

Undergraduate Medical Studies Committee Meeting		DATE	December 17, 2014
		ROOM	M2M240
<b>CHAIR</b>	Dr. Sean Murphy,		
<b>MEMBERS:</b>  <b>2014 - 2015</b>	<p>Student Representatives (2)</p> <ul style="list-style-type: none"> <li>• Mr. Mark Hayward, Phase 1 – 3 Student Representative</li> <li>• Ms. Susan Wakeham, Phase 4 Student Representative</li> </ul> <p>Academic/Administrative Representatives (5)</p> <ul style="list-style-type: none"> <li>• Dr. Olga Heath, Faculty Representative</li> <li>• Dr. Carolyn Morris-Larkin, Faculty Representative</li> <li>• Dr. Sheila Drover, 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. James Rourke, 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. Melody Marshall, 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. Kath Stringer, Clerkship Committee Chair</li> <li>• Dr. Victor Maddalena, Phase 1 Lead</li> <li>• Dr. Lisa Kenny, Phase 2 Lead</li> <li>• Dr. Joanne Hickey, Phase 3 Lead</li> <li>• Dr. Kath Stringer, Phase 4 Lead</li> </ul> <p>Non-Voting Corresponding Members (4)</p> <ul style="list-style-type: none"> <li>• Dr. Todd Lambert, Assistant Dean – New Brunswick</li> <li>• Dr. Mohamed Ravalia, 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> </ul>		
<b>PARTICIPANTS</b>	Dr. Sean Murphy, Dr. Vernon Curran, Dr. Victor Maddalena, Dr. Lisa Kenny, Dr. K. Stringer, Dr. Olga Heath, Ms. G. McGrath, Dr. Alan Goodridge, Ms. E. Hillman, Dr. D. McKay, Dr. Joanne Hickey, Mr. Mark Hayward, Ms. Melody Marshall		

<b>REGRETS</b>	Dr. Lindsay Alcock, Dr. John Campbell, Dr. James Rourke, Dr. Todd Lambert, Dr. Mohamed Ravalia, Dr. S. Drover, Mr. S. Pennell, Dr. Carolyn Morris-Larkin, Ms. Susan Wakeham,		
<b>RECORDING SECRETARY</b>	<i>Minutes Taped – Transcribed by Jane Stevens</i>		
<b>GUESTS</b>	Ms. Gerona McGrath		
<b>MINUTES</b>			
<b>AGENDA</b>	<b>ITEM</b>	<b>DISCUSSION</b>	<b>ACTION</b>
#1 WELCOME		<ul style="list-style-type: none"> <li>The meeting was called to order at 1610h.</li> <li>Quorum in attendance.</li> <li>No conflict of interest was identified.</li> </ul>	
#2 AGENDA APPROVAL		No additions or revision	<b>ACTION: Agenda adopted</b>
#3 APPROVAL OF MINUTES		There were no minutes available for approval.	
#4 STANDING COMMITTEE REPORTS	Item 4. a. PESC Report	<p>A. Goodridge provided a detailed report on PESC activities.</p> <p>The evaluation framework is now available and focuses on four areas: student experiences, graduate outcome, faculty and teaching; and, curriculum and resources.</p> <p>Quality improvement sessions have ensured that the evaluation process is more responsive. QI sessions are being held every two to three weeks by phase leads.</p> <p>Evaluations and feedback for the first offering of phase 1 and 2 have been received. Ratings are as follows:</p> <ul style="list-style-type: none"> <li>Clinical Skills has been rated most highly at 4.3 and 4.1.</li> <li>Healthy person for phase 1 was 3.5. This rating is generally lower than we have seen for individual courses. Many of the concerns have been addressed.</li> <li>Acute and Episodic Illness in phase 2 was rated at 3.5.</li> <li>Special Projects rated 3.4 and 3.9.</li> </ul>	<p><b>MOTION: To ensure that divisional heads and discipline chairs meet with faculty members with substandard evaluations.</b></p> <p><b>MOTION: To approve the Course review Policy, Phase Review Policy; and, Curriculum Review Policy.</b></p>

		<ul style="list-style-type: none"> <li>• Community Engagement rated 3.6 and 3.8.</li> <li>• Rural Visit rated 4.7.</li> <li>• House Calls rated 3.8.</li> </ul> <p>Faculty evaluations are ongoing. During the first year, the evaluations were slow to be circulated but that issue is being addressed. It is felt that a stronger directive to divisional heads and discipline chairs to meet with people who have substandard evaluations is required/</p> <p>In response, It was <b>MOVED</b> by D. McKay and <b>Seconded</b> by L. Kenny that when a faculty member following a course evaluation the PESC Chair may correspond to discipline chairs or divisional heads, a request to meet with faculty members as deemed appropriate.</p> <p style="text-align: center;">All were in favour and the <b>MOTION CARRIED</b></p> <p>A student experience questionnaire has been designed to look at broad aspects of the curriculum (mini-CGQ). Good response rates have been received from the Phase 1 and 3 students – 73%. The clerkship students rated around 33 to 34%. Curriculum items that were rated poorly were:</p> <ul style="list-style-type: none"> <li>• Class of 2018 - curriculum is delivered in an organized and logical way – 3.3%</li> <li>• Class of 2017 – curriculum is delivered in an organized and logical way – 3.2%</li> <li>• Clerkship students – I felt adequately prepared to start my clerkship rotations – class 1 and 2 rated at 3.0%. It should be noted that these students are completing the old curriculum.</li> </ul> <p>PESC has received the first annual report related to accreditation issues. With regard to the witnessed history and physical and the timely summative evaluations both scored at 100%.</p> <p>With regard to the CGQ, a couple of issues were noted:</p> <ul style="list-style-type: none"> <li>• Overall, graduates were most critical of the lack of guidance when choosing electives – rated at 2.6%</li> <li>• Adequacy of recreation – rated at 2.7%</li> </ul>	
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	Item 4. b. SAS Report	<p>V. Curran present a summary of key initiatives that have been undertaken by the Student Assessment Sub-Committee recently. These include:</p> <ul style="list-style-type: none"> <li>• The introduction of assessment blueprints and the process for reviewing same using the CBlue system.</li> <li>• A review and provision of advice of assessment maps in the curriculum and clerkship assessment maps.</li> <li>• Item analysis and reporting for all summative examinations.</li> <li>• Promotion and fostering the use of rubrics in the new curriculum including the construction of templates and resources for faculty use.</li> <li>• Implementation of a quality assurance process for each phase.</li> <li>• Creation of an inventory of all assessment tools and rubrics and evaluating same.</li> <li>• In collaboration with HSIMS, creation of a new item bank for all summative and formative examinations in the new curriculum.</li> <li>• Preparation of course assessment reports for all courses. Reports are subsequently reviewed by SAS and the phase and assessment leads.</li> <li>• Annual tracking of monitoring criteria including the student satisfaction scores for assessment across all phases. Anomalies are reported to UGMS. In the old curriculum, SAS was tracking 3 to 5 year trends, this will be continued in the new curriculum.</li> <li>• Monitor assessment marks for all summative examinations.</li> </ul>	<b>ACTION:</b>

