

	Curriculum Expansion	Campus Collegiality	Instructional Enhancement	Accommodate Learning Styles	Instructional Services/Facilities	Instructional Technologies
ed. specialist support			X			
info tech,					X	
make sure the computers do what they are supposed to do					X	
Provide sufficient faculty such that graduate school courses could be conducted apart from medical school courses. This suggestion was based on the observation that whereas medical school courses often aim at conveying basic facts that students need to know in their medical practice, graduate school courses teach ways of thinking and dealing with biomedical problems.			X			
24. M2 > more use of standardized patients > like clinical skills evaluation			X			
36. Computers off?					X	
1. Asked Questions > Forced > Participatory xx			X	X		
3. Interaction rather than reading PowerPoints (i.e., Dr. Hall) - More engagement			X	X		
4. PowerPoint is not used effectively.			X			
6. Big jump from ICM preceptor to rounding with residents – may need intermediate step.			X		X	
7. System like the VA (electronic medical record) where students can make notes and are required to give <u>feedback</u>			X			
- anything with clinical application such as CPR classes			X	X		
- exposure to clinical problems early in training			X	X		
- get students involved directly in patient care	X		X	X		
- hands on because it provides a memorable experience			X	X		
- hire more teaching faculty			X			
- use questions more in the teaching process and actually discuss the answers			X			
6. Develop a more dynamic UMMC graduate school website that makes it easier to find and locate students (via phone numbers and addresses). This may include a “blog” or access to a “bulletin board.” To make the website more timely might need to improve the capability of easily changing individual web pages. seems to apply to a website based system that could facilitate transfer of information from one program/lab to the next. While this was suggested for the School of Graduate Studies, it should be applicable to all other schools at UMMC.					X	X
“History and Physical” early so I can remember why I’m here			X			
· Ask students’ opinions before changing the sequence of coursework			X			
· Faculty should not assume students know everything			X			
· Improve faculty modeling of behaviors that are to be taught to students			X			
· Include more laboratory-based instruction			X	X		
· Increase interdepartmental collaboration			X			

· More collaboration among faculty			X			
· More hands-on learning experiences			X	X		
· Update existing laboratory equipment			X			
· Various ways to learn			X	X		
· Be sure that lectures are given the way students can understand, even if they aren't the expert			X			
· Be sure that ppt is available prior to lecture.			X		X	
· Enhance departmental online pages. Teaching materials online in "bite size" portions. These items would not replace class, but enhance learning outside the classroom.				X		X
· Increase faculty awareness of what is on board exams.			X			
· Interactive questions. Or bonus questions to reward going to class. Random quizzes to encourage class attendance.		X	X	X		
· More interactive		X	X	X		
· Student helps website with information for all schools. Including study guides and links to helpful websites. Helpful across schools. (support/communications/internet)						X
· more case based			X			
16. Simulation center for all disciplines.			X			X
1-Earlier introduction of Standardized Patient interaction into the curriculum			X			
2. faculty need to model professionalism			X			
2. faculty need training in teaching critical thinking; faculty also need to model	X		X			
2. faculty need training in teaching to various learning styles (input methods-auditory, visual, small group, large group, kinesthetic, case-based)			X	X		
3. adapting to all learning styles			X	X		
3. faculty need to learn appropriate use of technology in teaching			X			
3. Expand/upgrade technology at UMMC to improve learning by medical, dental, nursing, health professions, and graduate students as well as residents and fellows.						X
3. Creative thinking to develop new ways to meet Mississippi's health challenges.	X		X	X	X	
4. more interactive activities between faculty and students		X	X			
4. development of health care teams as a training tool;	X	X	X	X		
true development of health care teams; needs to be earlier and formalized	X	X	X	X		
4. Expand/upgrade core facilities to provide access to state-of-the-art equipment and methodologies.						X
4. Integration of problem-based learning into teaching strategies.			X	X		
5. Integration of case-based learning into teaching strategies.			X	X		
6. Provide center-wide site licenses for various software programs used by basic scientists.			X			
6. Developing online learning communities.		X	X			
7. Using reflective learning in the classroom.	X		X			
9. Student teaching: Peer tutoring in class to increase student understanding.			X			
a) Identify 1-2 clinical faculty with a primary teaching role. This faculty will be responsible for the didactics for students and residents. Compensation should be commensurate with clinical faculty.			X			
a) Integration and assimilation of clinical experiences			X			
a) Education for the educator			X			
a) hands on experiences			X	X		
a) Interactive		X	X	X		

