



## UGMS Meeting Minutes

Wednesday, September 15, 2021  
4:00-5:30 p.m.

**Members (in alphabetical order):**

Dr. Tanis Adey (chair), Associate Dean UGME	voting	Elizabeth Hillman, Assistant Registrar Faculty of Medicine	voting
Lindsay Alcock, Librarian & Head of Public Services HSL	voting	Dr. Andrew Hunt, Assistant Dean DME	voting
Craig Campbell, Learner representative Class of 2022	voting	Dr. Heather Jackman, Phase 2 Lead	voting
Dr. Vernon Curran, SAS Chair	voting	Brian Kerr, Curriculum & Accreditation Advisor	corresponding
Dr. Norah Duggan, Phase 4 Lead	voting	Dr. Todd Lambert, Assistant Dean NB	voting
Dr. Jasbir Gill, Phase 3 Lead	voting	Dr. Boluwaji Ogunyemi, Assistant Dean, Social Accountability	voting
Dr. Alan Goodridge, PESC Chair	voting	Carla Peddle, Manager UGME	voting
Melanie Greene, Policy Analyst	corresponding	Dr. Amanda Pendergast, Phase 1 Lead	voting
Yaswanta Gumjadi, Learner representative Class of 2023	voting	Stephen Pennell, Chair iTac	voting
Dr. Alison Haynes, Curriculum Lead	voting	Michelle Simms, UGME Administrator	recording secretary
Dr. Taryn Hearn, Accreditation Lead	voting	Dr. Margaret Steele, Dean of Medicine	ex officio (non-voting)

**Present** (in alphabetical order): T. Adey; L. Alcock; C. Campbell; V. Curran; N. Duggan; J. Gill; A. Goodridge; Y. Gumjadi; T. Hearn; E. Hillman; A. Hunt; B. Kerr; T. Lambert; B. Ogunyemi; C. Peddle; S. Pennell, M. Simms; M. Steele;

**Guest** D. McKeen

**Regrets** (in alphabetical order): A. Haynes; H. Jackman

**Absent** (in alphabetical order):

Topic	Action
Welcome	
Agenda review <ul style="list-style-type: none"> <li>• Review for Conflict of Interest               <ul style="list-style-type: none"> <li>○ None declared</li> </ul> </li> <li>• Confirmation of Agenda</li> </ul>	



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	<p><b>Motion:</b> To approve the agenda after the addition of AAMC Curriculum Inventory to New Business and to move Accreditation to after E-Votes.</p> <p><b>Moved:</b> N. Duggan <b>Second:</b> A. Pendergast</p> <p><b>In favour:</b> all <b>Opposed:</b> none <b>Abstained:</b> none <b>APPROVED</b></p>
<p>Review and approval of prior minutes – July 21, 2021</p>	<p><b>Motion:</b> To approve the minutes from the July 21, 2021 meeting.</p> <p><b>Moved:</b> N. Duggan <b>Second:</b> A. Goodridge</p> <p><b>In favour:</b> all <b>Opposed:</b> none <b>Abstained:</b> A. Pendergast; V. Curran <b>APPROVED</b></p>
<p>Introduction of Dr. Dolores McKeen, Vice Dean, Education and Faculty Affairs.</p> <ul style="list-style-type: none"> <li>• Round table introduction of committee members</li> </ul>	
<p>1. Matters arising from the minutes</p> <p>1.1. A. Haynes to draft a short message to learners for use as part of Continuity Plan.</p> <ul style="list-style-type: none"> <li>• Completed.</li> </ul> <p>1.2. T. Adey to ask for approval from the Dean of Medicine/Task Force to keep recorded sessions from 2020-2021 academic year.</p> <ul style="list-style-type: none"> <li>• Brought to Task Force by A. Haynes on T. Adey’s behalf and waiting on guidance from T. Pittman.</li> </ul>	



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<p>1.3. Committee members to provide feedback to M. Greene regarding the new exam deferral policy by August 2, 2021.</p> <ul style="list-style-type: none"> <li>• Completed.</li> </ul> <p>1.4. UGMS administration to consider requesting an e-vote on adopting the policy once feedback received.</p> <ul style="list-style-type: none"> <li>• Completed.</li> </ul> <p>1.5. Committee members assigned DCIs to submit completed DCIs to T. Hearn and B. Kerr.</p> <ul style="list-style-type: none"> <li>• Completed.</li> </ul> <p>1.6. UGME to send out job description and seek expressions of interest for Electives Coordinator.</p> <ul style="list-style-type: none"> <li>• Completed.</li> <li>• No response to the call for interest but active recruiting ongoing.</li> </ul>	
<p>2. E-Votes</p> <p>2.1. E-vote to approve the updated Exam Deferral Policy. Policy was originally presented at the July 21, 2021 UGMS meeting – APPROVED.</p> <p>2.2. E-vote to move the four objectives in “Introduction to the Endocrine System” to two other lectures in Phase 1. There will be no change in assessment and no change in length of the other two lectures. Previous approved by the Phase 1 Team. – APPROVED.</p>	<p><b>Motion:</b> To approve the updated Exam Deferral Policy.</p> <p><b>Moved:</b> T. Adey <b>Second:</b> N. Duggan <b>APPROVED on August 16, 2021 by e-vote</b></p> <p><b>Motion:</b> To approve the move of four objectives in “Introduction to the Endocrine System” to two other lectures in Phase 1.</p> <p><b>Moved:</b> A. Pendergast <b>Second:</b> A. Haynes <b>APPROVED on August 24, 2021 by e-vote</b></p>
<p>12. Accreditation Report</p> <ul style="list-style-type: none"> <li>• T. Hearn reported on the progress of the 3 components of the paperwork for accreditation.             <ul style="list-style-type: none"> <li>○ Data Collection Instruments (DCIs) – answers to all the questions. This is mostly completed.</li> </ul> </li> </ul>	<p><b>Action:</b> All committee members to provide timely response to requests for DCI revisions.</p>



