

### Newsletter February 2012

## WMU School of Medicine Board of Directors Formed

The WMU School of Medicine Board of Directors held its first meeting in February to continue to move forward the medical school development process.

Western Michigan University School of Medicine (WMed) is incorporated as a private 501(c)(3) nonprofit corporation. The Board of Directors—comprised of representatives from Western Michigan University, Borgess Health, and Bronson Healthcare—is responsible for financial oversight, adherence to the Articles of Incorporation and Bylaws, and the appointment of faculty and administrators. The five Directors include:

John M. Dunn, Chairman of the Board, President of Western Michigan University Hal B. Jenson, MD, Dean, WMU School of Medicine Larry F. Tolbert, Marketing Representative and Secretary, Heat and Frost Insulator and Allied Workers Paul A. Spaude, President & CEO, Borgess Health Frank J. Sardone, President & CEO, Bronson Healthcare



Front Row: Frank Sardone; John Dunn; Paul Spaude. Back Row: Hal Ienson, MD; Larry Tolbert

At a later date, the Board will expand to include a representative of the WMed faculty. WMed is supported by private gifts, clinical revenue, research activity, tuition from students, and endowment income. The School has been approved by the State of Michigan as a nonpublic university with authority to grant the Doctor of Medicine degree and other healthcare related degrees. The School of Medicine is seeking accreditation by the Liaison Committee on Medical Education for the educational program leading to the Doctor of Medicine degree.

## KCMS to Transition Into WMU School of Medicine

Earlier this month, the Board of Directors of Michigan State University Kalamazoo Center for Medical Studies (MSU/ KCMS) announced its organization's formal merger into WMU School of Medicine (WMed), effective July 1.

KCMS, a collaboration between Borgess Medical Center, Bronson Methodist Hospital, and MSU College of Human Medicine, has provides graduate medical education and has been a community campus model for third and fourth-year MSU/CHM medical students since 1974. Under the terms of this merger, KCMS operations, programs, personnel, and facilities will be wholly merged into and become part of WMed. The current clinic operations, support staff, and faculty will remain at their current locations at 1000 Oakland Drive and the psychiatry clinic will remain on the Borgess campus. An ongoing relationship between KCMS and MSU College of Osteopathic Medicine will continue following the merger into WMed. MSU students in the College of Human Medicine will continue their medical training in Kalamazoo through June 2014 under a transitional affiliation agreement.

Many of the center's faculty and staff are already serving on WMed committees that are preparing documents for accreditation so the medical school can welcome its first class of students in fall 2014. Late last year, WMU announced the leadership appointments in its medical school for five key medical and operations staff members of the KCMS organization. KCMS has more than 60 physician faculty members and nearly 500 community clinical faculty members who teach over 200 resident physicians and 50 medical students each year.

# Town Hall Sessions Held on WMU Campus

Western Michigan University President John Dunn and WMU School of Medicine Dean Hal Jenson recently hosted a Town Hall session on the WMU campus to provide an update on the medical school development and answer questions from faculty, students and staff.

"Why Develop a New Medical School in Kalamazoo?"

A new medical school offers many advantages to the community, the region and the nation.

The Western Michigan University School of Medicine (WMed) will integrate medical education programs across the continuum from undergraduate medical education, to graduate medical education, to continuing medical



education. The current model of undergraduate medical education in Kalamazoo is based on two years of basic science instruction at the MSU campus in East Lansing followed by two years of clinical instruction in Kalamazoo. It is understood that this is not optimal to train physicians for the future of medicine. Providing all four years of medical education in Kalamazoo facilitates the integration of basic sciences with clinical sciences, and provides instructors and mentors across all disciplines for all four years of education.

WMed students will begin clinical experiences in the very first few weeks of medical school. Basic science elements will be included as part of the clinical clerkships. A single campus for all four years of undergraduate medical education permits developing this new curriculum that will better prepare our graduates as the physicians for tomorrow.

