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INDEPENDENT STUDENT ANALYSIS REPORT FOR THE LIAISON COMMITTEE ON MEDICAL EDUCATION

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Independent Student Co-Chairs:

MS4: John Lofrese, Gabrielle Ritaccio

MS2: Michelle Gorbonosov, Michael DePasquale

Independent Student Analysis Members:

MS4: Hannah Charland, McKinzie Neggers

MS2: Kendal Glynn, Leanne Graf, Mary Beth Gadarowski

Faculty Advisor: Lauren Germain, PhD

Contents

Introduction.....	3
Survey Development.....	3
Data Collection and Analysis.....	3
Report Writing and Editing.....	3
Student, Faculty and Administration Relationships.....	4
Student Learning Environment and Opportunities	4
Library and Information Resources	7
Student Services.....	7
Medical Education Programs.....	9
Preclinical Education.....	10
Clinical Education.....	10
Overall Education.....	12
Student, Faculty and Administration Relationships.....	14
Student Learning Environment and Opportunities	15
Student Learning Environment and Opportunities (cont.).....	16
Library and Information Sciences.....	17
Student Services.....	18
Student Services (cont.)	19
Medical Education Program – Preclinical	20
Medical Education Program – Clinical.....	21
Medical Education Program – Overall	22

Introduction

The following report contains the results of the Independent Student Analysis (ISA) conducted between October and November of 2017 as part of the Liaison Committee on Medical Education (LCME) self-study process at State University of New York (SUNY) Upstate College of Medicine. This study was conducted in order to satisfy the requirements of the LCME in the re-accreditation process at SUNY Upstate. The ISA committee consisted of four student chairs and five additional members. A faculty liaison from the Curriculum Office aided the committee with survey design and data analysis.

Survey Development

The development of the survey was guided by Appendix D in the LCME document, “The Role of Students in the Accreditation of Medical Education Programs in the U.S. and Canada” ([LCME Guidelines and Procedures](#)). The committee added questions that we felt were important to gain insight into SUNY Upstate’s specific programs, including questions evaluating the satellite clinical campus in Binghamton, to ensure students felt their experiences were satisfactory and comparable across SUNY Upstate College of Medicine campuses. Gabrielle Ritaccio created the survey on Survey Monkey® and the other committee members edited the survey before releasing it to the student body. The entire survey ranged from a total of 76 to 86 questions depending on the year of the respondent. The majority of responses were on a likert scale with four response options – very satisfied, satisfied, dissatisfied, and very dissatisfied. Six questions were categorical and one question used a narrative response for additional student comments.

Data Collection and Analysis

The survey was constructed using Survey Monkey®, a web-based survey tool. It was made available to all students through their school-based email addresses. The email provided individual links based on the email address to ensure students were able to complete only one survey at their convenience. Once the link was accessed, responses to the survey were saved, and completion rates were tracked.

In order to increase student participation, incentives were offered from the Curriculum and Dean of Medical Education Offices. These incentives included randomly selected individual prizes drawn weekly, travel mugs provided for the first four hundred students that completed the survey, class funds based on participation rates, and free lunch events where students were given the opportunity to complete the survey.

A total of 583 students responded, representing 85.3% of the student body. 88.9% of first year students, 84.4% of second year students, 79.3% of third year students, and 88.5% of fourth year students completed the survey. A total of 81% of students who spent the third year at the Syracuse clinical campus and 92% of students who spent the third year at the Binghamton clinical campus responded to the survey.

Report Writing and Editing

Following completion of the data collection and analysis, the committee reconvened and discussed how to interpret the data. It was determined that “satisfied” and “very satisfied”

responses would be aggregated into a single “satisfied” category, and “dissatisfied” and “very dissatisfied” responses would be aggregated into a single “dissatisfied” category. The committee decided that areas in which greater than 90% of the student body was satisfied would be considered an area of strength and those in which greater than 20% of the student body was dissatisfied would be considered an area for improvement. Three co-chairs of the committee, Michelle Gorbonosov, Mike DePasquale, and John Lofrese, were assigned with compiling the report while the remaining co-chair and committee members edited the final version.

Student, Faculty and Administration Relationships

Accessibility of medical school faculty and student participation of students on key medical school committees was rated highly by all years (in both domains, 96% of the student body was satisfied). Participation of students on key medical school committees showed a significant increase in satisfaction between third and fourth year students compared to first and second year students ($p = 0.002$), signaling growing student participation in the college’s growth and success.

Office of Dean of Students

Greater than 90% of the student body find the Dean of Students, Dr. Julie White, accessible, aware of student concerns, and responsive to students’ problems. On average, first and second year students rated these items higher than third and fourth year students, though these differences were not found to be significant. Of note, 94% of M4 Binghamton students were satisfied with the Dean of Students at Binghamton, Dr. Thomas Swoboda, but only 33% of M3 students were satisfied with his performance. This appears to be a specific event-related phenomenon, and Dr. Swoboda will be stepping down after this academic year, which should be considered during the self-study process.

Office of the Associate Dean for Medical Education

Greater than 90% of the student body was satisfied with the accessibility of the Associate Dean for Medical Education, Dr. Paul Ko. While students felt that the Dean was aware of student concerns, over 20% of the M3 and M4 classes were dissatisfied with the Dean’s responsiveness to student concerns. Responsiveness to student problems showed a statistically significant difference ($p < 0.001$) between third and fourth-year students (78% satisfied) and first and second-year students (94% satisfied). This problem should be addressed, so students feel comfortable bringing concerns to faculty and administration before they become systems-wide problems. Students in Binghamton were also satisfied with the Associate Dean for Medical Education at their campus, Dr. Rajesh Dave.

