



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

Tuesday, April 19th, 2022
12:30 – 2:00 pm WebEx Virtual Meeting

Attendees: Alan Goodridge (Chair), Kaela Barrington, Heidi Coombs, Norah Duggan, Taryn Hearn, Amanda Pendergast, Rick Perrier, and Katrin Zipperlen

Regrets: Hannah Brennan, Dawn Curran, Jasbir Gill, Heather Jackman, and Bruce Sussex

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"> March 15, 2022 	Deferred to May meeting
Reports	<p>Phase 1 Course Evaluation Reports</p> <p>A. Pendergast presented the Phase 1 Course Evaluation and Summary Reports. The Phase 1 Management Team met in March and discussed the reports. A. Pendergast prepared Response Reports and sent to H. Coombs who will disseminate to PESC.</p> <ul style="list-style-type: none"> MED5710: Patient I – The overall mean was 4.1, up from 4.0 last year (2020-21) and the response rate was 28%, down from 36% last year. No items were rated below 3.5. The Anatomy labs were in-person for the first time in several years and were well received. Issues related to the delivery of the labs have been addressed and changes are being implemented for next year. MED5720: Clinical Skills I – The overall mean was 4.6, up from 4.4 last year (2020-21) and the response rate was 30%, consistent with last year. No items were rated below 3.5. The CanMEDs roles were all above 4.3% and the mean score for curriculum delivery was 4.7%, up from 4.0%. There were no major weaknesses identified in this course. 	H. Coombs to send the Phase 1 Response Reports to PESC.

	<ul style="list-style-type: none"> • MED5730: Physician Competencies I – The overall mean was 4.1, down from 4.2 last year (2020-21), and the response rate was 26%. The highest-rated component of the curriculum was Health Ethics & Law in Medicine (4.3) and the lowest-rated components were Interprofessional Education (3.5) and Measuring Health Status – Biostatistics & Epidemiology (3.6). The content of Biostatistics has improved but students still advocate for an assignment rather than exam. The Curriculum Oversight Subcommittee met with Community Health & Humanities about transitioning the assessment from an exam to an assignment. The re-scheduling of the Integrated Learning Sessions (ILS) to after exams has been well-received. Recruitment for ILS facilitators will begin earlier next year. • MED5740: Community Engagement I – The overall mean was 4.2, consistent with last year (2020-21), and the response rate was 28%, also consistent with last year. No items were rated below 3.5. The mean for curriculum delivery was 4.3 and all items were rated 4.1 or higher. There were some difficulties recruiting facilitators for early clinical experiences. 	
	<p>MCCQE 2021</p> <p>K. Zipperlin presented the MCCQE results for the Class of 2021. The pass rate for Memorial graduates was 96%, compared to 97% for Canadian graduates. The total mean score performance for Memorial graduates was 255, compared to 263 for Canadian graduates. The general trend was that Memorial graduates scored below the Canadian reference groups in Dimensions of Care and Physician Activities.</p> <p>Although there has been a slight decline in the overall mean score and sub-scores, the historical performance of Memorial graduates has remained relatively stable and remains within one standard deviation of the mean.</p> <p>A. Goodridge thanked K. Zipperlin for the presentation and will present the report to UGMS. The committee has begun tracking the lowest performing objective categories for Memorial graduates and will monitor these categories going forward.</p>	<p>A. Goodridge to present the MCCQE 2021 results to UGMS.</p>
	<p>Learner Satisfaction with Assessment</p> <p>K. Zipperlin presented the Learner Satisfaction with Assessment report. She noted that historical trends in learner evaluations of assessment for all courses in all Phases have largely remained stable, though Clinical Skills II has been trending down over the past two years. Satisfaction with the assessment of Community Engagement II and III has improved over the past year since the assessment of those courses during the previous academic year (2020-21) had been significantly impacted by COVID-19. In Phase 4, the use of e-Clinic Cards in Core Experiences continues to receive lower ratings compared to the other assessment methods; and, Clinical Skills IV and Physician Competencies IV continue to receive lower ratings compared to the clinical Phase 4 courses.</p> <p>K. Zipperlin recommended monitoring Clinical Skills II, in terms of the downward trend in satisfaction with assessment, and Clinical Skills IV and Physician Competencies IV.</p> <p>N. Duggan added that part of the challenge with Clinical Skills IV and Physician Competencies IV is that the courses are “siloes” and consist of independent work that the students complete on their own. Phase 4 is planning to introduce some Academic Half-Days during Core for the ethics components.</p> <p>A. Goodridge thanked K. Zipperlin for the presentation.</p>	

