

Clerkship Committee Meeting		DATE	February 20 th , 2014
		ROOM	PDCS Room 5
CHAIR	Dr. Katherine Stringer		
MINUTE TAKER	Mrs. Fatima Hammond		
MEMBERS: 2013 - 2014	<i>Dr. Katherine Stringer, Clerkship Coordinator</i> <i>Dr. Mary Jane Smith, CDC Pediatrics</i> <i>Dr. Jamie Farrell, CDC Medicine</i> <i>Dr. Tina Delaney, CDC Obstetrics/Gynecology</i> <i>Dr. Craig Stone, CDC Surgery</i> <i>Dr. Jasbir Gill, CDC Psychiatry</i> <i>Dr. Norah Duggan, CDC Rural Family Medicine</i> <i>Dr. David Jones, Selectives Coordinator</i> <i>Dr. Keegan Au, Electives Coordinator</i> <i>Dr. Jennifer Leonard, Course Chair MED 7280</i> <i>Dr. Todd Lambert, Assistant Dean, New Brunswick - joins by teleconference</i> <i>Dr. Richard Wedge, PEI Representative - joins by teleconference</i> <i>Ms. Verna McInnis, Clerkship Coordinator PEI - joins by teleconference</i> <i>Ms. Kathy MacLean, Clerkship Coordinator PEI - joins by teleconference</i> <i>Dr. Donald McKay, Associate Dean, UGME</i> <i>Dr. Scott Moffatt, Assistant Dean, Student Affairs</i> <i>Ms. Sally Ackerman, MESC</i> <i>Mr. William Stokes, student, class of 2014</i> <i>Mr. Andrew Dalton, student, class of 2015</i> <i>Ms. Melody Marshall, UGME Coordinator</i> <i>Ms. Angeles Damil, Administrative Coordinator, New Brunswick - joins by teleconference</i> <i>Ms. Dawn Keenan, Program Manager, New Brunswick - joins by teleconference</i>		
PARTICIPANTS	Dr. K. Stringer, Dr. N. Duggan, Dr. C. Stone, Dr. T. Delaney, Ms. S. Ackerman, Dr. J. Farrell, Dr. MJ. Smith, Dr. J. Leonard, Mr. A. Dalton (2015), Dr. D. McKay, Dr. S. Moffatt, Dr. K. Au, Ms. A. Damil, Ms. D. Keenan, Ms. K. MacLean, Ms. V. McInnis, Dr. D. Jones, Mr. W. Stokes (2014)		
GUESTS			
REGRETS	Dr. J. Gill, Dr. R. Wedge, Dr. T. Lambert, Ms. M. Marshall		
MINUTES			
AGENDA	ITEM	DISCUSSION	ACTION
#1 WELCOME / MEETING START TIME	<ul style="list-style-type: none"> Item #1 Dr. Stringer (Chair) opened the meeting at 4:12pm	<ul style="list-style-type: none"> Call to Order Quorum in Attendance 	
#2 ADDITIONS TO THE AGENDA	<ul style="list-style-type: none"> Item #2 Agenda	<ul style="list-style-type: none"> Agenda Approved with Addition Item 5.5 Accreditation 	

<p>#3 APPROVAL OF MINUTES: February 20th, 2014</p>	<ul style="list-style-type: none"> Item #3 Minutes 	<ul style="list-style-type: none"> Minutes from January 16th, 2014 	<p>ACTION: Minutes Approved</p> <p>Moved: Dr. Norah Duggan Seconded: Dr. Craig Stone</p>
<p>#4 PRESENTATIONS</p>	<ul style="list-style-type: none"> Item 4.1 MUN-NB Update 	<ul style="list-style-type: none"> The NB Forum Program will be finalized soon. Working on additional Core placements for two full NB Templates and added RFM Placements. [Damil] 	<p>ACTION:</p> <p>MS. Damil to supply new information as it becomes available</p>
	<ul style="list-style-type: none"> Item 4.2 MUN-PEI Update 	<ul style="list-style-type: none"> Planning underway for May 6th, 2014 Visit to PEI. [Stringer] 	
<p>#5 BUSINESS ARISING</p>	<ul style="list-style-type: none"> Item 5.1 ED-30: Timely Summative Feedback - Electives 	<ul style="list-style-type: none"> Discussion regarding timely completion of ITERs took place around two specific times of year; MSPR season in the Fall and Graduation Season in the Spring. [Au, McKay, Farrell, Hammond, Dalton, Stokes] <ol style="list-style-type: none"> Student needs to take a major role, especially outside of the province. Mr. Stokes asked if a paper copy of the ITER could be provided as part of pre-departure planning. The answer was a firm yes from Dr. McKay and Dr. Au suggested that it could also be given as a PDF. Student must have the Paper copy or non-One45 PDF signed by a Faculty member in order to make it valid. Students should book an introductory meeting with their preceptor upon arrival in addition to booking a meeting on the last Thursday of the rotation to complete their ITER in person. Efficiency Procedures should be strengthened within the UGME and at the Discipline Level. Chair of Each Discipline has been asked to identify who at the Discipline will assist the UGME Office with the resolution regarding incomplete ITERs. The APA at the Discipline has been nominated as that person. The Discipline Coordinator will not have a letter put on their file for any incompletes. The CDC will provide assistance as a favour to the Office. 	<p>ACTION:</p> <p>UGME to create a Travel Kit for Electives and Selectives that take place outside of NL.</p> <p>ACTION:</p> <p>Student Responsibility in ITER completion must be addressed at key times: Orientation to Third year, Clerkship Preparation and Orientation to Fourth Year</p>
	<ul style="list-style-type: none"> Item 5.2 ED-30: Timely Summative Feedback - Selectives 	<ul style="list-style-type: none"> [Jones] 	

