

Undergraduate Medical Studies Committee Meeting		DATE	March 15, 2017
		ROOM	M2M240
CHAIR	Dr. Sean W. Murphy		
MEMBERS: 2016-17	<p>Student Representatives (2)</p> <ul style="list-style-type: none"> • Mr. Mark Hayward, Phase 1 – 3 Student Representative • Ms. Kylie Goodyear, Junior Student Representative • Ms. Heather Perry, Junior Student Representative <p>Academic/Administrative Representatives (5)</p> <ul style="list-style-type: none"> • Dr. Olga Heath, Faculty Representative • Dr. Carolyn Morris-Larkin, Faculty Representative • Dr. Lindsay Alcock, Faculty Representative • Dr. John Campbell, Faculty Representative <p>Permanent Members (13)</p> <ul style="list-style-type: none"> • Dr. Margaret Steele, Dean of Medicine • Dr. Donald W. McKay, Associate Dean, Undergraduate Medical Education • Ms. Elizabeth Hillman, Registrar’s Delegate • Ms. Carla Peddle, UGME Coordinator • Dr. Alan Goodridge, Chair - Program Evaluation Sub-Committee • Dr. Vernon Curran, Chair – Student Assessment Sub-Committee • Mr. Stephen Pennell, Chair – Information Technology Advisory Committee • Dr. Jason McCarthy, Phase 4 Lead/Clerkship Coordinator • Dr. Amanda Pendergast, Phase 1 Lead • Dr. Lisa Kenny, Phase 2 Lead • Dr. Joanne Hickey, Phase 3 Lead <p>Corresponding Members (5) (Absence does not affect quorum)</p> <ul style="list-style-type: none"> • Dr. Tom Laughlin, Assistant Dean – New Brunswick • Dr. Mohamed Ravalia, Assistant Dean – Rural Medical Education Network • <i>Vacant</i>, Assistant Dean – Prince Edward Island • <i>Vacant</i>, Assistant Dean – Yukon • Dr. Tanis Adey or Dr. Taryn Hearn, Co-Interim Review Coordinators 		
PARTICIPANTS	S. Murphy, O. Heath, D. McKay, E. Hillman, A. Goodridge, V. Curran, L. Kenny, J. Hickey, K. Goodyear, H. Perry, T. Laughlin (dial-in), T. Adey (dial-in)		

REGRETS	C. Morris-Larkin, L. Alcock, C. Peddle, S. Pennell, J. McCarthy, A. Pendergast, M. Hayward, T. Hearn		
RECORDING SECRETARY	<i>Minutes Recorded and Transcribed by Ms. Carol Vokey</i>		
GUESTS	J. Bartlett, M. Mathews		
MINUTES			
AGENDA	ITEM	DISCUSSION	ACTION
#1 WELCOME		The meeting was called to order at 1608 hours. S. Murphy welcomed M. Mathews and J. Bartlett.	
#2 AGENDA APPROVAL		Agenda was approved.	
#3 APPROVAL OF MINUTES		Minutes of January 18, 2017 meeting were approved as presented.	
#4 STANDING COMMITTEE REPORTS	Item 4. a. PESC Report	<p>A. Goodridge said the PESC committee has suggested two possible amendments to the Course Review Policy:</p> <ol style="list-style-type: none"> 1. Wording regarding reports being circulated to Phase Leads: add circulation to course leads and Phase 4 clinical discipline coordinators. 2. Wording regarding who is responsible for follow-up reports for courses / rotation identified as requiring review based on below-benchmark evaluations. <p>The Committee discussed this, and S. Murphy will discuss with the P4 Lead about the process he follows and report back. Such revisions may not be required, as the Phase Leads generally have the option to delegate such tasks as may be appropriate. As for the first suggestion, there are no "Course Leads" <i>per se</i> and the Phase Leads can make reports available to the relevant faculty for action.</p> <p>A. Goodridge also updated they are doing phase reviews on a regular basis as per their mandate. ILS was identified as problematic in that evaluations have not improved as other courses have. Peer review appears to be a n issue. Phase 2 Acute Episodic Problems score has improved and other elements are stable. In Phase 3, reviews have improved from a score of 3.4 to 4.1. A. Goodridge said inconsistency with Clinical Skills tutors is an ongoing issue and he has asked the Clinical Skills Committee to look at OSCE results to identify problem areas.</p>	<p>ACTION: S. Murphy to talk to J. McCarthy regarding process of circulating low performing course reports and bring back to committee.</p> <p>ACTION: A. Goodyear to work on frequency of evaluations required by students.</p> <p>ACTION: Keep "Curriculum Review Process" on agenda. PESC to take first step and bring back ideas on how to proceed for discussion.</p>

