

Undergraduate Medical Studies Committee Meeting		DATE	January 18, 2017
		ROOM	M2M240
<b>CHAIR</b>	Dr. Sean W. Murphy		
<b>MEMBERS:</b>  <b>2016-17</b>	<p>Student Representatives (2)</p> <ul style="list-style-type: none"> <li>• Mr. Mark Hayward, Phase 1 – 3 Student Representative</li> <li>• Ms. Kylie Goodyear, Junior Student Representative</li> <li>• Ms. Heather Perry, Junior Student Representative</li> </ul> <p>Academic/Administrative Representatives (5)</p> <ul style="list-style-type: none"> <li>• Dr. Olga Heath, Faculty Representative (on leave)</li> <li>• Dr. Carolyn Morris-Larkin, Faculty Representative</li> <li>• Dr. Lindsay Alcock, Faculty Representative</li> <li>• Dr. John Campbell, Faculty Representative</li> </ul> <p>Permanent Members (13)</p> <ul style="list-style-type: none"> <li>• Dr. Margaret Steele, Dean of Medicine</li> <li>• Dr. Donald W. McKay, Associate Dean, Undergraduate Medical Education</li> <li>• Ms. Elizabeth Hillman, Registrar’s Delegate</li> <li>• Ms. Carla Peddle, UGME Coordinator</li> <li>• Dr. Alan Goodridge, Chair - Program Evaluation Sub-Committee</li> <li>• Dr. Vernon Curran, Chair – Student Assessment Sub-Committee</li> <li>• Mr. Stephen Pennell, Chair – Information Technology Advisory Committee</li> <li>• Dr. Jason McCarthy, Phase 4 Lead/Clerkship Coordinator</li> <li>• Dr. Amanda Pendergast, Phase 1 Lead</li> <li>• Dr. Lisa Kenny, Phase 2 Lead</li> <li>• Dr. Joanne Hickey, Phase 3 Lead</li> </ul> <p>Corresponding Members (5) (Absence does not affect quorum)</p> <ul style="list-style-type: none"> <li>• Dr. Tom Laughlin, Assistant Dean – New Brunswick</li> <li>• Dr. Mohamed Ravalía, Assistant Dean – Rural Medical Education Network</li> <li>• <i>Vacant</i>, Assistant Dean – Prince Edward Island</li> <li>• <i>Vacant</i>, Assistant Dean – Yukon</li> <li>• Dr. Tanis Adey or Dr. Taryn Hearn, Co-Interim Review Coordinators</li> </ul>		
<b>PARTICIPANTS</b>	S. Murphy, C. Morris-Larkin, L. Alcock, D. McKay, E. Hillman, C. Peddle, A. Goodridge, V. Curran, S. Pennell, L. Kenny, T. Laughlin, T. Adey, H. Perry		

<b>REGRETS</b>	J. McCarthy, A. Pendergast, J. Hickey, M. Hayward, K. Goodyear, T. Hearn		
<b>RECORDING SECRETARY</b>	<i>Minutes Recorded and Transcribed by Ms. Carol Vokey</i>		
<b>GUESTS</b>	T. Stuckless		
<b>MINUTES</b>			
<b>AGENDA</b>	<b>ITEM</b>	<b>DISCUSSION</b>	<b>ACTION</b>
#1 WELCOME		The meeting was called to order at 16:10 hours.	
#2 AGENDA APPROVAL		Agenda was approved. P. Kearley, was not present so S. Murphy will send FCAT document to Committee members for review.	<b>ACTION: S. Murphy to send out FCAT documents to Committee members for review.</b>
#3 APPROVAL OF MINUTES		Minutes of November 24, 2016 meeting were approved as presented.	
#4 STANDING COMMITTEE REPORTS	Item 4. a. PESC Report	A. Goodridge said there was nothing new to report.	
	Item 4. b. SAS Report	<p>V. Curran reported on recommendation made to Phase 4 to consider replacing NBME's with progress testing with discipline-specific exams. Canadian med schools are moving in this direction, and progress testing also provides enriched feedback around objectives. D. McKay provided some additional detail regarding a short term and longer term vision of adopting MCC exams for progress testing. He also mentioned that in preparation for the initial offering of the revised blueprint MCC Pt 1 exam in 2018, the class of 2017 will also be offered at no charge a chance to sit the 2018 exam this spring. S. Pennell asked how the exams run and D. McKay said they will be using Prometrics but there are a few other options which have to be discussed in the future. S. Pennell said the Prometric site at Medicine has just closed and some discussions will be needed to get it back. L. Alcock asked about library materials necessary to prepare for progress testing. V. Curran will report back to the Committee as more information becomes available. D. McKay said Phase 4 is supportive of progress testing and he has to get the cost for the Dean's approval. He will report back to the Committee.</p> <p>V. Curran also reported on the Phase 4 Summative Assessment Procedure which has been revised by SAS and the Phase 4 Committee. T. Laughlin said</p>	<p><b>ACTION: V. Curran will report back to the Committee on progress testing as more information becomes available.</b></p> <p><b>ACTION: D. McKay to get cost of using MCC exams for the Dean and report back to the Committee.</b></p>

