

Joint Clinical Oversight Group – Annual Report from Clerkship Directors AY 2020-21

Discipline: Psychiatry

Site: UH

Clerkship Director: Sara Goldman MD

Update and attach Required Documents:

1. Review and update (if needed) the PowerPoint describing the current structure of the rotation. Please attach the updated PowerPoint.
2. Attach the grading/assessment rubric used in your clerkship.

Respond to Quality Metrics: (The items highlighted on your individual data form are outside of benchmark range and require discussion.)

1. Your average completion rate for mid-rotation feedback for the year is provided. Describe your plan for improvement if <100%: 96.55 for UH and VA combined. Will review weekly whether feedback completion is done.
2. Your average rate of EOR completion within 4 weeks is provided. Describe your plan for improvement if <100%: 91.95 for UH and VA combined. Will review completion at 2 weeks out, and budget to be done within 4 weeks.
3. The following ratings are provided for your clerkship. Comment and describe your plan for improvement if outside of benchmarks, indicated below:
 - Overall rating (>80% excellent or very good) 75. I have reviewed all end-of-rotation student comments, and I am currently reviewing all clerkship orientation documentation on CANVAS to make sure it is updated to reflect the student's comments about what they would like to know at the beginning of the clerkship.
 - Neglect (<5%) 0
 - Mistreatment (<5%) 2.08
You must also respond to any serious or egregious report of mistreatment regardless of your benchmark. There was one student who made me aware of one attending's mistreatment of her, by not being sensitive to her culture. The attending has been spoken to regarding this by me and by the unit medical director, after the student's rotation was over.
 - Duty hours (>95%) 97
4. Your faculty rating for teaching is provided. Please comment on faculty development needs and plans. Provide a specific plan for improvement if the number falls below 80%. (The students provide excellent feedback about specific teachers that may be helpful to understand the ratings.) 91.67

- a. Describe the process you use to review the quality of faculty teaching.
Faculty engagement is reviewed regularly through clerkship feedback as well as through EOR reports. Any areas of concern are followed up on directly and we work to place students with faculty who have strong feedback and consistently engage.
 - b. How did you communicate learning objectives of the clerkship to faculty?
They were sent the learning objective list at the beginning and the middle of the year.
 - c. How were faculty prepared for their roles in teaching and assessment?
Each faculty member was contacted in order to explain to them the medical student goals for the rotation, and to clarify how to fill out assessments.
5. Your resident rating for teaching is provided. Please comment on resident as teacher development needs and plans. Provide a specific plan for improvement if the number falls below 80%. 97.92
- a. Describe the process you use to review the quality of resident teaching. Have you identified any residents this past academic year whose teaching was suboptimal? How did you address this situation?
The quality of the resident teaching is consistently identified by the medical students as one of the best parts of the clerkship. The residents are routinely encouraged to teach, and no suboptimal teaching was identified either by myself or by the medical students.
 - b. Complete the table to describe the preparation programs available to residents to prepare for their roles teaching and assessing medical students:

Briefly summarize the program: There are lectures given during the residents' orientation about how to teach medical students, and this is addressed personally by me with individual residents as well. The psychiatry department also has a residency track which teaches interested residents about medical education, and quite a few residents are involved in that.	
Is the program optional or mandatory?	The orientation lectures are mandatory, the education track is optional.
Is it sponsored by the department or institution?	By the psychiatry department.
Who monitors participation?	The residency director and the senior residents make sure that all residents participate in the orientation sessions.

Provide Qualitative Feedback and Reflection:

- 6. With the upcoming condensed clerkships at the end of the year, how do you plan on adjusting your clerkship? What are ways the SOM can assist?

The psychiatry clerkship is 4 weeks long, of which the students spend 2 weeks on the inpatient psychiatry unit and two weeks on CL. The clerkship will be condensed to 3 weeks, and the students will then only spend one week on CL, because it is hard to learn the manifestations of the major psychiatric illnesses in less than two weeks. In terms of didactics, some of the orientation lectures will be slightly shorter. However, all weekly lectures will still be given by allowing fewer timeslots for independent study during the Friday morning didactics.

7. Are there any clinical skills and/or knowledge in which students seem underprepared?
None that I have found.
8. What significant changes were made in the rotation last year? Were they successful?
Last year, the students began to observe a recreational therapy group on the inpatient unit regarding addictions. This has been valuable for teaching the students group dynamics, as well as teaching them how to motivate patients who have addictions.
9. What themes did you identify in student feedback about strengths of the clerkship?
They all enjoy that they have lots of autonomy and are integral members of the team. They also appreciate working so closely with their supervising attendings.
10. What themes did you identify in student feedback about areas for improvement in the clerkship?
They asked for more clarification about the duty hours and clearer objectives. Many of the students also mentioned that they would like to observe outpatient psychiatry.
11. What current challenges exist in the clerkship?
Due to the recent agreement that the NEOMED students will be rotating at UH sites, there is no longer enough spots for the Case students to rotate on the Child inpatient unit, or on the medical-psychiatric unit. I am therefore trying to identify other ways to give the students similar experiences.
12. What changes are planned for next year to address both feedback from students and challenges you identified?
I will discuss during my orientation talk what the objectives and duty hours are, and where on CANVAS the students can find them to review. I am investigating ways that the students could participate in outpatient psychiatric settings, perhaps including child psychiatry since they cannot rotate on the Child inpatient unit anymore.