



Program Evaluation Subcommittee (PESC)

MINUTES

Chair: Dr. Alan Goodridge

Tuesday, December 17th, 2024
12:30 – 2:00 pm WebEx Virtual Meeting

Attendees: Alan Goodridge (Chair), Sandra Cooke-Hubley, Heidi Coombs, Nirada Sirigorn-Anun, Katrin Zipperlen, Allison Haynes, Debra Bergstrom, Bruce Sussex, Anna Thomas

Regrets: Amber Critch, Zhiwei Gao, Taryn Hearn, David Stokes, Amanda Fowler, Brian Kerr, Norah Duggan, Hayley Dalton

TOPIC	DETAILS	ACTION ITEMS
Minutes	<p>A. Goodridge welcomed the members to the meeting</p> <p>Review and approval of the Minutes for November 19th, 2024</p> <p>Moved: A. Goodridge</p> <p>Seconded: S. Cooke-Hubley</p>	
Business Arising	<p>ILMs and Pre-Recorded Lectures</p> <ul style="list-style-type: none"> Students have been questioning the use of ILMs and pre-recorded lectures by faculty when, at the same time, they are being told that they must attend classes in-person. A. Haynes explained that if a faculty member is not available for their scheduled session, COS tries to reschedule them to another time within the same Theme; if they are still not available, they try to get another faculty member to give the session. Pre-recorded lectures are only offered as a last resort. However, this year had more pre-recorded lectures than previous years. 	<p>ACTION: A. Goodridge to bring this issue to UGMS for discussion.</p>
Institutional Monitoring	<p>K. Zipperlen presented the result of the MCCQE Prep survey.</p> <ul style="list-style-type: none"> Note that the question about preferred prep products included a “not applicable” option. UGME is currently covering the cost of the MCC prep product for all students writing the MCCQE. This may not be offered on a permanent basis. A. Haynes asked if SAS could match the appropriateness of MCQs to the MCC questions, especially in terms of clinical reasoning rather than memorization. K. Zipperlen noted that SAS has guidelines about writing appropriate MCQs and they 	<p>ACTION: Follow-up for next steps.</p>

	<p>also offer sessions on writing effective questions. However, it is difficult to get faculty engaged and attending these sessions.</p> <ul style="list-style-type: none"> • A. Haynes suggested the use of AI – i.e. create AI-generated questions and propose them to faculty, who would then only have to approve the questions. • A. Haynes suggested benchmarks for progress testing. UGME has advertised for 2 remediation leads – one for Phases 1-3 and one for Phase 4 – who will be able to meet with students who are struggling and provide guidance. • A. Goodridge thanked K. Zipperlen for presenting the results of the survey. 	
Reports	<p>A. Fowler was unavailable to present the Phase 2 Response Reports.</p> <ul style="list-style-type: none"> • Tabled to the January meeting. 	TABLED to January.
	<p>D. Bergstrom presented the Phase 3 Response Reports.</p> <ul style="list-style-type: none"> • The response rates were low, so it is difficult to make definitive conclusions about the feedback. • Facebook is being used to share information about the curriculum, which has resulted in some inconsistencies in terms of the information students receive. A. Haynes noted that it is primarily students doing this and that they should not be sharing faculty notes and presentations on Facebook. She suggested we discourage the use of Facebook – everything related to the curriculum should be on D2L. D. Bergstrom will follow-up with students and faculty about Facebook being an inappropriate place to share curriculum-related content. • There is recurring feedback about overlapping and unbalanced content in the Patient III course. COS is conducting a review with the Undergraduate Curriculum Leads (UCLs) of all content in Phases 1-4, which should help mitigate this issue. • The students raised concerns about Theme 7: Syncope & Chest Pain, stating that there was too much content and not enough time for this Theme. D. Bergstrom and A. Haynes will reach out to the cardiovascular team about the feedback. • There are inconsistencies between the Clinical Skills tutors. The tutors sometimes have differing ways of approaching the same clinical situation. We may need to investigate ways to ensure some standardization and consider trying to identify the sessions where this happens more frequently. • A. Goodridge thanked D. Bergstrom for presenting the Phase 3 response reports. 	<p>ACTION: D. Bergstrom to send Phase 3 Response Reports to H. Coombs.</p> <p>ACTION: D. Bergstrom and A. Haynes to reach out to the cardiovascular team about the student feedback.</p>

<p>Updates</p>	<p>COS Update</p> <ul style="list-style-type: none"> • A. Haynes presented the COS tracking document, which includes all changes COS makes based on student feedback. This will be a great way to show students how their feedback is being used towards curriculum change and will be helpful for accreditation. • H. Coombs agreed that this is an excellent documentation of the changes being made but raised concerns about the process, noting that according to the document, COS has already decided on changes to be made for next year based on a current Theme evaluation that has not yet been presented at PESC or the Phase Management Teams. According to PESC’s processes, it is the Phase Leads who are responsible for deciding on curriculum changes after the course evaluation reports have been presented to PESC and the Phase Management Teams for discussion. • H. Coombs also pointed out that COS recently presented a change to Clinical Skills IV at the Phase Management level that was contrary to the course evaluation response report that was presented to PESC by the Phase 4 Lead two days previous. • A. Haynes felt that the issue is the timelines for the course evaluation reports and pointed out that all of their curriculum changes are presented and approved by various committees. • The discussion was cut off by a university internet outage, when several members lost internet connection and were dropped from the meeting. • To those remaining in the meeting, A. Goodridge applauded A. Haynes and COS for the tracking document and for their enthusiasm in improving the curriculum and noted that the issue with the process needs to be addressed. 	<p>ACTION: A. Goodridge to follow-up with COS regarding processes for curriculum change.</p>
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Ended abruptly at approximately 1:50 pm

Next Meeting: January 21st, 2025 – 2M240 and online