

Undergraduate Medical Studies Committee Meeting		DATE	November 19, 2014
		ROOM	PDCS Room 5
CHAIR	Dr. Sean Murphy,		
MEMBERS: 2014 - 2015	<p>Student Representatives (2)</p> <ul style="list-style-type: none"> • Mr. Mark Hayward, Phase 1 – 3 Student Representative • Ms. Susan Wakeham, Phase 4 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. Sheila Drover, Faculty Representative • Ms. Lindsay Alcock, Faculty Representative • Dr. John Campbell, Faculty Representative <p>Permanent Members (13)</p> <ul style="list-style-type: none"> • Dr. James Rourke, Dean of Medicine • Dr. Donald W. McKay, Associate Dean, Undergraduate Medical Education • Ms. Elizabeth Hillman, Registrar's Delegate • Ms. Melody Marshall, 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. Kath Stringer, Clerkship Committee Chair • Dr. Victor Maddalena, Phase 1 Lead • Dr. Lisa Kenny, Phase 2 Lead • Dr. Joanne Hickey, Phase 3 Lead • Dr. Kath Stringer, Phase 4 Lead <p>Non-Voting Corresponding Members (4)</p> <ul style="list-style-type: none"> • Dr. Todd Lambert, 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 		
PARTICIPANTS	Dr. Sean Murphy, Dr. K. Stringer, Dr. S. Drover, Ms. E. Hillman, Mr. S. Pennell, Dr. Vernon Curran, Dr. Alan Goodridge, Dr. Olga Heath, Dr. D. McKay, Dr. Carolyn Morris-Larkin, Dr. Joanne Hickey, Mr. Mark Hayward, Ms. Susan Wakeham, Ms. Melody Marshall		

REGRETS	Dr. Victor Maddalena, Dr. Lindsay Alcock, Dr. John Campbell, Dr. James Rourke, Dr. Lisa Kenny, Dr. Todd Lambert, Dr. Mohamed Ravalia		
RECORDING SECRETARY	<i>Minutes Taped – Transcribed by Jane Stevens</i>		
GUESTS	Ms. Sally Ackerman		
MINUTES			
AGENDA	ITEM	DISCUSSION	ACTION
#1 WELCOME		<ul style="list-style-type: none"> • The meeting was called to order at 1610h. • Quorum in attendance. • No conflict of interest was identified. 	
#2 AGENDA APPROVAL		<p>Agenda revisions/additions include:</p> <ul style="list-style-type: none"> • Item 12. 6. Should read: P2P Course (Phase 4) • Addition of assessment of IPE sessions • Addition of Clerkship Preparation time limit request. 	ACTION: Agenda adopted as revised
#3 APPROVAL OF MINUTES		<p>Minutes from August 27, 2014 were adopted as presented.</p> <p>Minutes from October 30, 2014 were adopted as presented.</p>	ACTION: Minutes adopted as presented.
#4 STANDING COMMITTEE REPORTS	Item 4. a. PESC Report	<p>A. Goodridge provided a brief summary of recent PESC activities. He noted that a recent revision of the PESC Terms of Reference has resulted in a change in membership. Changes include:</p> <ul style="list-style-type: none"> • Representation from all curriculum leadership and includes: <ul style="list-style-type: none"> ○ Associate dean - UGME, ○ Phase Leads, ○ 2 undergraduate students; and, ○ Representation from post-graduate education. • Quorum must include a learner. <p>A detailed report from PESC will be provided at the next regular meeting.</p>	
	Item 4. b. SAS Report	<p>V. Curran gave a summary of current SAS activities. Revisions to the SAS Terms of Reference have been implemented. All members have been recruited with the exception of a representative from Biomedical Sciences.</p> <p>A quality review process of assessment instruments and tools in the new curriculum is currently underway. This process includes an inventory of all</p>	ACTION: Recommendations surrounding ED-27, 30, and 31 will be brought forward during the December 2014 meeting of the UGMS Committee.