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<ul style="list-style-type: none"><li>○ Independent Student Analysis (ISA) – survey filled out by the learners. This data is compiled in an excel spreadsheet but not yet analyzed for the report.</li><li>○ Medical Self Study (MSS) – Review of our DCIs. This is identical to the site visit report that is completed by the team. Writing of the MSS has started. This may identify areas of required revisions in the DCIs.</li><li>● It is expected that the UGMS Committee will have to meet with the accreditors because of the role it plays in medical education.</li><li>● Mock Accreditation<ul style="list-style-type: none"><li>○ Provides an opportunity for independent external assessment and a chance to become familiar with the types of questions that may be asked.</li><li>○ Will take place the first or second week of December 2021. Members will need to be available for practice interviews.</li><li>○ All information has to be sent to the mock accreditor by Oct. 25, 2021.</li></ul></li><li>● Accreditation site visit occurs April 4- 6, 2022 with follow-up on May 11, 2022. Documents will be submitted to the site visit team by January 2022 and meetings will be determined one month prior to the virtual visit. You must be available to meet during this time.</li><li>● Documents will be available in SharePoint. Committee members must be familiar with materials relevant to the committee and the relevant elements will be identified by T. Hearn. A special meeting may be required to go through the anticipated questions.</li><li>● Dean Steele commented that accreditation should be our number one priority at this time and everyone should be available to do mock interviews.</li><li>● T. Hearn stated learners may be asked question about anything that may be flagged from the ISA; whether policies are followed (for example, protected time policy); use of Office of Learner Well-Being and Success.</li></ul>	<p><b>Action:</b> All committee members and units/teams to be familiar with the DCI content relevant to your unit/team.</p> <p><b>Action:</b> All committee members plan to be available for mock accreditation and the site team visits.</p>
3. New business	



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### 3.1 ITAR completion process for distributed faculty.

- Some members of the distributed faculty had brought forward the request to have paper clinic cards while they transition to T-Res.
- S. Pennell explained that clinic cards transitioned to electronic format because of the increased volume used and the need to aggregate data and generate reports.
- Clinic cards are formative and are not meant to be used for the summative evaluation. More faculty and learner development may be needed regarding formative and summative feedback and the use of clinic cards.
- There is a working group in SAS looking at some of these issues.

### 3.2 Clarify if item should be considered new business or part of report.

- Critical decisions or those that require discussion and input from the committee should be identified as New Business. Other items, such as curriculum changes, can just remain in the report.

### 3.3 UGMS ToR (Attached documents for review)

- T. Adey asked D. McKeen to step out of the meeting.
- It was brought forward for consideration whether D. McKeen, in her role as Vice Dean, Education and Faculty Affairs, should be included on the UGMS committee.

### 3.4 Venue for future meetings – Webex or in person

- Current format very effective and makes it easier to join the meetings for those offsite.
- Discussion whether a hybrid should be used.
- Meetings will continue with just Webex and will re-evaluate at end of the year.

### 3.5 Academic Advising Process (Attached documents for review)

- C. Peddle presented the document.

