be" to "is." Key to communicate expectation to student a head of time, our obligation to patient to respect his / her time. Consensus achieved.
- e. Items 4, 5, 7: 4 already accepted, 5 lists consequences and so discussed last meeting, accepted; 7 already standard policy, wish to emphasize no whining. Again, 8 now 1.
- f. Agreement that all go forward to CC1 and CC2 for further discussion and approval.
- g. Hobgood: charge for professionalism considerations will be on web page established for all to review, encouragement to participate in next task force.