Training of medical students and residents is important to assure the pipeline of future physicians for Kalamazoo and southwest Michigan, and will also contribute to meeting the physician supply needs for the state of Michigan and the nation. Approximately one-third of residents will practice in the region where they train. Development of the medical school and strategic growth of the residency programs assure that we meet the physician workforce needs of southwest Michigan.

The WMed will provide opportunities for students from southwest Michigan to enter medical school. This includes graduates from Western Michigan University, Kalamazoo College, other regional colleges, as well as students from southwest Michigan who are graduating from colleges throughout the country.

A medical school in Kalamazoo provides opportunities for physicians in southwest Michigan for professional growth in continued improvement. The medical school will provide teaching and research opportunities for faculty at Western Michigan University. Faculty from across the University will have opportunities to contribute to delivering the medical student curriculum. Research faculty at the University will have the opportunity to collaborate with clinical investigators to solve problems, which would not be possible without the medical school.

Medical schools in affiliated teaching hospitals have a significant economic impact on the regions where they are located. A report in 2008 by the Association of American Medical Colleges (AAMC) found that the annual economic impact of medical schools and their affiliated teaching hospitals was \$512 billion. In Michigan, total economic impact in 2008 was estimated at over \$24 million, with over 150,000 employees. (Association of American Medical Colleges: The Economic Impact of AAMC-Member Medical Schools and Teaching Hospitals. 2008.) A medical school will contribute to improving the health of the communities in southwest Michigan.

## What is Active Learning and Why Is It So Important?

Eli Collins-Brown EdD, Department of Medical Education, WMU School of Medicine



Your golden lab puppy is raring to go! Let's play, play, play! You think 'I don't have time to take a <sup>1</sup>/<sub>2</sub> hour to play with the pup!', but you can't resist that wagging tail and the puppy dog eyes. So you trudge outside and begin tossing the ball. Back and forth, back and forth, back and ... wait a minute! She spots the tug-o-war rope and immediately drops the ball and grabs the rope. She races around your legs a couple of times and then lies in front of you, just daring you to grab the rope! A fierce battle ensues, accompanied by much growling on both parts, for about a minute, maybe two and then she's done. She rolls over for a belly rub and an "Atta Girl" pat and rub. The dreaded 30-minute play session is over in eight minutes! All she needs now is a treat and she'll come quietly into the house and lay at your feet.

Wow, she reminds you of your students! Well, maybe not the belly rub or laying at your feet, but they are all raring to go when you start your lecture and then one by one, you see them fall after

10, 15, 20 minutes. Only part way into the class time, you know you've lost them, heads perched on arms, sleeping, doodling, or Facebooking, and you wonder what happened!

Common knowledge says that the average dog has an attention span of 15 minutes, puppies even less. And human teenagers and adults have an average attention span of 12 minutes, up to 20 if they are using focused concentration to perform a task, such as washing crystal stemware or playing a game (which could engage them for hours!). When we think about how we teach our students, what do we cover in the first 12 - 15 minutes of our lectures? Food for thought!

Active learning is a way to keep your students engaged, alert and involved in the learning throughout the class session. "Active learning is anything students do during a class session other than passively listen to a lecture: i.e., read, write, discuss, or engage in problem-solving. Typically, these strategies involve students in such higher order thinking tasks as analysis, synthesis, and evaluation. These activities can replace lectures as a means of conveying information or they can supplement lecturing. They can range from something as simple as a brief writing exercise in which students react to lecture material to more complex activities such as problem-based learning or the use of case studies." <u>http://oir.fod.msu.edu/oir/</u><u>TeachingMethods/active-learning.asp</u>

As the School of Medicine writes the self-study and application for LCME accreditation, we notice the emphasis that they are making on active learning, specifically asking for learning activities that will be used through the course that are classified as active learning. We have identified a number of instructional methods that promote active learning that are being designed into the courses and clerkships:

Interactive Lecture - Interactive lectures are classes in which the instructor incorporates engagement triggers and breaks the lecture at least once per hour to have students participate in an activity that allows them work directly with the material. The engagement triggers capture and maintain student attention and the interactive lecture techniques allow students to apply what they have learned or give them a context for upcoming lecture material. The goal of interactive lecture is to engage students by finding ways for them to interact with the content, the instructor, and their classmates. Accordingly, interactive lectures include segments of lecture combined with segments where students interact. One of the things that make the lecture interactive is the ability of the instructor to choose the content of the lecture segments based on the students' needs.