a) Interactive learning and case-based learning		x	x	x		
a) Needs to see models of process			x			
a) Protected time – designated for preparation and teaching			x			
a. Creative teaching strategies and technologies, i.e. Wimba			x	x		
aa.Greater flexibility to teach in a Virtual Classroom			x	x		
Academic I Pod				x		x
Address different learning styles			x	x		
Advanced computer technology and network access through an improved DIS function.						x
An interdisciplinary skills lab		x	x	x		x
Another area that could be improved by education is cultural diversity			x			x
Are the professors strategic planning > some seem not to like others – not professional			x			
Assessing and improving student competency in the use of health information technology.... Standards regarding competence in the use of health information technology have been published for many professions. The specific competencies to be demonstrated as learning outcomes could be tailored to the specific discipline/educational program.	x		x			
b) Make sure they recognize efforts			x			
b) More small groups opportunities/engage student			x	x		
b) More tolerance and patience			x			
b. Meeting students “Where They Are” including alternative semester sessions, winter sessions and intercessions for elective courses			x			
Basic science faculty numbers > anatomy is overwhelmed			x			
Better communication with all departments			x			
Better networking;						x
better printing						x
Blackboard is not user friendly > more training			x			
c) Consistency in teaching			x			
c) Training for faculty			x			
Case-based instruction			x			
cc.Faculty would like to have planned days set aside each year for campus-wide Faculty Development without conflicts with student class schedules			x			
communication skills	x		x			
Communication,communication among all disciplines to deter duplicating orders,promote time management and ultimately shorter patient stays.	x	x	x			
Content available for all learning styles – visual, auditory, tactile			x	x		
d) Clinical access prior to 3rd year/program	x		x	x		
d) Do study to determine what works for majority of students/best practice			x			
Degree of disconnect between faculty members and what other classes are doing – communication to coordinate among classes. Less repetition...more depth.			x			
Demonstrations of skills applications			x	x		
e) Pair student with upper classmen to see clinical experience – Vertical integration Learning Plan	x	x	x			
Evaluate students more frequently			x			

Give student a day as a client of UMC in there area of expertise. I remember the movie the doctor where a MD was diagnosed with throat cancer. It changed his whole approach to his practice. There was a conversation recently where someone told me they didn't get proper treatment and my thoughts were if the situation were reversed that would never happen. Even just sitting in a clinic is a trying situation for most people. Especially if you are trying to entertain your child while you wait.			X	X		
Groups of four with attending > case based > connecting it all		X	X	X		
Hands on applied experiences			X	X		
Hands on practice			X	X		
Having lots of learning options available				X		X
Help faculty teach better, be more engaging/creative			X	X		
I believe as an institute we should focus on more research. I belive research and educaiton go hand-in-hand. I believe people learn so much with the hands on approach.			X			
I believe the instructors need to be more involved in our learning;for example,with my pharmacology class we only meet "in person" two times during the semester. There is a difference with asking questions through blackboard or group wise versus "in class". I believe this class is very important in order for us to succeed health care providers. As well as our Pathophysiology class we only meet two times "in house". USM meets for their pathophysiology,and I believe for their pharmacology class as well. We do want to succeed at UMC! We would have not chosen here over other state schools if we did not want to succeed! Thank you for giving me the time to give my input on the learning system at the UMC School of Nursing.		X	X			
I feel that somewhere in students education they should learn about cognitive erro's that are common to physicaian with the idea that awareness of this may help them guard against them. I beleive some medical erros are the result of minimization because of cognitive overload	X		X			
I think a course should be added that teaches professionalism and basic common courtesy. These are aspects that seem to escape some of these students although most of them are college graduates. Since they will be dealing with patients and patient families, they need to learn that they will be treating patients that are not JUST LIKE THEM. The ability to deal with all kinds of people on all levels will be essential and is something that should be practiced "while in school". I have observed students lack of basic courtesy towards the general staff and especially the housekeeping staff.	X		X		X	
I think there should be a central location for posting information for students, namely a webpage designed solely for providing info. The "student" link on the intranet is not very useful. This idea came about after I was questioned by a medical student on information about the Surgical Scholars Program. The student was looking for information about it and couldn't easily find it. We couldn't find it either after doing a search on the intranet nor on the "student" link. The student later told me that another student had to tell him to look on the Department of Surgery's website for the information. Also, the student said that the existance of the program was only casually, briefly mentioned in one lecture. I feel that this and other similar information should be widely and easily available to students.						X
<i>I would be glad to help. Since I have been out in the real world, I think of things we should have been taught while we were in dental school. Most of what I think about pertains to patient management: how to talk to patients, pain free injections and treatment, relating to patients, psychology of patients, etc. Let me know what I can do to help.</i>	X		X			
Identify specific outcomes			X			
images			X			
Implement more problem-based learning and test to that mode of learning		X	X	X		
Improve computer labs						X
Improve hardware in amphitheaters						X
Improve teaching skills			X			
Incorporate training for ICD-9 and CPT-4 coding for residents.	X		X			

