Student Assessment Sub-Committee			DATE	March 25, 2015		
				ROOM	PDCS Room 4	
CHAIR		Dr. Vernon Curran,	Chair			
MEMBERS:		Dr. Victor Maddaler	na, Phase 1 Lead			
		Dr. Lisa Kenny, Phase 2 Lead				
2013 - 2014		Dr. Joanne Hickey, Phase 3 Lead				
		Dr. Katherine Stringer, Phase 4 Lead (Clerkship Coordinator)				
		Dr. Amanda Pendergast, Phase 1 Assessment Lead				
		Dr. Mike Hogan, Phase 2 Assessment/Co-Lead				
		Dr. Barton Thiessen, Phase 2 Assessment Co-Lead				
		,	nase 3 Assessment Co-Lead			
		Dr. Gokul Vidyasankar, Phase 3 Assessment Co-Lead				
		Dr. Catherine Mah, Member-at-Large				
		Dr. Jessica Downing, PAIRN Representative				
		Dr. Donald W. McKay, Associate Dean, UGME				
		Dr. Sean Murphy, Chair – UGMS Committee				
		Ms. Diana Deacon, Educational Specialist (MESC)				
		Mr. Stephen Pennell, Manager, Health Education Technology and Learning				
		Mr. Chris Harty – Phase 1-3 Student Representative				
		Ms. Stephanie Power-MacDonald, Clerkship Student Representative				
Amand		Dr. V. Curran, Dr. D. McKay, Ms. D. Deacon, Mr. S. Pennell, Mr. Mark Earle, Dr. G. Vidyasankar, Dr. Jatin Morkar (by telephone), Dr.				
		•	manda Pendergast, Dr. Kath Stringer, Ms. Gerona McGrath, Ms. Stephanie Power-MacDonald, Dr. Jessica Downing			
RECORDING SECR	ETARY	(Minutes Taped)				
INVITED GUEST						
REGRETS Dr. C. Mah		Dr. C. Mah				
			MINUTES			
AGENDA		ITEM	DISCUSSION		ACTION	
WELCOME	The	Chair convened				
	the	meeting at 4:00				
	p.m	•				
#1	•	ltem 1.a	 Minutes for January 28, 2015 were approved at this meeting. 			
REVIEW &	Арр	roval of January 28	Moved by Dr. Pendergast; Seconded by Dr. Curran			
APPROVAL OF	,		 Minutes for February 25, 2015 were approved at this meeting. 			
MINUTES	2015 Minutes		Moved by Dr. Pendergast; Seconded by Dr. Vidyasankar			

	 Item 1.b Follow-up on action items 	• The chair of UGMS will contact all the faculty members involved in the upcoming Phase 2 and remind them about the recommendation that rubrics are to be used for all written assignments.	ACTION: In progress.
		• Clerkship coordinator will continue to work with HSIMS on ITARs.	ACTION: Completed
		• Clerkship Assessment form has been added to the table of indicators to be reviewed annually.	
		 Updated Internal Medicine Assessment map will be presented to UGMS for review. Reviewed and approved at UGMS meeting last week. 	
		• Draft Revisions to the clinic cards will be presented at the next clerkship meeting.	ACTION: Not yet completed.
		 Students have questions about the process of handling Challenge cards for exams. 	ACTION: See Student Issues
		 Ms. Deacon to email policy and procedures to committee members to get feedback within 1 week. > UGMS has approved the Policy but not the procedures. Will now need to review additional items to be added to the procedures before presenting to UGMS for final approval. The Working Group will have another meeting in May to try to come up with guidelines for written assignments, i.e. the volume of written assignments and how they are being graded. 	ACTION: Follow up in April meeting.
		 Ms. Deacon to report on progress of Working Group re Clinical decision making questions (MCCQE Part I) The Working Group is in the process of getting a meeting together and recruiting a guest speaker to come in. 	ACTION: Follow up in April meeting.
#2 Accreditation		• The Chair stated that the site visit team was very positive and it seems everything went well. The formal report with	

