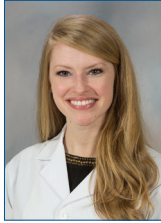




## Honor society bestows faculty teaching awards, inducts medical students, residents

By Lyssa Weatherly

The Gold Humanism Honor Society (GHHS) is a program of the Arnold P. Gold Foundation established to recognize medical students, residents and faculty who are exemplars of humanistic patient care and who can serve as role models, mentors and leaders in medicine.



Weatherly

The power of the society lies in bringing together like-minded individuals to sustain their own humanism and to inspire and nurture humanism in others. The GHHS honors medical students, residents, fellows and role-model physician teachers who demonstrate excellence in humanistic clinical care, leadership, compassion and dedication to service.

The Inspiration for GHHS began in the late 1990s when medical educators and residency program directors expressed the need for a way to identify applicants to residency training programs who had outstanding clinical and interpersonal skills. Thanks to a series of grants from the Robert Wood Johnson Foundation, deans, medical educators and experts in assessment convened to explore the viability of an honor society to promote humanistic values and behaviors.

Since its inception, GHHS has grown in stature and influence to become a vital part of medical school and residency training program cultures throughout the United States. The society currently has more than 25,000 members in training and in practice.

This past March, our newest group of 26 students nearing the completion of their M3 year was chosen for induction into the 2016-17 class of the Jeanette D. Pullen Chapter of the Gold Humanism Honor Society (GHHS) at UMMC. The selection process solicited input from medical student peers, clinical clerkship faculty and staff, and faculty and staff from the administrative offices.

These students were selected for demonstrating excellence in the areas of patient care, compassion and dedication to service. They will be officially recognized in our induction ceremony and dinner later this month.

Our chapter is very active on campus and hosts two very important events each year: the White Coat Ceremony for entering first-year medical students and the Student Clinician Ceremony for rising M3 students before the start of their clinical

duties. GHHS students also have the privilege of promoting humanism through activities and events for the School of Medicine and the entire Medical Center campus.

Past activities have included creating care baskets for patients' families, participating in mentoring programs and hosting a humanism in medicine lecture series. The administrative offices of the School of Medicine also rely on individual GHHS students to exemplify humanism during the year and to represent the school at a number of events, including orientations, student panel discussions, STEP preparation discussions and the School of Medicine's annual Family Day.

Each year, M3 students select six residents as recipients of the Arnold P. Gold Foundation Humanism and Excellence in Teaching Award. This award honors residents who have demonstrated an enthusiastic

commitment to teaching and who serve as role models for the compassionate treatment of patients and families, students and colleagues.

Winners of the 2016 Humanism and Excellence in Teaching Award include Dr. Chance Davis - Family Medicine; Dr. Savannah Duckworth - Medicine;

Dr. Ashley Griffin - Surgery; Dr. Ashley Johnson - Obstetrics/Gynecology; Dr. John Rushing - Obstetrics/Gynecology; and Dr. Diana Tate - Pediatrics.

GHHS student inductees for 2016 include Jeremy Archer, Brock Banks, Blythe Bynum, Ben Carroll, Ashton Davis, Joel Fahling, Hudson Frey,

Taryn Green, John Caleb Grenn, Daniel Krebs, Laurel Lackey, Tara Lewis, Daniel Lyons, Ian Mallett, Sean McCleary, Eric Merkle, Stephen Morgan, Josh Norman, Lauren Schober, Janeanna Shell, Ashley Villarreal, Maggie Wester, Richard Whitlock, Lauren Williamson, Mary Ruth Windham and Jesse Xie.



### Faculty spotlight: Dr. Lyssa Weatherly

Lyssa Weatherly grew up in Yazoo City and became one of only four graduates of her high school to attend medical school.

She obtained her undergraduate education from Mississippi College, where she majored in biology and chemistry and minored in mathematics, then attended UMMC for both medical school and residency training in internal medicine.

Weatherly said her desire to serve, her eagerness to learn and her love for people led her to medicine.

"I think these three passions have remained central, but also evolved over the past eight years to lead me down the paths I've chosen along the way," she said.

Her desire to serve others is at the heart of why she wanted to become a doctor and why she feels such a strong need to stay in Mississippi to do just that.

"I am so proud of what we do here, from training the next generation of Mississippi physicians in the classroom to healing her people on our wards," she said.

Weatherly has an almost unquenchable energy to learn and an enthusiastic desire to teach. It is the marriage of these two that has driven her to stay in academic medicine - a field where learning is endless and teaching possibilities abound.

"I have found a love for teaching in the classroom working with the M1 and M2 students in both Anatomy and Introduction to Clinical Medicine," she said. "I also value my time at the bedside with both medical students in their clinical years and residents in training.

"It is the love for people that makes my job so amazing. Taking care of patients is the most fulfilling thing I could ever ask for out of a career. It is a joy coming to work every day. When you add to that the opportunity to work with students and residents, I consider it the best job in the world."

Weatherly finished internal medicine residency in 2015 and is now a fellow in the Department of Geriatrics. She plans to stay at UMMC as faculty in both internal medicine and geriatrics, with duties in both undergraduate and graduate medical education.

She lives in Jackson with her husband, Brandon, a resident in the Department of Radiology.

# Curriculum Corner: E\*Value-ating curriculum mapping's effectiveness

By Tanya Reed



Reed

As we embark on The Journey, a map to our destination is one of the most important tools we can have.