Individual departmental laptops that plug into common podiums						X
Infection Prevention needs to be integrated in all areas where direct and sometimes indirect patient care is provided. This should include hand hygiene, modes of transmission of diseases and isolation precautions.	X		X			
info tech in health care delivery						X
information tech						X
Instruction on Palliative Care for both nurses and doctors as this is an area that could be improved upon in the hospital. Not only would this improve customer satisfaction, it would improve financial outcomes as end of life care in the ICU is very expensive.	X	X	X			
Integration of basic and clinical sciences			X	X		
interdisciplinary health care		X	X			
Interdisciplinary health care – creating teams that work together for optimum patient care (new JCAHO std).		X	X			
Interdisciplinary learning experiences throughout campus		X	X			
Interdisciplinary teams working on patient quality projects at the unit level. Involve students from all programs on the same team. Focus on safety/quality initiatives already identified by The Joint Commission or CMS. Outcomes will be enhanced abilities to work on a team, to solve problems, to think critically, to communicate effectively. Bonus outcomes will be improved patient outcomes, improved communication with patient/family, improved community relations.		X	X			
interprofessional collaboration		X	X			
j) Institution needs to tell what the teaching model is/clarity			X			
j. Make sure Distance Education Technology equipment is compatible at each DL site						X
k. Faculty Time Management to facilitate student learning			X			
l. Monitor student workload and demands on their time			X			
Learn how to write and think – how best to achieve that. How to read literature and do they believe what they have read? Critical thinking and writing skills are important - how to address these?	X		X			
Lohmeier's use of clicker questions and then asking an individual student to explain the correct answer to the class.			X	X		
m. A curriculum that progresses from simple to complex with identified semester outcomes and clear distinction of what students must know and be able to perform at each level as they progress			X			
More computer based learning.				X		X
more fac time in small group or lab settings can help weaker students.;			X	X		
More faculty interaction		X	X			
More frequent exams, smaller amounts of material, formative testing			X			
more labs with actual patients instead of classmates			X			
more on interdisciplinary respect and understanding		X	X		X	
More online classes, helps student study and work at their own pace.			X	X		X
More real life examples of information			X	X		
More space per computer					X	
More technology training for use of faculty "clickers"			X			
More time needs to be spent on teaching professionalism and working as part of a team.	X	X	X	X	X	
No departmental politics out of the classroom			X			
o Bring in real patients/volunteers for students to practice various skills			X	X		
o Need fresh specimens for laboratory exercises			X			
o Update student microscope slides			X			
o Faculty need sufficient resources and technology to offer online and distance education learning opportunities to students						X

Options for learning such as: IPODS, Technology, Access to Labs and Materials outside of class time				X		X
patient safety	X		X			
prevention/wellnes	X		X			
Professors getting along with each other			X			
Provide case-based events for modeling learning.			X			
Provide core facility training centers where aspects of technique/technology can be more readily supported as learning events. Dedicate personnel, time and facilities for these learning activities..						X
provide culturaaly competent care	X		X			
Provide educational training to faculty – how to learn/promote learning. Introduce the science of learning to faculty.			X			
Provide students with actual case based video instruction and simulations with respect to patient/doctor (or other provider i.e. nurse, therapist, pharmacist etc.) interactions. I have found that video taping techniques and actual procedures and demonstrations and interactions is more valuable than out and out lecture & laboratory formats.			X	X		
Psychology testing to determine student learning styles and assist those who have academic peril			X	X	X	
pt safety	X		X			
Pt safety & infection control	X		X			
pt, management - how to talk to, relating to, psychology of	X		X			
Qual imp	X		X			
Quality and Patient Safety	X		X			
r. Decrease classroom size from the large 100 student group to smaller groups to enhance individual learning and interaction with faculty				X	X	
Record lectures for students to review			X	X	X	
Reminded more of what doctors do > often			X			
Require faculty to meet to coordinate semester work.			X			
Require faculty to review, report, and implement the latest standards of practice as published in recognized journals of their specialty and assure these standards are taught to the residents in order that our physicians are prepared with up - to - date standards of practice when they go to other healthcare facilities.			X			
Resources for faculty			X			
Re-structuring all clinical rotations to include mandatory daily time for the imaging related to the specific specialty(rotation). The imaging should be conducted by radiology faculty in protected time as a mix of case-related images(introduce imaging strategy as part of the patient's management)and topic related mini conferences. This would enable the student to incorporate various imaging moadlities, including interventions in a structured way at an earlstage of career development	X		X			
s. Realize the limitations of the programs and curriculum and identify the “need to know” from the “nice to know”			X			
simulations			X			
Small groups with physicians – problem based			X	X		
Streamline computer instructions and						X
Structure is important			X			
consistency in information			X			
Student Research			X		X	
Student technology person						X

