(Draft) Minutes / Action Items – <u>Student Assessment Sub-Committee Meeting</u>						
MEETING	STUDENT ASSESSMENT SUB-COMMITTEE MEETING MINUTES					
CHAIR	DR. VERNON CURR	DR. VERNON CURRAN				
DATE	September 26, 2012, Wednesday, Room 2862, 4:00pm -5:30pm					
MEMBERS AS OF September, 2012	Members: Dr. Vernon Curran, Dr. Donald McKay, Dr. Barton Thiessen, Dr. Weldon Bonnell, Dr. James Valcour, Dr. Jason McCarthy, Dr. Tanis Adey, Dr. Sean Murphy, Ms. Diana Deacon Students: Need 2 students for 2012-2013 year UGME Rep: Minutes Taped  9					
PARTICIPANTS	Attendees: V. Curran (Chair), D. McKay, D. Deacon, J. Valcour, B. Thiessen, J. McCarthy via (Teleconference)  UGME Office: Tape Recorded  6/9					
REGRETS	W. Bonnell, T. Adey, S. M	urphy	3/9			
AGENDA	ITEM	DISCUSSION	ACTION			
WELCOME /	V. Curran					
MEETING	opened	Call to Order				
START TIME	meeting 4:00 pm	No Quorum				
ADDITIONS TO THE AGENDA	Agenda	Agenda was reviewed.				
REVIEW / APPROVAL OF	• Item #1.a Review /	Minutes from June 2012 were reviewed.	ACTION:			
MINUTES	Approval of		Minutes were Reviewed			
#1 a.	Minutes		No quorum for approval. Approval postponed till October meeting			
			Moved:			
			Seconded:			
			Carried:			
		ACTION Items from June's Meeting:	ACTION:			
#1 b.	• Item #1.b	Reviewed Action Items:				
	Follow-up on ACTION Items	<ul> <li>Clinical Skills 1 and 2 assessment criteria forwarded to UGME has been approved.</li> <li>Formative/ Summative policy document revisions to incorporate ED-32</li> </ul>	<ul> <li>Items from June's Meeting were reviewed.</li> </ul>			

		were completed and revised policy documents forwarded to UGMS and approved.	
#2	• Item #2 a. Formative/ Summative Assessment Monitoring/ Evaluation  (Deacon)	Formative/Summative Assessment Monitoring/Evaluation  1. Historical Report of Summative Grades in Pre-Clerkship Courses  Ms. Deacon reviewed historical final grade data (past 3 years) for pre-clerkship courses. There were no significant concerns raised with the historical summary of final grades for each course. Final grades appeared to be consistent.  2. Assessment reports and responses from chairs  No outstanding issues with remainder of 2011-2012 courses. ISD I chair has not replied to assessment report, which identified serious issues with assessment in student comments. YR3 core clerkship reports for 2011-2012 will be prepared in October for PESC and SAS will go with these.	Add clerkship data from NBME reports and others as available.
#3	• Item #3. Update- Clerkship Assessment	<ul> <li>Update-Clerkship Assessment</li> <li>Dr. McCarthy joined by teleconference to provide an update on assessment changes in clerkship. Ms. Deacon also discussed support she has been providing to the clerkship committee and discipline coordinators.</li> <li>Requirement for students to pass all components of rotation assessment has been removed; includes NBME. Concerns raised around the use of the NBME as these exams are not designed around the specific objectives of the clerkship curriculum; may include items not specifically covered in our objectives. NBME identified as the main reason for failures in clerkship. Would like to replace NBME, but there is nothing to replace it with; there is no question bank readily available to replace it</li> <li>New pass/fail criteria for all rotations based on past performance</li> <li>Internal Medicine OSCE removed</li> </ul>	Drs. Curran, McCarthy and McKay and Ms. Deacon to meet to prepare final draft of a Summative Policy for Clerkship; draft to then be reviewed by SAC, Clerkship Committee and forwarded to UGMS for approval     Ms. Deacon to advise on development of Super OSCE as needed

- 4) "Super OSCE" under development for administration during Back to Basics in April 2013
  - o Internal Medicine-OSCE will not be offered this academic year due to a schedule overlap.
- 5) Mid-rotation feedback meeting with clerkship directors will be required for all core rotations
- 6) Clinic cards have been introduced as formative assessment tools
- 7) Mandatory procedures
  - T-Clerk Online System- electronic form of the Mandatory procedure manual. Hoping to be an effective way in which SAS collects data on the mandatory procedure manuals.
  - Idea is to ensure students know that they must do a minimum number of clinical encounters and if they don't complete this criteria there will be consequences
  - By improving the mandatory procedures manual this may discover that people are not meeting requirements, needs to make a plan of action for people who are not meeting the requirements.

## Future work

- 1) New OSCE exam
- 2) More robust assessment tools
- 3) Tools to identify and remediate students at borderline

## Discussion items

- ➤ ITERS are not getting handed in on time, they are coming back 2-4 months After the rotation is done, therefore students are getting their marks back late.
- ➤ Need to offer specialized faculty development sessions for faculty and residents on assessment. Some workshops are being offered through Certificate in Med Teach and Teaching Scholars program. Preceptors are an important audience for faculty development on assessment.
- ➤ Need to prepare a final draft of a Summative Assessment Policy for Clerkship.

			ACTION:
#4	• Item #4 a.  Medical Council of Canada Assessment Workshop, Thursday Sept. 6, 2012	<ul> <li>MCC &amp; Faculty Development (Assessment)</li> <li>The Medical Council of Canada Assessment Workshop was held on Thursday, September 6, 2012. 21 people attended. Very interactive workshop, great feedback from participants.</li> <li>Discussion about follow-up activities</li> <li>Dr. McKay suggested taking one discipline or course and applying the workshop process to its assessment plan as a pilot project; Radiology elective may be interested</li> </ul>	Dr. Mackay and Ms. Deacon to discuss further
ADJOURNMENT #7	> Item 7	<ul> <li>Meeting adjourned at 5:30pm</li> <li>Next Meeting date is         <ul> <li>Wednesday, October 24, 2012 in PDCS Meeting room.</li> </ul> </li> </ul>	