(C. C. Minutes November 29-12)


| BUSINESS ARISING | - Item 4.1 <br> Update: Clinical <br> Encounter Cards, Handbook, Faculty. ppt | - Appointment on December 3! <br> - Don developing a PP giving instructions on the process and giving clarity in completing the cards | ACTION: <br> - Dr. McCarthy to continue working |
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|  | - Item 4.2 <br> Update: AHD @ <br> Distributed Sites | - Clerks in NB experiencing problems with Eluminate Live <br> - Psychiatry made arrangements for clerks to attend $1 / 2$ days <br> - William Stokes provided detailed information on the problems clerks are experiencing <br> - Don suggested contact Dr. Steve Shoreline (MESC) to assist with a solution | ACTION: <br> - Don to contact Dr. Steve Shorline (MESC) to create faculty development in improving eliminate live at distributed sites for AHD <br> - Mr. Stokes will determined what they currently use for Surgery and Pediatrics in Grand Falls - Windsor |
|  | - Item 4.3 <br> Clerkship <br> Handbook: <br> Discipline entries | - Some disciplines have not submitted their documentation and is still in progress <br> - PDCS still assisting with the completion of the handbook | ACTION: <br> - Coordinators need to submit update for handbook |
|  | - Item 4.4 <br> NBME Annual <br> Reports (Diana <br> Deacon) | - Diana completed a comparison on MUNs results compared to other Canadian Medical Schools (2009/10, 2010/2011) <br> - Note: Different from previous years, NMBE reports have a separate table that compares our results to a Canadian comparison group rather than the total number of students completing the NMBE <br> - Significant differences were found in Psychiatry - significantly higher <br> - Detailed feedback not available. We would benefit from more detailed information re: student performance on the NMBE. Students would also benefit from more (i.e. any) formative feedback from NMBE on their individual performance! | ACTION: <br> - Diana to determine If NMBE objectives might be able to be mapped to Clerkship Objectives <br> - Wandalee to determine if an agreement to give formative feedback on students exists in the contract |


|  | - Item 4.5 Summative Assessment Policy | - Page 2: <br> (2.2.1) "In the ITER, faculty members-preceptors must document performance"... <br> (2.2.3) "Students must receive timely feedback and guidance in addressing identified gaps. It is the responsibility of both the student and the faculty merner Discipline Coordinator or designate to ensure that all ITERs are discussed and signed by both individuals. The student's signature does not necessarily imply agreement with the assessment received." <br> (2.2.4) Omit sentence <br> - Page 3: <br> (2.3.1) "A One or more comprehensive OSCEs will be administered at the end of the $4^{\text {th }}$ yearduring the Back to Basies course Clerkship. This assessment will test students' mastery of the overall objectives of the clerkship and clinical electives, including knowledge, clinical skills, professional conduct and elinical reasoning core clerkship." <br> - Page 7: Appendix C: Formative ITER form - Omit <br> - Page 10: Appendix $\boldsymbol{D}_{\text {C: }}$ Summative ITER form <br> - Hyperlink C \& D (only have A \& D) | ACTION: <br> - Wandalee to send Dr. V. Curran the UGME Web link <br> - Dr. V. Curran to update suggested changes to send to committee for final approval next meeting |
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|  | - Item 4.6 Professionalism Document | - Doctor Moffat circulated a Professionalism document and requested feedback <br> - This document will go to UGMS in the January 2013 <br> - Doctor McKay stated that a meeting took place with the assessment committee, ITER changes were proposed <br> - It was suggested that the ITER should reflect the agreed upon objectives. Correct order is to have objectives changed first to avoid having an updated ITER where objectives did not match | ACTION: <br> - Doctor Moffatt to reformulate and suggest recommendations to the UGMS to adopt his professionalism document and place new professionalism objectives for whole curriculum, as a result a new ITER would be developed <br> - Coordinators to review and provide feedback re: this document to Doctor McCarthy |


