



## **Longitudinal Integrated Clerkship Program Frequently Asked Questions**

The University of Vermont Larner College of Medicine offers two rural longitudinal integrated clerkships (LIC): One at the Hudson Headwaters Health Network, headquartered at Queensbury, New York and another at Central Vermont Medical Center in Berlin, Vermont. The current medical curriculum is comprised of 3 levels: Foundations (first 17 months), Clerkship (next 12 months) and Advanced Integration (final 14 months). LIC students will complete the clerkship level at one of these sites in the same timeframe as the block clerkships. Students may elect to do some individual electives at the site during Advanced Integration, but this will not be required.

### **How will students be selected for the LIC program?**

Students will apply for participation in this curriculum by September 14th by completing an application form, and then have an interview with the LIC governance committee to determine suitability for this curriculum. Students selected for this curriculum will be in good academic standing, have an interest in rural medicine, enjoy autonomy, will have the maturity to work independently, display resiliency, have an interest in the participating in the community, and an interest in collaborating with faculty to improve the student experience.

### **How will the LIC compare to the traditional clerkship rotations?**

The curriculum will have the same core educational objectives, course requirements and similar instructional and evaluation methods as students completing their course work in the traditional block clerkships. The major difference is that students at the LIC sites will meet the objectives of each clerkship in a longitudinal manner rather than in the traditional block schedule. Students will be embedded in primary care practices with primary care faculty physicians, and will also be assigned faculty preceptors in the required disciplines of internal medicine, pediatrics, surgery, Ob/Gyn, psychiatry, and neurology. Students will work with their preceptors to record patient encounters, participation, settings, and achievement of the competencies to ensure that they are meeting the same core requirements as traditional clerkship students. In addition, students will demonstrate developmental competencies essential for a primary care curriculum.

Students will:

1. Demonstrate the principles of patient advocacy as they follow the course of illness over time for a defined panel of patients.
2. Apply a broad and holistic perspective to patient's problems, by caring for patients with undifferentiated illness.
3. Participate in effective models of care coordination by participation in multidisciplinary teams.

4. Employ advanced communication skills by learning to engage patients in shared decision making.
5. Demonstrate the understanding of use of practice systems to triage, treat and follow up on medical visits.
6. Describe the Chronic Care Model as they demonstrate the appropriate diagnostic approach to chronic illness.
7. Apply screening tools, and life style counseling to advance wellness and prevention.
8. Demonstrate principles of disease management in common psychiatric conditions in the ambulatory setting.
9. Engage in patient-centered problem solving with other professionals.
10. Develop a community-specific health promotion project.

### **How does the LIC program work?**

Students will be assigned to a group of primary care faculty physicians at the home practice site, who will serve as their primary preceptors for the entire year; students will also have dedicated faculty preceptors from within these respective health systems to ensure adequate instruction in Family Medicine, Surgery, Ob/Gyn, Pediatrics, Internal Medicine, Psychiatry, and Neurology. Working with their preceptors, students will progressively develop a panel of patients to satisfy all required clinical encounters needed for clinical instruction in the clerkship level. Students embedded in primary care clinics will participate in providing comprehensive care to their patients, including wellness, acute care, and chronic care. They will work with interprofessional teams of physicians, nurses, social workers, pharmacists, and mental health workers in the emergency room, the hospital, subacute rehabilitation centers, hospice, and home care.

Clerkship students on average will participate in no more than 80 clinical hours per week. Of these, approximately 16 hours per week will consist of unstructured time to allow them to participate in course work, discipline-specific lectures or to follow their patients into other settings, e.g. consultations, tests or procedures. Students will assist in patient navigation, providing continuity and communication between all providers of medical care. Students will see patients in ambulatory settings in all of the required disciplines. Required inpatient experiences will be accomplished by using “burst weeks,” in which students will leave their ambulatory home base and participate in inpatient, discipline specific, experiences with specialty preceptors. Burst weeks will take place at the hospitals associated with the sites.

### **How will the didactic portions of the Longitudinal Integrated Curriculum campus be delivered?**

Currently all UVM clerkship didactic material is delivered via synchronous and asynchronous videoconferencing. All students have access to remote learning resources via their computers as well. This content will be included in the LIC and students will be responsible for all material delivered in lectures. The primary difference for these students is that the lectures will be attended in a different sequence. Students will have time to participate in the didactic portion of the clerkships. Students will access didactics via their UVM-issued laptop computers similar to traditional block clerkship students. UVM has had extensive experience with this technology and students routinely participate in synchronous lectures at distant clerkship sites, with full live participation. Additional didactic materials reflecting the additional LIC learning objectives, will be delivered on-site by preceptors and visiting faculty.

