



## ***Enhancing Neurology Clerkship Engagement: The Impact of Peer Review Processes***

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The primary purpose of this article is to inform readers about the recently concluded peer review process for the Neurology clerkship. This rigorous assessment is conducted every two years. The five common goals of the peer-review process are: (1) to promote reflection; (2) to assess course quality and currency; and (3) to identify areas for improvement; (4) to improve student learning; and (5) to obtain peer feedback.

The overall clerkship year plays a pivotal role in shaping the future of medical students, providing them with essential insights into the complexities of medicine; while teaching them how to translate academic knowledge into clinical practice through direct patient care. In the case of the Neurology clerkship, it takes a deeper look at the nervous system and its myriad disorders.

The rigorous and systematic peer review process incorporates diverse assessment and evaluation data, for example, grade distribution, Clinical Evaluation Tools (CET), end-of-clerkship evaluation, Graduation Questionnaire (GQ), and analyses of comparability of education across various sites. We adopt a holistic approach in reviewing our clerkship to continuously improve and meet the goals of undertaking this process.

It's not feasible to list all the observations and recommendations made by the peer review committee in this article. However, one of their observations included confirming the feasibility of action items within our current resources. The three action items identified based on the review of various data are: (a) improve resident teaching and feedback; (b) add clinical sites to increase capacity; and (3) ensure improved grading comparability across sites.

## ***The Developing Human is the First Phase 1 Course to Undergo the New Peer Review Process***

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The course leaders of The Developing Human (TDH) recently performed a rigorous review of the course through the Peer Review process. This process takes place every two years for each course and clerkship as part of the Curricular Outcomes Evaluation Process. This process adds another tool in addition to the yearly course reviews, in the evaluation of the educational outcomes in Phase 1.

As Director and Co-Director of TDH, Dr. Jennifer Zepf, DO, FASCP, and Dr. Antonia Oladipo, MD, MSCI, FACOG led the effort. First a Self-Assessment Team was assembled to analyze an array of data sources relating to course outcomes. Using these data, the team generated narrative responses to describe and draw conclusions about the course performance. Finally the team generated proposed action items for implementation in the next academic year and submitted their report to the Phase 1 Curriculum Subcommittee.

Next, a Peer Review Team consisting of members of the Phase 1 and Phase 2 curriculum subcommittees provided a review of the Self-Assessment. This team provided invaluable feedback on the course that was then presented to the Phase 1 committee for discussion and comment. The Phase 1 Chair then presented the final recommendations to the Medical Education Committee for further input and feedback.

## Student Feedback Informs the Human Dimension Course Evolution

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The Human Dimension (HD) program is a unique element of the SOM curriculum. This longitudinal course enables students to understand many determinants of health through the service learning experiences and integrated curriculum. As we are committed to the concept of continuous quality improvement, we incorporate feedback received from various stakeholders, including students, faculty, and community members. The HD curriculum continues to grow and change meeting the evolving needs of the stakeholders.

A specific example of change pertains to the HD Phase 1 large group learning sessions. Based on student feedback, a decision to implement changes to Phase 1 HD mornings was made. This new model, piloted in 2022 and continued in 2023, includes a panel of patients, physicians, community leaders, multidisciplinary leaders and other content specialists.

Students have continued to respond favorably to this new Phase 1 HD mornings structure. Additionally, the findings demonstrate that this new structure has been effective in meeting the learning objectives of the sessions. Students also felt session topics and content were valuable, important, educational, and informative.

Based on the review of thematic analyses, feedback pertaining to the strength of the program significantly outnumbered feedback pertaining to areas of improvement by a ratio of 2:1. Over 220 comments focused on strengths, while only a little over 100 comments focused on improvements. Majority of the positive feedback reflected on the quality of the panel. Some of the specific examples of positive comments include:

- *“The presentation and panel were very thought provoking and allowed for good understanding of the social and healthcare factors influencing the wellness of pregnancy.”*
- *“I also thought this was a great panel with a lot of interesting perspectives/approaches to the topic”*
- *“The guest speakers were very helpful in understanding the clinical applications of what we were learning this week!”*

We will continue to maintain the dynamism of this course by being flexible and continuously update our curriculum based on the feedback we received from various stakeholders.

See word cloud above.

The word cloud below demonstrates the top 15 strength themes that emerged from the data. The larger words represent stronger themes.



## The Developing Human is the First Phase 1 Course to Undergo the New Peer Review Process (continued)

Overall this more detailed look at the course reinforced the course directors’ approach to integration and clinical contextualization of basic science content. In addition, opportunities for Phase 1 and Phase 2 integration were highlighted and discussed throughout the Phase 1 and Medical Education Committee meetings. Improvements are currently being incorporated into planning for the Spring 2024 course as a result of these discussions.

## Enhancing Neurology Clerkship Engagement: The Impact of Peer Review Processes (continued)

An example of how the peer review committee provides recommendations based on the responses provided by the neurology clerkship team is described here. Question number 8 on the peer review form reads, *Comment on how Phase 1 curriculum (e.g., basic science, clinical skills, HD, HSS, complex learning) have prepared learners for your clerkship.* The peer review committee agreed with our response by adding, *“Agree with proposed changes that would allow increased exposure of students to musculoskeletal system, spinal cord pathologies, neuro-ophthalmology, and peripheral neuropathy by updating the core curriculum vignettes to cover more high yield topics seen on the neurology shelf.”*

Overall, the peer review committee commended the Neurology clerkship as ‘well-run, organized and educationally robust clerkship.’ We have identified indicators of success for each action item. By successfully implementing the action items and recommendations of the committee, we aim to further fortify our clerkship, fostering a conducive learning environment for our students and enhancing their educational and clinical experiences.