Student Learning Environment and Opportunities

SUNY Upstate consistently provides a safe and successful learning environment for its students. Students are overall satisfied with the learning environment and opportunities available through SUNY Upstate, with many criteria rated above 90% satisfied/very satisfied. Students are very satisfied with adequacy of the medical school’s student mistreatment policy (95%), adequacy of the mechanisms to report mistreatment (96%), adequacy of medical school activities to prevent mistreatment (92%), adequacy of safety and security of instructional sites (97%), adequacy of lecture halls, large group classroom facilities (95%), adequacy of small group teaching spaces on campus (96%), adequacy of educational/teaching spaces at hospitals (93%), and access to service

learning/community service opportunities (98%). Greater than 90% of the first-year class rated all items in student learning environment and opportunities section as satisfied or very satisfied.

Diversity and inclusion are a central part of the mission of SUNY Upstate. Students are overall satisfied with the diversity of the student body (89%) and faculty (85%), though there is always room to improve in these domains. This year, each medical school class elected a Multicultural Representative who works directly with the class to discuss unintentional bias in the curriculum, presents questions and concerns of under-represented students to the administration, and serves on the Dean's Diversity Advisory Committee. This position is one of the many ways SUNY Upstate continues to engage and support students who self-identify as being from groups historically underrepresented in medicine or who are economically disadvantaged.

Other questions in this section dealt with student spaces on the medical college campus and at clinical sites. Of note, there were two items that showed a difference between Syracuse and Binghamton campuses. 77% of students at Binghamton were satisfied with the adequacy of student study space at the hospital and clinic sites, while only 62% of Syracuse students were satisfied in this area ($p=0.002$). 87% of students at the Syracuse campus felt satisfied with the access to secure storage space at the hospital and clinical sites, while only 69% of Binghamton students were satisfied in this area ($p=0.053$).

Strengths – Beginning in first-year orientation, students are regularly informed on how to report mistreatment and whom to speak with about possible mistreatment. The MedHub evaluation system allows students to anonymously report mistreatment, and provides the administration with the proper information to conduct a prompt investigation into the report. In addition to policy reminders during orientation for each course and clerkship, the policy is clearly stated in each course syllabus and is available on the Upstate website. Overall, students are very satisfied with the mistreatment policy (95%) and mechanism to report mistreatment (96%).

Students are very satisfied with the safety and security at instructional sites (97%). Public Safety is a major priority for SUNY Upstate. Security guards are stationed immediately within the main entrance of Weiskotten Hall and in the hospitals in Binghamton and Syracuse. They are available to answer questions as well as escort students, by foot or vehicle, to nearby housing. The security office phone number is visible on the campus walls and available on the school's website. The Chief of Police, Paul Waltz, has attended numerous SUNY Upstate Student Government Meetings to inform students how to contact the security office and provide information about the goals and responsibilities of the department.

SUNY Upstate provides an array for service learning and community service opportunities for its students. We have a Center for Civic Engagement (CCE) that supports a multitude of activities within the local community. Students can volunteer at different clinics, including the Rahma Compassionate Care Clinic and the Helping Hands for Forgotten Feet Clinic, and participate as mentors in mentorship programs, including the Medical Education for Diversity Students (MEDS) program and Children's Health After-school Mentorship Program. The CCE office encourages and supports new groups that students want to begin that are focused on helping the Syracuse community and population. Overall, the student body is very satisfied with the opportunities offered at Upstate, including students who are at the Binghamton Clinical Campus.

Areas for Improvement – While students are overall satisfied with their experience and opportunities at SUNY Upstate, there are a few areas within the learning environment of the school that can be improved for the future. The only area in which greater than 20% of the student body was dissatisfied with the learning environment at SUNY Upstate was the adequacy of student study space at the hospitals and clinical sites (24% dissatisfied). The school has been working with the hospitals to find additional spaces for students and has a newly renovated lounge and call room that are specifically for students. When concerns were presented to administration over the past academic year, appropriate action was taken and a printer and HIPPA compliant shredder box were added to the student lounge at Upstate University Hospital. Students would also like to see these areas expanded to include more computers and designated quiet areas.

A notable trend seen in the data is that third year medical students are the least satisfied in comparison to their peers in other classes within the domains relating to student learning environment. M3 students were the most dissatisfied class in regards to the adequacy of student relaxation space at the medical school campus (27%), adequacy of student study space at the medical school campus (23%), adequacy of student study space at hospitals/clinical sites (42%), and adequacy of support (training, connecting to mentors, funding, facilities, etc.) to conduct successful student research (24%). Despite these trends in the quantitative data, there were few qualitative data to explain these metrics. The committee feels that these data capture the sentiment shared by that class due to its immediacy, as they are the only class consistently in the hospital during the time of this survey.

The fourth year class also rated adequacy of student study space at hospitals/clinical sites (25%) and adequacy of support (training, connecting to mentors, funding, facilities, etc.) to conduct successful student research (21%) as areas that need improvements. SUNY Upstate has been working to improve the study and relaxation spaces at the medical school campus and hospital, with additions of the New Academic Building and reconstruction in the Health Sciences Library. Dean Julio Licinio, who was recently hired in 2017, has made student research initiatives one of his top priorities. He has committed to increasing financial support for more students to attend and present their original research at national conferences.

The second year students were unsatisfied with access to secure storage space for personal belongings at hospitals/clinical sites (24%) and adequacy of student study space at the medical school campus (22%), though these were not remarked on in qualitative data. The committee believes these ratings may be explained by the fact that while second-year students have personal lockers on the medical school campus, there is no additional locker space in the hospitals. Some students may find it difficult to go to their lockers on campus before clinical experiences in the hospital, but the fact that these buildings are connected should make it easier. If the school could work with the hospital to connect the 7th floor corridor directly with the bridge to Weiskotten Hall, it could improve foot-traffic and increase student satisfaction. In terms of study spaces at the medical school campus, the library has been under renovation all year. While the librarians and administration have made an effort to schedule the heaviest construction during times that the library is closed and less busy, noise level does rise, which distracts many students while they

are studying. This is a temporary change, however, that will not be present next year and students will hopefully be very pleased with the renovation.