The GPS for our curriculum is a much-needed guide to ensure we get to where we are going in a timely manner.

Although we may have worked very hard to ensure our GPS is correct, there is a time when all GPS systems need to be updated to ensure the accuracy of location. Now is the time of year to map where we are on our journey with the curriculum.

The curriculum mapping process provides a complete view of the curriculum for faculty AND administrators, helping faculty meet the responsibili-

ties of managing, administering and evaluating the curriculum.

The process is a valuable tool for administrators, helping them meet their responsibilities in administering the curriculum and providing them with a useful management aid. Using the map, faculty and administrators can identify all content, review teaching modalities, review assessment methods and assess resource requirements.

Curriculum mapping can help improve communication about the curriculum. The curriculum map can be a valuable resource for monitoring the curriculum and undertaking an internal or external audit.

If appropriately designed and utilized, the map can be customized to provide the required information for the auditors and necessary information for faculty management. LCME is very clear about the faculty being responsible for the curriculum content and management. The LCME believes in the vital role that faculty play in ensuring students are being best prepared for medical school.

**What are we hoping to achieve by mapping the curriculum?**

- Document what is taught and when
- Reveal gaps in the curriculum
- Help refine an assessment plan
- Improve communication among faculty LCME

**If curriculum mapping is to be effective, a couple of requirements are mandatory:**

1. The curriculum mapping initiative must have full institutional support and must be recognized as a mainstream curriculum planning and implementation activity.
2. There must be sufficient time for medical educational and E\*Value experts to ensure the map is completed by September 2016.

We recommend using the Curriculum Mapping spreadsheet that will be circulated to each coordinator and director. Courses should reflect AAMC guidelines and keywords.

If you have any questions or concerns about the curriculum map, email Tanya Reed at [tmreed@umc.edu](mailto:tmreed@umc.edu).

## Education Tip: The changing face of instructional design



Douglas

Wendell C. Douglas, an instructional designer, is the newest member of the Office of Medical Education.

With a background in faculty development, curriculum and instruction, teaching effectiveness, and educational administration, Douglas' primary focus will be to partner with teaching faculty to embrace and enrich the very intense teaching-learning experiences of medical students.

With the shifting of professional instructional design and testing formats to an application and evaluation platform several years ago to assess learning, the need to understand and embrace adult learning principles and to build and strengthen application-based, interactive teaching systems such as Team Based Learning (TBL), Problem Based Learning (PBL), interactive didactic strategies and blended learning opportunities, among others, has never been so pressing.

Douglas classified the overarching goal of the instructional designer: "In a collaborative partnership, we will seek to assess learner needs, understand and engage various learning styles and collaborate with teaching methods to deliver rich, interactive and effective teaching-learning experiences for our teaching faculty and students."

He emphasized a quote from Benjamin Franklin: "Tell me and I'll forget; Show me and I may remember; Involve me and I'll learn."

Douglas is available to advise, observe and offer suggestions; assist in developing TBL, PBL and interactive didactic strategies; and conduct faculty development sessions to assist departments, teams and individuals in meeting their interactive teaching and learning goals.

For more information, call Douglas at 4-1212 or email him at [wdouglas@umc.edu](mailto:wdouglas@umc.edu).

## Innovation: All aboard the Community Bus

By Dr. Loretta Jackson



Jackson

The objectives for the educational program for the SOM are listed in the bulletin. Those of us who lead, actively participate in and/or seek to impact the educational program use these objectives to determine which courses/clerkships need to be developed, modified or redesigned.

Course directors consider how to achieve these objectives. Some objectives require a bit of finesse to achieve. For example: Graduates must have the ability to use systematic approaches for promoting, maintaining and improving the health of individuals and populations.

There are a number of service learning opportunities in the curriculum designed to help students see the issues in the community that impact the health of individuals and populations. This year, one of our M1 courses – Population Health, Disease Prevention and Health Promotion – used a novel approach: taking students TO the community.

A small group of students in the class visited Stewpot, the Mississippi Food Network warehouse, Grace House, the Roadmap to Health Equity and the Jackson-Hinds Community Health Center – all places that provide significant services that impact the care of individuals and

the population – as part of the "Community Bus Tour." The tour was designed to expose students to the reality of poverty in Mississippi and in the local community and to show them some of the resources that are available to individuals and families who are in need. According to a post-tour survey completed by 75 percent of the students who participated, these goals were achieved.

One student wrote, "This was a fantastic experience. Despite being an involved Jacksonian for (more than) five years, I was unfamiliar with many of the sites that we visited. It was eye-opening and I discussed it at length with my friends and family members.

"Physically visiting these sites, speaking with the administrators and learning about the services offered at each location provided me with a framework to better understand the Jackson population and, most importantly, to deeply and truly empathize. The woman at the health equity center was right: We students tend to 'live in walls' and bury ourselves in books while we are training to become physicians and deal with people. I think this should be mandatory for all medical students."

Those who know of other ways to help our students and residents see the issues within the communities we serve are encouraged to email me at [ljackson@umc.edu](mailto:ljackson@umc.edu).

### CALL TO ACTION

Please email Tanya Reed at [tmreed@umc.edu](mailto:tmreed@umc.edu) if you have any opportunities to be advertised in Call to Action.