

Evaluation Subcommittee
12/13/06

Present: Drs. Kellner, Hagen, Hahn, Novak, Duckworth, Ritz, Ms. LouAnn Cooper,
Student: Kavita Rajasekhar, MSII

Dr. Rarey went over the handout of the assessment scores for the fall 2005 and spring 2006 courses and the 2005-06 clerkships. Dr. Kellner stated that the numbers were very impressive. Dr. Duckworth suggested that in the future bar graphs be used instead of line graphs that are hard to read.

Ms. Karle went over the Anesthesiology clerkship scores and comments. She stated that on most components the scores were good with the exception of IID. There is not anywhere in the syllabus that tells the students how to make an appointment with the director. The learning objective section needs to be rewritten, and the student performance criteria need to be listed on the same page as the objectives along with the evaluation method. Regarding student feedback, because this is a two week clerkship the director feels that it is difficult to give good formal formative feedback to students after only one week. The director would like to not have to give formal formative feedback at all. Dr Kellner brought up two important points: 1) do the students feel that the feedback is beneficial, 2) does the LCME require that formal formative feedback be given. Dr. Ritz stated that a fourth year course should have some type of feedback. It was stated that the director would need to be asked what the students do during the first week of the clerkship. The committee agreed that the director should be contacted and asked to sit with the evaluation subcommittee.

Ms. Cooper began the discussion on the Surgery clerkship. It was stated that surgery was rated on the lower end of all clerkships. The learning objectives are not well defined or linked to the competencies. The committee would like to asked the director what was changed in the report submitted this year from that of last year. It was asked if the director was a member of a national surgery clerkship alliance, as that might prove to be a useful resource in creating uniformity. It was stated that it might be better to have general objectives for the clerkship and then a handout of objectives for each specialty. Learning activities may also prove to be useful. The committee agreed that the director should be contacted and asked to sit with the evaluation subcommittee.

Dr. Ritz discussed the Emergency Medicine clerkship. It was stated that the syllabus was scored lower than the directors' report by the evaluation subcommittee. One possible explanation for this could be that the online version of the syllabus is different that the version that was submitted with the report. The committee agreed that the director needed to be notified of the discrepancy.

The meeting adjourned at 1:00 PM.

The next meeting will be January 10, 2007.