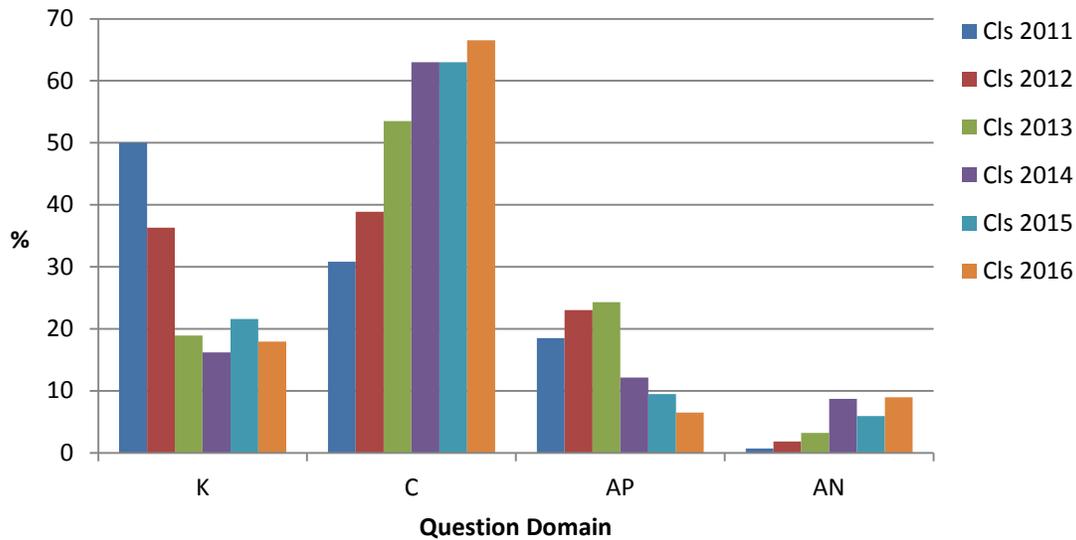




I. Performance Comparison (comparative data showing current and previous years provided by Curriculum)

Cardiopulmonary I



	Cls 2011	Cls 2012	Cls 2013	Cls 2014	Cls 2015	Cls 2016
Final Exam Mean	70.0	70.1	70.1	73.32	73.51	72.51
Section Failures	8	10	8	2	4	5

II. Academic Performance

A. Final section grades:

Grade	Number of Students
A	23
A-	45
B+	55
B	32
B-	44
C+	19
C	25
F	4

B. Remediation Performance

Student [number or initials]	Exam Remediating (written, lab)	Remediation Period (PEP #, end of semester, end of year)	Outcome
DB	Written,	End of semester	Failed, withdrew
SK	Written,	End of semester	Dismissed
PPo	Written	End of semester	Passed
PPa	Written	End of semester	Failed
RR	Written, Anatomy	End of semester	Failed, dismissed

III. Highlights [From CQI and Faculty Feedback]

A. Strengths:

Description	Percentage/Outcome
The class agreed or strongly agreed that the content was well organized and integrated.	87%
The class agreed or strongly agreed that the section was presented at a level that they could comprehend.	90%
The majority of the class found the anatomy lab to be very useful.	72%
The class found the patient presentations to be useful or very useful. The students feel the patient presentations provide motivation for studying.	88%
Eleven percent of the class mentioned the usefulness of online activities including Dr. Karius' acid/base material, the heart sound quizzes and microbiology quizzes. The students feel the online activities help to reinforce and gauge comprehension of the material.	11%
The class agreed or strongly agreed that the exams assessed concepts that were covered in class and/or covered in the reading assignments and learning objectives.	82%
The class agreed or strongly agreed that the learning objectives and exams enabled them to assess their own understanding of the important concepts in the section.	82%
The majority of the class rated the section as average or above average and 15% of the class rated the section as excellent.	77%

B. Usefulness of applied learning activities: [From CQI]

Description	Percentage/Outcome
The class felt there is adequate availability of learning resources to meet the demanding needs of a first year medical student.	94%
Several members of the class made it a point to say, "thank you," for extending the hours of Smith Hall and of the library during the final exam time period.	16%
The class felt the availability of resources was adequate and what they needed to be successful during the Cardiopulmonary I section.	69%
In the comments regarding the student TA's and fellows facilitation in assisting labs and learning, an overwhelming majority of the students were incredibly grateful for their help and found them to be an invaluable resource during the section. Although there were very few comments of concern (7 out of the 55 (12%) comments made by our class), 3 of those 7 mentioned that it may be useful to hire a few more TA's as we have such a large class size.	

IV. Faculty/guest lecturers who gave SUPERIOR presentations during the section

The students seem generally pleased with their instruction with only minor issues or suggestions for improvement. There were several comments regarding conflicting information presented by faculty; this information has been forwarded to Dr. Thomas for action as the year 1 Curriculum Director. Student comments indicate that they lack confidence in some ability to accurately present the material. Seven pages of often detailed comments regarding areas for improvement suggest that this is a serious issue that requires some sort of change in the delivery of these lectures. Top-ranking faculty are Dr.s Karius, Fitzpatrick, Segars, J.Taylor and Friedlander.

