



**Program Evaluation Subcommittee (PESC)  
Chair: Dr. Alan Goodridge  
MINUTES**

Tuesday, March 15th, 2022  
12:30 – 2:00 pm WebEx Virtual Meeting

Attendees: Alan Goodridge (Chair), Kaela Barrington, Heidi Coombs, Taryn Hearn, Jasbir Gill, Amanda Pendergast, Bruce Sussex, and Katrin Zipperlen

Regrets: Hannah Brennan, Dawn Curran, Norah Duggan, Heather Jackman, and Rick Perrier

Topic	Details	Action Items
Welcome	A. Goodridge welcomed members to the meeting. The meeting did not have quorum, but continued as a preparation session for accreditation.	
Agenda	Review for Conflict of Interest: no conflict of interest was disclosed. Review/Confirmation of the Agenda: approved with no additions.	
Minutes	Review and Approval of Minutes: <ul style="list-style-type: none"> <li>February 22, 2022</li> </ul>	Carried Over
Accreditation - Review Question Prep Responses	<p>A. Goodridge presented B. Kerr and T. Hearn’s “Accreditation Question Prep Responses” document, which included additions by H. Coombs.</p> <ul style="list-style-type: none"> <li>Element 8.4 – ISA data indicates that students are dissatisfied with their pre-clerkship learning experience.</li> </ul> <p>H. Coombs provided data from the AFMC GQ (2021) demonstrating that the graduating class (2021) were satisfied with their pre-clerkship learning experience, which would be more indicative of satisfaction levels with pre-clerkship under ordinary circumstances since the Class of 2021 finished pre-clerkship before COVID. The Independent Student Analysis (ISA) data captures students whose pre-clerkship learning experiences were directly impacted by COVID restrictions.</p> <p>A. Goodridge stated there were two areas where PESC was most actively involved with COVID issues: gathering feedback on preferred online/remote teaching and learning methods; and, advocacy for the Clinical Skills program. B. Sussex noted that there has been remedial teaching provided for students who were affected by the reductions in</p>	A. Goodridge & H. Coombs to attend Accreditation Session about the impact of COVID

Clinical Skills sessions in 2020-21. T. Hearn suggested that A. Goodridge attend the accreditation session about the impact of COVID on the undergraduate program.

- Element 8.5 – There has been consistently low response rates on course evaluations, especially for Phase 3.

PESC has used a number of methods to increase response rates, including: sending multiple reminders; offering incentives; scheduling protected time in class schedules; and, reminding students about the importance of their feedback. In addition, the Faculty of Medicine has multiple sources of student feedback to supplement the course evaluation feedback, including: student representation on all Phase Management Teams, PESC, and the Student Assessment Subcommittee (SAS); QI sessions periodically throughout Phases 1-3; and, faculty evaluations after each block in Phases 1-3.

A. Goodridge noted that the low response rates could be a reflection of the stability of the curriculum. Response rates were much higher in the early years of the spiral curriculum as we worked through a number of issues with the new structure and delivery. When the spiral curriculum began, many of the courses were scoring 3.5 out of 5. We have witnessed a significant improvement over the years such that most courses are now scoring 4.0.

A. Pendergast added that the Faculty of Medicine has also conducted in-depth evaluations of certain curriculum components, such as the review of the Integrated Learning Sessions (ILS) which included a series of focus groups.

- Low Performance Procedure – Why does it take five “Red Flags” before there is an intervention with a faculty member?

A. Goodridge clarified that the Low Performance procedure comes into effect after three “Red Flags.” If there are an additional three flags (making six in total), a comprehensive plan is put into place involving the Associate Dean (UGME) and Associate Dean (PGME) and a meeting is held with the faculty member. H. Coombs noted that we now use the term “Low Performance Evaluation.” The DCI was written before the change. T. Hearn will ensure that any documentation for Accreditation includes the new language.

- Element 9.7 – It is unclear who monitors the delivery of formative feedback in Phase 4 and what happens if there is a recurring issue with a faculty member.