		<p>assessment tools currently being used. The review process will ensure consistency and standardization in assessment methods.</p> <p>The quality review process has been completed for Phase 1 and follow up is being completed.</p> <p>Data on ED-27, 30, and 31 has been reviewed and presented to SAS. A recommendation has been made to include those areas as part of the annual monitoring at the assessment sub-committee level. Monitoring standards will be brought forward at the next meeting of the UGMS Committee.</p> <p>Assessment blueprints and maps are being monitored as they occur for each of the summative exams.</p> <p>Examination items are being mapped to objectives that are to be covered for each summative exam. A sample of items is selected based upon the proportion of instructional time for each of the topics. Instructors are then asked to forward 4 to 5 summative items and 3 to 4 formative items. Over time this will ensure the development of a test bank for the new curriculum. Assessment leads also review items, providing a quality validity check as items are received.</p> <p>It has been suggested by MELT that the Chair of UGMS communicate with relevant faculty that rubrics should be used as per policy.</p> <p>S. Murphy informed the committee that he did follow up with M. Goodridge regarding the assessment scheme / map for Phase 3 Clinical Skills. The map as revised by UGMS was correct, but a clarification was circulated to students to confirm that situations may occur in which students are not eligible for remediation. Efforts to simplify the grading scheme will continue.</p>	<p>ACTION: Assessment indicators to be brought forward during the December, 2014 meeting of the UGMS Committee.</p>
	<p>Item 4. c. iTAC Report</p>	<p>S. Pennel advised that iTAC has been successful in obtaining access to the MediTech system at no charge. Discussions are ongoing to incorporate health informatics into the curriculum.</p> <p>iTAC will also investigate the inclusion of health informatics in the Phase 3</p>	

		<p>clinical skills component.</p> <p>An agreement has been reached between medicine and Eastern Health for videoconferencing units. Eastern Health will pay 1/3 of the cost of videoconferencing.</p> <p>Cloud servicing licensing agreements with Microsoft are being discussed which could also result in free software.</p> <p>Technology integration in the current curriculum indicates a positive, time-saving benefit to students.</p> <p>The C-Blue curriculum blueprinting system has been adopted by the faculties of Engineering, Pharmacy, Nursing, and Social Work. Dr. Neville, the Associate Vice-President (Academic) will be presenting the system to the Vice-President's Council for approval for campus-wide use.</p> <p>Question Mark learner feedback has been very positive. Feedback can be provided to students on specific areas based on the coaching report and blueprint ID.</p>	
#5 PHASE 4-CLERKSHIP REPORT/ISSUES		<p>Dr. Kath Stringer has been officially appointed as the Phase 4 Lead. A Phase 4 committee has not yet been created but the Clerkship Committee is planning for the transition.</p> <p>A recent New Brunswick visit and the P2P course have been included as spate agenda items.</p>	
#6 PHASE 3 REPORT/ISSUES		<p>J. Hickey reported that Phase three has been initiated and is moving along quite nicely. A potential increase the length of the community visit to two weeks, a direct result of student feedback and inquiries, is being investigated.</p> <p>Students have indicated that they are satisfied with the assessment maps. The first examination in phase three has been scheduled for next week. There has been one ILS and feedback session thus far.</p>	
#7 PHASE 2		<p>S. Murphy noted that the Phase 2 assessment maps need to be revised prior to the next Phase 2 start date.</p>	

