

Program Evaluation Subcommittee (PESC) Chair: Dr. Alan Goodridge Notes

Tuesday, Oct 25th, 2022 12:30 – 2:00 pm WebEx Virtual Meeting

Attendees: Alan Goodridge (Chair), Sandra Cooke-Hubley, Heidi Coombs, Norah Duggan, Jasbir Gill, Atena Goudarzi,

Bruce Sussex, Katrin Zipperlen

Regrets: Dawn Curran, Amanda Fowler, Ryan Elliott, and Taryn Hearn

Topic	Details	Action Items
Welcome	A. Goodridge welcomed members to the meeting.	
Agenda	No conflicts of interest were disclosed. The agenda was approved with no additions.	
Minutes	Review and Approval of Minutes: - Sep 20th, 2022 No quorum (no learner in attendance), therefore the minutes will be approved at the next meeting.	Carried Over
Business Arising	Revised Curriculum Review TOR	
	A. Goodridge provided an update on the Terms of Reference, based on a discussion at the recent UGMS meeting. The Terms have been amended such that the membership includes Steve Pennell, Chair of Informatics and Technology Advisory Committee (iTAC), in addition to David Stokes, Senior Instructional Designer with HSIMS.	ACTION : A. Goodridge to chair the first Curriculum Review meeting.
	In addition, the timeline for the review has been extended to the end of 2023. N. Duggan noted that UGME provides program options to the students in December every year so that they can submit their templates in January. With this in mind, if the Curriculum Review is not completed until the end of the year, Phase 4 will not be able to implement changes in time for the fall of 2024.	ACTION : H. Coombs to add the Curriculum Review timeline to the agenda for the next Curriculum Review meeting.

	A. Goodridge thanked N. Duggan for her input and will take this into consideration for the Review. It may be possible to have a phased-in approach, where we prioritize certain areas to ensure that there is enough time to implement changes for the fall of 2024. These priority areas will be identified in consultation with Phase 4 Management.	
	Feedback from Phase 1 Learners	
	H. Coombs presented the Phase 1 Block review feedback. It was notable that the students said the lecture notes and/or PDF versions of slides were posted before lectures, since this is something that has been an ongoing challenge.	
	In terms of what has not been working well, the students felt the biochemistry content was too advanced for their backgrounds and was delivered at too fast a pace. This was an issue for students without a science background especially. They would like more time for biochemistry content, perhaps the content can be divided into more lectures and delivered at a slower pace. One student suggested a one-week intensive "pre-foundations" course for non-science students prior to the start of Phase 1.	ACTION : S. Cooke-Hubley to reach out to Dr. Ed Randell about the concerns raised.
	S. Cooke-Hubley added that she presented the feedback to the Phase 1 Management Team but there was little discussion at the meeting. The students commented on the biochemistry issue and the class seems to be divided into those with a science background and those without.	
	H. Coombs noted that concerns with the biochemistry content for non-science students came up last year as well, and the Phase Lead (Dr. Amanda Pendergast) offered to meet with the students individually if they were struggling.	
	A. Goodridge asked S. Cooke-Hubley to reach out to Dr. Ed Randell about the concerns raised.	
Reports	H. Coombs presented the Phase 2 Course Evaluation Reports.	ACTION: H. Coombs to revise the Phase 2 Course Evaluation Reports and present at the next Phase Management meeting.
	MED6750: Patient II	
	 Students expressed concerns with the anatomy labs, noting issues with the self-directed learning, the lack of facilitators and/or inconsistent facilitators, difficulties accessing the instructors, and issues with the bell-ringer exams. They have found the labs to be inconsistent and overwhelming. K. Zipperlen noted that Dr. Janna Andronowski was able to hire Teaching Assistants for the labs, which should address 	ACTION: PESC to continue monitoring the issues related to the Anatomy labs.

some of the inconsistencies among facilitators. In addition, the Phase 2 assessment plan has been modified to accommodate the heavy workload and assessments at the end of the Phase. The Phase 2 students in 2023 will have two practical exams (instead of three) and one group presentation.

- S. Cooke-Hubley reported that some of the current Phase 1 students have been finding the anatomy labs overwhelming.

