

**MSU Public Forum - Wellness
Meeting Minutes
December 11th, 2019**

I. Opening Remarks

- A. **The purpose of this forum is to discuss wellness at Stritch, provide updates on current ongoing efforts at the University level, and engage in an open and productive conversation to work towards tangible solutions.** We initially considered including all topics mentioned in the Student Feedback Survey, but decided that it would be best to have a separate, more specific discussion at a later time, as each requires more dedicated time.
1. **Wellness during clinical years** - We recognize that wellness for M1/M2s can look very different from M3/M4s. Given the timing of this forum, we plan to focus mostly on preclinical wellness today. We apologize that this has made it difficult for students with clinical responsibilities to attend, but we were trying our best to accommodate various schedules. We hope to have a similar forum next semester focused on wellness during clinical years at a time when more M3/M4s are available to contribute.
 2. **Diversity** - We want to ensure that we have multiple perspectives from multiple students to support any initiatives moving forward, and recognize that many students who may be directly affected by this issue are not currently here, as many are not ready to speak about solutions right now. We have been working with SNMA and LMSA leadership, and hope to have a similar forum next semester in collaboration with them, PRIDE, and other student groups to discuss diversity issues at Stritch.
- B. Please try your best to avoid making assumptions about Nicole's situation, as well as Victor's and Mandie's, our classmates who have passed. Dean Mendez has received permission from their families to be open about their situations, and plans to speak to us at a time when each of our respective classes are together, where he can do so in a way that is respectful to them and their loved ones. Please just be cognizant of the fact that most of us don't know the entire situation. Please respect their memories and those who were close to them, and recognize that many people, including faculty and admin, are currently grieving and will continue to do so in the coming weeks and months.
1. Given that this forum is happening so soon, please just be aware that some of the voices who are most affected by Nicole's passing as well as by the larger structures of Stritch and the medical system are not currently here, but we hope to have further discussions after winter break when people may feel more ready to speak about these issues. We understand the anger and frustration, but think it's also necessary to make space for those who truly knew the gaps in her situation to be able to have time to identify necessary solutions and lead the initiatives towards addressing them.
- C. It's also necessary to consider how long we've been at Stritch, how our personal experiences may be different from our classmates, and the rationale for why certain structures/policies are in place before making assumptions about what is best for the entire class or school.

II. Overview of Current Wellness at Stritch

A. Perspectives

1. Online resources available 24/7
2. Unlimited 24/7 phone calls with a counselor
3. Unlimited in-person counseling with a counselor at Stritch (confirmed with admin)
4. 5 Psychiatry visits over 4 years with Comprehensive Clinical Services, with an initial referral from Pspts
 - a. Can work with you to accommodate additional visits on an as-needed basis
5. New recent contract added an additional counselor and increased availability for in-person sessions

B. Student Wellness Advisory Group (SWAG)

1. Serves as a liaison and advocates on behalf of the student body to ensure that student wellness concerns are represented, recognized, and provided for. Works to promote balanced, healthy practices among the diverse student population. Multifaceted programming, advocacy, and awareness efforts.

C. Wellness Committee

1. Composed of students and faculty. Students previously applied, interviewed, and were selected. Informal review of wellness resources looking at what various offices provide and keeping each other informed. Expanding to get further input about Wellness curriculum.

D. Wellness Curriculum

1. Required sessions for M1s/M2s throughout the year. Peer mentors lead topic discussions.

III. Stritch Student Feedback Survey Results

- A. [If you have not filled out the survey yet, please continue to do so here.](#)
- B. [M2 Class Board met with admin](#) and provided them with initial results.
 - 1. Feedback was categorized by idea/thought/concern and tallied by number of responses. **ALL** feedback was included and categorized. The results provided to admin also included many direct quotes and ideas about how to honor the lives of our classmates who have passed.
 - 2. The board is still collecting survey responses and adding it to the compiled results, so the finalized document of results will be made available to us at a later time.