Students and faculty at UMC need more training in providing palliative, or supportive, care to seriously ill patients in Mississippi. This includes patients with various life-threatening illnesses who need symptom control for problems such as pain, nausea, dyspnea and other issues.	x	x	x			
students need education in purpose of utilization review, how coding and billing works, documentation of support for medical necessity and billing.	x		x			
Teach students to problem-solve	x		x			
Tech phobia free						x
tech support for distance ed			x			x
tech upgrades inclu basic sci infrastructure, core facilities, cooperative efforts,			x			x
Televised broadcast of real-time new surgical procedures which students can watch			x			x
Things that put medicine in perspective – clinical correlation, patient contact	x		x	x		
To gain a better understanding about how to teach diverse students. This could include different generations, genders, races, socioeconomic backgrounds, ethnic groups, etc. Faculty training could be a part of this.	x		x		x	
To help the public have a better impression of UMC and to give better care, students, residents, staff and faculty need to develop better listening skills and bedside manner. There might be a few surprised people if they were graded by a "standardized patient" on their communication skills and attitudes. The program, Clinical Skills Assessment Center, under Dr. Judy Gearhart, would be an excellent evaluation tool for UMC students, faculty and staff to see exactly how they are perceived by others. I have been an advocate of UMC for 20 years. Recently, I was seen in the Orthopaedic department. The experience was so bad, I am seeking medical care outside the University. This has just reinforced the fact that first impressions are really critical.	x		x		x	
Training must incorporate customer services,	x		x		x	
u. Focus on master of skills, no clock hours in clinical/lab			x			
v. Decrease the class size			x	x		
health care disparities by either utilization of health care policy makers and grass roots efforts by health care providers.	x				x	
diversity training	x				x	
seminar series or teleconferences with outstanding professionals,					x	
Create an International Studies learning environment and student exchange program with nursing students from other countries.					x	
26. More interaction between classes – M4s, M3s, M2s teaching each other.		x				
40. More ethical stuff that we don't talk about – how much of your personal beliefs should go into a patient interaction?	x				x	
41. More diversity stuff that we could talk about	x				x	
2. More interfacing with schools – we didn't learn because we didn't have expert x Interdisciplinary; multi disciplinary education >		x				
- do not depend too heavily on the residents' involvement in student learning that the time with faculty is limited		x				
- impart the process of thinking or how we think as well as what we think when evaluating patients	x					
2. Provide opportunities for cross-discipline mentoring.		x			x	
3. Provide a course to enhance writing skills, or another means to generally improve the ability of students to write scientific papers, dissertations, and/or grant proposals.					x	
More Interaction > Better Morale > Less Depressed		x				
2-offer opportunities (elective or extracurricular) for exploring the arts, music, literature, creative writing and medicine					x	
#1 HESI review/ test-taking strategies seminar (HESI or respective standardized tests for each UMMC school)					x	
#1 Record lectures on Polycom or Wimba for post-lecture retrieval to enhance studying					x	



