

## November 2018 Update

Dear colleagues,

Since my last update in February, our curriculum redesign effort has made tremendous progress. Our work in Phase I on the defining purpose – “Finding our Why” – culminated this past spring at our annual retreat for the Medical Education Committee (MEC). MEC members worked in small groups to discuss variations on our “why.” Eventually the entire group engaged in a process to reach consensus on our “Why” statement. We then shared this with the FEC, which engaged in rich conversation. The result of the process is a working statement of purpose for our education of medical students; our answer to “why:”

“To empower students to become physicians committed to excellence and leaders in innovation, research, health, education, advocacy and humanistic care.”

With Phase I now complete, the Curriculum Redesign Steering Committee (CRSC) has launched Phase II of the redesign process. In this phase, our goal is to define the “what” of the new curriculum: what elements or features need to be in the new curriculum to enable us to achieve the goals in our “why.” We formed four workgroups, inviting a wide range of individuals to participate. We’ve included a diverse group of stakeholders including faculty (from both clinical and basic science departments), education staff, residents, and students. All workgroup meetings are led by skilled facilitators involved in the CRSC, with the goal of generating a wide range of ideas.

Workgroup meetings began in early October, and all workgroups will complete six meetings by December 2018. The idea generation has been nothing short of inspiring, with dozens of rich and thoughtful contributions.

Later in Phase II, we will be expanding this idea generation to the entire DGSOM community. Stay tuned in coming weeks for the opportunity to submit your ideas on “what should be in our new curriculum.”

Regards,

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