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| Marcia HobbsKurt GillilandNeva HowardCarrie HoyleSarah SmithsonCatherine CoeLindsay WilsonSusan MartinelliJen McEntee | Josh AlexanderGary Beck DallaghanKelly SmithKathy BarnhouseAmy BryantCam EnarsonLuigi PascarellaMarcia HobbsGeorgette Dent | Amanda AntonoIan FunkJosh EwyMai RiquierHeather Tarantino (Charlotte)Erin Bakal (Raleigh)Wanda Price (Greensboro) | Robyn Latessa (Asheville)Meredith Hughes (Wil)Amanda Danielson (Wil)Tiffany Conway (Wil)Celeste Colcord (Charlotte)Mark Higdon (Charlotte)Meredith Niess (Charlotte)Katherine Anderson (Raleigh) |

**Education Committee Goals 20-21**

* **Clinical Assessments: (continued from 19-20 with modification)**
	+ Short term (20-21):
1. Move from norm based (only a set number of students get a certain grade) to criterion-based grading (all students who get above a certain score get a set grade) in clinical phases.
	* Longer term
2. Define criteria for competencies to allow competency-based grading
3. Identify and develop expertise among faculty to optimize fair and effective competency-based grading
* **Personal Counseling/Wellness Curriculum: (continued from 19-20 with modification)**
	+ Monitor student satisfaction with recent changes in wellness and support (changes in mental health benefits, new hiring of mental health counselors and increased integration with CAPS
	+ Develop other measures to assess student wellness and sense of belonging
* **Curricular Design: (continued from 19-20 with modification)**
	+ Short term (20-21):
1. Enhance integration of the following curricular topics:
	* + Pharmacology preparation for the clinical phases
		+ Nutritional content in the clinical phases
		+ Neurosciences (neurosurgery physical medicine and rehabilitation, psychiatry, and clinical neurology) content in the clinical phases
		+ Teaching about care for the emergent patient in the clinical phases
		+ Ultrasound curriculum in the clinical phases.
		+ Interprofessional Education across the MD Program
2. Ensure adequate clinical opportunities for Foundation Phase students during the COVID pandemic
	* Longer term
3. Develop a case-based learning curriculum integrating the clinical, systems health, social justice, and biomedical sciences. Goal is to promote extensive integration, clinical reasoning, empathy, teamwork, belonging, and trust with anticipated implementation Fall 2022.
* **Resources for Clinical Instruction (continued from 19-20 with modification)**
	+ Shorter term (20-21)
1. Expand clinical resources for the instruction of medical students in the ambulatory and inpatient settings in the Raleigh area, focusing on Rex Hospital
2. Improve successful recruitment and retention of community preceptors
	* Longer term
3. Explore capacity for instruction of medical students in other UNC Health affiliated hospitals and clinics.
* **Social Justice Curriculum (based on Social Justice Curricular Task Force recommendations)**
	+ Process for reviewing and improving curricular content related to Social Justice
	+ Transform foundation phase curriculum into relationship-based curriculum where cases worked through in small groups allow integration of social justice concepts with focus on integration, smaller groups, and case-based approach
	+ Broaden array for assessments especially in clinical phases
	+ Strengthen advocacy curriculum with robust understanding of structural factors that influence health
	+ Create expectation where all faculty have regular training to teach through a social justice lens