· Increase library hours – open at 6am; stay open until at least 10 on Fri and Sat. Increase hours more during board study times. Open earlier on Sunday.					X	
· Increase the amount of problem-based learning.			X			
· More direct faculty involvement, esp in upper years. Offer mentorships.			X			
· More outdoor areas to sit and study.					X	
· Note-service for all schools.					X	
· Podcast /videorecording lectures available for all lectures.					X	
· Study skills workshops; student led and/or outside resource.					X	
1. students need to be taught ethics	X		X			
1. communication between faculty and students		X				
1. Expand/Enhance UMMC's computer resources to permit Med/Dental students to run case-based learning modules						X
1. improve students' critical thinking (application of information; generating new information; don't just test students on critical thinking-teach them to think critically and give them practice, practice, practice; listen to the patient)	X		X			
11. Critical thinking to understand how to diagnose and treat patients/put system information together.	X		X			
12. Professionalism in health care students.	X		X		X	
13. Ethical issues for health care workers.	X		X		X	
14. Service learning – working to help others and imbed learning.		X			X	
15. Use of technology to increase student learning.						X
2-offer opportunities (elective or extracurricular) for exploring the arts, music, literature, creative writing and medicine					X	
2. teach study skills appropriate to professional education					X	
2. Developing a core learning facility that focuses on career related topics such as position announcements, alternative careers (public health, public policy), provides training in management techniques for individuals about to enter the job force, etc.					X	
2. Developing a core learning facility that focuses on development of writing skills					X	
2. ESL (English as a Second Language) classes,					X	
4. a formal mentoring process – upperclassmen; recent graduates; not-so-recent graduates		X			X	
4. formalized method of using faculty retirees in training					X	
8. Cross-cultural understanding to increase student's ability to identify health needs.	X				X	
A focus on patient safety and quality improvement models. I see new nurses and new residents who finished their respective programs without any knowledge of what patient safety really means, why it is so important, and how to apply it to their practice.	X					
A writing center☐					X	
a) Performance driven incentives; i.e., discounts on tuition, etc.					X	
Access to classroom/laboratory spaces – professional students need to be treated as professionals.					X	
advocacy for vulnerable pts	X					
Allow students to put money in an account so that we can swipe our ID cards to pay at the cafeterias just like the regular employees. That would be incredibly convenient, especially during third and fourth years.					X	
b) Summer research institute for students in each department					X	
business writing					X	
c) Academic center					X	
c) Mentoring					X	
c) Research opportunities					X	
c. Offer a medical Spanish elective					X	





PFORM: Putting Faces on Rural Medicine: <input type="checkbox"/>						
<input type="checkbox"/> I marvel at the number of medical school applicants that have experience doing mission work abroad and profess a strong desire to return to these sites. The reason is their experience has been personalized.....the faces of people they have served are etched in memory. Yet these same altruistic students rarely express interest in serving the healthcare needs of rural Mississippi because, in part, they lack a similar personal connection. <input type="checkbox"/>						
<input type="checkbox"/> The concept of PFORM is to enhance the quality of educational programs in all UMC schools by focusing on rural healthcare needs through interdisciplinary teams of students gaining personalized educational and clinical experiences. A vital component is etching the faces of Mississippians in need in minds of our students. <input type="checkbox"/>						
<input type="checkbox"/> A strong foundation for PFORM can be achieved by bringing together under one umbrella disparate educational and clinical training opportunities that already exist. Some that come to mind include independent clinical outreach programs for the needy already in place for students in SON, SOD and SHRP, most notably employing distant fixed and mobile clinics [busses]; off-site hospitals/clinics operated by UMC or used for Family Me						X
plan for student tutoring		X				X
professionalism						X
Provide comfortable chairs and tables						X
quality improvement content in curriculum						X
Quiet settings with enough amenities						X
Quiet study spaces						X
Recordings are great – this is awesome						X
Repetition			X			
Teach students Joint Commission standards	X					
Students would also need information about the financial aspects of health care as physicians and nurses are now required to understand and place into practice the policies by Medicare and Medicaid.						X
Study support tool						X
t. Facilitate student responsibility for student learning						X
teamwork	X					
time-mgmt						X
to develop a multi-year program that would allow the student to finish school with a proficient knowledge of medical spanish. this program would include instruction as well as language and cultural immersion throughout the students' tenure at the school. this program could be individually taylored to fit each school's schedules. i had envisioned this to be a voluntary program to be offered to incoming students, however, there may be room to fit part of this into various curriculums/rotations. <input type="checkbox"/>						
<input type="checkbox"/> ideally, the student would be able to obtain a certification of some sort in medical spanish. this would be an advantage to the student when looking for residency or job placement as well as an advantage to the school when trying to attract the most highly qualified applicants to the school.						X
Virtual patients						X
w. Minimize technology problems, such as disconnections, interruptions with video and/or audio						X
We should make improvements to our orientation process especially in our distance learning programs.			X			
We're way behind on technology > Vista? Mac support?						X
weekly seminars by outstanding clinicians and scientists						X

