

Student Assessment Sub-Committee		DATE	January 28, 2015
		ROOM	PDCS Room 4
CHAIR	Dr. Vernon Curran, Chair		
MEMBERS: 2013 - 2014	<i>Dr. Victor Maddalena, Phase 1 Lead</i> <i>Dr. Lisa Kenny, Phase 2 Lead</i> <i>Dr. Joanne Hickey, Phase 3 Lead</i> <i>Dr. Katherine Stringer, Phase 4 Lead (Clerkship Coordinator)</i> <i>Dr. Amanda Pendergast, Phase 1 Assessment Lead</i> <i>Dr. Mike Hogan, Phase 2 Assessment Lead</i> <i>Dr. Jatin Morkar, Phase 3 Assessment Co-Lead</i> <i>Dr. Gokul Vidyansankar, Phase 3 Assessment Co-Lead</i> <i>Dr. Catherine Mah, Member-at-Large</i> <i>Dr. Jessica Downing, PAIRN Representative</i> <i>Dr. Donald W. McKay, Associate Dean, UGME</i> <i>Dr. Sean Murphy, Chair – UGMS Committee</i> <i>Ms. Diana Deacon, Educational Specialist (MESC)</i> <i>Mr. Stephen Pennell, Manager, Health Education Technology and Learning</i> <i>Mr. Chris Harty – Phase 1-3 Student Representative</i> <i>Ms. Stephanie Power-MacDonald, Clerkship Student Representative</i> <i>Ms. Melody Marshall, UGME Coordinator</i>		
PARTICIPANTS	Dr. V. Curran, Dr. D. McKay, Dr. K. Stringer, Dr. M. Hogan, Dr. A. Pendergast, Dr. C. Mah, Dr. J. Downing, Ms. D. Deacon, Mr. S. Pennell, Mr. C. Harty, Ms. G. McGrath		
RECORDING SECRETARY	<i>(Minutes Taped)</i>		
INVITED GUEST			
REGRETS	Dr. G. Vidyasankar, Ms. Stephanie Power-MacDonald		
MINUTES			
AGENDA	ITEM	DISCUSSION	ACTION
WELCOME	The Chair convened the meeting at 4:00 p.m.		
#1 REVIEW & APPROVAL OF MINUTES	<ul style="list-style-type: none"> Item 1.a Approval of November 2014 Minutes 	<ul style="list-style-type: none"> The Minutes from the November 2014 meeting were adopted as presented. <p>It was MOVED by S. Pennell, SECONDED by M. Hogan to adopt the minutes of the November 2014 meeting as revised.</p>	ACTION: MOTION to approve minutes

	<ul style="list-style-type: none"> Item 1.b Follow-up on action items 	<ul style="list-style-type: none"> The Education Specialist has written the UGMS Chair regarding MCC standards surrounding question and item development. The Associate Dean has proposed language for the summative assessment program making rubrics a part of all assessment plans. The proposals will come to SAS for approval at a later date. The Clerkship Coordinator has been working with HSIMS to edit wording on the ITAR for P2P. The Educational Specialist, Chair of SAS and the Associate Dean – UGME met to review accreditation standards. Accreditation has been included as an agenda item for this meeting. Student concerns regarding examination questions from previous blocks have been brought forward to the working group. A memo regarding the CGQ result summaries has been forwarded to UGMS. 	<p>ACTION: The Associate Dean, UGME will report back on rubrics for summative assessments.</p> <p>ACTION: Clerkship Coordinator will continue to work with HSIMS on ITAR edits.</p>
#2 Accreditation		The Associate Dean of UGME provided an overview of accreditation activities and noted that a written submission and draft timetable has been prepared and presented to the accreditors. Faculty and staff continue to prepare for the visit of four accreditation representatives.	
#3 Assessment Updates	Phase 1	The Phase 1 meeting was held last week. Students are now completing community engagement and special projects. There have been no concerns regarding formative or summative assessment.	
	Phase 2	<p>The phase 2 group has met and preparations are underway for the commencement of phase 2.</p> <p>Results of last year’s phase 2 assessment reviews have been discussed and suggestions for improvement have been implemented.</p> <p>A very detailed schedule has been created which includes:</p> <ul style="list-style-type: none"> due dates for questions, dates of weekly review meetings; and, assessment and reassessment dates. 	
	Phase 3	Dr.’s J. Morkar and G. Vidyasankar and have been named as phase 3 assessment co-leads.	

