

2009-10-30

Meeting Information

Date:	October 30, 2009
Time:	8 PDT/11 EDT/16 CET

(NOTE: EU switches to standard time one week ahead of US)

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Attending: Kim Hoffman, Chair; Valerie Smothers, staff; Brownie Anderson, Michael Barbouche, Carol Carraccio, Bob Galbraith, Gwen Garrison, Maureen Garrity, Simon Grant, Lindsey Henson, Chandler Mayfield, Amber Montañano, John Norcini, Pat O'Sullivan, Morgan Passiment, Kevin Souza.

Agenda Items

1 Review [minutes](#) of last meeting

The minutes were approved.

2 Confirm revised schedule

Kim asked the group to review the revised schedule on the wiki. She commented that our next call would be November 6. Many group members will be unavailable due to be AAMC meeting. Brownie, Gwen, Pat, and Carol all indicated that they would not be available. Kim commented that we would bring any issues from the November 6 meeting forward to the November 20 meeting.

3 Introduction of new participants (see [working group list](#))*

Kim asked the new participants to introduce themselves.

Kevin is the assistant dean for medical education and director of educational technology at University of California San Francisco. They have worked on portfolios for five years, and he has been involved with the medical student's performance evaluation as well. He also designed the curriculum management system called Ilios. He's used standards to share information with the Currrmit curriculum management system at AAMC.

Chandler works with Kevin and directs learning technologies. He worked on Ilios and portfolios as well. They are implementing Mahara as efolio platform, which implements the Leap 2A portability standard.

Gwen is in charge of student records and graduate medical education tracking at AAMC.

Morgan is with AAMC and works with the professional develop group on information resources, which focuses on how IT is used in the healthcare education and research environment. The group has an interest in Efolios and the requirements for data transfer between organizations.

Kim provided an overview of how this project fits with larger projects. There has been a group from US medical schools interested in portfolios, their use for competence assessment, and how to share information about that from undergraduate medical education to graduate medical education and on into professional practice. At some point, these programs need to figure out how to share information with one another. The educational trajectory project is a thin slice of that larger initiative. The goal is to see if we can share information that is not readily standardized and shareable right now.

Gwen commented that student records at AAMC tracks 75,000 medical students in the United States. Enrollment status is tracked through to graduation or the end of medical education. It may be of benefit to look at the data collected within student records and the agreed upon definitions of leave of absence, academic issues, research, etc. She added that they do not collect information at a granular level.

Kim remarked that we do want to build upon work already done. So far, the group has recognized that some pieces of information would be helpful to share during transition periods. That is what the use cases focus on.

4 Review [revised use cases](#)

Valerie provided an overview of the use cases and where we are in terms of the process. Valerie commented that the use cases better define the problem that we are trying to solve. It is important to get the group consensus on the use cases in order to move forward in developing the standard. That ensures that we are all working to solve the same problem. The current use cases focus on the transition from undergraduate professional education to graduate professional education (residency). An administrator may send the data to a residency program, the residency program director may request the data, the learner may request the data, or a researcher may request the data.

Kim commented that we had changed the language in the use cases so that it would be more representative to those outside of the US, particularly the ECFMG. She added that the order of the use cases reflected the perceived priority. She asked for the group's endorsement of the use cases.

Carol commented that it would be easier to get buy-in from the larger community if there was a stronger focus on the learner. She would like to have the program director higher on the list. Lindsey asked Carol to clarify if she was referring to the learner as the person who initiates the data transfer. Carol commented that she was coming back to Bob Galbraith's notion about the learner being the owner of the data. Lindsey commented that that would influence the priority of the use cases. Pat agreed that the focus should be on the learner.

The group agreed on the following priority of use cases:

- 1 - Learner Extracts Educational Trajectory Data
- 2 - Graduate Program Director Requests Educational Trajectory Data

3 - Researcher Compiles and Examines Educational Trajectory Data Looking for Trends

4 - Administrator Sends Educational Trajectory Data to a Graduate Program

Simon commented that there would be issues around the degree of anonymization when the data is used for research purposes. EDTR 4 is fundamentally different than the other use cases.