Library and Information Resources

Students across all years were satisfied with the library and information resources at SUNY Upstate. During the year of the student analysis report, the Health Sciences Library at Upstate was under construction with planned completion by September of 2018. As a result, many students commented in other sections of the survey on the necessity for additional spaces for studying and group learning while the renovation is underway. Greater than 90% of the student body was satisfied with all items related to the library and information services at SUNY Upstate. Although most students were satisfied or very satisfied with the library and information resources at Binghamton (84%), it was still recommended in comments that students need study spaces at the Binghamton campus. One comment stated that students were encouraged to go to the clinical campus library as the Wilson General Hospital library is small and crowded, but the clinical campus is quite a distance away from the hospital.

In addition to the questions regarding our library resources, the committee included a question on Kaplan resources that are made available to all students. Student tuition includes a mandatory fee for Kaplan study materials including textbooks, online lectures and online question banks. As the market for NBME subject exam and STEP exam study materials continues to grow, the committee felt it was an opportunity to gauge student satisfaction with Kaplan resources.

Strengths – The Health Sciences Library at SUNY Upstate was rated very highly overall in all areas. Most comments regarding the library were in regards to frustration with the construction, but students have been able to find additional study space in the New Academic Building and Setnor Hall. Students also remarked that they are excited to benefit from the renovated library and new clinical skills center after construction has been completed.

Areas for Improvement – The school should strongly consider assessing its relationship with Kaplan. 20% of the student body felt that Kaplan was an inadequate resource to prepare for in-house exams and national board exams. Many negative comments regarding Kaplan were seen on the survey. Many students stated they do not think it is fair to be forced to pay for Kaplan in their tuition, as there are other resources that are superior and more commonly utilized. Students offered suggestions for alternative resources where they would prefer their tuition is spent including USMLE World (UWorld), Pathoma, and SketchyMedical (pathology, pharmacology, and microbiology). These concerns have been brought to the Academic Success Center, which has historically negotiated the contract with Kaplan and they are currently discussing this issue.

Student Services

SUNY Upstate is committed to providing adequate support and services for their students. Overall, students are very satisfied with the student services, including accessibility of student health services (93%), accessibility of personal counseling (93%), confidentiality of personal counseling (96%), availability of mental health services (93%), availability of programs to support student well-being (92%), availability of tutorial help (92%), and adequacy of education about prevention and exposure to infectious and environmental hazards (96%). The largest area

in which SUNY Upstate can improve student services is by providing affordable student health insurance. Students rated the availability of student health insurance as the most unsatisfactory category in this section, with 41% of the student body replying dissatisfied or very dissatisfied to this item.

Strengths – SUNY Upstate emphasizes the importance of personal health while studying in medical school. The subject of mental health, personal counseling and health services is emphasized during the beginning of every course and clerkship introduction and during orientation at the beginning of each year. Students are aware of whom to speak with if they are having issues in their academic or personal lives. Each student has a basic science advisor that they meet with once a semester to discuss current successes and challenges. As mentioned above, these domains are highly rated by students because SUNY Upstate supports students in these areas and highlights well-being as a priority to successfully completing medical school.

There are visible trends in the data for two questions in particular. The first trend deals with SUNY Upstate's unique Learning Community initiative. The school started Learning Communities as a way to foster a more social and enjoyable experience for its students. Doctors and residents are included in each learning community so that students can network with current physicians at SUNY Upstate. This initiative began in 2014 when the current fourth-year class began at SUNY Upstate, and the program has grown and improved in scope and execution each year. The current third and fourth year students rated "adequacy of Lake Learning Communities to foster community and increase mentorship" as 72% and 79% satisfactory, respectively. However, the current first and second year students rated this category as 95% and 87% satisfactory, respectively. Generally, the satisfaction with Learning Communities has increased with each successive class. By this trend, Learning Communities should continue to gain satisfaction from students. Another positive trend is the adequacy of debt management counseling. Fourth year students are provided with a financial aid course that helps them manage debt. They rated this category as 81% satisfactory. Providing lectures for second and third year students may alleviate their stress about debt and help them manage their debt early, which the quantitative data show was something they were dissatisfied with.

Areas for Improvement – Many students at SUNY Upstate are either enrolled in their parent's health insurance plan or enrolled in Medicaid if above the age of 26. Currently, SUNY Upstate does not provide an affordable insurance option for its students as the university consortium through which they had previously negotiated health insurance rates dissolved in 2015. This explains why students rated the availability of student health insurance as the most unsatisfactory category (41%) not only in this section, but in the entire survey. Before the survey, students made the school aware of this issue. Since then, they have been working to find an insurance package that is both affordable and available for all four years of medical school. The committee is hopeful that the school will provide this for students in the future or at least plan to help them find affordable plans on their own.

Students rated adequacy of counseling about elective choices (34% dissatisfied) as the second most unsatisfactory category in this section and the survey as a whole. The elective options for each year are not clearly stated on the website or during orientation. Except for first year students, the remaining classes are unsatisfied with elective counseling, especially third year

students (39% dissatisfied). The school provides a large document with all elective choices available in the school, but it does not separate them by class year or availability. Upstate should consider releasing a document for each year that outlines which electives are available for first, second, third and fourth year students. An easy-to-navigate electronic system that is continuously updated with course options and availability for all students to access would be an ideal solution. Administration should include elective counseling as a separate presentation during orientation for each year so that students are aware from the beginning what electives are available. Improving communication about elective choices will help inform students and ease the confusion.

The student body was also dissatisfied with the adequacy of career counseling at Upstate, with 26% of students responding with dissatisfied or very dissatisfied. This category, however, appears to be improving with each class. Class-specific data show 25% of fourth years, 48% of third years, 26% of second years and 5% of first years were dissatisfied with the career counseling at Upstate. This could be related to the improved advising structure of the Lake Communities to fit this need. One of the goals of learning communities is to foster a stronger doctor-student connection so that medical students can speak with physicians as early as their first year. Each learning community is assigned physicians so that students can reach out and speak with them. The first and second year curriculum also has more clinicians teaching lectures and incorporating relevant clinical material in a basic science setting. In the comments, third year students mentioned that they want more guidance from practicing physicians regarding choosing specialties. Many students are not aware of whom to speak with about interest in different medical fields, as the main advisor for students through all four years is a basic science instructor. Continuing to expose medical students to more physicians in a variety of different specialties and settings will help alleviate this issue.