|  | - Item 4.7 <br> T-Res: Trainee Goal/Activity Summary | - T-Res developed a new feature to allow Faculty Members to complete evaluations on T-Res <br> - This feature is available for trial, if any of the clerkship discipline coordinators wish to use it for a pilot in their discipline | ACTION: <br> - If a discipline is interested in test running this feature, please contact Doctor McKay |
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|  | - Item 4.8 <br> One45 Issue Update | - Dr. Delaney noted issues with One45 in her discipline <br> - Doctor McKay met with Adam Siscoe (HSIMS) and found areas of concern | ACTION: <br> - Adam Siscoe working on the issues at hand |
| NEW BUSINESS \#5 | - Item 5.1 <br> Clerkship Redev: <br> Assessment Blueprinting (McKay) | - Doctor McKay circulated a sample of a completed Clerkship Blueprint document <br> - If coordinators need assistance completing the blueprints, please contact Doctor McKay | ACTION: <br> - Please submit the Clerkship Blueprints to Doctor McCarthy <br> - For review next meeting |
|  | - Item 5.2 <br> Clerkship Redev: The <br> Five Point Grading System (McCarthy) | - Dr. McCarthy spoke on five point grading system re: whether the committee wishes to continue with this system. <br> Requesting committee feedback <br> - Previously discussed in the July meeting using cohort based vs. criterion based assessment tools, pass/fail/below average as initial grade, with Average, Above Average and Outstanding given at the end of the core clerkship etc. <br> - Agreement that the grading system needs to help the clerkship progress committee identify marginal students. <br> - Discussed benefits/drawbacks to give outstanding students incentives, kudos with the five point grading system. <br> - In the new curriculum, the grading system may be changed to a straight up pass/fail. | ACTION: <br> - Move to KIV |
|  | - Item 5.3 <br> NBME Rescheduling (McCarthy) | - Dr. McCarthy requested Committees feedback on rescheduling the NBME exams, if needed. <br> - The committee would like the students to take deferred exams at the end of their clerkship rotations, or at a time when | ACTIONS: <br> - Doctor McKay to write a letter stating the update |


|  |  | writing the examination would not interfere with present or future core clerkship courses/rotations <br> - If the committee allows students to request NMBE deferrals of if NMBE deferral is required (e.g. storm) students must be made aware that in taking an NMBE during another rotation could negatively impact their performance on the exam or their current course/rotation, and that they would proceed at their own risk <br> - It may be wise to get the students to sign a document where the student understands the risks, etc. <br> - Committee recommends that deferred NMBEs be done at the end core clerkship rotations/courses, or at a time when writing the NMBE would not interfere with current/upcoming courses/rotations. |  |
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|  | - Item 5.4 <br> End of Rota Clinical <br> Encounter <br> Contingency Plan (McCarthy) | - If a discipline is noting that a student is at the end of a rotation and a clerk does not have all of his/her clinical encounters met what steps should be taken? <br> - The student must meet the clinical encounters to pass the rotation <br> - The student must bear responsibility for seeking opportunities to complete the required encounters and bring concerns re: incomplete encounter lists to their preceptors/discipline coordinators <br> - The mid-point formative feedback session is an opportunity to review required clinical encounters to guide the student in a learning plan to complete these encounters <br> - CLIPP cases or computer based tutorials are also utilized to ensure students are able to complete their clinical encounter requirements | ACTION: <br> - Leave current arrangement |
|  | - Item 5.5 <br> Meeting with students end of rotation (Farrell) | - Is it possible to meet with students the end of the rotation, and is it required <br> - Meeting with students at the end of the rotation is logistically difficult. There is no new information to pass on to the student, as the NBME marks nor the final ITERs are in place. | ACTIONS: <br> - Remove "Did you meet with the Trainee to discuss his/her performance" from the Final Evaluation of Clerk |


