		Stude	nt Assessment Sub-Committee	DATE	November 30, 2016	
CHAID				ROOM	M1M109	
CHAIR		Dr. Vernon Curran, Chair				
MEMBERS: Voting members:						
2015 2016		Dr. Pam Pike, Phase 1 Assessment Lead				
2015 - 2016		Dr. Mike Hogan, Phase 2 Assessment Co-Lead Dr. Barton Thiessen, Phase 2 Assessment Co-Lead				
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		Dr. Gokul Vidyasankar, Phase 3 Assessment Lead Dr. Jason McCarthy, Phase 4 Lead (Clarkship Coordinator)				
		Dr. Jason McCarthy, Phase 4 Lead (Clerkship Coordinator)				
		Mr. Mackenzie Turpin, Phase 1-3 Student				
		Mr. Matthew Quann, Phase 4 Student				
		Dr. Magdalena Lugowski, PARNL Resident Dr. Catherine Mah, Member-at-Large				
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		Dr. Craig Moore, Member-at-Large Ex officio (non-voting) members:				
		Dr. Donald W. McKay, Associate Dean, UGME				
		Dr. Sean Murphy, Chair, UGMS Committee				
		Ms. Gerona McGrath, PESC				
		Ms. Diana Deacon, Educational Specialist, Assessment				
		Mr. Stephen Pennell, Manager, Health Education Technology and Learning				
		Ms. Elas Winter, Support Staff, UGME				
PARTICIPANTS		V. Curran, D. McKay, M. Hogan, C. Mah (call in), C. Moore, P. Pike, D. Deacon, S. Pennell, M. Turpin, G. McGrath				
RECORDING SECRETARY (Minutes Tap		(Minutes Taped) Tr	ranscribed by Carol Vokey			
INVITED GUEST						
REGRETS	REGRETS S. Murphy, G.		asankar, B. Thiessen, J. McCarthy, M. Lugowski, M. Quann			
			MINUTES			
AGENDA	ITEN	1	DISCUSSION	ACTION		
WELCOME	The	Chair convened the				
	mee	ting at 4:05p.m.				
#1 REVIEW &	, ,	proval of October	The minutes of the October 26, 2016 minutes were reviewed.		It was moved by P. Pike	
APPROVAL OF	26, 2	2016 minutes.			onded by C. Moore to	
MINUTES			It was MOVED by P. Pike and SECONDED by C. Moore to approve the		the minutes of the	
			minutes of the October 26, 2016 minutes as presented.		26, 2016 minutes as ed. Motion carried.	
			All were in favour and the MOTION CARRIED .	pi esent		

	b) Follow-up on ACTION	i. <u>Demonstration of clinic card app</u> : S. Pennell explained the following:	
	items from October 26,	- Three disciplines have volunteered to pilot the app.	
	2016 meeting.	- He would provide feedback on which reports will be needed. D. Deacon will also help determine this. We will be charged for reports.	
		- Newest version, T-Res 2, has 0 charge for preceptor accounts, but there	
		will be a charge for students to use the app.	
		- Faculty development will be required to assist preceptors. S. Pennell will	
		coordinate this with S. Shorlin.	
		- Going forward, let S. Pennell know if anything is missing.	
		- This app functions on IOS and web browser.	
		S. Pennell and D. Stokes ran through a demonstration of how the app will work, and V. Curran thanked them for their work.	
			ACTION: Summative Assessment
		ii. Summative Assessment Procedure for Phase 4 Courses: D. Deacon said	Procedure for Phase 4 Courses
		this is the latest iteration from the Phase 4 Working Group who reviewed it	tabled until next meeting.
		and approved it with minor edits. V. Curran suggested tabling this item and	Changes should be sent to D.
		to bring it back for next meeting to give members the opportunity to review.	Deacon and V. Curran.
		Any changes should be sent to D. Deacon and V. Curran before next meeting.	
		meeting.	
		iii. Approval of Phase 2 Class of 2020 Assessment Plans: D. Deacon said	
		that the plans for MED 6750, MED 6760, and MED 6770 previously approved	
		at SAS have been approved by UGMS.	
#2 Report on		G. McGrath reported on the Graduate Questionnaire as follows:	
Graduate		- This is a benchmark year as it is the last year of cohort for students in the	
Questionnaire (G.		old curriculum and the last year for this questionnaire format.	
McGrath)		- Sent to all graduating medical students in Canada	
		- Our response rate was 87% which is lower than last year but not bad.	
		- Because students self-select, results may not be indicative of the entire student body	
		- Results are taken very seriously by accreditors	
		- Overall, results show that Memorial learners answered most questions in	
		the lower levels of satisfaction compared to national averages.	
		- Next year, the EPA's will play a part in this process.	
		D. McKay said the questionnaire doesn't serve Canada's needs. It is too	
		long, and questions are opinion-based which make them invalid indicators.	
		Changes are coming for 2018, and the questionnaire will be shorter.	