		<p>Monitoring of 3 to 5 year trends has begun.</p> <ul style="list-style-type: none"> <li>• Monitor the LMCC part one scores and 3 to 5 year trends.</li> <li>• Monitor the NBME grades in clerkship and 3 to 5 year trends.</li> <li>• Monitor the CGQ and focus specifically on items surrounding assessment which is reported to the UGMS.</li> <li>• Monitor summative examination statistics, item analysis.</li> <li>• Annual reviews of assessment and monitoring around the witnessed histories and physicals and ensuring that students are receiving their marks within six weeks.</li> <li>• Reviewing data around the mid-point review meetings and ensuring that those occur and will be liaising with the undergrad office to monitor that data.</li> <li>• Staff are made available for consultation and advice on assessment methods with faculty.</li> <li>• Support for accreditation on an as needed basis.</li> </ul>	
	Item 4. c. iTAC Report	No report available.	
#5 PHASE 4-CLERKSHIP REPORT/ISSUES		K. Stringer reported that planning is underway for the first Phase 4 management meeting scheduled to be held on January 29, 2015.	
#6 PHASE 3 REPORT/ISSUES		<p>J. Hickey advised that Phase 3 is finishing up the second block (of seven).</p> <p>There have been some logistical issues primarily surrounding faculty communication and engagement. Strategies are being devised to improve communication. It is hoped that an orientation package will be available to send to teaching faculty one month prior to the schedule's commencement. Improvements are being made to faculty engagement. Faculty have been requesting more time for material, this issue is being investigated.</p> <p>The timing/schedule change to community engagement has been implemented and has been received well by the students. Most learning contracts have been received so the students will have the full six months after the holiday break to work on independent projects.</p> <p>The leave policy is an ongoing issue.</p>	

#7 PHASE 2 REPORT/ISSUES		Phase 2 is not currently active.  L. Kenny advised that issues with assessment and assessment support have been ongoing. There are ongoing issues with faculty engagement and scheduling and efforts are being made to address this.	
#8 PHASE 1 REPORT/ISSUES		V. Maddelena reported that Aside from some small logistical issues, Phase 1 is progressing quite nicely.	
#9 SENATE, SCUGS, AND UNIVERSITY ISSUES		D. McKay reported that the Senate Committee has ruled that guns are not permitted in classrooms, and issue not directly relevant to the FoM.  The paper calendar has been discontinued.	
#10 SENIOR MANAGEMENT COMMITTEE AND POLICY ISSUES		No meeting of the Senior Management Committee has occurred since the last UGMS meeting.	
#11 ACCREDITATION ISSUES		D.McKay updated the committee on a number of accreditation related issues.	
#11 UGME OFFICE REPORT AND ISSUES		The UGME office has been unsuccessful in recruiting for an intermediate secretary to replace the staff member on secondment and the incumbent intermediate secretary will return to her position on December 22, 2014.	
#12 MATTERS ARISING FROM THE MINUTES			
#13 NEW BUSINESS	13. a. Course, Segment, and Curriculum Review Policies	This agenda item has been covered in 4. a.	
	13. b. IPE Special Projects	As a follow up to the November meeting item regarding IPE assessment, O. Heath informed the Committee that the objectives for IPE cannot be	

	III Assessment	<p>achieved without having students actively participate. A number of students have not attended sessions.</p> <p>After discussion of this matter, S. Murphy recommended that the assessment map in place not be altered, as the course has commenced and students may not necessarily benefit (in terms of grades) from the proposed change.</p> <p>It was agreed that the reflection will remain and that the team project will ensure that students have actively participated in creating the team project.</p>	
	13. c. Student Issues	<p>M. Hayward reported that there are some issues with instructional time. The students feel that time has been cut too short for instructors. It is felt that instructors could take the time to review the objectives and pare down the content from previous iterations.</p> <p>The assessment map for health ethics and law for phase 3 has been questioned. It was suggested that the assessment map posted online is not the assessment map that was approved by UGMS. This will be followed up.</p> <p>Clarification of the leave policy was requested with respect to the assessment map for health ethics and law.</p>	
#14 ADJOURNMENT		The meeting adjourned at 1835h.	
Next Meeting		The next regular meeting of the UGMS is January 21 <sup>st</sup> , 2015.	