#### **Action :**

N. Duggan, A. Hunt, and V. Curran to discuss the use of clinic cards by distributed faculty and report back to UGMS.

**Motion:** To add D. McKeen as a non-voting ex-officio member of the UGMS Committee

**Moved:** T. Adey

**Second:** T. Lambert

**In favour:** all

**Opposed:** none

**Abstained:** none

**APPROVED**

#### **Action:**

M. Simms to update UGMS ToR and upload to website.



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<ul style="list-style-type: none"> <li>• Discussion occurred around the point of providing academic advising from “individuals who have no role in making assessment or advancement decisions” about the learners. The advisor may still be involved in the teaching of the learners and may contribute to assessment but not in the final evaluation.</li> <li>• E. Hillman brought forward that the language in the procedure does not fully align with that in the University Calendar.</li> </ul> <p>3.6 Association of American Medical Colleges (AAMC) Curriculum Inventory</p> <ul style="list-style-type: none"> <li>• Consideration was given to participating in the AAMC Curriculum Inventory.</li> <li>• S. Pennell stated we have not participated in it since 2018. This is a labour intensive process in which few Canadian medical schools participated.</li> <li>• Given current demands on HSIMS, the upcoming accreditation, and lack of previous use of this tool by Memorial faculty, it was decided that we would not take part this year but will revisit in a year’s time.</li> </ul>	<p><b>Action:</b> Committee members to provide feedback regarding the Academic Advising document to C. Peddle by Wednesday, Sept. 22, 2021.</p> <p><b>Action:</b> C. Peddle to make revisions based on feedback and M. Simms will send out revised document for e-vote.</p> <p><b>Action:</b> S. Pennell will follow up with colleagues at other Canadian medical schools to determine if they are currently submitting to the AAMC Curriculum Inventory.</p>
4. Standing Committee reports	
<p>a) PESC</p> <ul style="list-style-type: none"> <li>• No action items</li> </ul>	
<p>b) SAS (Attached documents for review)</p> <ul style="list-style-type: none"> <li>• No action items.</li> <li>• EPA Assessment Working Group Progress Report attached.</li> <li>• Accreditation Monitoring Report attached.</li> </ul>	
<p>c) iTac (Attached documents for review)</p> <ul style="list-style-type: none"> <li>• No action items.</li> </ul>	



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<ul style="list-style-type: none"> <li>• Eight displays were damaged because of the thunder and lightning storm. Some other audiovisual technology was impacted. Equipment functioning, although not optimally, except in M2M218 (not functioning).</li> <li>• T-Res problem brought to the attention of HSIMS by the Phase 4 learners. S. Pennell stated that it has been resolved.</li> <li>• Both M. Steele and T. Adey thanked S. Pennell and his team for their ongoing support and hard work.</li> </ul>	
<p>c) COS (Attached documents for review)</p> <ul style="list-style-type: none"> <li>• No action items.</li> </ul>	
<p>5. Phase 4 report</p> <ul style="list-style-type: none"> <li>• No action items.</li> </ul>	
<p>6. Phase 3 report (Attached documents for review)</p> <ul style="list-style-type: none"> <li>• No action items.</li> </ul>	
<p>7. Phase 2 report</p> <ul style="list-style-type: none"> <li>• No report.</li> </ul>	
<p>8. Phase 1 report (Attached documents for review)</p> <ul style="list-style-type: none"> <li>• No action items.</li> </ul>	
<p>9. Report from NB (Attached documents for review)</p> <ul style="list-style-type: none"> <li>• The team will be visiting St. John's for Oct. 4 – 5, 2021. Their agenda is mostly full, but if anyone would like to meet with them, please T. Lambert know.</li> </ul>	
<p>10. Report from DME (Attached documents for review)</p> <ul style="list-style-type: none"> <li>• Discussed in New Business.</li> </ul>	
<p>11. Social Accountability Report</p> <ul style="list-style-type: none"> <li>• No action items.</li> </ul>	



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12. Accreditation matters <ul style="list-style-type: none"> <li>• Discussed earlier.</li> </ul>	
13. Learner issues <ul style="list-style-type: none"> <li>• No action items.</li> </ul>	
14. Associate Dean/Dean Update (Attached documents for review) <ul style="list-style-type: none"> <li>• No action items.</li> <li>• Message will be going out to the learners regarding the Continuity Plan.</li> <li>• M. Steele congratulated T. Adey on her new position as Registrar of the College of Physicians and Surgeons of Newfoundland and Labrador (CPSNL) and thanked her for her contributions to the Faculty of Medicine. T. Adey said it had been a privilege to work with the team.</li> <li>• Clinical Skills – Clarifying if there is full capacity in the CLSC learning rooms. Awaiting response from the Chief Risk Office.</li> <li>• September 30 is National Day for Truth and Reconciliation. Classes have been rescheduled.</li> </ul>	
15. Policy <ul style="list-style-type: none"> <li>• No report.</li> <li>• M. Greene has left the position and the position should be posted soon.</li> </ul>	
16. UGME office report <ul style="list-style-type: none"> <li>• Interviews have been held for the new Electives/Selectives Academic Program Assistant position.</li> </ul>	
<b>Next Meeting Oct. 20 2021</b> <b>Adjourned: 5:45 pm</b>	





Faculty of Medicine

## Undergraduate Medical Studies (UGMS) Committee

### Terms of Reference

#### Preamble

CACMS Element 8.1 states: “The faculty of a medical school entrust authority and responsibility for the medical education program to a duly constituted faculty body, commonly called a curriculum committee. This committee and its subcommittees, or other structures that achieve the same functionality, oversee the curriculum as a whole and have responsibility for the overall design, management, integration, evaluation, and enhancement of a coherent and coordinated medical curriculum.”

#### Purpose

The Undergraduate Medical Studies (UGMS) Committee was established to govern all aspects of the curriculum for the Doctor of Medicine (M.D.) program as a principle education committee for the Faculty of Medicine Faculty Council in accordance with by-law 5.1.1.4. UGMS is responsible for the design, implementation, management, integration, evaluation and enhancement of the curriculum, as well as ensuring alignment with current accreditation standards.