V. Areas of Improvement [From CQI]

A. Content/Faculty

- Fifteen percent of the class recommended scheduling pharmacology and microbiology lectures earlier in

the week or in the week prior to a test, taking into consideration the amount of memorization that is required for these two subjects.

- Thirteen percent of the class recommended grouping all aspects of a topic (i.e. clinical medicine, microbiology, pharmacology, etc) together in the same week.
- Eleven percent of the class suggested splitting up the asthma and COPD lecture into two separate lectures (*each lecture covering the clinical medicine and pharmacology of the disease*), it is felt the information was rushed given the importance and prevalence of these two diseases in practice.
- Eight percent of the class suggested covering more of the pharmacology lectures before the midterm (i.e. *the antibiotics lectures since they are fairly broad*) to allow students to have more time to learn the material.

Each of the following areas for improvement had support by four percent of the class:

- Dr. Karius' online activity (Respiratory Adaptations) should be an actual lecture given the importance and level of difficulty of the material. Six out of 59 comments (10%) mentioned changing Dr. Karius' "online" lecture to an "in class" lecture.
- An overview of a disease should be given prior to the pharmacology of that disease.
- It would be beneficial to provide an introductory lecture covering the basic anatomy and physiology of the cardiovascular system the first few days of the section.
- Some lectures were disorganized and difficult to comprehend.
- If more than one professor is covering a topic (i.e. asthma), then the professors should collaborate in order to avoid any inconsistencies in the material being presented.

B. Learning Resources

Thirteen percent of the comments from the class requested for more study rooms to be made available because there are not currently enough private study areas to accommodate the large amount of students. One student commented, "It would be nice to have more study space on campus and have them open for a longer time, Smith Hall is nice but if you don't get there at 6:00 [am] to sign out a room, you probably won't get one."

C. Exams

Twenty-two percent of the class expressed concerns that there were questions on the exams that were not covered in the lectures. It was suggested that perhaps professors should review the test questions for accuracy and significance before the exam.

- Eleven percent of the class who commented felt that the learning objectives were too vague and broad, which makes them ineffective when attempting to use them as a tool for studying.
- Five percent of the class expressed concerns about the physiology questions on the tests. The commenters felt that the test questions were poorly written and difficult to comprehend.

D. Applied Learning Activities

Forty percent of the class suggested the following improvements regarding the Human Patient Simulator (HPS) Labs:

- More HPS
- More guidance on "the best way to do it" and more direction for the activities
- More interaction with the physicians following HPS
- Handout to be given before reaching KCCC that would summarize day's activities
- Not scheduling HPS on Fridays or right before exams.

E. Overall Quality of the Section

Six percent of the class felt the PowerPoints presented should be carefully revised to have less clutter and more focus. The backgrounds should be simple and light in color, as it is difficult for students to take notes on the dark backgrounds. It was suggested during this section that the class simply change the background themselves, which is not possible as the power points are released to the students as PDF's. Perhaps, before posting and printing the handouts, the backgrounds could be changed to a more aesthetically appropriate format for the class' benefit.

V.

Main areas for improvement:

A. Organization and scheduling of lectures and labs should be addressed. Thirty-five percent of the comments for the main areas of improvements described concerns in this area. Recommendations from the class indicate that students appreciate topic-centered days (or a topic contained in one week's time) and would like future sections to use this tactic to better understand the full scope of the material. When

multiple professors in several different fields cover one topic, there is often a lot of overlap of material. Better time may be spent if the lectures were consolidated, freeing time for more clinical applications. The "tag-team" combination lectures were well received and allow the students to integrate the material from multiple viewpoints in a concise manner. Students wished for the sections to be more front-loaded, filling the early days in the section with lectures and moving any unscheduled hours to a period of time closer to the exams. Additionally, twenty percent of the comments left in the main area of improvement section indicated their dislike of memorization heavy lectures (i.e. Pharmacology and Microbiology) presented the Friday before an exam. By moving these lectures to earlier in the section, students are better able to retain the material.

2. The presentation of some of the lectures of this section should be thoroughly revised. Twenty-four percent of the comments in the main area of improvements section discussed dissatisfaction with the lack of variation in the professors and the lack of clarity of the presentations as they currently stand. Additional comments echoing these concerns were made in the content section of the survey. In general, students requested better integration of the material, more presentations from ____ (or simply a variation of professors), better quality of presentation of the graphical data used, and a more thorough presentation and evaluation of the material.

