

## Meeting Information

**Date:** 10/15/19

**Attendees:** Shobha Stack, Karla Kelly, Doug Schaad, Brenda Martinez, Raye Maestas, Bill Sayres, Kellie Engle, Martin Teintze, Mark Whipple, Allison Lambert, Jeff Seegmiller, Toby Keys, Amanda Kost

## Agenda Item

- a) **Plans for the year**
- b) **Plans for meeting as a committee**
- c) **Thoughts on longer-term goals for scholarship**

## Updates

- The Scholarship Workgroup report was submitted regarding whether the III should continue to be a graduation requirement.
  - **Recommendation:** It should not be required.
  - **Next step:** We have it on the agendas for both the Foundations Committee and Curriculum Committee meetings where the recommendation will be presented and voted upon. The proposal will then be sent to Dr. Allen for final recommendation.
  - Shobha will present at the meeting. Kellie will be in touch about setting the dates.
- LCME was satisfied with our III response. We just need to monitor students' perceptions of research. This year we are doing another anonymous MS2 III exit survey to collect more data about student perceptions, and will review it in this committee in December.
- Next month Mark and Shobha are meeting with ITHS to talk about what resources they have to create a Research Pathway.

## Questions about longer-term scholarship goals

- How do we best handle students doing research/scholarship activities beyond III?
- How can we help students at another site who would like to do research in Seattle get connected?
  - We have a new section on the III blog and are building a new database of research opportunities for those interested in working outside of the summer. We also have general information about connecting with mentors and finding opportunities.
- Is there an issue with the cost of coming to Seattle during clinical research experiences?
- How can they keep it going if they are returning to their site? They can't do it during clerkships.
- What is the map for students who want to do research throughout their medical school career while still focusing on Foundations and other curricular requirements?

## Concerns about encouraging students to sign up for 6-week electives

- These require a lot of advanced preparation.

- When can students take these? They have one elective in their clinical phase – can that be a research elective?
- Electives don't satisfy the 5 months of elective clerkships. At least 4 need to be clinical. We don't currently have a way of giving credit for nonclinical electives (NCEs), but this is a registration issue, not school policy.
- Should research electives count toward graduation requirements in place of clinical electives?
  - It really affects our regional students; they need a way of starting on research early in clinical phase.
  - **Exceptions:** 1) MSTP students who completed Foundations under old curriculum (we gave them one month of credit because otherwise they couldn't graduate) and 2) students doing CBSR (they get credit for 4 weeks of clerkship credit).
  - Should probably be limited to 4 weeks. This would allow students to customize an option that meets their research needs. It would relieve a lot of anxiety for students advised to do research for their chosen specialty. They could also schedule 2 months of research electives, but likely only 1 month would count towards graduation requirements.

### Concerns about non-III opportunities

- We currently have about 55 mentors for III and 20 for non-III, but we are just starting on non-III opportunities.
- A month isn't a long time to start an IRB. Maybe mentors could allocate a certain portion of a project since time is so limited.
- These types of opportunities typically come up face-to-face OR on clerkship and don't make it into the database of opportunities. We are really concerned regional students are at a disadvantage because of this fact. These opportunities are fleeting, so they are hard to get into the database.
- We are also working on adding pathways, including a Humanities pathway. There are possibilities beyond research for other enrichment activities that aren't clinical.

### Pros and cons of research electives counting toward graduation requirements

- **Disadvantages of not counting toward graduation:** Time and expenses. Students pay towards these courses, so they will have to pay extra tuition. They would also need to fund travel and housing, another barrier for regional students. When students get beyond 4-6 weeks, then they are really bumping into graduation requirements – most meaty projects take at least this amount of time.
- **Disadvantages of counting toward graduation:** Tendency towards expecting students to do more rotations in the same specialty. If you have to do 3-4 EM rotations, that can make it difficult. This ties into another policy about how many clerkships you can do in one specialty, which is 3 in order to get credit. This is being driven by the residency expectations to do all of these away specialty rotations.
- **Advantages of counting toward graduation:** This would serve as an alternative because not everyone can afford to do away rotations. This would help provide more parity.

### Impacts of counting toward graduation

- Needs assessment re: enough advanced research electives for interested students. It might be a recommendation for development of these electives.
- We need to do the needs assessment and know what we have available, especially for students who are regionally based.
  - We need to make sure we have equal opportunities for students in all regions.
  - Right now we don't have the capacity to track this activity for students due to limitations within the registrar's office.
- Being connected to career advising because our specialties don't offer these kinds of research electives and students might feel uncomfortable that they can't meet the research requirements of residency programs.
- **Conclusion:** The group should investigate this recommendation and speak with Dr. Allen about the resources required, especially getting technical systems in place (working with Michael Campion on this). We need to know if there is capacity so students aren't disappointed.