#### Membership

##### Voting Members

- Associate Dean, Undergraduate Medical Education (UGME) (Chair)
- Curriculum Oversight Subcommittee (COS) Chair (Vice Chair)
- Two medical learner representatives (one from Phase 1-3; one from Phase 4)
- Registrar’s delegate
- Coordinator, UGME
- Faculty Undergraduate Accreditation Lead (FUAL)
- Program Evaluation Subcommittee (PESC) Chair
- Student Assessment Subcommittee (SAS) Chair
- Information Technology Advisory Committee (iTac) Chair
- Phase 1-4 Leads
- Assistant Dean, New Brunswick
- Assistant Dean, Distributed Medical Education
- HPEI Undergraduate Medical Education Coordinator, Prince Edward Island
- Assistant Dean, Social Accountability
- Health Sciences Library delegate

Approved by Faculty Council: April 27, 2021



Faculty of Medicine

### Non-Voting Ex-officio Members

- Curriculum and Accreditation Advisor, UGME
- Policy Analyst, Dean's Office
- Dean of Medicine (Ex-officio)

### **Operations**

- The Committee shall meet monthly from September to June and at the call of the Chair.
- Quorum will be 50% plus one (1) voting members and must include one learner.
- The term of the medical learner representatives is one (1) year, once renewable.
- Meeting minutes that reflect the activity of the committee shall be recorded.
- Committee members are expected to attend meetings or, if unable to do so, send advance notice of their absence.
- When the Chair is unable to attend a meeting, the Vice Chair will be the Chair's delegate.
- For voting members only, a delegate may attend with prior notification to, and approval by, the Chair. The delegate will assume voting rights.
- Motions may be circulated and approved by e-mail vote for time sensitive matters.
- The UGMS Committee may assign duties to subcommittees.
- Key stakeholders from faculty, staff, and learners will be consulted and invited to attend meetings on an as needed basis when additional content expertise is required for decision-making related to the planning and delivery of the curriculum.
- The Chair or delegate will represent the Faculty of Medicine on the Senate Undergraduate Studies Committee.
- The Committee will report to Faculty Council annually.

### **Committee Member Expectations**

- Attendance at 75% of monthly meetings.
- Meeting preparation.
- Timely completion of assigned tasks.
- Participation on working groups or committees, as requested by the Chair.
- Pursuit of professional development related to undergraduate education.
- Solicitation of collegial input, when requested.



Faculty of Medicine

## **Responsibilities**

- Develop policies and procedures related to curriculum delivery, content, assessment and outcomes of the MD program and seek approval where necessary.
- Plan curriculum content (objectives) and assessment, as well as the review and approval of any changes.
- Review curriculum content for relevance and redundancy.
- Ensure graduates achieve the prescribed competencies.
- Monitor:
  - policy adherence and effectiveness
  - accreditation standards compliance
  - performance and effectiveness of the committee's function
- Communicate recommendations to the appropriate individuals or groups.
- Report program outcomes to Faculty Council.
- Seek Faculty Council approval for University Calendar changes.
- Prepare for approval by Faculty Council and the appropriate University bodies, the regulations for curriculum and student assessment required for the MD degree.



Faculty of Medicine

## Academic Advising Procedure

<b>Office of Accountability:</b>	Undergraduate Medical Education Office
<b>Office of Administrative Responsibility:</b>	Undergraduate Medical Education Office
<b>Approver:</b>	Undergraduate Medical Studies
<b>Approval Date:</b>	## September, 2021
<b>Review Date:</b>	## September, 2024

### Overview

The Faculty of Medicine (FoM) is committed to providing academic advice to learners in the MD program who are having difficulty understanding content delivered in one or more subject areas. The medical school is required to meet standards set by the Committee on the Accreditation of Canadian Medical Schools (CACMS), including standard 11.1 on Academic Advising:

*A medical school has an effective system of academic advising in place for medical students that integrates the efforts of faculty members, directors of required learning experiences, and student affairs staff with its counseling and tutorial services and ensures that medical students can obtain academic counseling from individuals who have no role in making assessment or advancement decisions about them.*

The medical school must also abide by the Regulations set forth by Memorial University, including Regulation 10.4 on Assessment:

- b. *It is the responsibility of the student to consult immediately with the appropriate Phase Lead regarding any assessment in which concerns about performance have been expressed. Within one week of receiving notification of the result of an assessment, a student may submit a written request to the appropriate Phase Lead for reconsideration of the assessment result or for a reread of an exam or paper.*
- c. *The student is responsible for notifying the appropriate Phase Lead immediately of any new or pre-existing circumstances that could affect the student's individual performance in the work of the class.*

### Purpose

To outline the procedures in place when medical learners seek academic advice.

### Scope

The MD program at Memorial University

# Academic Advising Procedure

## Procedure

### **A.0 Requesting Academic Advising Support**

- A.1** The learner contacts the appropriate Phase Lead to request academic advising and identify any new or pre-existing circumstances which impact their ability to complete the work of the class.
- A.1.1** Learner and Phase Lead identify the nature of the academic advising request:
- general academic advising (i.e. to improve study habits, test taking, etc.)
  - particular curriculum content advising (i.e. to improve understanding of hepatic portal vein function, improve skills for physical abdominal examination, etc.)
- A.2** The Phase Lead will direct the learner to the appropriate resources
- A.2.1** Learners who require general academic advice to improve academic performance are directed to the Office of Learner Well-Being and Success for academic supports.
- A.2.2** Learners who require academic advice relating to a specific topic or subject will be directed to the Undergraduate Content Lead (UCL) who is responsible for the delivery of the content in question.
- A.3** Learners must not receive academic advice or counselling from any member of the education team who is involved in decision-making related to the assessment or advancement of the learner.

