

LCME STATUS REPORT  
MS-26

TASKS (Steps to be taken that will lead to the desired outcome)	INDIVIDUALS/ GROUPS RESPONSIBLE	INDICATORS THAT THE TASK HAS BEEN ACCOMPLISHED	EXPECTED DATE OF ACCOMPLISHMENT OF TASK	DESIRED OUTCOME THAT ILLUSTRATES COMPLIANCE WITH THE STANDARD	PROGRESS
<p>Create and administer Student Services Annual Survey (SSAS) based on the Graduation Questionnaire to serve as a primary tool for measuring all outcomes as they pertain to student services.</p>	<p>Associate Dean for Student Affairs</p>	<p>Draft of survey developed by associate dean and reviewed by Student Affairs' staff, the Assistant Dean for Academic Affairs, the Senior Associate Dean for Medical Education, and the LCME Student Services Task Force (which includes two medical students)</p>	<p>Administration of survey to all students in April 2012 and annually thereafter</p>	<p>An increase of five percent every year for three years in student satisfaction as measured by the SSAS</p> <p><del>The GQ data for the Class of 2016 will meet or exceed ratings commensurate with "All Schools"</del>  <span style="color: red;">Not relevant to this task</span></p>	<p>SSAS created with 39 items on Likert scales, 26 of which are std GQ questions. Baseline data was obtained by administering SSAS to all students in April 2012. Survey was incentivized. Final N=190 (63% RR). Data has been analyzed for total aggregate data. On August 15, 2012, Dr Veitia met with Dr. Gress to analyze data by class.</p> <p>Deadline: February 1, 2013 (for manuscript)</p>

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Increase the accessibility and responsiveness of the Office of Student Affairs and eliminate barriers such as potential for or perception of biases	Dean, School of Medicine	All Student Affairs staff have been moved to a more centrally located facility at which there will be greater ease of access for students	January 2012	An increase of 15 percent every year for three years in student satisfaction as measured by the SSAS in the areas of accessibility, awareness, and responsiveness to student concerns	All three measures are within the GQ 2012 range for All Schools. <table border="1" data-bbox="1383 548 1875 698"> <thead> <tr> <th>GQ 2012</th> <th>MUSOM</th> <th>AS</th> </tr> </thead> <tbody> <tr> <td>Accessible</td> <td>80%</td> <td>81%</td> </tr> <tr> <td>Aware</td> <td>73%</td> <td>75%</td> </tr> <tr> <td>Responsive</td> <td>71%</td> <td>73%</td> </tr> </tbody> </table>	GQ 2012	MUSOM	AS	Accessible	80%	81%	Aware	73%	75%	Responsive	71%	73%
GQ 2012	MUSOM	AS															
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		MSPEs will be written by staff in the Office of Medical Education rather than by the Associate Dean for Student Affairs	Academic Year 2012-2013	The GQ data for the Class of 2016 exceed ratings commensurate with "All Schools"	Responsibility for all MSPEs was reassigned to the OME by Interim Dean Nerhood (effective AY 2012-2013). MSPEs completed and uploaded to ERAS on September 30, 2012.												

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(continued) Increase the accessibility and responsiveness of the Office of Student Affairs and eliminate barriers such as potential for or perception of biases	Associate Dean for Student Affairs	Associate dean for student affairs will conduct monthly open forum meetings at which all students will be welcome to participate	February 2012	Though the sessions will be voluntary, attendance will be taken to document utilization	<p>One forum was held in March, 2012 and attended by 15 students. In discussions with the first and second year class presidents, the Dean, and the Dean's Staff, it was determined that a more effective means of student engagement could be developed. The new dean conducted the first of a series of focus group meetings with students on April 16, 2012. The plan for student engagement is:</p> <p>(1) The Dean will continue focus group meetings with 12 randomly selected students about every two weeks. Dates to present: 04/16/12, 05/22/12, 07/17/12, and 08/22/12, 09/04/12, 10/03/, 10/17/12.</p> <p>(2) Leadership meetings will be held by SOM Dean and ADSA with class officers at least once per month. The first meeting was held on September 24, 2012.</p> <p>(3) On a monthly basis, the ADSA and other administrative staff will meet with the first and second year students. The first meeting with the first year students is on Tuesday, September 11, 2012. The first</p>