REPORT/ISSUES			
#8 PHASE 1 REPORT/ISSUES		V. Madelena reported that a change in teaching methods which includes a shift from traditional in-class lectures to more innovative methods has some faculty members concerned with the ability to attribute these new teaching methods to promotion and tenure dossiers, etc.. Some discussion ensued, and it was agreed that this was a significant issue that needs further consideration.	
#9 SENATE, SCUGS, AND UNIVERSITY ISSUES	9. a. Revisions to MUN calendar regulations on student evaluations and course syllabi	D. McKay advised that a new section has been added to the calendar that deals with credit for university courses held elsewhere. Also, calendar revisions have been proposed for registration and evaluation. While most changes are innocuous, revisions which are problematic for the Faculty of medicine include: <ul style="list-style-type: none"> • <i>The course syllabus shall include the instructor's office hours.</i> The Faculty of Medicine schedules numerous instructors for each course, many of whom do not have the capability to provide this. It is suggested that UGMS request exemption from this regulation. • <i>There should be a statement regarding academic misconduct, including a reference to the entry on academic misconduct in the calendar.</i> It was felt that a reference to particular regulations is not necessary and that UGMS request the deletion of this statement. • <i>In the event of an officially declared emergency where there are cancellations, works can be rescheduled, but in no circumstances can the rescheduled work be held in the last week of lectures of a semester.</i> It is understood that this regulation would protect students from being inundated with information prior to a final examination. The regulation is problematic for faculty as many courses do not have final examinations. It is suggested that the wording be changed to reflect "in courses with final exams". 	ACTION: Student Assessment Committee will review suggestions and make a recommendation to UGMS on changes/deletions for the suggested calendar revisions noted.
#10 SENIOR MANAGEMENT COMMITTEE AND POLICY ISSUES		D. McKay reported that a Blood-Borne Pathogen policy was enacted by CPSNL in February. Adherence to the policy is required by all learners, including residents and medical students, as well as physicians within the province. The Faculty of Medicine released a companion policy which was created by senior management and is being managed by Student Affairs to ensure	ACTION: Associate Dean, UGME will report on the scheduled meeting with the Registrar of CPSNL.

		student compliance. A meeting has been scheduled with Dr. Linda Inkpen, the Registrar of the College to discuss student and faculty concerns with the Blood Borne Pathogen Policy.	
#11 ACCREDITATION ISSUES	11. a. Mini DCI for ED-33 and ED-35	D. McKay updated members on a number of accreditation related items. <u>ED-33</u> In preparation for the limited survey visit, UGMS committee members will be asked to meet to review the role of this Committee in curriculum governance. <u>ED-35</u> The committee's central role in curriculum review was discussed. PESC has provided the majority of analysis and data in this area.	ACTION: Members will be required to meet to discuss limited survey questions.
	11. b. Report on ED-27, ED-30, and ED-31	<u>ED-27, 30; and, 31</u> PESC, SAS, and the Clerkship Committee have already seen relevant data. UGMS will consider the reports from SAS and PESC and any outcomes/recommendations will be reflected in the UGMS minutes.	
	11. c. Update on ED-5-A	<u>ED-5-A</u> SAS has been continually looking at assessment issues to ensure that students have identified their learning needs, evaluated the information, assessed the credibility and shared it with peers and/or mentors; and then applied it to their future life. This ongoing work has been implemented in Phase 1, 2, and, 3. It has also been implemented in the pediatric and psychiatry inter-professional portion of the clerkship program. There is a continuing role for UGMS and SAS in that relevant sample schedules that illustrate the placement of these self-directed learning sessions ensuring that there is time for student to engage in them.	ACTION: UGMS should meet for a brief session surrounding ED-5A prior to the February meeting.
	11. d. MS-19 Action Plan	<u>MS-19</u> While MS-19 appears to be a student affairs issue, UGMS has recently created FCAT (financial counselling advisory team) and CAG (career advisory group) to ensure ongoing sessions in the formal curriculum dealing with student career and financial issues.	MOTION: To discuss reporting periods with the Chairs of the FCAT and CAG.