### **B.0 Role of the Undergraduate Content leads**

The Undergraduate Content Lead acts as the content expert for the purposes of assisting medical learners in obtain content specific academic counseling. Counselling may be completed by the UCL, or a delegate.

- B.1** A delegate will be assigned:
- B.1.1** in the case of a potential conflict of interest; and
- B.1.2** in cases where the delegate is able to provide more content-specific counselling

## Related Links

CACMS Standard 11.1 Academic Advising

MUN Regulation 10.4 Assessment



# UGMS Summary Report

[September 2021]

**Phase Team or Sub-Committee:** Student Assessment Subcommittee

**Liaison to the UGMS:** Dr. Vernon Curran

**Date of Last Phase Team or Sub-Committee Meeting:** 23/June/2021

**Date of Next Phase Team or Sub-Committee Meeting:** 22/September/2021

Agenda Items Requiring Phase Team or Sub-Committee Action		
Item	Recommended Action	Status
EPA assessment working group	Dr. Reid presented progress report. Short-term action items implemented. Final report with findings being drafted and will be presented to SAS in the fall.	Ongoing
Accreditation monitoring report	SAS reviewed data on assessment-related accreditation elements for Class of 2021.	Done

Agenda Items Requiring UGMS Action:
1.
2.
3.
4.

Additional Comments, Suggestions, New or Pending Business:
1.
2.
3.

***Our Vision:*** Through excellence, we will integrate education, research and social accountability to advance the health of the people and communities we serve.



# UGMS Summary Report

[September 2021]

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***Our Vision:*** Through excellence, we will integrate education, research and social accountability to advance the health of the people and communities we serve.

## EPA Assessment Working Group – Progress Update

### Introduction

The EPA Assessment Working Group was established in November 2020 by the Student Assessment Subcommittee (SAS) to address continued concerns and feedback by learners and faculty regarding the implementation of the EPA assessment framework, in particular the use of clinic cards. The group is chaired by Phase 4 Assessment Lead Dr. Stephanie Reid and includes the following members: Dr. Heidi Coombs (Education Specialist Program Evaluation), Dr. Norah Duggan (Phase 4 Lead), Dr. Nic Fairbridge (Research Associate), Steve Pennell (Manager Health Education Technology and Learning), Dr. Steve Shorlin (Teaching Consultant), David Stokes (Senior Instructional Designer), Katrin Zipperlen (Education Specialist Assessment).

The working group was tasked to review and evaluate the current process for EPA assessment and to report findings to SAS and other oversight committees. The group specifically identified the following tasks to be completed:

- Review of program evaluation data including qualitative feedback
- Collect and analyze data on clinic card use
- Survey core disciplines on process and implementation of EPA assessment
- Review of assessment process and forms
- Identify issues and barriers
- Provide final report with suggested recommendations and next steps

This document will provide an update on the progress of the working group so far and identify short-term action items for implementation ahead of the academic year 2021-2022.

### Summary of completed tasks to date

#### *Review of program evaluation data*

The group reviewed quantitative and qualitative program evaluation data from 2018 to 2020. Evaluation survey respondents rated the statement “The following assessment methods were used effectively: clinic cards/EPAs” consistently between 3.2 and 3.7 (5-point Likert scale) for rotations longer than 4 weeks in duration. Ratings below 3.5 are considered of concern. The qualitative feedback from the evaluation surveys identified the following themes regarding EPA assessment: not effective method for feedback, issues with T-res, difficulties getting clinic cards signed off, learners writing their own feedback, different interpretations of entrustability, preceptors reluctant to assess learners as entrustable, difficulty achieving certain EPAs, and making EPAs fit retroactively.

#### *Analysis of clinic card usage data*

The group reviewed a report analyzing clinic card usage. The report aimed to evaluate if preceptors respond to clinic cards and how many are being signed off. Data from the current academic year (until March 2021) was utilized for the analysis. The results indicated that:

- 16% of all learner-initiated cards are not being responded to
- Resident preceptors signed off more submitted cards than faculty preceptors (93% vs. 78.5%)

July 2021



- Percentage of clinic cards not signed off varies by discipline (10-25%)
- 17% of preceptors overall (22% of all faculty preceptors, 8.3% of all resident preceptors) did not respond to submitted cards on T-res. This is also evident in number of unused accounts on T-res.

#### *Survey to disciplines on implementation of EPA assessment*

The group reviewed responses to an EPA assessment questionnaire completed by Clinical Discipline Coordinators (CDCs) and/or discipline administrative assistants. Data has been collected for all core disciplines except one. The questionnaire asked about the process of EPA assessment, how EPAs are used in assessments and the culture of acceptance of the EPA framework within the discipline. Initial analysis suggests that each discipline has a different approach for incorporating clinic cards into their EPA assessment workflow and how entrustment decisions are made. Some common concerns have been identified regarding clinic cards and assessment in general (e.g. learner writing comments, no clear guidance on how clinic cards should be used). The next step is to include a review of the assessment forms and associated assessment burden for each discipline.