		<p>Another emerging problem is decreasing evaluation response rates by students. K. Goodyear suggested that it could be due to the frequency of evaluation. K. Goodyear also mentioned issues with clinic card app. A. Goodridge to look at performing entire curriculum review, and said PESC take first step and bring back ideas on how to proceed for input.</p>	
	<p>Item 4. b. SAS Report</p>	<p>V. Curran said SAS has been working on the issue of reassessment problems due to timing of exams. L. Kenny said there isn't a lot that can be do to change this year, but this will be an item to be addressed further next year. In the interim, individual cases should be brought to UGME. J. Hickey said it is difficult to find the balance between fewer exams that are longer vs. shorter exams more often. L. Kenny said UGME has been very accommodating to students, and everyone is working very hard to make it better. K. Goodyear feels it has already improved.</p> <p>V. Curran also presented Class of 2017 – Annual Phase 4 Review Report, showing CACMS elements related to assessment, and highlighted the following:</p> <ul style="list-style-type: none"> - Only 26% of the Class of 2017 had all mandatory procedures completed once by the end of Core. K. Goodyear said it's hard to get the opportunity to perform blood gas testing and catheter insertion as the techs won't allow them. Students have until the end of 4th year to complete these procedures once, and further monitoring will be done. S. Murphy to follow up with J. McCarthy. - Element 9.5 doing well in majority of core rotations except Anesthesia, Pediatrics and Emergency Medicine with lower percentage of students with required number of clinic cards. Based on last year's data, and this is the first year with Clinic Cards. K. Goodyear said percentages should be up in Emergency and PEDS. V. Curran thought app would improve narrative feedback; however that may not be the case. App effectiveness will be evaluated at the end of the pilot period. - Element 9.8 timely summative assessment - only 56% of students received summative assessment from Anesthesia within 6 weeks of completion. V. Curran will continue to monitor, and S. Murphy will discuss with J. McCarthy. 	<p>ACTION: S. Murphy to follow up with J. McCarthy on incomplete mandatory procedures.</p> <p>ACTION: S. Murphy to follow up with J. McCarthy on low percentage of summative assessment from Anesthesia.</p>

	Item 4. c. iTac Report	S. Pennell was not present to report. S. Murphy said S. Pennell was working on revisions to the policy on live video capture as requested by SMC. S. Murphy to ask S. Pennell to bring the policy to UGMS for review.	ACTION: S. Murphy to ask S. Pennell to present policy on live video capture to UGMS for review.
#5 PHASE 4- CLERKSHIP REPORT/ISSUES		As J. McCarthy was not present, the Phase 4 Assessment Plan was tabled for next meeting.	ACTION: Phase 4 Assessment Plan tabled for April meeting.
#6 PHASE 3 REPORT/ISSUES		J. Hickey said they may have to update the assessment plan for Physician Competencies and the Research Curriculum. Challenge this year with ethics approvals on time have to monitor student progress more carefully. Brainstorming to determine alternatives and working with ethics to remedy and will bring to SAS and then to next UGMS.	
#7 PHASE 2 REPORT/ISSUES		L. Kenny said there were no big updates. M. Mathews, UCL for Public Population Health, presented a proposal to re-sequence components of the curriculum for discussion. Various issues were outlined and discussed. L. Kenny said the Phase 2 Team is in agreement board with changing the format. S. Murphy said to go ahead and approach other phase committees and UGMS can discuss again when they have more information. M. Mathews to email the presented document to S. Murphy for distribution to the Committee.	ACTION: M. Mathews to bring proposal to Phases 1, 3 and 4 and report back to UGMS for further discussion.
#8 PHASE 1 REPORT/ISSUES		A. Pendergast was not present to report.	
#9 Report from NB		T. Laughlin reported that things are going well and work is progressing to accommodate LIC. He said they are hoping to discuss the MUN LIC Implementation Committee at tomorrow's clerkship meeting.	
#10 SENATE, SCUGS, AND UNIVERSITY ISSUES		D. McKay said there were no issues to report.	
#11 SENIOR MANAGEMENT COMMITTEE AND POLICY ISSUES		No issues to report.	
#12 ACCREDITATION ISSUES		D. McKay reported that the Faculty of Medicine was compliant in all 12 standards, satisfactory in all but one standard which requires no reporting or follow-up. Nothing more until next accreditation visit in 2021. UGMS is	ACTION: S. Murphy to add discussion on standard that requires monitoring to next

		responsible for standard 8.1 which is the most complex accreditation element to meet and deals with curricular management. He congratulated the Committee as well as SAS and PESC on a job well done, and he will be presenting a full report to Faculty Council on Tuesday. L. Kenny questioned the one standard that required monitoring, and D. McKay said he will discuss it with the responsible group first, then will bring to next UGMS meeting.	UGMS Agenda.
#13 UGME OFFICE REPORT AND ISSUES		As C. Peddle was not present to report, D. McKay read an update she prepared which outlines options being considered by Memorial University regarding MCC Progress Testing. D. McKay said the exact cost for the new exams has yet to be identified, and suggested the item be tabled for next UGMS meeting.	ACTION: MCC Progress Testing to be tabled for April UGMS meeting (UGME Office).
#14 MATTERS ARISING FROM THE MINUTES	<ul style="list-style-type: none"> • LEAN Curriculum • FCAT TOR 	<ul style="list-style-type: none"> • D. McKay read an email from J. Ramlackhansingh which says the majority of LEAN objectives are covered in PLC with the exception of “participate in simulation activities and apply the lean principles to show improvement”. Given that this objective is reflective of the manner in which LEAN had been taught and no more, no further action is required. • Change to FCAT TOR was a minor revision. <p>It was MOVED by S. Murphy and SECONDED by L. Kenny to accept revisions to FCAT TOR as presented.</p> <p style="text-align: center;">All were in favour and the MOTION CARRIED.</p>	ACTION: It was moved by S. Murphy and seconded by L. Kenny to accept revisions to FCAT TOR as presented. Motion carried.
#15 NEW BUSINESS	<ul style="list-style-type: none"> • MED 8750 (P4) assessment plan revision • April meeting date 	<ul style="list-style-type: none"> • <u>MED 8750 (P4) Assessment Plan Revision</u>: covered above • <u>April meeting date</u>: S. Murphy said the next UGMS meeting is scheduled for April 19 and occurs during Easter break. He will poll the Committee on an acceptable alternate date. 	ACTION: S. Murphy to poll Committee on alternate date for April meeting.
#16 ADJOURNMENT		Meeting adjourned at 1745 hours.	
Next Meeting		To be determined.	