

<b>Student Assessment Sub-Committee</b>		<b>DATE</b>	November 26, 2014
		<b>ROOM</b>	PDCS Room 4
<b>CHAIR</b>	Dr. Vernon Curran, Chair		
<b>MEMBERS:</b>  <b>2013 - 2014</b>	<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>		
<b>PARTICIPANTS</b>	Dr. V. Curran, Dr. D. McKay, Dr. K. Stringer, Dr. M. Hogan, Dr. C. Mah, Dr. J. Downing, Ms. D. Deacon, Mr. S. Pennell, Ms. Stephanie Power-MacDonald Mr. C. Harty, Ms. G. McGrath, Dr. G. Vidyasankar		
<b>RECORDING SECRETARY</b>	<i>(Minutes Taped)</i>		
<b>INVITED GUEST</b>			
<b>REGRETS</b>	Dr. Amanda Pendergast		
<b>MINUTES</b>			
<b>AGENDA</b>	<b>ITEM</b>	<b>DISCUSSION</b>	<b>ACTION</b>
WELCOME	The Chair convened the meeting at 4:00 p.m.		
#1 REVIEW & APPROVAL OF MINUTES	<ul style="list-style-type: none"> <li>Item 1.a Approval of October 2014 Minutes</li> </ul>	<ul style="list-style-type: none"> <li>The Minutes from the October 2014 meeting were adopted as presented.</li> </ul> <p>It was MOVED by K. Stringer, SECONDED by C. Harty to adopt the minutes of the October 2014 as presented.</p>	<b>ACTION: MOTION to approve minutes</b>

	<ul style="list-style-type: none"> <li>Item 1.b Follow-up on action items</li> </ul>	<ul style="list-style-type: none"> <li>Standards surrounding the data collected for ED-27, 30; and, 31 have been added to the monitoring indicators to be summarized on an annual basis. UGMS will continue to collect the information.</li> <li>The chair followed up with the UGMS surrounding recommended edits for new phase 3 course assessment maps. There were no issues raised by UGMS with regard to the recommendations.</li> <li>A full review of rubrics for phase 1 has been completed.</li> <li>MELT has made a recommendation that the chair of UGMS should send an email to faculty surrounding the importance of using rubrics. UGMS has indicated that the email should be forwarded to faculty who have not developed rubrics should be sent.</li> <li>The quality review of tools used in phase 2 is ongoing.</li> <li>Blueprints for summative examinations will be brought forward as they are developed.</li> </ul>	<p><b>ACTION: D. Deacon to write UGMS Chair regarding the MCC standards surrounding question/item development.</b></p> <p><b>ACTION: The Associate Dean, UGME will send a targeted email regarding the development of rubrics.</b></p>
	<ul style="list-style-type: none"> <li>Item 1.b.i. Review updated monitoring indicators</li> </ul>	<p>SAS will ensure that data related to phase 4 assessment is reviewed on an annual basis and to ensure:</p> <ul style="list-style-type: none"> <li>a witnessed history and physical taking place for each student in each core rotation;</li> <li>timely summative evaluations;</li> <li>students are receive their final mark for each core rotation within six weeks; and,</li> <li>mid-point review meetings are taking place.</li> </ul> <p>A staff person from UGME will collect data from each discipline to demonstrate that each standard is being adhered to.</p>	<p><b>ACTION:</b></p>
	<ul style="list-style-type: none"> <li>Item 1.b.ii. Review ITAR instrument for Progression to Post-Graduate (P2P)</li> </ul>	<p>Progression to Post-Graduate is a longitudinal, integrated selective learning experience where 12 weeks of selectives are integrated into one course.</p> <p>The In-Training Assessment Report (ITAR) is a new tool which has been approved for use in the P2P course during Phase 4/Clerkship.</p> <p>The reason for reviewing the ITAR (in-training assessment report) was to incorporate those aspects of continuity and self-directed, integrated learning. P2P assessment incorporates a focus on continuity of care and</p>	<p><b>ACTION: ITARs should be edited to have “constructive criticism” read as “constructive feedback”.</b></p> <p><b>ACTION: K. Stringer to follow up on time limit indicated on ITAR.</b></p>

		<p>integration of learning.</p> <p>A recommendation has been made to change the wording of “constructive criticism” to read “constructive feedback”; and to change ITER to ITAR on all assessment forms.</p>	
#2 Accreditation		<p>The key accreditation items that are of interest to the SAS sub-committee include:</p> <ul style="list-style-type: none"> <li>• Ongoing review of phases (ED-35),</li> <li>• Ongoing reflection activity, life-long learning skills curriculum development and delivery (ED-5A)</li> </ul>	<b>ACTION: D. Deacon and V. Curran to meet and review accreditation standards.</b>
#3 Assessment Updates	Phase 1		<b>ACTION:</b>
	Phase 2	<p>There are still a number of students who have not submitted items for re-assessment.</p> <p>A number of students have not participated in Inter-Professional Skills Training (IPST) sessions, while the sessions are not mandatory changes may be required to ensure that students attend the session.</p>	<b>ACTION:</b>
	Phase 3	<p>Three assessment maps have been approved by UGMS for phase 3. Creation of the fourth assessment map “Preparation for Phase 4” course is currently underway and it is hoped that the map will be available early in 2015.</p>	<b>ACTION:</b>
#4 Assessment Updates	Clerkship	<p>Concerns were identified with the grading schemes for pediatrics and obstetrics/gynecology. These concerns have been addressed and revisions made.</p> <p>An issue with basing pass marks norm referencing instead of criterion referencing. A review of assessment will be undertaken for Phase 4 to ensure that pass marks are based on criterion referencing.</p>	<b>ACTION:</b>
#5 Formative Summative Assessment	a. Reports from Educational Specialist	<p>Reports on data for indicators related to assessment were presented.</p> <ul style="list-style-type: none"> <li>• Work continues of the phase 2 assessment reports with regard to</li> </ul>	<b>ACTION:</b>