#### *Short-term action items*

The data collected so far revealed systemic issues and barriers, which require further review and more time to adequately address. These issues will be outlined in more detail in the final report to SAS. The working group is proposing to implement the following short-term items focusing on learner education around EPA assessment ahead of the start of the new academic year 2021-2022:

- Revision of clinic card scale based on program evaluation feedback
  - Completed. The changes in T-res will be effective for the start of the Core Experiences course on August 16.
- Review and update EPA assessment content in Student Handbook.
  - Completed ([https://www.med.mun.ca/StudentHandbook/Phase-4/Assessment-during-Core-using-Entrustable-Professional-Activities-\(EPAs\).aspx](https://www.med.mun.ca/StudentHandbook/Phase-4/Assessment-during-Core-using-Entrustable-Professional-Activities-(EPAs).aspx))
- Identify priority points about EPA assessment and share with Class of 2023 prior to the start of the Core Experiences course.
  - Reference to updated handbook content sent to class August 26. Dr. Duggan clarified use of clinic cards in message from August 25.
- Recording of new T-res demo videos for learners that will include EPA 14 and new clinic card scale.

## Class of 2021 – Annual Phase 4 Accreditation Monitoring Report

The Core Experiences course for the Class of 2021 (academic year 2019-2020) was interrupted after 28 weeks due to the pandemic. Learners restarted clinical rotations on July 6, 2020 and finished the Core Experiences course on October 6, 2020. Rotations for the restart were truncated to accommodate the shorter timeframe (13 weeks).

### Mid-point review meetings – CACMS element 9.7

Discipline	Percent of students with mid-point review meeting on time	Number of students with late mid-point review meetings
Anesthesia	n/a	
Emergency Medicine	n/a	
Internal Medicine	88.5	9 (1 day late)
Obstetrics/Gynecology	94.8	4 (3 days; 3.5 to 5 weeks late)
Pediatrics	82.1*	12 (1 week late); 11 learners without mid-point form on One45
Psychiatry	97.4	2 (2 days late)
Rural Family Medicine	91.0	7 (1 to 5 days; 1.5 to 4 weeks late)
Surgery	97.4	2 (2 days late; lockdown)

\*based on available data; 11 learners without completed mid-point form on One45

### Timely summative assessment (within 6 weeks after end of rotation) – CACMS element 9.8

Discipline	Percent of students within 6 weeks compliance (including all weeks)	Percent of students within 6 weeks compliance (excluding lockdown)	Number of students not compliant (all weeks/excl. lockdown)	Average # of days (range min-max) assessment is completed post rotation
Anesthesia*	69.9%	68.8%	22/20	38 (min 0 - max 178)
Emergency Medicine**	96.1%	95.4%	3/3	21 (min 8 - max 65)
Internal Medicine	16.7%	16.7%	65/45	51 (min 21 – max 123)
Obstetrics/Gynecology	67.9%	86.9%	25/8	41 (min 20 – max 137)
Pediatrics	60.3%	50.0%	31/31	55 (min 29 – max 127)
Psychiatry	75.3%	81.0%	19/11	41 (min 11 – max 113)
Rural Family Medicine	96.2%	97.0%	3/2	18 (min 2 – max 61)
Surgery	80.8%	96.9%	15/2	30 (min 21 – max 56)
LIC	0%	0%	2	52

\*no completion date available for 5 ITARS since they were re-opened

\*\*no completion date available for 2 ITARS since they were re-opened

## Witnessed History and Physical - CACMS element 9.4

Discipline	Percent of students with witnessed history and physical	Number of students not compliant	Assessment method
Anesthesia	n/a		
Emergency Medicine	100	0	Mini-CEX
Internal Medicine	100	0	Mini-CEX
Obstetrics/Gynecology	100	0	Mini-CEX
Pediatrics	100	0	Mini-CEX
Psychiatry	90*	8	Mini-CEX
Rural Family Medicine	100	0	Mini-CEX
Surgery (general and orthopedic)	100	0	Witnessed history and physical

\*Mini-CEX cancelled for rotation impacted by pandemic disruption

## Completed Clinic Cards – CACMS element 9.5

Clinic card requirements were revised for some disciplines based on the shortened rotation. The below data does not include LIC learners.

Discipline	# of clinic cards required	Percent of students submitting cards	Percent of students with required # of clinic cards (all submitted cards)	Percent average of cards signed off by preceptor (range)
Anesthesia*	3	100**	100%	100%
Emergency Medicine***	9 ED shift cards	100	81.8% (average 9)	95.0% (66.7-100%)
Internal Medicine	12	100	94.9% (average 20)	89.5% (65.0-100%)
Obstetrics/Gynecology	10 or 12	100	93.6% (average 20)	91.1% (41.7-100%)
Pediatrics	8 or 10	100	94.4% (average 20)	81.9% (54.2-100%)
Psychiatry	8 or 12	100	89.6% (average 13)	97.1% (66.7-100%)
Rural Family Medicine	5 or 8	100	96.2% (average 9)	93.3% (71.4-100%)
Surgery	6 or 8	100	92.3% (average 12)	84.4% (44.4 – 100%)

\*Anesthesia uses paper cards

\*\*no data for 26 learners

\*\*\*two learners excluded from analysis



# UGMS Summary Report

[Sept 2021]

**Phase Team or Sub-Committee:** iTAC

**Liaison to the UGMS:** Steve Pennell

**Date of Last Phase Team or Sub-Committee Meeting:** (cancelled)

**Date of Next Phase Team or Sub-Committee Meeting:** (Oct 1, 2021)

Agenda Items Requiring Phase Team or Sub-Committee Action		
Item	Recommended Action	Status

Agenda Items Requiring UGMS Action:
1.
2.
3.