Course Assessment Reports/Action Plans

K. Zipperlin presented a summary of action plans from the Course Assessment Reports.

PHASE 1

- Patient I: Monitor feedback regarding administration of Anatomy exam.
- Clinical Skills I: No issues.
- Physician Competencies I: Change assessment method for Biostatistics.
- Community Engagement I: No issues.

PHASE 2

- Patient II: Monitor learner performance.
- Clinical Skills II: No issues.
- Physician Competencies II: Review assignment description and rubric (completed). Training of teaching assistant graders (ongoing). Provide more information during Phase 2 introduction (to be included for 2022-2023 academic year).
- Community Engagement II: Preceptor recruitment for Community Visit.

PHASE 3

- Patient III: Continue encouraging faculty instructors to submit appropriate questions following MCQ writing guidelines (ongoing). Encourage faculty instructors to provide explanations for formative questions (completed; communication sent by UGME Associate Dean Dr. Hearn).
- Clinical Skills III: No issues.
- Physician Competencies III: Review assignment description and rubric (completed). Training of teaching assistant graders (ongoing). Communicate assignment expectations with a sample of passing performance (review feasibility of providing sample, follow-up with Phase 3 Lead Dr. Gill).
- Community Engagement III: Preceptor recruitment for Community Visit.
- Phase 4 Preparation: Provide assessment schedule to learners. Course to be delivered in-person in June 2022.

PHASE 4

- Core Experiences: No issues.
- Electives: No issues.
- Advanced Practice Integration: No issues.
- Physician Competencies IV: Physician Competencies Lead Dr. Atkinson reviewed use of Phase 4 Research Day with Phase 4 Research Lead Dr. Hierlihy. They recommend keeping Phase 4 Research Day as it provides an important method to assess knowledge translation.
- Clinical Skills IV: OSCE and mandatory procedures were not delivered due to COVID-related absences.

Accreditation Update	T. Hearn provided a post-Accreditation visit update. There will be a follow-up Accreditation visit on May 11th and PESC may be asked to attend. She anticipates that we will receive the final report from CACMS in January 2023.	
Learner Representation	D. Curran – not present. H. Brennan – not present. R. Perrier – nothing to report.	
Updates	Phase 1 – A. Pendergast had no further updates. Phase 2 – H. Jackman sent regrets. Phase 3 – J. Gill sent regrets. Phase 4 – N. Duggan had no updates.	
New Business	<p>Survey for Phase 4 Faculty</p> <p>H. Coombs suggested that the Faculty of Medicine administer a survey for faculty who teach in Phase 4, similar to the surveys that go out to faculty who teach in Phases 1-3. This would be an opportunity for faculty to provide feedback on their teaching experiences in Phase 4. The question of feedback from faculty who teach in clinical settings was mentioned during the Accreditation Site Visit in April.</p> <p>T. Hearn agreed with the idea and added that faculty who teach Academic Half-Days should also be given an opportunity to provide feedback.</p> <p>The committee agreed. K. Zipperlen suggested a question about assessment on the survey. H. Coombs will look into what is being done at other Medical Schools for gathering feedback from faculty during clerkship and put together some survey options.</p>	H. Coombs to complete an environmental scan on feedback from faculty during clerkship.
	Meeting adjourned at 1:51PM	

Next Meeting: Tuesday, May 17th, 2022 – WebEx