#4 Assessment Updates	Clerkship	<p>It is noted that every time that a new rotation is offered it is considered a new offering of the course. New University regulations state that students must be made aware of assessment prior to the end of the first week of classes. This regulation will take effect with the next iteration.</p> <p>To assist with the monitoring of clerkship assessment, an annual form will be required to be filled out by each discipline to ensure that the assessment is the same across all clerkship sites. The information will be standardized by C-Blue.</p>	ACTION: The clerkship assessment form will be added to the table of indicators to be reviewed annually.
	a. Internal Medicine Assessment Map	<p>A discrepancy in a percentage allotted to an ITAR used in New Brunswick has been identified. Percentages should be the same for all students regardless of their location. As such, an updated internal medicine assessment map has been presented for the committee's feedback. The updated map will be presented to UGMS for approval at their next meeting.</p>	ACTION: The updated internal medicine assessment map will be presented to UGMS for their review.
#5 Formative Summative Assessment Monitoring and Evaluation	a. Reports from Educational Specialist	<p>Assessment report forms from Phase 2 were presented. The reports will be forwarded to the phase 2 lead.</p> <p>There were no major concerns raised for course 6750. The four examinations had similar ranges and means of item difficulty. The response rates were good for all four of the courses as were the mean ratings. For all four phase 2 courses a mean rating of greater than 3.5 was achieved. Students felt that the material reflected course objectives. There were numerous detailed comments. In general, students would like to see more questions on the summative exams.</p> <p>Clinical skills was well-received. All students passed with 28 judged as having exemplary performance. There was no item analysis, a pass/fail grade was provided. Mean ratings were above the benchmark.</p> <p>Special Projects included more assessment pieces. Generally, students did well and the overall mean percentage was 90. Students felt that they should have a clearer direction for the poster presentation and the feedback panels that were held in the IPST didn't seem to understand the assignment.</p> <p>Students provided a mean rating of 3.7 for effectiveness of assessment in the Community Engagement course. One of the concerns expressed was</p>	

		that having to complete the community profile assignment while they were on their placement took time away from activities that were supposed to be taking place in the community. The students also felt that they should have had more direction in regard to requirements for the community profile and that the handbook was restrictive and that marks for assignments were inconsistent. Preceptors also completed an evaluation of the handbook and gave ratings from 3.9 to 4.6 out of 5 for their usefulness in achieving the educational goals.	
	b. Responses to reports to Course Chairs and Phase Leads	No responses have been received from course chairs.	ACTION:
	c. Quality Review of Assessment Tools/Instruments	The educational specialist provided the results of the quality review check of assessment tools which has been completed for phase 2 – 2013/2014. Work is ongoing on the quality review of assessment tools/instruments for phase 3.	ACTION: The Chair will bring forward the results of the Phase 2 quality review to the next meeting of UGMS.
	d. Phase 1 and 3 Exam Blueprints	Examination blueprints were circulated for the members to review.	
	e. Phase 2 Class of 2018 Assessment Maps	Phase 2 assessment maps were circulated by email prior to the meeting for the member’s review. A process has been suggested that will ensure version control on the assessment maps. The final versions of assessment maps will be uploaded to the student handbook and D2L will link to the handbook. Changes will be made to the handbook ensuring that versions are always current.	
#6 Clinical Decision Making Questions	MCCQE Part 1	There are two types of questions on the qualifying exam. While students take part in a “dummy exam” in preparation for the actual examination an effort is being made to ensure that these types of questions are being incorporated into the curriculum.	ACTION: A working group will be organized to come up with a strategy to promote and foster greater use of the MCCQE format for examination questions through phases 1 through 4.
#7 Review of Clinic Cards		There are some variations across the clerkship rotations in terms of the content and format of clinic cards, these include: <ul style="list-style-type: none"> • three-point scales vs. seven-point scales, 	ACTION: A draft revised clinic card will be presented at the next clerkship meeting.

		<ul style="list-style-type: none"> • daily vs. weekly. <p>There should be standardization across all curriculum with regard to clinic cards. Suggestions include:</p> <ul style="list-style-type: none"> • Cards to be collected and tracked by the discipline APA, • Three point scale; and, • Cards will be completed on a weekly or daily basis at the discretion of the discipline. 	
#8 Assessment Policy		This item has been tabled.	
#9 Business Arising		There was no further business.	
Adjournment		The meeting adjourned at 5:45 p.m.	