## **How will students be assessed at the LIC?**

*Summative Assessment:* The assessment methods will be similar for all students at the main and remote campuses. The timing and forms used for assessment will be different, reflecting the differing clerkship structures. In the LIC, there will be quarterly summative assessment periods. Students will be graded in each of the disciplines that comprise the LIC. All clerkships at UVM have a common set of competencies that are assessed using a standard set of criteria. For summative assessments in the LIC, the clerkship site director will compile the preceptor assessments and compose a narrative of the student's performance. Clinical performance is assessed using the 6 curriculum competencies adopted by the faculty for all clerkships. To ensure comparability, the Universal Clerkship Assessment form, used for traditional block clerkships, has been modified for use in measuring competencies in clerkship disciplines (e.g., medicine, surgery, etc.) that are required in the LIC. The clinical work contributes 70% to the student's final clerkship grade for each discipline. The remaining 30% of the grade is determined by performance on quarterly cognitive assessments which consists of written exams (in most cases NBME subject exams), and multidisciplinary clinical skills assessments (simulation and standardized patients). Thus, by the end of the clerkship year, the LIC students will have completed all of the same examinations, and similar clinical skills assessments required of traditional clerkship students. At the end of the year, the LIC grading committee will review all students' clinical progress and provisional grades for each discipline and will assign a summative grade for the LIC. Students will receive final summative grades in each clerkship discipline (Pass, Honors and Fail).

*Formative Assessment:* The students in the LIC will receive routine, daily formative feedback in the ambulatory clinical setting. In addition, a formal formative feedback structure of Monthly, Quarterly and Yearly assessments will ensure that students are well informed of their academic progress.

## **What about housing for LIC students? Are room and board provided?**

Shared student housing will be provided at HHHN LIC Site at no cost to the student.

## **What if I change my mind? Can I opt out of the LIC program after I've started?**

Students will be permitted to opt out of the LIC with permission from the Associate Dean for Students. Leaving the LIC may delay entry into the traditional block clerkship and loss of scholarship.

## **What access will I have to library resources?**

All students, regardless of location, can connect to Dana Medical Library resources remotely using school-issued laptops and tablet computers. The number of primary users are served by 7.5 FTE employees and 1.5 student workers. All online resources of the Dana Medical Library are available electronically to Larner College of Medicine students at all sites. Dana Medical Library provides access to several journal databases, electronic textbooks, and other clinical tools. All databases can be accessed off-site using your UVM NetID and password. All of the library's journals are online. Articles from journals that the library does not subscribe to can be obtained from other libraries for free. Approximate turnaround time is 48 hours, but may be less depending on the time of the year and the item being requested. Librarians are available to answer questions about resources or to assist with research questions via phone, email, or video conferencing.

## **What are the resources for Study Space and Wellness?**

Each student will be afforded desk space in their principle primary care location. For wellness, each student will be eligible to participate in employee wellness plans and each student will have access to fitness facilities in the community. Most ambulatory facilities have break rooms, and kitchen facilities. All students will be provided with a secure locker or comparable facility at all clinical care locations.

Each student cohort will appoint a Wellness Ambassador. That student will update and distribute information about local wellness-related activities and resources to the LIC group. The Wellness Ambassador will connect with the Director of Student Support at the OMSE once a month to check in about wellness-related issues for the LIC. The Wellness Ambassadors will have access to support and consultation from the COM Wellness Committee and can participate remotely at a Wellness Committee meeting. The students will have access to the Wellness Newsletter. On-line wellness resources will also be available for all students at the Office of Medical Student Education website.

Each student group will meet with a mentor that will provide community support with ongoing personal and professional concerns. This mentor will not be involved in student assessments. Resources will be provided for local opportunities for access to fitness, cultural, and spiritual activities.

### **How will LIC students participate in clinical simulation assessments?**

The Clinical Simulation Laboratory in Burlington VT will be the site of all clinical simulation assessments. LIC students will return to the UVM Larner College of Medicine to use the UVM Clinical Simulation laboratory quarterly. Cognitive assessments, such as the NBME subject exams, will be arranged at a location convenient for the student. Some of the clerkship exams can be taken on site. Arrangements will be made at the Student ACCESS office for students requiring accommodations for their exams.

