### GROUP A  
**STUDENT OWNERSHIP OF LEARNING**

1. Set clear expectation around student ownership of learning.
2. Provide faculty development programs to help engage students in learner-centered manner.
3. Entertain changes in the Fundamentals of Medicine series to promote student ownership of learning.
4. Consider different approaches to learning: flipped-classroom, PBL, student portfolios.
5. Survey other medical schools to see how they set expectations around ownership of learning.

### GROUP B  
**THE PREMEDICAL CURRICULUM**

1. Establish Year 1 student partnerships with Year 3 students which last two years.
2. Standardize Year 1 and 2 docent groups using common objectives.
3. Focus more intensely on professionalism in the Fundamentals of Medicine series.
4. Promote coursework in human nutrition and physiology or biology.
5. Achieve more consistency and expectations in course objectives across sections working with SBS and S&S.

### GROUP C  
**THE DOCENT SYSTEM**

1. More clearly define the criteria used to select docents.
2. Develop a retention plan for junior docents.
3. Develop the Year 6 docent clerkship to be a capstone experience.
4. Reflect the learning styles of 2015 students in pedagogy across the six years.

### GROUP D  
**COMMUNITY HEALTH**

1. Catalog existing courses, service learning activities, and community partnerships that focus on community health.
2. Formalize long-term community partnerships to address social determinants of health.
3. Establish processes to assess student interests that align with community health needs to strategically expand service learning experiences.
4. Establish and create sustainable mechanisms to fund faculty and student community health research.
5. Develop and incentivize faculty to become more involved in community health research.

### GROUP E  
**GRADUATE EDUCATION IN THE MEDICAL SCHOOL SETTING**

1. Create a culture of inclusion for all SOM students: undergraduate and graduate.
2. Promote program integration and collaboration within the school and across the campus.
3. Invest in people and facilities to support growth in graduate programs.
4. Invest in people and facilities to grow and market existing graduate programs.
5. Identify reward mechanisms for clinical faculty involved in graduate programs.

### GROUP F  
**STRATEGIC PRIORITIES AS THE SCHOOL APPROACHES 50**

1. Instill strong leadership with clear, short- and long-term goals and priorities.
2. Build a new facility.
3. Increase funding through increases in tuition and class size, new programs and improved alumni relations.
4. Begin a robust branding of UMKC School of Medicine, including all partner institutions.
5. Foster a robust research agenda and become recognized for our research efforts.