|  |  | - The final ITER has a field that asks whether the clerkship discipline coordinator met with the student to discuss the evaluation. In most every case, the answer to this question is "no", as the student has moved on to another rotation by the time this ITER is completed. <br> - The clerkship committee asked for this button to be removed from the final ITER | - Doctor McKay to connect with Adam Siscoe to execute this request |
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|  | - Item 5.6 New Objective Delivery (Farrell) | - Dr. Farrell asked when we can implement any changes to the objectives. <br> - Answer: changes are implemented at the start of the next student cohort (i.e. the beginning of the next new 'course'/rotation). <br> - Dr. McKay notes that if we make substantial changes to objectives, we should submit them through UGMS (ex; new exam, evaluating students on a completely different area than present) | ACTIONS: |
| Standing Items \#6 | - Item 6.1 <br> Medical Student Reports (Stokes \& Watton) | - 4th year - Clerks would like free access to a printing and photocopying <br> - photocopying might be available through student affairs office <br> - 3rd year - Question re: format of MSPR <br> - discussion re: MSPR ensued. <br> - Committee will consider looking into MSPR, e.g. are there best practice guidelines for the same, etc. | ACTIONS: <br> - Doctor McKay to inquire of Student Affairs <br> - Current standard is verbatim quotes from ITERs <br> - Doctor McCarthy suggested reviewing other universities standards <br> - Doctor McKay suggested that Clerks make suggestions re: improvements |
|  | - Item 6.2 MUN-NB Update (Lambert) | - Regrets that weather prevented the clerkship committee from travelling to NB for this meeting. Clerkship and on-site visits rescheduled for January 24, 2013. <br> - Recently had MUN/NB collaborative clerkship review <br> $\checkmark$ Very informative meeting <br> $\checkmark$ Agreement that cards would be created for each | ACTION: <br> - Will discuss further in Jan <br> - Aim to have NB visit Jan 23-25 <br> - Aim to have NB clerkship schedule correspond with the NL clerkship schedule. |


|  |  | rotations with objectives from MUN and Dal [double sided card (one side MUN objectives and other side Dal objectives)] <br> $\checkmark$ Discussed on a go forward basis how might refine collaboration <br> $\checkmark$ Will have make decision re: start dates of rotation and determine its effect on capacity, as well as housing |  |
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|  | - Item 6.3 <br> MUN-PEI Update <br> (Wedge) | - No report provided |  |
|  | - Item 6.4 <br> Accreditation 2013 |  |  |
|  | - Item 6.4.1 ED-30: Formative and Summative Ax (McCarthy) | - Some disicplines have concerns about being able to comply with this standard. Problems with One45 software shared by multiple disciplines. Difficulty with timely submission of ITERs problematic for some Clerkship Discipline Coordinators. <br> - Doctor McKay researched the possibility of an internal resolution to One45 issues. Timely feedback from peceptors mayy have to be addressed through the discipline <br> - ITERS Should be submitted to the clerkship discipline coordinators within three weeks to enable the discipline to meet the deadline required to meet the standard ED-30. <br> - Clerkship Discipline Coordinators should call their preceptors in areas outside of St. John's (e.g. NB) and ensure that formative and summative evaluations are being done in accordance with ED-30. | ACTION: <br> - Doctor McKay to pole students <br> - Discipline coordinators please ensure that the formative and summative is taking place <br> - Ms. Ackerman suggested keeping record of meeting with Clerks <br> - Doctor McCarthy to send out an email as a reminder to CDC's to contact their preceptors in distributed sites. |
|  | - Item 6.4.2 <br> ED-1: Mapping <br> Objectives <br> (McCarthy) | - Ongoing and a part of the clerkship handbook <br> - Need to ensure that all objectives are mapped to CanMeds and located in the handbook | ACTION: <br> - HSIMS currently updated the old database, therefore, anything sent to Doctor McKay will appear |


|  | • Item 6.4.4 <br> ED-2: Clinical <br>  <br> Monitoring <br> (McCarthy) | $\bullet$ Taking place in the Formative ITER |  |
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| ADJOURNMENT <br> \#8 |  | $\bullet$ Clerkship Committee Meeting Adjourned at 6:40pm |  |
| Next Meeting |  | $\bullet$ December 13, 2012 @ 4pm (PDCS) |  |