		recommendations is not expected until June.	
#3 Phase I, II & III Assessment Updates (Assessment WG Leads)	Phase I	 No issues to report for Phase I All students have been promoted to Phase 2 	
,	Phase II	 Issues were tabled regarding challenge cards. Will monitor and need to come up with some guidelines about review process. First exam had high reassessment rate. 	ACTION: Further update next meeting.
	Phase III	Issues regarding the number of challenge cards. Will monitor and need to come up with some protocol.	ACTION: Further update next meeting.
#4 Clerkship Assessment Updates (K. Stringer)		 Dr. Stringer provided an update for Phase 4 with regard to the ITARs. The Clerkship Committee has recently adopted the AAMC Core Entrustable Professional Activities (EPAs) for entering residency. As a result the whole assessment mapping and rubrics have to be redesigned. Dr. Stringer doesn't have enough to bring to the committee yet – realistically won't be ready until June. Major changes in assessment plans for Phase 4. Some terminology changed in the new policy and we will now use the wording "assessment plan" rather than "assessment map" to avoid confusion. Clinic cards to be deferred to next SAS meeting. 	ACTION: Follow up at June meeting. ACTION: Dr. Stringer and Ms. Deacon to discuss.
#5 Student Issues		 Mark Earle, Phase II student, replaced Chris Harty as student representative for this meeting. Students found it difficult to find out what they had gotten wrong on exam questions under the new exam procedures. Students understand the change but the recommendation that students want passed on is that if things are going to change like this in the future, then communicate it to the students. The Chairman stated that the plan is to formalize the exam review procedures and policies on a go-forward basis and these will be posted on the MUN website. Students would like to see more focused objectives so it will be 	

		 easier to see where they went wrong on an exam. Students recognize that there is a problem with the challenge cards. They need some transparency to understand why some valid challenges get turned down. Students would like to see a 3rd person involved if a large percentage of the class gets a particular question wrong and the professor deems the question valid. The message to be taken back is that all challenge cards are taken seriously and there is an automatic review process in place to identify questions that a large percentage of the class get wrong. If deemed invalid, the professor is notified and changes are made. A matter that Chris wanted brought forward relates to the 75% grading recently put in place with the new curriculum. Why was the change made? Clerkship: Good verbal feedback doesn't always correspond to ITERs. Staff spend less time with clerks than the residents do, but generally are the people who complete the ITERs. 	ACTION: Add more detail to Procedures wording around steps involved in item review. ACTION: Ms. McGrath will follow-up with students in QI sessions. ACTION: Dr. Stringer will take to Clerkship.
#6 Formative/ Summative Assessment Monitoring/ Evaluation	a. Reports from Education Specialist (Diana Deacon) - Core Clerkships	 Ms. Deacon reviewed reports which were circulated to committee members beforehand. 	
	b. Responses to reports from Course Chairs/Phase Leads (Diana Deacon)	 Core clerkship assessment reports have been sent out. Responses reviewed from Pediatrics and Surgery. No issues. Also reviewed Clerkship Assessment Implementation Monitoring Forms from Pediatrics and Surgery. No issues. 	
	c. Quality Review of Assessment Tools/Instruments (Diana Deacon)	Nothing new to report.	
	d. Phase 2 and 3 Exam Blueprints (Diana Deacon)	 Reviewed Class 2018 Phase 2 Block 01, Class 2017 Phase 3 Block 04 exam blueprints. Main issue involves the number of questions for the various topics. A couple of topics did not have questions. 	

#7ITAR for P2P clerkship (K. Stringer)		P2P ITAR has been approved by UGMS.	
#8 Psychiatry clerkship marks		 Dr. Stringer reviewed the marks for Psychiatry. Would like to do better monitoring of Psychiatry. 	
#9 Business Arising	Assessment Procedure	 Need to add more detail to the assessment procedures particularly around exam review. Phase leads should have a look at the procedures and submit comments to the Chair or Ms. Deacon. 	ACTION: Ms. Deacon will send out a reminder and comments should be sent back within a week. Follow-up with final draft at the April meeting.
Adjournment		The meeting adjourned at 5:35 p.m.	