ABSTRACT
At the Medical College of Wisconsin (MCW), it is estimated that URM students on average make up 10% of the incoming M1 classes. The objectives of this study are: 1) to look at how MCW attrition rates compare nationally and determine if URM students are disproportionately represented in this data; and 2) to identify key areas where interventions may ameliorate the attrition rate among URM students and improve the academic atmosphere globally at our institution. Through a better understanding of MCW’s attrition rates and the impact on URM students at MCW, this project has the potential to identify opportunities to provide more holistic academic support and mentorship for academically vulnerable students and make it a more inclusive and desirable institution for future medical students.

BACKGROUND
The literature currently reports that the attrition rate of medical students is approximately 4-6% nationally. Few studies have examined the effect of attrition with regard to URM status and individual institutions rarely report these figures. Of those studies published [4-8], all found URMs to experience graduation delays and withdrawals at a significantly higher rate compared to non-URMs.[9] From 1992-1997, the AAMC reported that URMs were dismissed six times more frequently, were more likely to take a LOA, and three times more likely to still be enrolled in the sixth year of medical school compared to non-URM’s.[10] We examined several cohorts of MCW classes to determine what percentage of URM & non-URM enrollees have to repeat a year of school or drop out and do not return. We used a human-centered design sprints to identify key areas where students feel they are struggling and where they feel MCW can better support them. The design-thinking sprints would be facilitated by Kern Institute faculty and staff. Data from the sprints will be used to make connections between concerns, value, and proposed initiatives.

METHODS
We examined several cohorts of MCW classes to determine what percentage of URM & non-URM enrollees have to repeat a year of school or drop out and do not return. We used a human-centered design sprints to identify key areas where students feel they are struggling and where they feel MCW can better support them. The design-thinking sprints would be facilitated by Kern Institute faculty and staff. Data from the sprints will be used to make connections between concerns, value, and proposed initiatives.

RESULTS
1) Examine how MCW attrition rates compare nationally and determine if URM students are disproportionately represented in this data.
2) To identify key areas where interventions may ameliorate the attrition rate among URM students and improve the academic atmosphere globally at our institution.

OBJECTIVES
1) Examine how MCW attrition rates compare nationally and determine if URM students are disproportionately represented in this data.
2) To identify key areas where interventions may ameliorate the attrition rate among URM students and improve the academic atmosphere globally at our institution.

DISCUSSION
• URM students consistently reported feeling unsupported and undervalued compared to their non-URM peers with regard to academic support and remediation.
• Many students expressed concern that policies surrounding academic probation were depersonalized and often made students feel exiled, isolated, and under the microscope.
• Furthermore, academic remediation policies lacked transparency making students feel uncertain about next steps moving forward following disciplinary action.
• Students proposed having an extended orientation period prior to the start of classes to provide more transparency regarding academic issues and remediation including the availability of academic support services.

FUTURE DIRECTIONS
• Results of our investigation into the attrition rate of URM medical students and our design sprint were presented to our Dean, who proposed the implementation of a task force made up of faculty and student body leaders starting the 2019-2020 academic year.

BIBLIOGRAPHY

Figure 1. Graduation Completion By Race/Ethnicity

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