					<p>meeting with the second year students will be October 5, 2012.</p> <p>(4) In one of the focus group meetings, a request was made to reinstitute town hall meetings so that all students would have access to the Dean and other administration. The first meeting was held October 1, 2012. Additional meetings of this nature may be conducted depending on need.</p> <p>(5) Electronic opinion surveys of student opinion are frequently used. In August, 2012, two surveys were conducted-study space and social media. Results of the Study Space Survey (N=160) indicated that 68% of the respondents (students) preferred that the BCC lobby become an individual/group study space with comfortable couches rather than a recreational space (27%). Results of the Social Media Survey (RR= 58%) indicated that 66% were opposed to the use of Twitter as a means of getting information.</p> <p>(6) The open door policy characteristic of the Office of Student Affairs will be maintained. Student traffic has significantly increased since the move to the BCC. Students can continue to expect email replies within 24-48 hours from all student affairs staff. Students are provided with the personal cell phone of</p>
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					the ADSA.
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Establish and maintain a Medical Student Wellness Committee	Associate Dean for Student Affairs provides guidance and serves as administrative liaison but committee is student-driven. Wellness Committee members are tasked with keeping students informed and promoting events at student meetings	<p>Programming in the areas of physical and emotional Wellness of the Wellness Model completed in 2011-2012</p> <ol style="list-style-type: none"> <li>1. 50 Miles in 50 (week) days Wellness Model</li> <li>2. Wellness Committee is considering the use of Wellness electives as a requirement for graduation starting with the Class of 2016</li> <li>3. Planning "Open Mic" Spring event s in</li> </ol>	<p>Academic year 2011-2012 (this event will be repeated in Spring of 2012 and annually thereafter)</p> <p>Second event began in February 2012</p> <p>Ongoing</p> <p>Ongoing</p>	<p>An increase of 15 percent every year for three years in student satisfaction as measured by the SSAS in "Student Programs &amp; activities that promote effective stress management, a balanced lifestyle and overall well being"</p> <p>The GQ data for the Class of 2016 exceed ratings commensurate with "All Schools"</p>	<p>The Wellness Committee was established in December 2010 and charged with creating medical student programs to foster self-care, emotional well-being, and personal/professional balance. At least 2 students from each class are selected to serve. A Wellness Model has been approved. A fitness event created by the committee has been held for the last two years (February 7-April 15, 2011 and February 27-May 5, 2012) in which 77 and 69 students participated, respectively. The Wellness Committee was instrumental in the contractual services for personal counseling. Students were reluctant to add a wellness requirement to graduation so the matter was tabled. A need for a spouse/significant other support group was identified. The MUSOM Plus Ones was created in December 2012 and held nine social events in Spring 2012. They hosted a dinner as part of orientation for the class of 2016 on August 10, 2012, which was attended by about 50 guests.</p>

		a relaxing to promote intra-class collaboration and socialization			<p>The Wellness Committee is in favor of planning a major event in spring 2013 for all students. The LCME Student subcommittee in discussion about recruiting an intern from MU exercise science /health &amp; wellness program to assist in program development.</p> <p>The first meeting of AY 2012-2103 was held on September 17, 2012. A fall festival is planned for October 2012.</p> <p>Recreational equipment purchased for students to facilitate physical activity during study breaks.</p>
Provide readily accessible counseling services for all medical students by providers who do not teach or evaluate students in a location that is not utilized for teaching, therefore making it improbable that students encounter residents or	Associate Dean for Student Affairs	<p>Contractual arrangement made with CHH Counseling Services for 10 free sessions annually to include spouses and children. Insurance billed if needs exceed 10 sessions.</p> <p>Contractual arrangement made with Valley Health Services for 10 annual</p>	<p>Contracts established July 2011. Students in the Class of 2015 were made aware of the resource at orientation and this will become standard practice. This year, all other students were informed by email and the resources were prominently displayed on the Student Affairs Webpage and included in the new Student</p>	<p>Monthly utilization data is obtained from Counseling Center and SSAS has a utilization item</p> <p>An increase of 15% every year for three years in student satisfaction as measured by the SSAS in the area of personal counseling.</p>	<p>Contractual services with CHH Counseling Center have been continued for AY 2012-2103. Aggregate utilization data is monitored. A total of 90 sessions were recorded for personal counseling in 2011-2012. A total of 18 sessions were recorded for psychiatric consultation for the year. Services are provided by counselors who do not teach or evaluate students in a location where there is a low likelihood of encountering faculty or residents. Prior to beginning the service, the ADSA met with counselors to discuss common student issues and student policies. By invitation, one of the counselors participated in a Plus Ones development meeting. First year students are informed of the availability of 10 free counseling sessions at</p>