		While FCAT and CAG is required to report to the UGMS Committee, a time frame has not been identified. It was suggested that a report be requested early in the new year.	
	11. e. Update on MS-32 Curriculum	<p><u>MS-32</u></p> <p>Senior Management Committee has recently approved the procedure to accompany the policy that the Faculty of Medicine had previously approved on MS-32, the standards of conduct.</p> <p>While the standards are only required for faculty/student relationships, Memorial has gone the extra mile and have identified mechanisms by which students may raise concerns about health care staff or staff members in general.</p> <p>In Phase 1, the students take part in a mini-quiz dealing with the policy and during the house call portion of Phase 2 students are required to read the policy and answer questions.</p> <p>The Senior Management Committee has agreed on a dispersion plan which includes specific discussion regarding this policy at all discipline meetings, RMEN, NB Faculty, Phase Management Teams and Clerkship meetings.</p>	
#11 UGME OFFICE REPORT AND ISSUES		<p>M. Marshall reported that the UGME office has hired replacement administrative support for UGMS.</p> <p>Regular meetings have been held with the Discipline APA's and within the regions.</p> <p>The Medical Student Performance Records have been completed and submitted.</p> <p>The office is participating in a pilot launch of the AFMC student portal for visiting electives. The portal is expected to go live early in the new year.</p>	
#12 MATTERS ARISING FROM THE MINUTES	12. a. New member – Phase Oversight Committee	S. Murphy advised that the Phase Oversight Committee requires a new committee member. It is expected that with the completion of Phase 4 development, MELT will no longer be required as an <i>ad hoc</i> working group. Phase Oversight provides an significant role in terms of curricular integration	ACTION: Committee members are asked to consider taking a position on the Phase Oversight Committee

		and will persist.	
#13 NEW BUSINESS	13. a. Faculty issues in New curriculum	C. Morris Larkin reported that some Faculty have raised concerns that leadership & responsibilities are not always clear within some groups and courses . It was suggested by some members that two “experts” per course (ie. Clinical Skills, Healthy Person, Community Engagement, etc.) might be included on the Phase Management Team. This will be discussed at a future meeting.	
	13. b. PLC vs. PMLP	<p>V. Maddalena informed the Committee that The Physician Management and Leadership Program is offered jointly by the Faculty of Medicine and the Gardiner Institute. It had originally been envisioned that all students would complete the 10 modules associated with the program. The Gardiner Centre has been reluctant to allow shortening of the program and generally did want the program altered in any way. As such, the students may not be eligible to receive the designation of PMLP unless the program was delivered in its original format.</p> <p>An proposed alternative to the PMLP program is the PLC (Physician Leadership Certificate), a modification of the PMLP. The current plan is that the class of 2018 will receive the PLC after completing the online components.</p> <p>Students do not seem to have a preference and there is a significant cost savings to the FoM to offer the PLC over the PMLP.</p> <p>It was MOVED by S. Murphy and Seconded by C. Morris-Larkin to bring forward the 2018 PLC program and the class of 2017 will receive a Faculty of Medicine Physician Leadership Certificate consisting of seven sessions.</p> <p style="text-align: right;">All were in favour and the MOTION CARRIED</p>	MOTION: To bring forward the 2018 Physician Leadership Program.
	13. c. Course goals for CEIII (Phase 3)	<p>A motion for a Community Engagement III course was put forward to Faculty Council and approved. For the coming year, this course will not be offered and the content will be delivered in the Special projects course.</p> <p>It was therefore MOVED by S. Murphy and Seconded by C. Morris-Larkin to amend the objectives for the Special Projects Course to include the</p>	MOTION: To include the Community Engagement III component in the Special Projects Course.