Medical Education Programs

Data on the medical education programs at SUNY Upstate was categorized into preclinical, clinical, and overall. Students from all classes, including MD/PhD students, responded to questions regarding the preclinical years and overall education. Only students in the M3 and M4 years responded to questions regarding the clinical years of education. Responses from preclinical education were analyzed according to class year to look for any significant differences that might coincide with the change to the Unified Preclerkship (UP) curriculum in the 2016/17 academic year. The 17 MD/PhD students were removed from these comparative analyses, as it was unclear which curriculum they were exposed to in the preclinical years. Questions concerning the clinical years were analyzed by clinical campus to observe any differences between the Syracuse and Binghamton experience.

In all but four domains third-year students were the most dissatisfied class. Again, the committee believes this is a reflection of medical school culture as a whole, and not specific to the experiences at SUNY Upstate. We do believe, however, that this is a trend that should be analyzed and addressed, as there may be opportunities for the administration to intervene and increase student satisfaction during the clinical years.

Preclinical Education

The data on the preclinical medical education at SUNY Upstate were generally positive, with average responses in all areas scoring above a 3.0. Greater than 90% of the student body felt satisfied or very satisfied in the 3 of the 5 areas. There were no areas where greater than 20% of students responded as being dissatisfied or very dissatisfied.

Of note, there appeared to be no significant change in students' perceptions of the preclinical years before and after the curriculum change. This could be a result of the slow and measured rollout of the new UP curriculum over the course of three years, with incremental change that affected each class in different ways. Second year students were least satisfied with the quality of the second year, with 23% responding that they were dissatisfied or very dissatisfied. More than 20% of combined M3 and M4 students were dissatisfied or very dissatisfied with clinical skills training and feedback in the preclinical years, though the majority of these responses appear to be from the third-year class.

Strengths – Quality of the first year, opportunities for self-directed learning and overall workload in the preclinical years each had greater than 90% of students reporting that they were satisfied or very satisfied. Survey comments described satisfaction with the increased integration of courses and improvement to the curriculum. They would like to see these improvements extended further to include coordination with the Practice of Medicine (POM) course.

Areas for Improvement – Overall there were no major areas for concern, but individual classes did have issues in certain areas. The quality of the second year as rated by the M2 class was fairly low, with 23% reporting they were dissatisfied. This is likely due to the fact that this class is the first class to experience the new UP curriculum in the second year of school, and there are still issues to be worked out. Many student comments focused on the desire to improve the POM course by expanding its coordination with other courses, focusing more on clinical skills training and increasing the number of clinical experiences. These responses were reflected in the data, where 26% of the M3 class felt dissatisfied with the clinical skills training in the preclinical years.

27% of the M3 class felt dissatisfied with the amount and quality of formative feedback in the preclinical years. One comment mentioned not receiving feedback or clear responses to challenged questions on summative exams, which has been an ongoing debate in the preclerkship courses over the past few years. Other comments from students regarding the preclinical years illustrated that students felt much of the material taught was not preparing them well for the STEP 1 exam, as it focused too heavily on non-clinically correlated topics. Many of these comments also related to Kaplan as poor test preparation tool, which potentially influenced people's judgment on the Upstate curriculum.

Clinical Education

Responses to the questions about education during the clinical years at Upstate show there are areas for improvement. Although there were numerous comments from students at the Binghamton campus regarding the perception that the third year in Binghamton is academically less rigorous, there were no significant differences when comparing the quantitative data between the two campuses.

Strengths – The two areas in which over 90% of students responded with satisfied or very satisfied were access to patients during the third year and quality of the fourth year required clerkship. Comments showed that students were typically very happy with the diversity of patients and diagnoses during the third year. Comments also highlighted the amount of time students have during the fourth year for their applications, away rotations and interviews.

One question in the survey assessed the clinical Rural Medical Scholars Program (RMSP) at SUNY Upstate. From a total of 16 fourth year and 9 third year students, 100% felt that their clinical experiences were equivalent to that of their peers in Syracuse and Binghamton. One student commented that it was the single most important experience in medical school. These results speak not only to the efficacy of the RMSP program, but to the popularity of the program among those students who participate.

Areas for Improvement – Students rated the amount and quality of feedback in the third and fourth years poorly, with 24% dissatisfied with amount and 28% dissatisfied with quality. These trends remained when the data was broken down by class year and clinical campus, showing that students see this is a universal problem at SUNY Upstate. In the clinical years, students should receive evaluations from every physician and resident with which they have a significant amount of clinical training. Comments frequently mentioned the lack of constructive and timely feedback during clerkships. Students felt that the mechanisms, namely MedHub evaluation services, used by the school were ineffective. Some students felt that residents and faculty preceptors were not properly trained to give feedback, and many students related the inadequacies of the evaluation structure to dissatisfaction with grading in the clerkships. SUNY Upstate does a thorough training course in evaluation for all incoming residents and faculty who see students, as well as monitors for graders who habitually give the same scores in all evaluation categories. Any preceptor who is found to be a poor evaluator is asked to re-train in proper evaluative skills. In order to increase transparency and foster confidence in the evaluation process, SUNY Upstate should market this training to show to students the rigor with which they train all preceptors. Administration should also strongly consider clearly defining policies on who should be evaluating students (i.e. all faculty and residents that have worked over 10 hours with the student must complete an evaluation), when evaluations need to be completed (i.e. all evaluations must be submitted within one week of the last day with which the faculty or resident worked the student), and how and why students can drop evaluations (i.e. students have up until one week after an evaluation is submitted to request it be dropped by the clerkship director providing they can prove there was a conflict of interest, mistreatment, or the preceptor did not meet work with them over 10 hours or submit their evaluation within a week).