		<p>it was excellent work and very well done. He also provided a couple of suggestions which were accepted. V. Curran acknowledged K. Stringer's and D. Deacon's input into the document. E. Hillman suggestion to add a definition of "Clinic Card" which was accepted.</p> <p>It was <b>MOVED</b> by V. Curran and <b>SECONDED</b> by D. McKay to approve the Phase 4 Summative Assessment Procedure with minor edits.</p> <p style="text-align: center;">All were in favour and the <b>MOTION CARRIED.</b></p> <p>D. Deacon will make edits and send the final version to J. Reddigan for policy.</p>	<p><b>ACTION: It was moved by V. Curran and seconded by D. McKay to approve the Phase 4 Summative Assessment Procedure with minor edits. Motion carried.</b></p> <p><b>ACTION: D. Deacon to make agreed upon edits to the Phase 4 Summative Assessment Procedure and send the final version to J. Reddigan for policy.</b></p>
	<p>Item 4. c. iTac Report</p>	<p>S. Pennell reported on the following:</p> <p><u>MCAT</u>: All satellite offices have closed down. H. Perry said she had to write her MCAT in Toronto, but recognized the benefits of writing the exam. D. McKay said this exam gives a diverse group of students without a strong science background the opportunity to show their aptitude to follow a science-based curriculum. Mr. Pennell expressed concerns about the current Prometric site on campus and the implications for the MCC exam.</p> <p><u>TRes 2 App</u>: Beta launch will be February 20 and will run for 6-8-10 weeks in Psychology, OBS/Gyne and Surgery. There has so far been no cost to develop the app but generating reports will have costs attached.</p> <p><u>Lecture Capture</u>: the completed draft policy to be presented on January 21<sup>st</sup> and will be also be presented to Faculty Council. A vulnerability assessment for the streaming software is scheduled for the week of February 9, and if all goes well, the process should be launched by the end of February. J. Reddigan and S. Pennell to meet with R. Thorne (Privacy Specialist) next week.</p> <p><u>Informatics</u>: D. Murphy and Eastern Health are on board to help us get informatics deeper into the clinical skills curriculum, moving ahead nicely.</p> <p><u>Blackboard Collaborate</u>: end date is June 20<sup>th</sup>. We will have access to a</p>	<p><b>ACTION: D. McKay to contact MCC regarding re-establishing testing office on campus.</b></p>