IV. Current Ongoing Efforts (Sahand G.)

- A. Class of 2020 was the first class recruited by Dean Nakae, and has been one of the most diverse classes in Stritch history. However, [adequate systems and resources were not in place to serve their unique, different needs](#), and we have continued to lack these resources with following classes.
 - 1. Lack of adequate representation, resources, mentoring, academic support, and support for challenging lives outside of med school that the majority of previous Stritch students didn't have the need for.
- B. Literature has referred to med schools across the nation (not just us) as being in a "mental health crisis."
- C. At previous Dean's meetings, it has become obvious that we currently don't have enough resources to make changes. Our Deans support us in these initiatives, but they are just in charge of their specific department within the school. [Real, institutional changes need to come from the University level.](#)
- D. Previously met with [JoAnn Rooney, President of Loyola University Chicago](#) to discuss Stritch issues.
 - 1. Since then, she has appointed **Jim Flavin**, who has lots of experience in improving the culture of institutions in both the corporate and academic world. [He has been meeting with Stritch students to learn more about our personal needs, sitting in on Dean's/administrative meetings, and developing suggestions/solutions for how to improve the overall wellness of our student body.](#)
 - 2. Based on the many personal meetings with him, there is full trust in his intentions and abilities.
- E. Fr. Flavin wants to have further meetings with students (can be student only or also include Mark Torrez (Diversity) and the Ministry team).
 - 1. [Based on our input that we give him as students, Fr. Flavin will develop a report with suggested solutions on how to restructure Stritch, which he will give to the Board of Trustees of LUC in February.](#)
 - a. [This is the best way that we can play a role in making real changes in Stritch infrastructure.](#)
- F. **Based on meetings with students throughout the year, this is what Fr. Flavin has in his report so far:**
 - 1. [There needs to be someone/something in place to coordinate resources for all students, and allow for a streamlined way for these resources to communicate with one another.](#)
 - a. Wellness Dean?
 - b. Representative for Office of the President to have oversight over the school?
 - c. Not someone at an equal hierarchical level as Stritch Deans
 - 2. [There have been five main resources identified that students are served by/tend to rely on. Issues, gaps, and potential solutions include:](#)
 - a. **Perspectives**
 - (1) Concerns about availability and providers
 - (2) Concerns about this info getting back to Deans
 - (3) Potentially hire own providers to see outside of Perspectives, on campus or elsewhere
 - b. **Ministry**
 - (1) Things that no one else is in charge of falls on them
 - (2) Not everyone feels 100% comfortable walking into Ministry due to religious aspect
 - c. **Office of Diversity, Equity, and Inclusion (ODEI)**
 - (1) Office is too small, not a space for people to gather
 - (a) Will be moving to 2nd floor in the new year
 - (2) Was established after Stritch got a ding on LCME review for not having enough support
 - (a) This also happened at other med schools nationwide
 - (3) Deans are clinicians w/ little time, which makes it difficult to meet with them
 - (4) Previously had SAC-D committee that met monthly to discuss diversity issues, then formulated a report at the end of the year that was presented to Dean Goldstein

- (a) At the moment, we do not have anything similar with a leadership/committee entity that allows students to gather to discuss these issues

d. Academic Center for Excellence (ACE)

- (1) Need to improve academic resources. Medical students are more likely to seek out academic support vs. mental health support
- (2) Lack of personnel
- (3) Need to have more robust tutoring presence
- (4) Lack of STEP1 failure support
 - (a) Northwestern - students who didn't pass are immediately assigned a Kaplan tutor (\$5k)
 - (i) Cheaper than another full year of tuition

e. Student Affairs

- (1) Deans Mendez and Sonntag are overworked and understaffed
- (2) Loss of admin support
 - (a) Basically just Viviana, who is in charge of M1/2s
 - (b) There is money in the budget for 1 admin support per class, but this hasn't happened
- (3) Students feel that discussing personal challenges will reflect poorly on Dean's letter/residency. This is false. It's their job to present us in the most positive way possible.
- (4) Difficulties with adequate availability for student meetings
 - (a) Different needs for each class
- (5) Currently there to provide support to students who are struggling, taking time off, exam delays
- (6) Not enough resources for away rotations, career planning. Lack of experience surrounding unique needs