attending physicians		assessment or treatment services by a psychiatrist within 48 hours.	Handbook	The GQ data for the Class of 2016 exceed ratings commensurate with "AS"	<p>orientation (August 2011, August 2012). All other students have been informed by email and at rising class meetings. Contact information is easily accessible on the Student Affairs and Student Resources web pages. In AY 2012-2013, all students were provided with contact information cards that include CHH Counseling Services. The Dean approved the recommendation, based on utilization, the contract for psychiatric services not renewed. Students are required to have comprehensive health insurance so this will not present a problem.</p> <p>With respect to satisfaction with personal counseling, an increase of 25 percentage points was noted on the GQ 2012; however, better promotion of services is necessary. In addition to first year orientation, students will continue to be reminded at rising class meetings and as is indicated at monthly meetings to be held with first and second year students. Digital signage will be utilized as will email reminders once per semester.</p>
Improve dissemination of information about student services	Associate Dean for Student Affairs	A "Dean's Quest" event will be held as part of orientation for new students.	Planned for August 2012	Dean's Quest cards will be collected to document that all entering students have	Because orientation for new students left them only adequate time to attend to personal matters as advised in preparation for medical school, it was determined that the "Dean's Quest" would not be a productive use of student

		<p>New students will be required complete activities that verify their awareness of key student affairs locations and services.</p> <p>Create web-based calendar for student events/activities</p> <p>Digital signage will be installed in each of three teaching building in order to improve visibility of programs that promote student wellness.</p>	<p>Ongoing</p> <p>Approved February 2012</p>	<p>participated</p> <p>Student Feedback</p> <p>Student Feedback</p>	<p>time. Other methods for keeping students engaged and informed were in development at this time that would produce the same result of improving dissemination about services. Services are/will be brought to the attention of students at the various student meetings that are described on page 3. In addition, improved web pages with clickable maps were created for study space and posted September 2012 and students were informed by email.</p> <p><a href="http://musom.marshall.edu/students/documents/studyspace.pdf">http://musom.marshall.edu/students/documents/studyspace.pdf</a></p> <p>This same strategy can be employed to facilitate student awareness of location of administrators (with drop down menu describing services provided at each office) and locations for services (e.g., counseling center). Calendars of events for tutoring sessions, career advising, and financial services are routinely emailed to students and strategically posted. Digital signage that has been installed in the BCC lobby and the Coon Education Building can be used to keep students informed. A discussion was held by the assistant and associate deans about utilizing social media for communication/updates. Student opinion survey indicated that students are strongly opposed to the use of Twitter for this purpose. The Office of Student Affairs is responsible for the</p>
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					SOM Face book page.
Take steps to assure that faculty and students understand the Policy for the Provision of Health Care Services to Medical Students	Associate Dean for Student Affairs	Policy reviewed and modified per discussion with Dr. Nerhood, Dr. Hunt, and Dr. Barzansky. Presented to Dean's Advisory on November 15, 2011. Email to faculty, residents, and students informing them of the modification sent on November 21, 2011. Website updated November 2011.	November 21, 2011 for policy revision and dissemination.	Confirmation from check boxes on mentor evaluations and third and fourth year evaluations that student-provider relationship did not exist with person completing the evaluation	The policy available at <a href="http://musom.marshall.edu/students/policies/">http://musom.marshall.edu/students/policies/</a> was disseminated to all faculty for review in November 2011 and the policy was finalized November 21, 2011. It was a point of discussion at clerkship meetings and meetings of the Dean's Advisory Committee. Since AY 2011-2012, a confirmation checkbox appears on all third and fourth year clinical evaluations that states: "No person contributing to the evaluation has had a provider relationship with this student."
Maintain current list of non-psychiatric & psychological health care providers on website who are not in a position to evaluate	Associate Dean for Student Affairs	List is reviewed and updated semi-annually	Provider list existed at time of 2011 LCME Site Visit and was updated on November 21, 2011.	In creased student awareness of resources	Updated 09/14/2012  See Health Care Resources for Medical Students at <a href="http://musom.marshall.edu/students/sa-main.asp">http://musom.marshall.edu/students/sa-main.asp</a> .

medical students					
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