		Community Engagement III component. All were in favour and the MOTION CARRIED	
	13. d. Phase 3 community visit – 1 vs. 2 weeks	<p>J. Hickey advised that currently, a one-week community visit as well as two weeks allotted for independent projects takes place at the end of Phase three. The students have suggested that there be a two week community visit and one week for independent projects.</p> <p>The classes voted and the result was that 76% would rather have the two week community visit with one week for independent projects.</p> <p>After discussion it was agreed that such a change would be consistent with learning objectives and provide students with additional learning opportunities. It was agreed that this change would apply to all students, but that if students in the current Phase 3 cohort can demonstrate that this change would cause them undue hardship, then those students would be accommodated. This is not expected to be a major issue.</p> <p>It was MOVED by S. Murphy and Seconded by L. Glynn to approve changes to the independent projects and community visit time frames.</p> <p>All were in favour and the MOTION CARRIED</p>	MOTION: To approve changes to time frames within the community visit and independent projects components of phase 3.
	13. e. Leave policy	<p>M. Hayward reported that students have expressed concerns with the Leave Policy. After discussion. S. Murphy advised that UGMS does not determine the policy governing leave.</p> <p>It is suggested that MSS put their concerns in writing and forward to the appropriate department for review.</p>	
	13. f. P2P Course (Phase 4)	<p>The Committee was informed that online assignments are required during the Clerkship Preparation program and there have been some issues with due dates.</p> <p>A tentative timetable has been proposed for in-class instruction in which 4.5 days will be participatory and take place in the clinical learning simulation centre. Facilities are limited and the full class cannot be accommodated at the same time. Additional classes will need to be held outside the normal hours. It should be noted that there is no increase in hours, just a difference</p>	<p>ACTION: UGMS will review timelines for the online assignment portion of the Clerkship Preparation Course at an upcoming meeting.</p> <p>ACTION: UGMS will review in-class schedules for the Clerkship Preparation Course at an</p>

		in the normal schedule.	upcoming meeting.
	13. g. Report on AAMC Meeting	<p>The Associate Dean, UGME has just returned from the AMC meeting in Chicago where the Undergraduate Canadian deans met for the second of two annual meetings. Major discussions surrounded the following points:</p> <ul style="list-style-type: none"> • CGQ will be “Canadianized” this year. It will no longer be conducted by the AAMC, it will be conducted by the AFMC (Association of Faculties of Medicine of Canada). The questionnaire will be shortened for the 2015 year and it will focus primarily on those questions dealing directly with Accreditation issues. • Entrustable Professional Activities – the AAMC has two documents available to assist MD graduates in commencement of the residencies. • Medical Council of Canada exam – the class of 2017 will be the first class to undertake the exam. The examination will test professionalism, communication, medical expert, and, manager in the categories of wellness, acute disease, chronic disease; and, psycho-social disease. There are some issues in how professionalism and communication will be evaluated and it is anticipated that the exam may change for future years. • CanMEDS are being revised and it is agreed that this should be a fundamental framework. This does not mean that we have to take it verbatim, but to use it as a guideline for the competencies of our students. The major change is that “manager” is becoming “leader”. 	
	13. h. Report on NB visit	<p>D. McKay reported that five representatives travelled to New Brunswick. Two curricular related issues were discussed. They were:</p> <ul style="list-style-type: none"> • Clinic Cards – dissatisfaction from faculty and students. • Academic Half-Day Sessions – dissatisfaction from students. <p>Both issues will be brought forward at the Clerkship Committee meeting and UGMS should expect a report from the Clerkship Committee in the near future.</p>	ACTION: Clerkship Committee will report on issues brought forward during the NB visit.
	13. i. Report from FCAT	This item has been tabled, as a representative was not present.	
	13. j. Assessment Map –	O. Heath reported that active participation has been removed from the assessment map relevant to IPE in Phase 3. 30% (8-9% of special projects) of	ACTION: UGMS will bring forward the matter of Active

	IPE and IPSD	<p>the grade had been allotted to this grade.</p> <p>There are now two reflections and one project remaining, which does not reflect the definition of inter-professional education which states that students learn from, with, and about each other. If the students are not present and actively participating, then they cannot learn from or with each other.</p> <p>In the most recent IPE activity, a couple of students did not attend. When this was the case in the other two phases, remedial assignment included a reflection where students consider the impact of their absence on their team. This encourages students to attend and participate actively and to reflect on the importance of being physically present on the team's ability to complete a project.</p> <p>A proposal to include active participation will be forthcoming to UGMS.</p>	Participation in Phase 3 pending receipt of further information.
#14 ADJOURNMENT		The meeting adjourned at 1835h.	
Next Meeting		The next meeting of the UGMS is scheduled for December 17, 2014.	



Sean. W Murphy, MD
Committee Chair