21% of students were dissatisfied with the clinical skills assessment in the clinical years. All clerkships mandate some degree of clinical logging of both diagnoses and physical exam skills using the online service, MedHub. Additionally, the majority of clerkships require at least one experience in which a physician evaluates the student on their history taking and physical exam skills. Although there were not many comments addressing this problem, one student stated the belief that MedHub is an effective way to encourage students to speak up regarding clinical skills assessments as it offers a clear way to communicate that certain clinical skills have to be performed and observed on a clerkship.

Lastly, 28% of third and fourth year students reported they were dissatisfied with the utility of the first and second years as preparation for clinical clerkships. This reflects a problem in the preclinical years that was seen in the comments on the survey. Students felt that there are opportunities for the curriculum in the preclinical years to focus more on clinically relevant material, which hopefully would prepare them better for both STEP 1 and their clerkship rotations. Improvements to the POM course have been focusing on increasing integration with the basic sciences courses and increasing students' written and oral presentation skills to help prepare them better for their clerkships. With continued effort in these areas, the committee believes Upstate can bridge the gap between the preclinical and clinical years.

Overall Education

The items that dealt with overall medical education at Upstate scored very well in almost all areas. Only one item, adequacy of experiences with electronic health records (EHR), showed that 21% of the student body was dissatisfied or very dissatisfied. Of note the only significant differences between campuses in the overall medical education was in interprofessional educational experiences and training in electronic health records. 19% of Binghamton students and 13% of Syracuse students were dissatisfied with the adequacy of EHR training ($p=0.011$). 27% of Binghamton students and 17% of Syracuse students were dissatisfied with the adequacy of interprofessional education experiences ($p=0.044$).

Strengths – Students were generally very satisfied with their overall medical education at SUNY Upstate. Greater than 90% of the student body was satisfied in the areas of utility of the education program objectives to support learning, clarity of policies for advancement and graduation, access to student academic records, education in disease diagnosis, education in disease management, education in disease prevention, and education in health maintenance.

Areas for Improvement – Training with EHRs is one area for improvement that SUNY Upstate should specifically focus on in this section. However, it should be noted that students in the preclinical years, specifically the M2 year, were more likely to identify this as a problem. When examined by class, 14% of M1 students, 44% of M2 students and 23% of M3 students, and 6% of M4 students were dissatisfied with EHR training. These data, compounded with the significant difference seen between clinical sites, illustrates the need for improvement in this area in order to positively impact the student learning experience. It is important for students as they progress into their second year of medical school to start becoming familiar with the systems they will be required to use in the coming years. This includes Binghamton students, who must be adept at using no less than five EHR systems throughout the clinical experiences on their campus. It is recommended that earlier training in EHR systems be implemented in coming years.

Interprofessional education (IPE) is of growing importance across all healthcare settings, and SUNY Upstate has been increasing efforts to include these opportunities in its curriculum. The Office for Interprofessional Education works across all colleges at SUNY Upstate Medical University to promote interprofessional activities within and outside the curriculum. Although most students are satisfied with the school's level of IPE, students from the Binghamton campus feel their education is lacking in this area. The committee believes that the strong commitment to IPE that is seen at the Syracuse campus must be extended to the Binghamton campus.

The final area for improvement is the student knowledge of the Graduation Competencies and Educational Program Objective (GC-EPOs). The GC-EPOs are the foundation of all course and clerkship objectives at the college, and it is important for students to understand what is expected of them throughout their education at this institution. SUNY Upstate includes the list of GC-EPOs at the beginning of each syllabus for all courses and clerkships, and this list can also be found on the Curriculum Office website. A total of 25% of students were not aware of the purpose of the GC-EPOs and 36% of them did not know where to find the GC-EPOs. It is worth noting, however, that the first year class scored the best on these measures, with 83% of M1 students claiming to know the purpose of the GC-EPOs and 79% claiming to know where they can be found. SUNY Upstate should be marketing the importance of these objectives to students in a more engaging and interactive manner.

Student, Faculty and Administration Relationships

Question		M1		M2		M3		M4		MD/PhD		Total	
		N	%	N	%	N	%			N	%	N	%
Accessibility of the Office of the Dean of Students (Dr. White)	Satisfied	151	99%	117	94%	116	97%	124	98%	13	93%	508	98%
	Dissatisfied	1	1%	7	6%	3	3%	2	2%	1	7%	13	2%
Awareness of student concerns by Dean of Students	Satisfied	145	98%	119	92%	110	89%	110	87%	14	100%	484	92%
	Dissatisfied	3	2%	10	8%	13	11%	16	13%	0	0%	42	8%
Dean of Student's responsiveness to student problems	Satisfied	145	99%	117	91%	103	87%	115	91%	14	100%	480	92%
	Dissatisfied	1	1%	12	9%	15	13%	11	9%	0	0%	39	8%
Adequacy of Dean of Students at Binghamton (Dr. Swaboda)*	Satisfied					26	67%	54	95%	4	100%	80	83%
	Dissatisfied					13	33%	3	5%	0	0%	16	17%
Accessibility of Associate Dean for Medical Education at Syracuse (Dr. Ko)	Satisfied	149	100%	117	94%	106	96%	115	94%	14	93%	487	96%
	Dissatisfied	0	0%	7	6%	4	4%	7	6%	1	7%	18	4%
Awareness of student concerns by Associate Dean of Medical Education	Satisfied	142	98%	116	90%	98	87%	94	80%	11	79%	450	89%
	Dissatisfied	3	2%	13	10%	15	13%	23	20%	3	21%	54	11%
Associate Dean of Medical Education's responsiveness to student problems	Satisfied	142	99%	113	88%	85	77%	94	80%	10	71%	434	87%
	Dissatisfied	1	1%	16	12%	26	23%	24	20%	4	29%	67	13%
Adequacy of Associate Dean for Medical Education at Binghamton (Dr. Dave)*	Satisfied					34	85%	44	92%	3	100%	78	89%
	Dissatisfied					6	15%	4	8%	0	0%	10	11%
Participation of students on key medical school committees	Satisfied	143	100%	118	93%	105	96%	108	96%	12	92%	474	96%
	Dissatisfied	0	0%	9	7%	4	4%	5	4%	1	8%	18	4%
Accessibility of medical school faculty	Satisfied	147	99%	122	95%	110	93%	116	97%	13	93%	495	96%
	Dissatisfied	1	1%	6	5%	8	7%	3	3%	1	7%	18	4%

*Only third and fourth year students from the Binghamton campus responded to these questions.