V. Open Discussion about Tangible Solutions for Wellness/Mental Health

A. Perspectives

- 1. Need to have accountability for counselors. We lose this since it's an outside resource.
 - a. Need evaluation on what they're doing, how well they're doing
 - b. Currently meet monthly w/ admin (?) and quarterly w/ Ministry (?) to discuss utilization rates
- 2. Students have come during set walk-in hours, and no counselors were even there. Counselors have also not been there during actual scheduled appointments, with no prior notice nor follow-up
 - a. This has happened to multiple students. Student Affairs doesn't even know this happens
 - b. When they had walk-in hours, students couldn't schedule individual appts during that time frame
- 3. Students who seek out Perspectives usually need urgent availability, not an appointment weeks later
- 4. Limited number of appointments makes it very difficult for students to seek care. It is hard enough to make the initial appointment and seek help, but the limit serves as another barrier
 - a. Students start rationing appointments
- 5. After reaching 5 psychiatric appts with CCS limit, had to meet with Viviana to get approval for additional visits. Shouldn't have to disclose mental health status to someone who isn't a licensed professional
- 6. Shouldn't just have only 3 on-site staff
 - a. Flexibility of phone calls is nice, but sometimes just want in-person connection
 - b. This is hard on the therapist too. Social worker burnout
- 7. Another student called the hotline, and was able to be connected w/ an outside resource for continuity
- 8. Disregards low-income minority students who don't have access to outside insurance to cover the rest of the appointments once they reach the 5 appointment limit. Should have some type of "equitable" (not "equal") system to accommodate students with different needs.

B. Ministry

- 1. Doing a great job!

C. Office of Diversity, Equity, and Inclusion (ODEI)

- 1. This office is doing barely enough to satisfy accreditation
 - a. In lit review of 172 med schools, Stritch is in the bottom third for diversity resources/support
- 2. Staffing and resource issue. Mark is overworked. Not enough support for the office to be able to provide student support.

D. Academic Center for Excellence (ACE)

- 1. Need professional tutors, not just student tutors

- a. Student tutoring is often just what they remember from the exam, not actually explaining/teaching
2. Inadequately staffed

E. Student Affairs

1. Response to students remediating/going through things is to take medication and/or take time off. This is not support. Students will still have the same issue once they come back.
 - a. Isolating, no follow-up, students have to reach out themselves
 - b. "Why didn't you figure it out before"
2. Issues with scheduling interviews. Admin often get involved in a semi-punitive way, not supportive
3. Lack of faculty/admin reaching out
 - a. When you fail an exam (or exam scores drop), no one reaches out/notices
 - b. Need point person to follow-up with people who take time off
4. Exam review policy
5. Course directors are not approachable

F. Need separate oversight/resource outside of Stritch

1. Wellness Dean from President's Office
2. Registered Student Organization for people to be at a certain place/time for study groups
3. We are students
 - a. Need to hire people who are trained to go into schools (like Jim Flavin), have seen what other schools have done with Diversity/Wellness and try to recreate that at Stritch
 - (1) We don't need to reinvent the wheel
 - (2) Fr. Flavin has been reading the literature and has met with other med schools
 - b. As students, we don't know exactly what everyone needs
 - (1) The institution is responsible for this. Pressure shouldn't be on us to fix the issue
- G. Develop formal petition, get the entire student body to sign it for Board of Trustees to see
- H. Will anything actually come from this conversation?
 1. President Rooney is ready to restructure everything, committed to putting in the necessary resources
 2. Most of the changes we're proposing probably won't happen while we're here, but it's important to take steps so these things will not happen again for future Stritch students
- I. M3 board is meeting with Deans Mendez & Sonntag
 1. Potential idea for ACE to coordinate
 - a. For students who fail course exam, STEP, or clerkship exam: Potentially be connected with another student in a similar situation to at least provide some student support and reduce isolation
 - (1) Short-term solution, with long-term solution being increased faculty/admin support
 - (2) This is too much responsibility on students
- J. Include Jim Flavin (or someone who is a presence outside of Stritch) in administrative meetings/sessions
 1. He's been at Leadership Council meetings

VI. Closing Thoughts and Action Items

A. MSU will reach out to Jim Flavin to meet/speak with him and share what we've heard so far

B. Set up multiple student forum sessions with Jim Flavin in January

1. All students can openly discuss their perspectives and provide input to the final report that he will give to the **Board of Trustees in February**
 - a. This report will lead to substantial changes at Stritch
 2. Multiple sessions to accommodate multiple classes and multiple issues
 - a. Potentially have one during next PCM-3 day (1/15)
 3. He is very available and wants to hear from as many students as possible
- C. Thank you to everyone who attended today. We really appreciate your valuable input and perspectives on how to move forward with tangible solutions. We'd also like to thank Sahand G., M4 Class President, for helping us lead the forum and playing such an integral role in making substantial changes towards improving wellness for our community.

VII. Adjournment