



SCHOOL PROFILE

- Founded: 1907
- Total Students: 214
- Total Faculty: >1000

CHALLENGES

- Decentralized, paper-based Evaluations process
- CurrMIT import tedious and labour intensive
- In-house Student Logging system lacked usability and adequate data output

SOLUTION

- Adopted standardized evaluation forms across multiple student groups
- Used Curriculum Management Module to replace manual CurrMIT import
- Logged clinical experiences using Procedure Logs and Patient Encounter Logs

RESULTS

- Successful LCME Accreditation
- New best practices through collaboration with one45 CS team
- Administrators freed from tedious data entry

Sanford School of Medicine Sets New Standard for Evaluation, Curriculum Management & Logging

“Thanks to the centralized curriculum management, oversight systems and student logging systems from one45, we had a very successful LCME visit.”

- Edward Simanton, PhD

Director of Evaluation and Assessment, Sanford School of Medicine

The Sanford School of Medicine of the University of South Dakota (USD) has one of the top rural medicine programs in the US and is home to 214 students and over 1000 full time faculty members. Since it was originally founded in 1907, the school has set the standard for the medical education of students, residents and healthcare professionals in the state of South Dakota.

While conducting a self-study in preparation for a 2009 LCME site visit, USD recognized its use of paper-based evaluations as an area that needed improvement. The school also recognized the need for a more efficient way to import the school’s curriculum into the CurrMIT database as well as a new logging system. USD sought a unified, comprehensive solution that would simplify clinical evaluations, student logging, and curriculum management.

Overhauling Paper-Based Evaluations

Leading up to the self study, USD found that evaluations of courses, clerkships, students and faculty were handled very differently by different departments. This resulted in a high level of variability in policies, anonymity, and data quality. In order to meet accreditation standards, a comprehensive and centralized program evaluation method was needed. “We are a

community-based medical school with students spread out over dozens of sites and hundreds of clinicians over the entire state. We needed a system that could track sites and schedules and faculty and send out automated evaluations in a single integrated system,” explains Dr. Edward Simanton, Director of Evaluation and Assessment at Sanford School of Medicine.

With the help of one45’s Client Services team, USD set up dozens of standard evaluation forms which are used across multiple student groups in the school’s undergraduate program.

The screenshot shows a software interface with a navigation bar at the top containing 'Schedules', 'Sendouts', 'Reports', 'Forms', 'Setup', and 'Support'. The main content area is titled '9 Send Out Info' and displays the following information:

- 9: May 16 - Jul 8, 2011**
- Initiated on Jun 28, 2011
- Sent by [Name]
- Form Stats** (includes single sends but does not include forms that have not been distributed yet)
- Completed / Sent
- Student: 11 / 11 (100%)
- Resident: 0 / 0
- Faculty: 0 / 0
- Admin: 0 / 0
- Total: 11 / 11 (100%)**
- Send Schedule!** [view all](#) (does not include single sends)
- Rot'n Form # Sent
- General Pediatrics - Clerkship Evaluation 2 Jul 3
- Black Hills [view](#) Revised 06-10
- Pediatrics Clerkship Evaluation 2 Jul 3
- Student Evaluation of Clinical Faculty 7 Jul 3

Current status of evaluations sent to a Yr3 student group



“According to the LCME, the inadequate tracking of student experiences is one of the most common citations for schools.”

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The forms are centrally controlled and are easily revised and updated throughout the academic year. “We are constantly adding and editing forms,” Simanton says. “We feel well supported in this process. Help is always provided in a friendly way on a timely basis.”

CurrMIT-Friendly Curriculum Management

The school also noted that administrators were spending many hours entering data into CurrMIT using the direct interface. This labor intensive task caused additional strain on the school’s already limited resources. The school recognized the need for fundamental changes to its curriculum management methods. “We were still teaching faculty how to write objectives and we needed to have everything up and organized and centralized with our schedules and objectives and mappings,” says Dr. Simanton.