### **What are the IT Services for LIC students?**

Students will arrive at the site with school-issued laptops and tablets. Students have access to private wireless infrastructure, which is essential for real-time clinical learning. The site can support the delivery of content, assessments, and evaluations. Site specific reporting and analytics will help ensure comparability of the curriculum design and delivery. All UVM Larner College of Medicine-based electronic learning tools and administrative systems will be extended to the campuses but customized to support the optimum delivery of the clinical curriculum. In order to ensure the comparability and completeness of the clinical education experiences, students will track their experiences through a web-based clinical competency tracker. In this system, the student will document details of interactions with patients, completion of procedures and achievement of patient-care competencies. All data will be reported to clerkship and site directors and be available to curriculum leadership.

### **Will LIC students have the opportunity to interact with residents during a required clinical experience?**

There are currently no residency programs at HHHN. At CVMC some disciplines do have UVMCC residents completing rotations. Students will receive adequate exposure to residents during the subsequent Advanced Integration level. In this level, all students are required to take the following month-long courses at UVM Larner College of Medicine: acting internship in internal medicine, an additional acting internship in the specialty of their choosing and a surgical specialty selective at the home campus. Each of these required experiences are taught in ward teams that include resident

physicians as teachers. Thus, each student will have significant resident physician exposure during their required education.

### **How will student services be provided for LIC students?**

*Financial aid:* The University of Vermont's Student Financial Services (SFS) department serves all clerkship students at all locations (including main campus) remotely during their clerkship year. The SFS department has designated, full-time employees who specifically serve medical students in relation to general financial aid processes and awards, billing, debt management, financial literacy, and budgeting. A Medical SFS Coordinator will be available seven days per week via phone, email, and Skype to assist medical students. Depending on the student's needs while on the LIC, SFS counseling is either performed one on one or in a group setting, such as webinars. Financial aid packaging and awards will be adjusted based on the financial needs of their location.

*Student Health:* All students are currently required to carry University sponsored health insurance or to sign a waiver and provide proof that they possess comprehensive health insurance. The University health insurance policy is CIGNA. Per UVM policy, faculty must exempt themselves from the assessment of students they treat. Arrangement have been made for students to use primary and mental health care providers who are not UVM Larner College of Medicine faculty. Faculty who treat a student will recuse themselves from grading the student. All students are provided with disability insurance free of charge through the University of Vermont.

There will be dedicated primary care physicians to provide medical care to medical students. They will not be involved in educational assessments. Students will also be given a list of local primary care physicians not associated with the educational program.

*Personal counseling:* The University Center for Health and Counseling provides comprehensive medical care and counseling. Psychological assessment and individual and group counseling services are provided at no charge to students. Students are instructed to contact UVM Counseling and Psychiatric Services who then work with providers at the LIC site to provide mental health services to our students at no charge. These providers utilize a screening process with referral to licensed counselors, psychologists, and psychiatrists.

*Tutorial assistance:* The Office of Medical Student Education employs a full time Director of Student Support dedicated to the academic success of our students. In addition to individual meetings, the staff provided class presentations on the topics of Work-Life Balance, Building Resiliency, Suicide Prevention and Awareness for Medical Students, USMLE Step 1 & Step 2, study and examination skills training. This division also oversees the student tutoring program in which tutors are trained, assigned to students, and then monitored. These services will be available to the LIC students. Preceptors serve the role as mentors at the LIC site. In addition, students will select a specialty advisor prior to scheduling their Advanced Integration year. These specialty advisors will be UVM Larner College of Medicine faculty who will work with their mentors at the LIC.

*Career advising:* Career advising is overseen by the Associate Dean for Students. The career advising program in the M3 and M4 years is comprised of a series of mandatory M3 class presentations on topics including Careers in Medicine, M4-year scheduling, exposure to specialties, developing a curriculum vitae and personal statement, interviewing skills, the application process (e.g. ERAS, NRMP, etc.) and related matters. These sessions will initially be simultaneously telecast live to the LIC site with a transition to on-site presentations by UVM Larner College of Medicine administration and faculty over

time. All M3 and M4 students select a Career Mentor who is responsible for meeting with students and assisting them with the M4 schedule and specialty/residency program selection issues.