		<p>replacement program called UCU which has a very similar interface. Medicine has also moved some disciplines to the Real Presence app with great success. A plan will be put in place to inform faculty that Blackboard Collaborate will not be available after June 20<sup>th</sup>.</p> <p><u>D2L to Cloud</u>: No set timeline, maybe this year. They are still testing the process.</p> <p><u>QuestionMark to Cloud</u>: they had a meeting about this before Christmas, and they are moving forward. They are also looking at a new survey tool.</p> <p>D. McKay to meet with S. Pennell regarding Prometrics and the MCC exam.</p>	<p><b>ACTION: D. McKay and S. Pennell to meet to discuss Prometrics and the MCC exam.</b></p>
#5 PHASE 4- CLERKSHIP REPORT/ISSUES		<p>J. McCarthy was not present. D. McKay spoke on the implementation of a new nation-wide immunization form on Tuesday. Now students only have 1 form to complete on a national basis. He stressed the importance of collaboration with other medical schools and the benefits of working collectively.</p>	
#6 PHASE 3 REPORT/ISSUES		<p>J. Hickey was not present.</p>	
#7 PHASE 2 REPORT/ISSUES		<p>L. Kenny said there were no major issues. They had a different start to Phase 2 this year as they scrambled to add material left uncovered in Phase 1. Next iteration should be better. H. Perry said the phase seems cohesive to her.</p>	
#8 PHASE 1 REPORT/ISSUES		<p>A. Pendergast was not present.</p> <p>L. Kenny mentioned a problem that occurred at the beginning of Phase 2 wherein the students weren't able to register for their courses. E. Hillman (Registrar's Office) thinks the issue is related to the new curriculum and will report back to the Committee when she gets the details. S. Pennell and his team could help with the implementation in the future.</p>	<p><b>ACTION: E. Hillman to</b></p>

			<p><b>determine cause of course registration issue and report back to the Committee.</b></p>
<p>#9 Report from NB</p>		<p>T. Laughlin reported on the following:</p> <p><u>Progress Testing:</u> Very enthusiastic about this. With an LIC, the program is integrated over the entire year. Block tests don't work in this system, but progress testing does. He said Jennifer Hall is interested in helping to implement a pilot project for progress testing in New Brunswick for Dalhousie Medical School New Brunswick LIC programs. D. McKay said it's important that we have our own assessment with our own objectives. T. Laughlin said they will present at a workshop in the Medical Education Forum in April.</p> <p><u>LIC Positions:</u> They now have funding for faculty and admin people for LIC positions in New Brunswick to provide 0.5 administrative assistant in Fredericton and Moncton and 0.1 faculty in Fredericton and Moncton which will phase in over the next 2 years. The faculty in Moncton this spring will help design a MUN LIC for two students, and the admin position will start next spring for these two students. In spring of 2018 the faculty person hired for Fredericton to work to ensure the LIC meets our and community's needs, and the admin person will start the following spring to prepare for start-up for 3 students in Fredericton in 2019. There are still hurdles to cross but things should happen nicely. T. Laughlin asked for input on starting an LIC Implementation Committee, and D. McKay suggested the committee from Memorial should be co-chaired by a Royal College person and a Family Medicine person and should look at LIC implementation everywhere including New Brunswick. He also this week has to send a letter to CACMS advising them of the major change of a stream addition. In the scenario of block versus LIC, LIC rotations replace standard electives. D. McKay said student involvement is needed immediately to start planning. They will have to first go through the class of 2020 as it will be important to have an existing clerk on the committee. He suggested this would start out as an ad hoc committee which may become permanent later. S. Murphy to speak with J. McCarthy to come up with recommendations for the Committee. D. McKay is working on this will keep us posted.</p>	<p><b>ACTION: D. McKay to send a letter to CACMS advising them of the addition of the LIC.</b></p> <p><b>ACTION: S. Murphy to speak with J. McCarthy regarding recommendations for the LIC Implementation Committee.</b></p> <p><b>ACTION: D. McKay also working on this and will keep the Committee updated.</b></p> <p><b>ACTION: It was moved by D. McKay and seconded by S.</b></p>