Additional Comments, Suggestions, New or Pending Business:
1. Instructional continuity – education technology installs
2. Summative exams edtech back to normal for Fall
3. T-Res changes live
4. Renovation planning continues for main auditorium; edtech upgrades for other spaces coming

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# UGMS Summary Report

September 2021

**Phase Team or Sub-Committee:** Curriculum Oversight Subcommittee

**Liaison to the UGMS:** Alison Haynes / Brian Kerr

**Date of Last Phase Team or Sub-Committee Meeting:** 26/08/2021

**Date of Next Phase Team or Sub-Committee Meeting:** 28/09/2021

Agenda Items Requiring Phase Team or Sub-Committee Action		
Item	Recommended Action	Status

Agenda Items Requiring UGMS Action:

Additional Comments, Suggestions, New or Pending Business:
1. Minor curriculum changes attached
2. New MCC objectives linked to existing sessions
3. Ongoing objective review almost completed

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Faculty	Date of Submission	Session	Change Type	COS Review	Status	
<b>PHASE 1</b>						
Gerry Mugford	Aug 11th 2021	Writing a Research Question and Proposal	Reword objectives Remove objectives	Aug 26th 2021	Approved	
Helene Paradis	Aug 12th 2021	Introduction to Metabolism	Remove objectives	Aug 26th 2021	Approved	
Lesley Turner	Aug 18th 2021	Chromosomes and Cell Division	Reword objectives	Aug 26th 2021	Approved	
Lesley Turner	Aug 19th 2021	DNA and Gene Expression	Reword objectives	Aug 26th 2021	Approved	
Alison Haynes	Aug 27th 2021	Linked sessions to Indigenous Health MCC Objective	Update MCC Objectives	Aug 26th 2021	Approved	
Helene Paradis	Sep 1st 2021	Intro to Metabolism / Carbohydrate Metabolism	Move objectives to another session	Sep 1st 2021	Approved	
Helene Paradis	Sep 1st 2021	Case Study 1: Diagnostic Enzymology	Add objective	Sep 1st 2021	Approved	
<b>PHASE 2</b>						
Reza Tabrizchi	Aug 16th 2021	Cardiovascular Drugs Congestive Heart Failure	Rewording objectives	Aug 26th 2021	Approved	
Alison Haynes	Aug 27th 2021	Linked sessions to Indigenous Health MCC Objective	Update MCC Objectives	Aug 26th 2021	Approved	
Alison Haynes	Aug 27th 2021	Linked sessions to Prescribing Practices MCC Objective	Update MCC Objectives	Aug 26th 2021	Approved	
<b>PHASE 3</b>						
Lesley Turner	Aug 19th 2021	Cytogenetics	Reword objectives	Aug 26th 2021	Approved	Sep 1st 2021 UGMS Sep 15th 2021
Lesley Turner	Aug 19th 2021	Cytogenetics Tutorial	Reword objectives	Aug 26th 2021	Approved	Sep 1st 2021 UGMS Sep 15th 2021
Lesley Turner	Aug 19th 2021	Genetic Screening, Counselling and Ethical	Modify MCC objectives	Aug 26th 2021	Approved	Sep 1st 2021 UGMS Sep 15th 2021
Lesley Turner	Aug 19th 2021	Integration of Genetic Concepts 1	Reword objectives	Aug 26th 2021	Approved	Sep 1st 2021 UGMS Sep 15th 2021
Lesley Turner	Aug 19th 2021	Integration of Genetic Concepts 2	Reword objectives	Aug 26th 2021	Approved	Sep 1st 2021 UGMS Sep 15th 2021