MED6760: Clinical Skills II

- Students continue to express concerns about the lack of consistency among the tutors. A. Goodridge noted that this is inevitable considering the different backgrounds and experiences of the tutors.
- N. Duggan agreed and added that it is important to ensure that the tutors are covering the learning objectives of the sessions and not providing too much supplementary information which the students are not going to be marked on. In some OSCEs, students run out of time or skip something important because they are applying tests not related to the learning objectives. She agreed that tutors are going to have different approaches, especially those who are generalists compared to specialists, but there has to be consistency.
- A. Goodridge suggested reaching out to Dr. Maria Goodridge for more information about Clinical Skills, and ask if she feels these comments by the students reflect issues with content or style. Are there times when the sessions might be overtaught?

ACTION: H. Coombs to contact Dr. Maria Goodridge about comments regarding Clinical Skills II.

MED6770: Physician Competencies II

 The response rate for this course was 10% with very little narrative feedback. Therefore there is no validity to the feedback and the results must be interpreted with caution.

MED6780: Community Engagement II

- The response rate for this course was 10%, and therefore must be interpreted with caution.
- H. Coombs sent the feedback related to the Community Visit essay on to Community Health & Humanities for their information. K. Zipperlen added that CHH has established a task force with Family Medicine to look into the Community Visit and the assessment piece.
- S. Cooke-Hubley asked about the word count and wondered if the limitations on word-count could be causing some frustration. K. Zipperlen clarified that the word-count for assignments are based on the amount of teaching related to the assignment.

Learner Representation	Phase 3 – TBD Phase 4 – D. Curran was not present. PARNL – R. Elliott was not present	ACTION : H. Coombs to follow-up with MedSoc about a Phase 3 learner.
Updates	Phase 1 – S. Cooke-Hubley reported that some of the learners would like to have the evaluation forms opened earlier and more often. H. Coombs noted that this has come up previously, where the students have asked for the forms to be released on a weekly or biweekly basis. The students find it difficult to complete the faculty evaluations at the end of a Block because they often cannot remember the faculty early in the Block. She and A. Goodridge met with HSIMS about the possibility of opening the forms at the beginning of a Block, which is possible to do. However, the students would have to keep the forms open from their end and if they click submit before the end of the Block, the form will close and they will lose access to it. H. Coombs added that we can send out the forms out on a weekly basis which could improve the quality of feedback for faculty, especially those who teach early in a Block. However, the number of surveys they receive could become overwhelming. N. Duggan suggested looking into a system where the students receive the evaluation forms immediately after a session, which works well for conferences. Phase 2 – A. Fowler was not present. Phase 3 – J. Gill had nothing to report. UGME – T. Hearn was not present.	
New Business	 Low Response Rates A. Goodridge reported that Dean Steele and T. Hearn have been discussing the accreditation issue related to low response rates and asked PESC to look into it further. The Committee discussed several options for increasing response rates, including: sending faculty evaluation forms weekly or biweekly; providing students with an app that allows them to give feedback after each session; dividing the classes into three groups and sending each group one-third of the forms (or sending all forms to a different group each week), accompanied by a message that they have been selected to provide feedback on those faculty members; and, providing a statistical update to the classes about the response rates, with a reminder that we cannot make curriculum changes based on very low response rates. 	ACTION: H. Coombs to arrange a meeting with HSIMS to discuss short-term options. ACTION: H. Coombs to send faculty evaluation forms weekly.

H. Coombs noted that the low response rates for faculty evaluations is separate from the accreditation issue, which is related to the low response rates for the course evaluations. Increasing the frequency of faculty evaluations could increase survey fatigue and make the course evaluation response rates even worse. She suggested that incentives for the course evaluations would help. A. Goodridge thanked everyone for the discussion. The Committee will continue to look into this and take actions to improve the response rates.	
Mid-Point Evaluation for Phase 3 H. Coombs stated that the Phase 3 course evaluations have historically had very low response rates. A midpoint evaluation before the Christmas break could help us get some information to supplement the minimal feedback provided at the end of the Phase.	ACTION : H. Coombs to administer midpoint evaluations for Phase 3.
New Process for Quality Improvement H. Coombs reported that although we no longer hold QI sessions, we still collect feedback at the end of each Block. The feedback is presented to the Phase Management Teams and PESC for discsusion.	
Meeting adjourned at 1:56 PM	

Next Meeting: Dec 20th, 2022 – WebEx