Monitoring and Evaluation		mean scores, etc. These reports should be ready for the January meeting.	
	b. Responses to reports to Course Chairs and Phase Leads	There has been a marked increase in student feedback on the course evaluation forms. A summary will be compiled and presented at a future date.  To date, there is no response to reports from course chairs and phase leads.	<b>ACTION:</b>
	c. Quality Review of Assessment Tools/Instruments	Work is ongoing on the quality review of assessment tools/instruments for phase 2.	<b>ACTION:</b>
	d. Phase 1 Exam 2 - Blueprint	The blueprint is based on instructional time. Each examination will contain two items for every instructional hour. The exam has turned out quite well with 57 items. There was no item reduction required for any of the topics covered.  Students have expressed concerns that older questions are given more weight when there are fewer questions than originally planned included on the examination.	<b>ACTION: Student concerns with regard to older examination questions will be brought forward to the working group.</b>
	e. NBME 2009-2014 Summary Report	The NBME summary report is one of the SAS monitoring indicators which is completed on an annual basis.  The report includes a Canadian group comparison which indicates that our results are on par with the Canadian results.  Historically, the value of the NBME comprised most of the assessment map but that is no longer the case. It was also noted that students would have to pass the NBME in order to pass the rotation, but that has also changed.	<b>ACTION:</b>
	f. Canadian Graduate Questionnaire 2014	The CGQ was administered to the graduating students of 2014. The main of the CGQ report is to review questions specific to clerkship assessment.  The three year record includes mean ratings for MUN and all Canadian schools. The breakdown is provided by discipline and most results are in keeping with Canadian averages. It was noted that emergency medicine had the lowest mean rating and obstetrics/gynecology was also low but still on par with the Canadian counterparts. Family medicine is noted to have the	<b>ACTION: Memo for UGMS with regard to the CGQ result summaries.</b>

		<p>highest mean rating.</p> <p><u>Item 1 – performance assessed against learning objectives</u></p> <ul style="list-style-type: none"> <li>• Scores are consistently above 3.8.</li> <li>• Family medicine scores the highest; obstetrics/gynecology scores the lowest.</li> </ul> <p><u>Item 2 – students have sufficient access to a variety of patients/procedures</u></p> <ul style="list-style-type: none"> <li>• Family medicine scores the highest with 4.5 which is in keeping with the national average.</li> <li>• Psychiatry and obstetrics/gynecology have the lowest mean ratings, which is an ongoing trend. This may be due to access to case rooms and a range of patients in clinics. Current changes may cause an increase in ratings</li> </ul> <p><u>Item 3 and 4 – faculty member or resident observes patient history and provided feedback</u></p> <ul style="list-style-type: none"> <li>• It is expected that an improvement will be seen due to the addition of the mini-cex and revisions to the clinic cards. Students need to be made aware that a mini-cex includes a witnessed history and physical examination.</li> </ul> <p><u>Item 5 – student receives sufficient feedback on performance</u></p> <ul style="list-style-type: none"> <li>• Family medicine has the highest rating.</li> </ul> <p>A memo will be prepared for the UGMS Committee with copies provided to the Associate Dean – UGME and clerkship coordinator.</p>	
	g. MCCQE Part 1 – 2013 Report	<p>The results were received mid-summer, 2014 and relate to the 2013 school year. Seventy-two students wrote the exam with a 96 % pass rate. Nationally, the pass rate was 99%. This broad-based exam encompasses community health, legal and health, and core subjects.</p> <p>There were no causes for concern identified.</p>	<b>ACTION:</b>
#6 Article on C-Blue and Blueprinting		A standing item of the committee dealing with the creation of a document outlining the creation of C-Blue.	<b>ACTION:</b>

<p>#7 Proposed University Regulations and Implications for Assessment in Undergraduate Medical Education</p>		<p>Proposed changes to University Regulations affecting and problematic to the Faculty of Medicine include (among others):</p> <ul style="list-style-type: none"> <li>• Posting of instructor hours,</li> <li>• No form of evaluation shall take place or be due during the last two weeks of the lecturing period in any semester. The last week of the lecturing period in any session, with the exception of oral exams and presentations, lab reports, etc; and,</li> <li>• In no circumstances can the rescheduled work be held in the last week of lectures of a semester.</li> </ul>	<p><b>ACTION: SAS will compile suggested exemptions to the proposed university regulations upon which time the Associate Dean – UGME will write to the registrar for exemptions to the proposed university regulations.</b></p>
<p>#8 Business Arising</p>		<p>There was no further business.</p>	
<p>Adjournment</p>		<p>The meeting adjourned at 5:45 p.m.</p>	