T. Hearn advised that midterm assessments and formative feedback for Phase 4 is the purview of the Clinical Discipline Coordinators (CDCs) and PESC will likely not be expected to speak to this Element. K. Zipperlen added that CDCs and Academic Program Administrators (APAs) schedule midpoint meetings with the students.

- Element 9.8 – Final grades for the MED8710 (Core) rotations have not been submitted to all students within the required 6-week timeframe.

A. Goodridge and T. Hearn agreed that that this is not something monitored by PESC but rather by Phase 4, SAS, and UGMS.

- Element 8.3 – What is our Curriculum Review process?

A. Goodridge explained that PESC oversees a review of the curriculum every 4-6 years. The Curriculum Oversight Subcommittee (COS) is a product of our last Curriculum Review (2018). PESC identified the need for higher level management of the entire curriculum, including monitoring the objectives and approving curriculum changes. T. Hearn advised that the accreditors may ask about our Curriculum Review process.

	<ul style="list-style-type: none"> <li>• Mistreatment</li> </ul> <p>A. Goodridge noted that mistreatment is addressed through multiple committees. PESC addresses issues that come to our attention through course, rotation, and faculty evaluation reports.</p>	
Accreditation – Comparative AFMC GQ Data	<p>H. Coombs presented data from the AFMC GQ (2021), comparing Memorial University results with national averages. She noted that student confidence levels that they have developed the clinical skills required to begin a residency program is 3.38 on a 4-pt Likert scale, above the national average of 3.31. Satisfaction rates with pre-clinical learning are at, or above, the national average in most areas. Satisfaction rates for all pre-clinical topics are trending upwards compared to the previous year (2020).</p> <p>She also shared the AFMC Mistreatment data, noting that for the item “Subjected to offensive sexist remarks/names,” the mean for Memorial – 1.92 on a 2-pt scale – is above the national average of 1.47. T. Hearn provided the summary of comments from the Independent Student Analysis (ISA) indicating that students experience instances of sexual remarks, belittling from other students and preceptors, and different treatment based on gender.</p> <p>H. Coombs added that the Faculty of Medicine’s Mistreatment Survey has been administered twice and provides more information about mistreatment-related experiences. The results have not been disseminated yet. But it is clear that we need enhanced education around what is inappropriate behaviour in terms of sexism/sexist remarks. She will check the <i>Professionalism in Practice</i> module for content related to inappropriate sexist remarks and bring the discussion to Culture of Excellence.</p> <p>In the AFMC GQ (2021), Memorial’s COVID response (2.35 on a 3-pt scale) was rated below the national average (2.95). This was likely related to the restrictions in place in NL, the distributed nature of our program, and the cancellation of visiting electives. For accreditation, we need to discuss the specific ways in which COVID impacted the delivery of the curriculum.</p>	<p>H. Coombs to check the Professionalism Module for content related to inappropriate sexist remarks</p> <p>H. Coombs to bring the Mistreatment discussion to Culture of Excellence</p>
QI Session – Phase 2	<p>H. Coombs presented a summary of the QI Session for Phase 2 (March 7th). There were 17 responses to the survey and the session was well attended. The main issue raised was related to the availability of WebEx to attend class from home. H. Jackman addressed this with the class and the Phase 2 Management Team spent a significant amount of time discussing this at the March meeting. T. Hearn noted that Memorial is not a virtual school and that in-person teaching and learning is fundamental to our MD program. B. Sussex added that students who attend sessions online often do not contribute to the session and are less engaged than those who attend in-person.</p> <p>The committee agreed that WebEx has been helpful for continued learning during COVID, but it cannot replace the in-person learning experience.</p>	
Learner Representation	<p>D. Curran – not present. H. Brennan – not present. R. Perrier – not present.</p>	
	Meeting adjourned at 1:51PM	

Next Meeting: Tuesday, April 19th, 2022 - WebEx