Student Learning Environment and Opportunities

Question		M1		M2		M3		M4		MD/PhD		Total	
		N	%	N	%	N	%	N	%	N	%	N	%
Adequacy of the medical school's student mistreatment policy	Satisfied	146	99%	118	95%	111	93%	114	93%	14	93%	489	95%
	Dissatisfied	1	1%	6	5%	9	8%	9	7%	1	7%	25	5%
Adequacy of the mechanisms to report mistreatment	Satisfied	146	99%	122	97%	113	93%	114	95%	13	93%	495	96%
	Dissatisfied	2	1%	4	3%	8	7%	6	5%	1	7%	20	4%
Adequacy of medical school activities to prevent mistreatment	Satisfied	146	99%	120	94%	103	84%	113	91%	11	79%	482	93%
	Dissatisfied	2	1%	7	6%	19	16%	11	9%	3	21%	39	7%
Adequacy of safety and security at instructional sites	Satisfied	151	100%	126	98%	116	94%	127	97%	12	86%	520	97%
	Dissatisfied	0	0%	3	2%	7	6%	4	3%	2	14%	14	3%
Adequacy of lecture halls, large group classroom facilities	Satisfied	148	96%	127	95%	125	96%	124	95%	15	94%	524	95%
	Dissatisfied	6	4%	7	5%	5	4%	7	5%	1	6%	25	5%
Adequacy of small group teaching spaces on campus	Satisfied	145	95%	130	97%	124	95%	124	96%	15	94%	523	96%
	Dissatisfied	8	5%	4	3%	6	5%	5	4%	1	6%	23	4%
Adequacy of educational/teaching spaces at hospitals	Satisfied	129	99%	101	95%	113	88%	117	89%	12	100%	460	93%
	Dissatisfied	1	1%	5	5%	16	12%	14	11%	0	0%	36	7%
Adequacy of student relaxation space on the campus	Satisfied	136	89%	104	81%	90	73%	117	89%	16	100%	447	84%
	Dissatisfied	16	11%	24	19%	34	27%	14	11%	0	0%	88	16%
Adequacy of student study space at the medical school campus	Satisfied	142	92%	103	78%	100	78%	120	92%	15	94%	465	85%
	Dissatisfied	12	8%	29	22%	29	22%	10	8%	1	6%	80	15%

Student Learning Environment and Opportunities (cont.)

Question		M1		M2		M3		M4		MD/PhD		Total	
		N	%	N	%	N	%	N	%	N	%	N	%
Adequacy of student study space at hospitals/clinical sites	Satisfied	102	94%	61	80%	73	58%	98	75%	9	90%	334	76%
	Dissatisfied	7	6%	15	20%	53	42%	32	25%	1	10%	107	24%
Access to secure storage for personal belongings on campus	Satisfied	144	94%	109	83%	112	90%	121	93%	13	87%	486	90%
	Dissatisfied	10	6%	23	17%	13	10%	9	7%	2	13%	55	10%
Access to secure storage for personal belongings at hospital/clinical sites	Satisfied	102	93%	58	76%	99	79%	112	85%	10	91%	371	84%
	Dissatisfied	8	7%	18	24%	27	21%	19	15%	1	9%	72	16%
Administration and faculty diversity	Satisfied	140	92%	100	78%	105	84%	113	88%	12	80%	458	86%
	Dissatisfied	12	8%	29	22%	20	16%	16	12%	3	20%	77	14%
Student diversity	Satisfied	144	95%	112	86%	110	87%	113	88%	12	80%	479	89%
	Dissatisfied	8	5%	18	14%	16	13%	15	12%	3	20%	57	11%
Access to opportunities to participate in research	Satisfied	125	95%	105	85%	96	86%	102	84%	13	93%	428	88%
	Dissatisfied	7	5%	18	15%	15	14%	19	16%	1	7%	59	12%
Adequacy of support to conduct successful student research	Satisfied	123	93%	96	83%	83	76%	92	79%	12	92%	394	83%
	Dissatisfied	9	7%	19	17%	26	24%	25	21%	1	8%	79	17%
Access to service learning and community service opportunities	Satisfied	151	99%	127	96%	122	98%	126	98%	15	100%	526	98%
	Dissatisfied	2	1%	5	4%	2	2%	3	2%	0	0%	12	2%
Adequacy of learning environment and facilities at Binghamton Campus*	Satisfied					35	83%	57	92%	3	100%	92	88%
	Dissatisfied					7	17%	5	8%	0	0%	12	12%

*Only third and fourth year students from the Binghamton campus responded to this question.