### Questions about research electives and possible research pathway

- Does it have to be a departmentally based clerkship? **Answer:** Yes, students don't get credit for away rotations because we can't guarantee their quality.
  - The Medical Student Scholarship Team will look into it and revert to the Cte. Key contacts would be Connie Lamb and Michael Campion to determine if it's feasible. Also: it's a 6-month lead time to implement new graduation requirements, plus we have to bundle them.
- We are going to start discussing a Research Pathway with ITHS – Bryan Kestenbaum, Shobha Stack, and Matthew Thompson. ITHS is a well-funded program throughout the Seattle region engaged in training researchers, but they haven't been very involved with medical students to date (they would like to be). We're going to have a meeting with ITHS because they have a lot of resources already. **Can they put together a pathway where there's research education and training that goes along with individual experiences?** That would make it a longitudinal experience that would be very worthwhile.
  - They could choose to enter either early in medical school or later. It's not like MSTP where there are different graduation requirements, but it's a packaged extracurricular activity focused around students who have this general interest. They can sign up at the time of matriculation or within a certain window.
- Did the idea come from students? **Answer:** About 1/3 of our students are pretty interested in research; it doesn't really matter what the motivating factor is.
  - This is so dependent upon the individual mentor-mentee relationship. We are just trusting that this will happen, but other schools have programs where there is infrastructure behind it, which is what we need. This would really benefit the regional students. It should be open to everyone: they would need to have a rough research plan, but they won't need prior research experience.
  - The Scholarship of Integration (Sol) mentoring seems more approachable. We had a successful teaching session arising from an Sol Medical Education (Med. Ed.) project that a student did for emergency medical management. Students were very interested and attendance was high.

## Discussion of building Medical Education scholarship

- There are talks with CLIME about a III program option around Med. Ed. One would be curricular assessment and another curricular development.
  - Assessment is harder to do in the summer.
- We are discussing a possible Med. Ed. pathway.
  - The scalability of this is also a question: could we accommodate a high number of students if they are interested?
- Would academic medicine be another possible pathway? There seems to be lots of interest in this. Some of our sister facilities (Michigan, UT Austin) offer these pathways, plus others, including an architecture pathway.
- There is a consortium of 40 medical schools that have created a database of what scholarly tracks/pathways they offer. We face limited resources here to implement, which is why partnering with ITHS makes sense for implementing Research Pathways.
- In a perfect world, it would be great if these longitudinal research pathways led to a publication, etc. It's important to figure out opportunities for doing this longitudinal research.
- It would be problematic to build a pathway that would require the student to expand. It would be hard to do 3 months of solid research without expanding.
- One of the appeals of a pathway is you'd still have something to show even if you didn't have a publication. You would still have training and a project that would still go on a CV. That's more helpful than an ad hoc research experience.

## Suggestions and ideas

- Would it be more attractive to mentor someone knowing about IRB, data analysis, etc. that they would glean from Non-Clinical Electives (NCEs) during Foundations phase? It takes time to teach how to write a testable hypothesis, etc.
- It would be great if the student could work with an analyst since some mentors don't have the bandwidth. We should partner with ITHS as they already have a system for providing support and consultations for grant applications, individual projects etc. depending on funding availability.
- We could waive some fees. Master's or PhD level students like having access to new data sets so it's a symbiotic relationship, especially if they end up on a publication or presentation. This supports the ITHS grant renewal.
- Some regional sites also have this type of support available. Maybe we can explore how the regions can collaborate on projects/opportunities.
- We could do something with TRUST, for two reasons. 1) You have students longitudinally for four-plus years in the same community and 2) you have a cohort. Could we come up with some multi-sites studies? Maybe we could develop a framework that would support it.
  - It may not be feasible to do TRUST and a Research Pathway.
- Could we build enough scholarship into the TRUST program that it not only benefits students' applications, but also provides the training to make changes in their careers and communities?
  - Could this be built with ITHS? If the interest is work force out in the region, is there some alignment for common interests?
  - Are any of the TRUST sites WPRN members? There may be existing TRUST sites that are part of this network that Allison runs. They're largely engaged with clinical research so she

helps coordinate a number of grants around pragmatic clinical topics. We've been in touch with them, so they are aware of the student scholarship but may not realize our students are in TRUST sites and are coming back again and again.

- Students in TRUST generally want to do a RUOP experience. Maybe if they're feeling left out of research opportunities, we could offer them a Research Pathway during TRUST. They wouldn't need to move to Seattle to do research.
- We want to make it modular enough that people can take advantage even if they don't want to sign up for a whole Research Pathway.
- Students always want to do everything that is available to them. If we could have them do only certain components, it would decrease anxiety and would prevent them from feeling left out. We should help marshal their energies so that they feel like they're partaking of quite a few opportunities. It would make their efforts more efficient. There may need to be some constraints so students don't burn themselves out.

Please email [Shobha](#) with any follow up ideas.