

Undergraduate Medical Studies Committee Meeting		DATE	March 18, 2015
		ROOM	M2M240
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 • Dr. 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	S. Murphy, V. Curran, V. Maddalena, K. Stringer, E. Hillman, D. McKay, M. Hayward, S. Drover, S. Pennell, C. Morris-Larkin, A. Goodridge, S. Wakeham, J. Hickey, O. Heath, L. Kenny, M. Marshall		

REGRETS	L. Alcock		
RECORDING SECRETARY	<i>Minutes Taped – Transcribed by Ms. Carol Vokey</i>		
GUESTS			
MINUTES			
AGENDA	ITEM	DISCUSSION	ACTION
#1 WELCOME		The meeting was called to order at 1600h.	
#2 AGENDA APPROVAL			
#3 APPROVAL OF MINUTES		The Minutes for the February 18, 2015 meeting were adopted with minor edits.	
#4 STANDING COMMITTEE REPORTS	Item 4. a. PESC Report	No major issues to report.	
	Item 4. b. SAS Report	No major to issues to report.	
	Item 4. c. iTAC Report	New iTac member, CIO of Eastern Health, Ron Johnson, replacing Stephen Greene (who is the new Director of ITS (formerly C&C)). We will work with Ron on gaining access to PACS in hopes of adding this medical informatics system into the curriculum. Development continues for the new Phase 4 Clerkship Prep app.	
#5 PHASE 4-CLERKSHIP REPORT/ISSUES		Clerkship: There was discussion regarding the Internal Medicine Core Clerkship Assessment Map 2014-2015. A motion was made to revise the current map.	Motion to adopt the new assessment map, as presented. Motion carried.

		In the past, clerkship assessment maps have not been individually approved by this Committee. It was agreed that In future, any changes to assessment maps (including Phase 4) should be brought to this Committee and M. Marshall will forward assessment items passed at UGMS to D. Deacon to go in the Handbook. This will be consistent with current procedures for the remaining phases.	
#6 PHASE 3 REPORT/ISSUES		<p>There was discussion regarding student ‘workload’ distribution with a specific request to shift some of the longer and larger content Block 6 (Chronic Conditions) material to Block 7, to make both blocks the same number of hours, and change assessment map to adjust weighting in exams. Approval in principle given, with formal approval to be administered through an e-vote to include the existing and adjusted assessment maps for reference.</p> <p>Discussion has taken place on the phase management team regarding student concerns regarding assignment due dates that coincide with other significantly busy times, e.g. exam dates. The question was raised whether or not student requests to change due dates must be brought to UGMS. After discussion, It was agreed that all such requests may be considered and approved by the appropriate phase management team.</p>	ACTION: J. Hickey will circulate both existing assessment maps and with proposed changes, with a call for an e-vote.
#7 PHASE 2 REPORT/ISSUES		<p>Phase 2 summative Assessment results were raised for discussion. An analysis is underway to determine possible reasons for the unanticipated results in recent summative assessments, specifically examinations. A number of factors that may be affecting student performance were discussed. The Committee will discuss further when the analysis is complete.</p> <p>The current practice of how students are allowed to review their individual exam results was raised for discussion. Presently, students are given the correct results to the exam, rather than just an indication that they had not received credit for an individual question. This is not consistent with the current examination policies and appears to have been done inadvertently. The concern is that this practice may be compromising the validity of future examinations.</p> <p>The summative assessment procedure, which includes examination review,</p>	ACTION: Formal message to be sent to students to inform them of change in process for reviewing exams.

		is currently being revised. As an interim measure, it was suggested that students not see the correct answers to exams until all deferred exams and reassessments were complete; an email would go to students from D. McKay or S. Murphy informing them this change in process.	
#8 PHASE 1 REPORT/ISSUES		Ongoing review of Phase 1 continues in preparation for the next administration in September.	
#9 SENATE, SCUGS, AND UNIVERSITY ISSUES		SCUGS is requesting comments on a report from the University regarding the issuance of 'Medical Certificates' and the consequences of the NLMA's five-day requirement to students if this sickness occurs around "high stakes" exams. In general, the Committee had no issues with the recommendations except Recommendation #3; It was suggested the wording should include that 'at the discretion of the Phase Lead students may be required to complete an alternate evaluation'. This Recommendation may be difficult to follow in all cases, as there is no substitute for skills examinations; it was recommended that such cases be dealt with on a case by case basis.	
#10 SENIOR MANAGEMENT COMMITTEE AND POLICY ISSUES		Faculty review ongoing	
#11 ACCREDITATION ISSUES		D. McKay reported that he was pleased with the draft report from the secretary of the survey team and he is hopeful for a good result. The final decision won't be made until mid-June at the earliest; S. Murphy thanked everyone for his or her excellent work on the accreditation process and dedication to the Medical School.	
#11 UGME OFFICE REPORT AND ISSUES		M. Marshall reported that staffing shortages in the UGME Office are being addressed. Advertisements for three positions are in progress: Secretary to Associate Dean, Academic Program Administrator (APA), and Manager of Curriculum. The APA position, which provides administrative support for the Phase Team Leads, is expected to be advertised within a week. Discussions concerning changes to the calendar and schedules for next year are underway.	
#12 MATTERS ARISING FROM THE MINUTES		None	

<p>#13 NEW BUSINESS</p>		<p>13.1) Clerkship Internal Medicine assessment map revision – see above under Phase 4 / Clerkship Report.</p> <p>13.2) Summative Assessment i) Summative Assessment Policy Phase 1-4: This policy document was presented independent of the related procedure document, which will be forthcoming. The policy was discussed and minor edits were suggested.</p> <p>It was MOVED by V. Maddalena and Seconded by S. Drover that the Summative Assessment Policy Phase 1-4 be accepted with the minor edits as presented.</p> <p style="text-align: center;">All were in favour and the MOTION CARRIED</p> <p>ii) Written assignments / assessment for Phases 1 -3: An overview of the number of and requirements of written assignments currently in Phase 1-3 has been compiled by D. Deacon and was presented. It was agreed the workload associated it this was very high relative to the grade values. A working group has been formed to make recommendations for rectifying this issue.</p> <p>13.3) Independent Projects Proposal: In response to issues identified with the present format, a proposal for revision was presented and discussed. It is proposed that students will prepare to do research projects incrementally over the 4 years of the MD program, instead of assuming students can undertake research projects in the first year of Phase 1. Under the new proposal, at the end of Phase 4 students will have been trained sufficiently to develop and execute at least small-scale projects. As well, faculty will be paired up with students as mentors instead of as supervisors. There will be a call for mentors representing each of the CIHR Pillars, with the intent of providing mentorship for students over the four phases.</p> <p>It was MOVED by S. Drover and Seconded by J. Hickey that the Independent Projects draft proposal be accepted in principle.</p> <p style="text-align: center;">All were in favour and the MOTION CARRIED</p>	<p>MOTION: To accept the Summative Assessment Policy Phases 1-4 as presented.</p> <p>MOTION: To approve Independent Project Proposal in principle. Motion carried.</p>
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#14 ADJOURNMENT		The meeting adjourned at 6:10 p.m.	
Next Meeting		With many members away in April, the next meeting of the UGMS will have to be decided at a later time and will be announced.	



Sean. W Murphy, MD
Committee Chair