Faculty	Date of Submission	Session	Change Type	COS Review	Status	
<b>PHASE 1</b>						
Lesley Turner	Aug 19th 2021	Introduction to Genetics, Importance of Fam	Reword objectives Modify MCC objectives	Aug 26th 2021	Approved	Sep 1st 2021 UGMS Sep 15th 2021
Lesley Turner	Aug 19th 2021	Molecular Diagnosis, Genetic Testing	Reword objectives	Aug 26th 2021	Approved	Sep 1st 2021 UGMS Sep 15th 2021
Lesley Turner	Aug 19th 2021	Pedigree Construction and Analysis Tutorial	Reword objectives	Aug 26th 2021	Approved	Sep 1st 2021 UGMS Sep 15th 2021
Lesley Turner	Aug 19th 2021	Pharmacogenomics	Reword objectives	Aug 26th 2021	Approved	Sep 1st 2021 UGMS Sep 15th 2021
Lesley Turner	Aug 19th 2021	Variations in Human Genome	Reword objectives Modify MCC objectives	Aug 26th 2021	Approved	Sep 1st 2021 UGMS Sep 15th 2021
Alison Haynes	Aug 27th 2021	Linked sessions to Indigenous Health MCC Objective	Update MCC Objectives	Aug 26th 2021	Approved	Sep 1st 2021 UGMS Sep 15th 2021
Alison Haynes	Aug 27th 2021	Linked sessions to Disaster Preparedness, Emergency Response and Recovery MCC Objective	Update MCC Objectives	Aug 26th 2021	Approved	Sep 1st 2021 UGMS Sep 15th 2021
Alison Haynes	Aug 27th 2021	Linked sessions to Somatic Symptoms and Related Disorders MCC Objective	Update MCC Objectives	Aug 26th 2021	Approved	Sep 1st 2021 UGMS Sep 15th 2021
Alison Haynes	Aug 27th 2021	Linked sessions to Prescribing Practices MCC Objective	Update MCC Objectives	Aug 26th 2021	Approved	Sep 1st 2021 UGMS Sep 15th 2021



# UGMS Summary Report

[September 2021]

**Phase Team or Sub-Committee:** Phase 3 Management Team

**Liaison to the UGMS:** Dr. Jasbir Gill

**Date of Last Phase Team or Sub-Committee Meeting:** 01/09/2021

**Date of Next Phase Team or Sub-Committee Meeting:** 06/10/2021

Agenda Items Requiring Phase Team or Sub-Committee Action		
Item	Recommended Action	Status
ILS Grading/TA Instructions to be reviewed	SAS/D. Bergstrom/S. Shorlin to meet to discuss	IP
Phase 3 Course Evaluation Response Report	Course evaluations were reviewed. Dr. Gill to complete Response Report and review with Phase 3 Team Oct 6	IP
Review of Exam Deferral Policy		C
Phase 3 Assessment Plans for Class of 2024 under review	SAS to complete and present at next Phase meeting	C
Addition of 50-minute session on Opioid Crisis	SAS to review assessment plan if approved by UGMS	C

Agenda Items Requiring UGMS Action:
No items at this time.

Additional Comments, Suggestions, New or Pending Business:
No items at this time.

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# UGMS Summary Report

[Insert Month & Year]

**Phase Team or Sub-Committee:** (Phase 1)

**Liaison to the UGMS:** (Amanda Pendergast)

**Date of Last Phase Team or Sub-Committee Meeting:** (April 2021)

**Date of Next Phase Team or Sub-Committee Meeting:** (7 / October / 2021)

Agenda Items Requiring Phase Team or Sub-Committee Action		
Item	Recommended Action	Status

Agenda Items Requiring UGMS Action:
1.
2.
3.

Additional Comments, Suggestions, New or Pending Business:
1. Students missing classes due to positive covid symptom screening-plans in place
2.
3.

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# UGMS Summary Report

September 2021

**Phase Team or Sub-Committee:** New Brunswick Report

**Liaison to the UGMS:** Todd Lambert

**Date of Last Phase Team or Sub-Committee Meeting:** N/A

**Date of Next Phase Team or Sub-Committee Meeting:** N/A

Agenda Items Requiring Phase Team or Sub-Committee Action		
Item	Recommended Action	Status

Agenda Items Requiring UGMS Action:
1.
2.
3.

Additional Comments, Suggestions, New or Pending Business:
1. NB team visiting St.John's for business meetings Oct 4-5, 2021
2. Clerkship class of 2023 transition into clerkship

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# UGMS Summary Report

September, 2021

**Phase Team or Sub-Committee:** DME

**Liaison to the UGMS:** Andrew Hunt

**Date of Last Phase Team or Sub-Committee Meeting:** N/A

**Date of Next Phase Team or Sub-Committee Meeting:** N/A

Agenda Items Requiring Phase Team or Sub-Committee Action		
Item	Recommended Action	Status

Agenda Items Requiring UGMS Action:
1. ITAR completion process for distributed faculty
2.
3.

Additional Comments, Suggestions, New or Pending Business:
1.
2.
3.

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# UGMS Summary Report

[September 2021]

**Phase Team or Sub-Committee:** (Associate Dean, UGME)

**Liaison to the UGMS:** (Tanis Adey)

**Date of Last Phase Team or Sub-Committee Meeting:** (day / month / year)

**Date of Next Phase Team or Sub-Committee Meeting:** (day / month / year)

Agenda Items Requiring Phase Team or Sub-Committee Action		
Item	Recommended Action	Status

Agenda Items Requiring UGMS Action:
1.
2.
3.

Additional Comments, Suggestions, New or Pending Business:
1. Covid-19 Continuity Plan Update
2. Search for Associate Dean, UGME position
3. AFMC Undergraduate Deans meeting monthly
4. Clinical Skills – capacity in CLSC
5. Faculty of Medicine Leadership Updates: Dr. Margaret Steele AFMC Board Chair Elect Dr. Dolores McKeen Vice Dean Education and Faculty Affairs

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# UGMS Summary Report

[September 2021]

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6.
7.

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