Library and Information Sciences

Question		M1		M2		M3		M4		MD/PhD		Total	
		N	%	N	%	N	%	N	%	N	%	N	%
Ease of access to library resources and holdings	Satisfied	146	97%	127	95%	124	98%	127	98%	14	88%	524	97%
	Dissatisfied	5	3%	6	5%	3	2%	2	2%	2	13%	16	3%
Quality of library support and services	Satisfied	150	98%	129	96%	127	99%	127	98%	15	94%	533	98%
	Dissatisfied	3	2%	6	4%	1	1%	2	2%	1	6%	12	2%
Adequacy of computer learning resources	Satisfied	145	97%	122	95%	119	95%	125	100%	13	87%	511	97%
	Dissatisfied	5	3%	7	5%	6	5%	0	0%	2	13%	18	3%
Ease of access to electronic learning materials	Satisfied	144	94%	120	91%	123	96%	126	98%	12	80%	513	94%
	Dissatisfied	10	6%	12	9%	5	4%	3	2%	3	20%	30	6%
Adequacy of Kaplan to prepare for in-house and national board exams	Satisfied	133	98%	114	89%	70	54%	101	80%	11	79%	418	80%
	Dissatisfied	3	2%	14	11%	59	46%	26	20%	3	21%	102	20%
Accessibility of computer support	Satisfied	144	97%	117	92%	111	90%	125	98%	15	100%	497	95%
	Dissatisfied	4	3%	10	8%	12	10%	2	2%	0	0%	28	5%
Adequacy of library and information resources at Binghamton Campus*	Satisfied					34	87%	49	82%	4	100%	83	84%
	Dissatisfied					5	13%	11	18%	0	0%	16	16%

* Only third and fourth year students from the Binghamton campus responded to this question.

Student Services

Question		M1		M2		M3		M4		MD/PhD		Total	
		N	%	N	%	N	%	N	%	N	%	N	%
Accessibility of student health services	Satisfied	148	99%	123	94%	113	90%	115	88%	14	100%	499	93%
	Dissatisfied	1	1%	8	6%	12	10%	15	12%	0	0%	36	7%
Accessibility of personal counseling	Satisfied	138	99%	93	95%	79	84%	87	92%	9	90%	397	93%
	Dissatisfied	1	1%	5	5%	15	16%	8	8%	1	10%	29	7%
Confidentiality of personal counseling	Satisfied	124	99%	76	97%	76	92%	80	96%	9	90%	356	96%
	Dissatisfied	1	1%	2	3%	7	8%	3	4%	1	10%	13	4%
Availability of mental health services	Satisfied	135	100%	91	94%	80	88%	81	87%	10	91%	387	93%
	Dissatisfied	0	0%	6	6%	11	12%	12	13%	1	9%	29	7%
Availability of programs to support student well-being	Satisfied	150	100%	117	93%	95	83%	114	90%	13	87%	476	92%
	Dissatisfied	0	0%	9	7%	19	17%	13	10%	2	13%	41	8%
Adequacy of Lake Learning Communities to foster community and increase mentorship	Satisfied	146	95%	115	86%	89	72%	99	79%	13	93%	449	84%
	Dissatisfied	7	5%	18	14%	35	28%	26	21%	1	7%	86	16%
Adequacy of career counseling	Satisfied	121	95%	79	74%	59	52%	92	75%	9	69%	351	74%
	Dissatisfied	7	5%	28	26%	55	48%	31	25%	4	31%	121	26%
Adequacy of counseling about elective choices	Satisfied	115	85%	69	63%	41	39%	87	69%	6	60%	312	66%
	Dissatisfied	20	15%	41	37%	63	61%	39	31%	4	40%	163	34%

Student Services (cont.)

Question		M1		M2		M3		M4		MD/PhD		Total	
		N	%	N	%	N	%			N	%	N	%
Quality of financial aid administrative services	Satisfied	142	97%	112	91%	73	71%	111	95%	7	70%	438	89%
	Dissatisfied	5	3%	11	9%	30	29%	6	5%	3	30%	52	11%
Adequacy of debt management counseling	Satisfied	131	96%	77	79%	58	66%	82	81%	4	67%	348	82%
	Dissatisfied	5	4%	21	21%	30	34%	19	19%	2	33%	75	18%
Availability of academic counseling	Satisfied	145	98%	104	88%	84	76%	105	90%	10	91%	438	89%
	Dissatisfied	3	2%	14	12%	27	24%	12	10%	1	9%	56	11%
Availability of tutorial help	Satisfied	140	96%	94	95%	80	84%	90	93%	9	90%	404	92%
	Dissatisfied	6	4%	5	5%	15	16%	7	7%	1	10%	33	8%
Availability of student health insurance	Satisfied	81	80%	36	51%	43	61%	40	43%	4	40%	200	60%
	Dissatisfied	20	20%	35	49%	27	39%	52	57%	6	60%	134	40%
Availability of disability insurance	Satisfied	82	98%	29	71%	43	90%	49	84%	3	75%	203	88%
	Dissatisfied	2	2%	12	29%	5	10%	9	16%	1	25%	28	12%
Adequacy of education about prevention and exposure to infectious and environmental hazards	Satisfied	141	99%	116	94%	119	98%	121	95%	13	87%	497	96%
	Dissatisfied	2	1%	7	6%	3	2%	7	5%	2	13%	19	4%
Adequacy of student services at Binghamton Campus*	Satisfied					30	79%	50	88%	3	100%	80	84%
	Dissatisfied					8	21%	7	12%	0	0%	15	16%

* Only third and fourth year students from the Binghamton campus responded to this question.

Medical Education Program – Preclinical

Question		M1		M2		M3		M4		MD/PhD		Total*	
		N	%	N	%	N	%	N	%	N	%	N	%
Quality of the first year/first academic period	Satisfied	150	98%	127	93%	116	89%	114	86%	16	100%	507	92%
	Dissatisfied	3	2%	10	7%	14	11%	18	14%	0	0%	45	8%
Quality of the second year/second academic period*	Satisfied			103	77%	108	83%	114	87%	13	87%	325	82%
	Dissatisfied			30	23%	22	17%	17	13%	2	13%	69	18%
Clinical skills instruction in the first/second years/periods	Satisfied	132	86%	112	82%	95	74%	108	82%	11	69%	447	81%
	Dissatisfied	22	14%	25	18%	34	26%	23	18%	5	31%	104	19%
Amount and quality of formative feedback in the first/second years	Satisfied	145	95%	113	83%	95	73%	113	87%	10	63%	466	85%
	Dissatisfied	7	5%	23	17%	36	27%	17	13%	6	38%	83	15%
Opportunities for self-directed learning in the first/second years	Satisfied	145	94%	130	96%	119	92%	126	96%	14	93%	520	95%
	Dissatisfied	9	6%	5	4%	10	8%	5	4%	1	7%	29	5%
Overall workload in the first/second years	Satisfied	147	95%	127	93%	119	91%	130	99%	16	100%	523	95%
	Dissatisfied	7	5%	9	7%	12	9%	1	1%	0	0%	29	5%
Coordination/integration of content in the first/second years	Satisfied	140	93%	115	85%	95	73%	108	83%	10	63%	458	84%
	Dissatisfied	10	7%	20	15%	36	27%	22	17%	6	38%	88	16%

* Only second, third and fourth year students responded to this question.