		<p>It was <b>MOVED</b> by D. McKay and <b>SECONDED</b> by S. Murphy to ask Clerkship/Phase 4 to assist in developing an LIC Implementation Committee.</p> <p style="text-align: center;">All were in favour and the <b>MOTION CARRIED.</b></p> <p><u>P2P in NB</u>: T. Laughlin is working with L. Power to find out ways to promote more P2P in New Brunswick as there are admin people in each site now. He will keep us posted.</p>	<p><b>Murphy to ask Clerkship/ Phase 4 to assist in developing an LIC Implementation Committee. Motion carried.</b></p> <p><b>ACTION: T. Laughlin to keep the Committee updated regarding P2P in New Brunswick.</b></p>
#10 SENATE, SCUGS, AND UNIVERSITY ISSUES		D. McKay said there were no issues to report.	
#11 SENIOR MANAGEMENT COMMITTEE AND POLICY ISSUES		<p>D. McKay said the last SMC meeting was scheduled for 12:00, but since the University was closed until 1:00, he didn't attend.</p> <p>At the last Clinical Chairs meeting on Monday, he was concerned about the issue of Clinical discipline chairs putting great emphasis on equity and teaching distribution while only focussing on one course as it provides an inaccurate picture of teaching distribution.</p>	
#12 ACCREDITATION ISSUES		V. Curran said accreditation for Professional Development is coming up in May.	
#13 UGME OFFICE REPORT AND ISSUES		C. Peddle said there was nothing to report.	
#14 MATTERS ARISING FROM THE MINUTES	<ul style="list-style-type: none"> <li>• LEAN Curriculum</li> </ul>	The LEAN Curriculum has been already been discussed at a previous meeting and is to be removed from the curriculum, at least in its present form. An outstanding issue is whether or not the objectives associated with LEAN are still covered elsewhere in the curriculum. S. Pennell said his team will investigate and report back for further action as warranted.	<b>ACTION: S. Pennell and his team to ensure LEAN objectives are being covered elsewhere and report back to the Committee.</b>
#15 NEW BUSINESS	<ul style="list-style-type: none"> <li>• FCAT/CAG Updates</li> <li>• FCAT TOR</li> <li>• P4 Summative</li> </ul>	<ul style="list-style-type: none"> <li>• <u>FCAT/CAG Updates</u>: T. Stuckless explained the Career Advisory Group's main concern is to develop strategies to minimize the number of students who are unmatched with CaRMS and assist these students.</li> </ul>	

	<p>Assessment Procedure</p> <ul style="list-style-type: none"> <li>• Co-Curricular Activities Policy</li> <li>• Co-Curricular Record Advisory Committee</li> </ul>	<p>The group had its first meeting and changed the Terms of Reference by increasing membership from 6 to 8. D. McKay commented that only 25% of students attended a letter review service for CaRMS, and the Class of 2018 only showed 75% attendance to a mandatory electives/selectives session. S. Murphy thanked T. Stuckless for her report.</p> <ul style="list-style-type: none"> <li>• <u>FCAT TOR</u>: Tabled for next meeting. S. Murphy to send information to Committee members.</li> <li>• <u>P4 Summative Assessment Procedure</u>: covered above.</li> <li>• <u>Co-Curricular Activities Policy</u>: J. Reddigan explained the co-curricular record for service learning and volunteer opportunities has already been established, and med students are concerned about not being covered by medical insurance while practicing in other countries while they take advantage of these opportunities. This policy is to shed light on non-credit learning experiences that could be included in the co-curricular record. Students would have to be approved by the proper office for non-credit learning experiences prior to participating, and the procedure has been put together to reflect this.</li> <li>• <u>Co-Curricular Record Advisory Committee</u>: this Committee would be designed to meet 2 times per year to review the types of activities being requested and ensure they are appropriate learning experiences. D. McKay said it is important to try to achieve educational and safety value at the same level of scrutiny as elective/selectives. E. Hillman said the Registrar’s Office can possibly construct a course to “register” them as administration’s way to keep track of students and this “course” could also be incorporated into the Dean’s letter. J. Reddigan said this could be added to procedure later.</li> </ul> <p>S. Murphy <b>MOVED</b> and A. Goodridge <b>SECONDED</b> to accept both the Co-Curricular Activities Policy and the proposal for the formation of a Co-Curricular Record Advisory Committee with edits.</p>	<p><b>ACTION: S. Murphy to send FCAT TOR information to Committee members for review.</b></p> <p><b>ACTION: It was moved by S. Murphy and seconded by A. Goodridge to accept both the Co-Curricular Activities Policy as well as the proposal for the formation of the Co-Curricular Record Advisory Committee with edits. Motion carried.</b></p>
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		All were in favour and the <b>MOTION CARRIED.</b>	
#16 ADJOURNMENT		Meeting adjourned at 1739 hours.	
Next Meeting		February 15, 2017	