#3 Phase 1 -4	Phase 1 - P. Pike said Community Engagement exam to roll out on Monday,	
Assessment	and C. Mah said exam was developed following SAS guidelines re ratios	
	(formative vs. summative) with good questions that are representative of	
Updates		
(Assessment	the content. Hoping for good performance.	
Working Group	Phase 2 M. Hogan said assessment plans have been approved except for	
Leads)	Phase 2 – M. Hogan said assessment plans have been approved except for	
	MED 6780 – Community Engagement II. Some points of note are: - weighting is the same	
	 preceptor grade will be based on a rubric, to be available in d2l C. Mah said driver of creation of Community Visit Essay relates to last fall 	
	,	
	re: shift of phases related to rural visits. Phase 1 Community Health	
	component no longer has a rural visit	
	- There had been a concern regarding the high percentage value of an	
	assignment that had a relatively low word limit. After discussion, it was	
	decided to leave as is.	
	- M. Turpin expressed student concerns with Phase 1 and 2 combined essay.	
	Dr. Mah said they will pay attention to the concern and have a detailed	
	explanation in the rubric.	
	It was MOVED by C. Mah and SECONDED by P. Pike to approve MED 6780	ACTION: It was moved by C.
	Assessment Plan as presented.	Mah and seconded by P. Pike to
	All agreed and MOTION CARRIED.	approve MED 6780 Assessment
	All agreed and World's CARRIED.	Plan as presented. Motion
	<u>Phase 3</u> – G. Vidyasankar not present. D. Deacon said there is nothing	carried. C. Mah to bring rubric
	outstanding.	for Community Visit Essay to a
	outstanding.	future meeting for discussion.
	Phase 4 – J. McCarthy not present.	rature meeting for discussion.
#4 Student	M. Turpin expressed the following student concerns:	
Matters	Phase 1	
	Community Engagement exam: delay in receiving formative questions. As	
	, e e	
	well, content (required readings plus lecture content) is overwhelming and	
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		combined. D. McKay said work can be submitted earlier than the due dates. V. Curran asked if assessment schedules are looked at when doing assessment plans, and D. Deacon said they were.	
		Phase 3 M. Turpin explained student concerns regarding tutorial assessment as they feel tutors are not being consistent with material they are testing. He said students have asked for answer keys but they have not been getting them. As a result, many students fear getting answers wrong when exams are based on tutorials. V. Curran said this issue has come up in the past, and D. Deacon said S. Shorlin has been working on tutorial guides. D. Deacon will follow up with S. Shorlin regarding tutorial guides and will ask him to attend	ACTION: D. Deacon to follow up with S. Shorlin regarding tutorial guides and will invite him to next SAS meeting to address tutorial concern. M. Turpin to be added to working group.
		next SAS meeting. M. Turpin is to be added to the working group. D. McKay	ACTION: M. Turpin to bring
		said tutors should have guides. M. Turpin to bring examples of tutorial	examples of tutorial
		inconsistencies to next meeting.	inconsistencies to next meeting.
#5 Formative/	a) Phase 1 & 3 Exam	a) D. Deacon referenced exam blueprints previously distributed.	ACTION: D. Deacon to contact J.
Summative	Blueprints		McCarthy re Phase 4 MED 8710
Assessment		b) Deferred. D. Deacon to contact J. McCarthy. Hopefully, he can call in	Assessment Report and ask him
Monitoring/ Evaluation	b) Phase 4 MED 8710 Assessment Report	during next meeting.	to call-in for next meeting.
	·	c) D. Deacon to send out to faculty for review. SAS to review once we hear	ACTION: D. Deacon to send
	c) Phase 2 Assessment	back from faculty.	Phase 2 Assessment Reports to
	Reports		faculty for review. SAS to review again after faculty review.

#6 Phase 4	D. McKay reported on his budget meeting with the Dean:
Discipline Exams	- MCC moving as local office closed. D. McKay has left a message and has
	had correspondence with counterparts across Country.
	- Phase 4 has agreed to tell SAS/UGMS they want to do away with National
	Board exams and implement progress testing at the end of Phase 3, end of
	Phase 4 MED 8710 and end of medical programme.
	- Vision is to purchase exam from MCC which is based on MCC objectives
	and includes clinical decision making questions. This would allow FOM to
	not have to create 3 exams and would be cheaper than 6 NBME's. This
	would also free up class time.
	- Need to get funding from MCC colleagues likewise questions, may be
	volume discount.
	- End result should be revenue neutral.
	- Many benefits includes using Canadian objectives with the right mix of high
	quality and appropriate questions, there would be 4 to 5 less exams which
	frees up time. Proactive in helping our students succeed.
	- This was unanimously approved by Phase 4. V. Curran said Phase 4
	proposal to come from J. McCarthy or D. McKay on his behalf.
	- Likely next year fall of 2017 proposal to be made at a future meeting.
#7 Update on	D. Deacon said data entered for Surgery is being looked at for statistical
EPA Project	analysis. Research group is looking at coded data from faculty focus group
	and will be reviewed at meeting on December 9. They have started coding
	clinic card comments and then there will be a similar process with the group.
	Draft literature review for a potential paper has started. V. Curran said he
	feels comments from preceptors were not useful for coaching and this will
	be useful for future faculty development.
#8 Business	There was no business arising and the meeting adjourned at 5:39 pm.
Arising	