3. The Cardiopulmonary I section would benefit greatly if the section began with a strong lecture that gives an overview of all that will be taught in the section. Begin the section by presenting the most basic anatomy and physiology in order to permit the class to begin the section on the same level. There was a lack of "big picture" focus from the start. Repetition is the key to this curriculum and it would benefit greatly from a quality introduction lecture to the system rather than assuming that the class pieces everything together by the end.
4. Exam questions should be more thoroughly regulated and should correspond to what was taught and emphasized in the section.

Continuous Quality Improvement

~ Protocol ~

Continuous Quality Improvement (CQI) is a process of constructive self-study that encourages the participation of all KCUMB students and faculty. CQI is a team based management strategy that emphasizes the improvement of the process an organization (KCUMB) uses to deliver its product (curriculum).

Pre-Section Tasks

- **Summer:** identify one or two MSII student coordinators to assist in the coordination & implementation of the CQI process (see job description).
- **Orientation:** introduce CQI to MSI students.
- Obtain volunteers from MSI & MSII to be CQI team leaders. Each team is made up of 4 students who represent their class for the duration of a given section (see job description).

Section Tasks

- **First week of section:**
 - ✓ Section Director (SD) introduces the team to the class.
 - ✓ Team pictures are posted to the CQI organization on Blackboard (BB).
 - ✓ Provide the team with job description & CQI comment forms.
 - ✓ Ensure the discussion board is up and running on BB for the duration of the section. Check the board daily for comments.
- Schedule meetings every other week for the duration of the section.
 - ✓ Reserve Genesis for the meetings.
 - ✓ Invite: student team members, SD, Curriculum Coordinator (CC), Co-Director (not required), Associate Dean (not required), student coordinators (not required), and senate representative (not required).
 - ✓ Instruct the team to check the CQI comment box and the discussion board on BB prior to the meeting. All students can voluntarily write comments and place them in the CQI box at the back of the classroom or post questions/comments to the discussion board electronically. The CQI team retrieves the comments and presents the issues at the meeting.
 - ✓ Discuss issues pertinent to the section and/or the curriculum.
 - ✓ Take notes, type, and distribute minutes to the SD, Assoc. Dean, and CC.
 - ✓ Under the direction of the SD, share pertinent comments with faculty and staff. Any comments that may affect change during the current section, comments that commend faculty improvement, or comments that offer suggestions for improvement to a faculty member who will lecture again during the section should be shared with the appropriate person.
- Ensure the section CQI survey is posted to BB in the appropriate CQI organization. All students are **REQUIRED** to login to either decline the survey or complete the survey for grades to be released.
 - ✓ Post an announcement for students to notify them of the survey post date, due date, and location on BB (CQI organization).

End-of-Section Tasks

- Monitor student completion of the CQI survey on BB.
 - ✓ Late submissions are noted on the professionalism score card (beginning with the class of 2008).
- Once all students have completed the survey, download the results from BB into a Word document.
- Meet with CQI team leaders and student coordinators. Provide them with a template & guidelines to write the consensus report (due: 3 weeks). The consensus report must be a concise summary of the larger report that contains all student comments.
- Send letter & evaluation to all section lecturers (due: 2 weeks).
- Send letter & evaluation form to the SD (due: 2 weeks).

Distributing Results

- **CQI Raw Data (all student comments):**
 - ✓ Curriculum
 - ✓ Copies to CQI team leaders
 - ✓ Copy to Section Director
- **CQI Consensus Report:**
 - ✓ Curriculum
 - ✓ Copy to Associate Dean for Academic Affairs and Curriculum
 - ✓ Copy to Vice President for Academic Affairs/Dean
 - ✓ Copy to Section Director
 - ✓ Copy to Co-Section Director
 - ✓ Edited copy to library and Blackboard for student review (all faculty comments blocked)
 - ✓ Copy to anyone mentioned in report with other names/identifying information blocked out; cc to supervisor
 - ✓ Edited copy to any department that is mentioned in the report (send to department chair)
 - ✓ Section Director presents debrief to Curriculum Council at specified date (see schedule)...changes implemented into section for next year based on student comments.
- **Faculty Lecturer Evaluations:**
 - ✓ Curriculum
 - ✓ Copy to Associate Dean
 - ✓ Copy to Section Director
 - ✓ Response to faculty who offered feedback (Assoc Dean/SD)
- **SD Report:**
 - ✓ Curriculum
 - ✓ Copy to Associate Dean
 - ✓ Section Director incorporates own comments into debrief to Curriculum Council
- **Response to Consensus Report:**
 - ✓ Written by Assoc Dean/SD
 - ✓ Copy to CQI team leaders
 - ✓ Copy to library/Blackboard

End-of-Year Tasks

- Cumulative analysis by MSI & MSII team leaders (April).

- ✓ At least one student representative from each team.
- ✓ The report is a summary of the major strengths & areas for improvement from the entire year, across both classes.
- ✓ Assoc Dean meets with SDs to discuss the major issues of the report.
- ✓ Assoc Dean presents the issues to the Curriculum Council.
- MSPE/Dean's letters (send to VP/Dean, copy student & Registrar).