Medical Education Program – Clinical

Question		Binghamton						Syracuse						Total	
		M3		M4		Total		M3		M4		Total		N	%
		N	%	N	%	N	%	N	%	N	%	N	%		
Overall quality of the third-year clerkships	Satisfied	23	77%	37	95%	60	87%	71	75%	80	87%	151	81%	211	82%
	Dissatisfied	7	23%	2	5%	9	13%	24	25%	12	13%	36	19%	45	18%
Access to patients during the third-year clerkships	Satisfied	28	93%	38	100%	66	97%	94	98%	89	98%	183	98%	249	98%
	Dissatisfied	2	7%	0	0%	2	3%	2	2%	2	2%	4	2%	6	2%
Overall workload in the third-year clerkships	Satisfied	26	87%	36	95%	62	91%	83	87%	84	91%	167	89%	229	89%
	Dissatisfied	4	13%	2	5%	6	9%	13	13%	8	9%	21	11%	27	11%
Supervision in the third-year clerkships	Satisfied	21	68%	33	87%	54	78%	76	79%	84	91%	160	85%	214	83%
	Dissatisfied	10	32%	5	13%	15	22%	20	21%	8	9%	28	15%	43	17%
Amount of formative feedback in the third and fourth-year clerkships	Satisfied	19	61%	26	70%	45	66%	66	69%	81	89%	147	79%	192	75%
	Dissatisfied	12	39%	11	30%	23	34%	30	31%	10	11%	40	21%	63	25%
Quality of feedback in the third and fourth-year clerkships	Satisfied	18	58%	30	79%	48	70%	62	65%	73	80%	135	72%	183	71%
	Dissatisfied	13	42%	8	21%	21	30%	34	35%	18	20%	52	28%	73	29%
Quality o of fourth-year required clerkship*	Satisfied			34	97%	34	97%			81	96%	81	96%	115	97%
	Dissatisfied			1	3%	1	3%			3	4%	3	4%	4	3%
Clinical skills assessment in the third and fourth-year	Satisfied	19	63%	33	87%	52	76%	66	69%	80	88%	146	78%	198	78%
	Dissatisfied	11	37%	5	13%	16	24%	29	31%	11	12%	40	22%	56	22%
Utility of the first and second-years as preparation for clinical clerkships	Satisfied	19	58%	33	83%	52	71%	66	68%	67	74%	133	71%	185	71%
	Dissatisfied	14	42%	7	17%	21	29%	31	32%	24	26%	55	29%	76	29%

*Only fourth year students responded to this question.

Medical Education Program – Overall

Question		M1		M2		M3		M4		MD/PhD		Total	
		N	%	N	%	N	%	N	%	N	%	N	%
Utility of the educational program objectives to support learning	Satisfied	150	98%	115	88%	102	85%	120	94%	14	93%	487	92%
	Dissatisfied	3	2%	16	12%	18	15%	7	6%	1	7%	44	8%
Clarity of policies for advancement/graduation	Satisfied	146	95%	123	91%	112	88%	123	94%	15	94%	504	92%
	Dissatisfied	8	5%	12	9%	16	13%	8	6%	1	6%	44	8%
Access to student academic records	Satisfied	133	96%	120	95%	113	91%	122	96%	15	94%	488	95%
	Dissatisfied	5	4%	6	5%	11	9%	5	4%	1	6%	27	5%
Medical school responsiveness to student feedback on courses/clerkships	Satisfied	139	97%	118	91%	90	71%	113	86%	13	87%	460	87%
	Dissatisfied	4	3%	11	9%	36	29%	19	14%	2	13%	70	13%
Adequacy of education to diagnose disease	Satisfied	140	97%	123	93%	118	91%	129	98%	15	100%	510	95%
	Dissatisfied	4	3%	9	7%	11	9%	3	2%	0	0%	27	5%
Adequacy of education to manage disease	Satisfied	129	96%	122	95%	106	82%	122	92%	15	100%	479	91%
	Dissatisfied	6	4%	6	5%	24	18%	10	8%	0	0%	46	9%
Adequacy of education in disease prevention	Satisfied	143	99%	120	92%	110	85%	121	92%	14	93%	494	92%
	Dissatisfied	2	1%	11	8%	20	15%	11	8%	1	7%	44	8%
Adequacy of education in health maintenance	Satisfied	133	95%	120	94%	115	88%	119	90%	14	93%	487	92%
	Dissatisfied	7	5%	8	6%	15	12%	13	10%	1	7%	43	8%
Adequacy of education in caring for patients from different backgrounds	Satisfied	142	95%	113	86%	103	80%	116	88%	16	100%	474	87%
	Dissatisfied	8	5%	18	14%	26	20%	16	12%	0	0%	68	13%
Adequacy of experiences with electronic health records	Satisfied	82	86%	59	56%	98	77%	123	94%	9	75%	362	79%
	Dissatisfied	13	14%	46	44%	29	23%	8	6%	3	25%	96	21%
Adequacy of interprofessional education experiences	Satisfied	143	96%	102	76%	98	76%	110	84%	13	81%	453	83%
	Dissatisfied	6	4%	33	24%	31	24%	21	16%	3	19%	91	17%