**Team-Based Learning** (TBL) - A structured form of collaborative work using a specific sequence of individual work, group work and immediate feedback to create a motivational framework in which students increasingly hold each other accountable for coming to class prepared and contributing to discussion. TBL will be used to connect knowledge and processes to solve complex problems and to integrate newly acquired concepts into real world application scenarios. A TBL will begin with individual preparatory work and an individual readiness assurance test (IRAT) to be completed before the class meeting. During the class meeting, the large group will break into smaller teams and be assigned the same application exercises are designed to encourage the learner to use material learned outside of class to solve ill-structured problems. Each team then takes the group readiness assurance test (GRAT). All of the teams reveal their answer to the application exercise simultaneously, resulting in energetic conversation between teams, as each teams seeks to justify their answer. Teams are held accountable for the work by writing an explanation for the answer to the application exercise, which is later graded by the course instructors.

Simulation-based Learning (SBL) - A common definition of a simulation is a reproduction of an item or event. Simulations can be produced in all fields through computer games, role-plays, or building models, to name only a few. But a true simulation has a specific goal in mind—to mimic, or simulate, a real system so that we can explore it, perform experiments on it, and understand it before implementing it in the real world. Because so many of the things we need to understand these days are either too complex, too vast, too small, too far, or too dangerous to be experienced directly, we can no longer rely, as we did for so long, on hands-on learning. Simulation provides a safe way for students to learn and practice skills.

**Integrated Learning** – An instructional format that uses a combination of instructional strategies; for example, interactive lecture and PBL for a given learning experience.

**Blended Learning** – The use of online/web-based learning activities to replace some of the 'seat time' in the classroom. For example, short, succinct lectures are recorded and viewed by the student as part of class preparation. Instead of meeting face-to-face for a 4 hour session in which the first hour would be lecture, the class would meet for a 3 hour session and engage in TBL, SBL, PBL or Integrated Learning activities.

**Classroom Assessment Techniques (CATs)** – Formative assessment opportunities conducted during class that allow both the students and the instructor to get an accurate picture of the level of comprehension at that point in time. These can be facilitated in a number of ways; through the use of classroom response systems (clickers), end of class summaries, or self-assessments completed at the end of a major topic. These are used as learning activities as they provide the student with information they can use to identify their own learning needs and a plan to meet those needs.

There are many ways to create a more 'active' class that will help your students to focus and concentrate of what they need to learn by keeping them engaged and involved in that learning process. Resources:

"Active Learning: Creating Excitement in the Classroom," Charles C. Bonwell & James A. Eison. Discusses the value of active learning and ways it can be incorporated into the classroom.

<u>Active Learning for the College Classroom</u>, Donald R. Paulson & Jennifer L. Faust. Describes 29 active learning techniques. <u>Focusing On Active, Meaningful Learning</u>, Ann Stalheim-Smith, iDEA Paper, No. 34

Active and Cooperative Learning

Michigan State University, Office of Faculty & Organizational Development, Online Instructional Resources

## **Employment Opportunities**

Recruitment is underway for three faculty positions in the WMU School of Medicine. Current employment opportunities include a Chair of the Department of Biomedical Sciences, Chair of the Department of Family Medicine, and Chair of the Department of Medical Education. We also have a staff position opening for an Engagement Manager. More detailed information about these positions and on future positions is available at <a href="http://www.wmich.edu/medicine">www.wmich.edu/medicine</a> in the Employment section.

#### **OUR MISSION**

The mission of the Western Michigan University School of Medicine is to advance the health of humanity through excellence in medical education, clinical care, research, and service. These pursuits are interdependent and together assure optimal care for today and hope for tomorrow.