Using one45’s Curriculum Management module, USD now has a simple and straightforward alternative to the CurrMIT interface. Since the school’s comprehensive curriculum data is entered into the one45 system during schedule and course setup, administrators could now bypass the traditional CurrMIT interface and easily upload complete, current information to CurrMIT without having to duplicate any work.

In addition, the school mapped its curriculum with topics and other keywords for improved tracking and analysis.

Improved Student Experiences Logging

For logging student clinical experiences, USD had been using an in-house solution which offered limited reporting functionality to faculty and clerkships. This homegrown system, which was described as “slow and cumbersome” for student users, also presented accreditation challenges. The LCME ED-2 Accreditation Standard states, “... The faculty must monitor student experience and modify it as necessary to ensure that the objectives of the clinical education program will be met.” USD needed a robust system with central oversight to replace its in-house logging program.

Using one45, USD now has two types of logs to track student experiences—Procedure Logs and Patient Encounter Logs. Procedure logs are used for tracking procedures that a student has performed, and Patient Encounter Logs are used to track a student’s clinical experiences and diagnoses. USD also uses Competency Grids to compare a program’s required competencies against students’ log entries to measure learning outcomes.

Dr. Simanton is pleased with the improvements to student experience logging that his school has been able to make through one45.

“According to the LCME, the inadequate tracking of student experiences is one of the most common citations for schools,” he explains.

The screenshot displays the one45 interface for curriculum management. On the left, a tree view shows the curriculum structure: Med1 (2014), Med2 (2013), Med3 (2012), and Family Medicine Clerkship (Jul 12 2010 - Jul 15 2010). Under Family Medicine Clerkship, several lectures are listed, including 'Lecture: Evidence Based Medicine'. On the right, the 'Lecture: Evidence Based Medicine' page is open, showing tabs for 'Info', 'Mappings', 'People', 'Eval', 'Handouts/Links', and 'Objectives'. The 'Mappings' tab is active, displaying 'current mappings (2)' under the heading 'AAMC/LCME Hot Topics'. Two mappings are listed: 'mapping Evidence-based Medicine del' and 'mapping Population-based Medicine del'.

Competency mappings for “Evidence Based Medicine” Lecture



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- Edward Simanton, PhD
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LCME Accreditation and New Best Practices

USD decided to partner with one45 after carefully reviewing and comparing factors including ease of use, customer support, and the availability of customization. One45 was identified as the only complete Learning Experience Management solution which provided all the Evaluations, Curriculum Management, and Clinical Logging features that the school needed for a successful LCME site visit. Administrators were pleased that they could easily export data from one45 directly into third-party programs like Microsoft® Excel. Information from forms and logs within the system was freely available for correlations analyses.

In terms of the implementation process, Dr. Simanton says, “Everything was done in individual training sessions over the phone with staff members sitting at their desks involved in active learning. Departmental clerkship coordinators got to know training and support staff as if they were part of the family.” One45’s one-on-one coaching and support model made the training and transition process easy and enjoyable for the USD team.

Since implementing one45 in 2007, USD has not only been able to address the challenges it previously experienced, but it has also been able to improve existing processes through working with one45’s knowledgeable Client Services team.

“In several cases, we had ways of doing things that didn’t make much sense and when we were setting things up. Staff from one45 sometimes suggested alternate ways of handling things that they had seen at other schools.” says Dr. Simanton. The consultative support provided by one45’s Client Services team often led to the adoption of new best practices for USD.

“Thanks to the centralized curriculum management, oversight systems and student logging systems from one45, we had a very successful LCME visit,” says Dr. Simanton. “Even though we have been customers for several years, the customer support is just as fast and attentive as when we were brand new customers.”

Procedure name	Total
(Croup) Acute Laryngotracheobronchitis	0
Abdomen, other	0
Abdominal aortic aneurysm	1
Abdominal pain/tenderness	5
Abnormal physiologic development	0
Abrasion	0
Acid base disorder	0
Acid/alkali burn	0
Acne	2
Acute adrenal insufficiency	0

Patient Encounter log - total encounters count (left) and new blank log (right)

Visit www.one45.com to learn how other medical schools have simplified their learning experience management using one45’s evaluation and curriculum management tools.