The group agreed with the re-ordered priority and content of the use cases. No additional use cases were suggested.

5 Open discussion

Kim asked the group to turn to the recurring conversation around data related to coursework. There have been several conversations about whether or not would be helpful to annotate the coursework a student completes to compare like courses and get a better sense of what students have participated in. Another perspective is that it's more important to see whether student is fully participating in the curriculum.

Valerie commented that currently in the data analysis spreadsheet the full academic load tab has been the subject of much debate. Hours for different formats have been suggested, indicators as to whether or not the individual is enrolled part-time or full-time, etc. It's not clear what would be most helpful to students or residency program directors.

Lindsey commented that contact hours are all over the map within the US medical schools. She questioned how helpful it would be to know number of contact hours and the number of hours devoted to different formats.

John commented that what the spreadsheet proposes is right for schools accredited by the LCME. However, outside of the US, there is even greater variability. It would be nice if there were a core set of markers could be applied internationally.

Kevin asked if there were ways to equate curriculum of schools outside of the United States with those within the US. He asked whether granular detail was needed for each US and Canadian graduates.

Simon commented that there were two different questions. One was an issue of what is mandatory and what is not. Together is what to do with the data and how you collect it. He recommended that those planning to use the data give a description of what they need and how it will be used.

Kim asked John to talk a little bit about the variability among international medical schools. John commented that people often ask about the quality of different schools in different countries. It's very difficult to generate comparability. Even schools that are attempting to emulate the US medical education system, comparability is quite challenging. A set of definitions might be useful.

Kim asked if there are any lessons to be learned from current data collection efforts underway at AAMC.

One replied that they don't keep records because of the variability among medical schools. Brownie commented that they do have confidential information in the graduate questionnaire regarding where students to clerkships, but they are not able to share that information.

Lindsey commented that ultimately we wanted document focusing on achievement of competence. We have stepped back and come up with a manageable project: the educational trajectory. She expressed concerns that we were getting bogged down in trying to transmit clerkship details and is developing an international version of Currrmit. She added that the efforts of these details seem to be taking us off track

Kim commented that we've plenty of work to do in the other tabs. One way to approach the problem is to say that if it needs additional work, we will not include it in the first draft of the specification.

Carol commented that from the learner perspective, extracurricular activities are the advantage. It's what is beyond the coursework that makes them unique.

Valerie suggested involving a student organization to better get the learner perspective included in our work. Brownie suggested working with the organization of student representatives at AAMC. Maureen agreed that would be good group to include.

Kim summarized that we have more work around data definitions, sharing information, and that we will put full academic load on hold for now. This is consistent with the focus on learner driven use cases. In addition, we will invite student participation. Brownie will identify leaders and OSR. The other group to involve would be the organization of residency representatives. They have gone through similar process and could speak to what would be valuable.

Kim asked if there were similar groups outside US. John replied that there is an international group of student representatives as well. Kim commented that we could devote a future call to getting their reaction.

Kim asked Maureen to introduce herself. Maureen replied she's the dean of students at the University of Colorado at Denver. She is the vice chair of the national group on student affairs and his chairing a group on the medical students performance evaluation. The group is struggling with that letter, and there may be value in a cross conversation. Kim recommended finding a time when she, Maureen and Valerie can talk.

Decisions

- The group agreed on the following priority of use cases:

1 - Learner Extracts Educational Trajectory Data

2 - Graduate Program Director Requests Educational Trajectory Data

3 - Researcher Compiles and Examines Educational Trajectory Data Looking for Trends

4 - Administrator Sends Educational Trajectory Data to a Graduate Program

- The group agreed to invite representation from the AAMC organization of student representatives.
- Transmitting details of full academic load will be on hold for the time being.

Action Items

- Valerie will revise the use cases to reflect the group's decisions.
- Brownie will identify leaders in the OSR.
- We will invite student and residency leaders in the US and internationally to participate.
- Maureen, Valerie, and Kim will speak regarding the relationship of educational trajectory to the medical students performance evaluation.