	<ul style="list-style-type: none"> Item 5.3 Orientation meetings Feedback 	<ul style="list-style-type: none"> Orientation to Fourth Year session held in January went well except for the receipt of the OSCE information. [Stringer, Leonard, McKay, Stokes, Dalton, Farrell] <ol style="list-style-type: none"> Specifically students were troubled by the timing of the OSCE's. If an OSCE is held during the CaRMS period the cost of getting back to St. John's for a Weekend or day was at issue. Of less concern to the students was the number of OSCEs. Getting all students together is an issue Debate around the repeat of the Core Year took place should a student fail the OSCE. Consensus was reached in that the student would not repeat the whole year but they could not move on to Fourth year before remediation was completed. Remediation time is an issue. The breadth of the remediation needs to be addressed. If a student must remediate the weak points made apparent by the OSCE then would they do an elective in the weak discipline area. What happens if multiple weaknesses are discovered? Which is less expensive; Flying an evaluator to the student or bringing the student to NL? Clinical experience is necessary to make an OSCE real and count for something. Therefore Clerks must undergo some Core rotations prior to the first formative OSCE. Training OSCE facilitators and/or video recording the Student for evaluation by an assessment team will be required. Read literature on solutions tried at other institutions Orientation to Third Year (Clerkship) No issues brought forward. Dr. Au arrived 4:21pm 	<p>ACTION:</p> <p>The Committee will decide when each OSCE will be scheduled.</p> <p>ACTION:</p> <p>Develop Proposals for each scenario and then complete cost analysis based on the Evidence.</p> <p>ACTION:</p> <p>Leonard and Stringer to meet and discuss OSCE Planning.</p>
	<ul style="list-style-type: none"> Item 5.4 NB/PEI Visit, May 2014 	<ul style="list-style-type: none"> From the 6th to the 9th of May the Clerkship Committee will go to PEI and NB for site visits and discussions with stakeholders in Medical Education. [Stringer, McKay, Duggan] <ol style="list-style-type: none"> Arrive in PEI in the early morning of the 6th. On the evening of the 6th Members will arrive in Moncton May 7 Moncton May 8 Clerkship Meeting in Fredericton May 9 Forum in Woodstock For those who were looking to join portions of the tour the Core 	

		<p>days/Nights are evening of May 6, All May 7 & *.</p> <p>g. Discussion took place regarding the Persons coming from MUN as representatives for the Forum and if CME Credits would be issued. Dr.'s Duggan, McKay and Stringer will attend as advocates for Undergraduate Education.</p> <ul style="list-style-type: none"> • Dr. Delaney arrived 4:40pm 	
	<ul style="list-style-type: none"> • Item 5.5 Accreditation 	<ul style="list-style-type: none"> • Two years from May 2013 The Accreditation team will be back to assess all areas of non-compliance and those they indicated that needed monitoring. [McKay, Farrell, Duggan, Smith, Stone, Delaney, Stringer] <ul style="list-style-type: none"> a. May 2015 is not far away b. Accreditation Secretariat Visit March 18 &19. Representatives from LCME and CACMS will help to draft an action plan for the visit in May. Members were asked to keep the afternoon of March 18th free but advised that they should not cancel clinics c. In preparation for the Secretariat Visit Dr. McKay asked each CDC to prepare detailed information relevant to the procedures and processes for ED-27, ED-30, ED-31. Dr. McKay will send out a template to fill in. The CDC's should provide their reports before March 6th so that Dr. McKay has the opportunity to draft complete action plans to the team in advance of their visit. d. Specifically, the action plan must indicate how, where and when does an item occur and where the data resides that will prove the item has happened. To whom and when is the data provided for review to monitor ongoing compliance. e. By January 2015 the Faculty of Medicine should be able to provide 100% compliance on all standards. f. Dr. Farrell asked if the new curriculum and the new building are part of the reason for the upcoming visit. Should we anticipate the accreditation team looking for problems in Phase 4? Dr. McKay confirmed that these would indeed be examined. g. Comparable services across distributed learning sites will be reviewed at the visit. This addresses the need to provide all MUN students regardless of site (NB, NL, PEI) with equal services. For instance a presentation such as the one for Orientation to Fourth year given in January was delivered via e-live. 	

<p>#6 NEW BUSINESS</p>	<ul style="list-style-type: none"> Item 6.1 P2P Update 	<ul style="list-style-type: none"> [Stringer, Jones] 	
	<ul style="list-style-type: none"> Item 6.2 Visiting Electives Applications 	<ul style="list-style-type: none"> Dr. Au discussed changes to the visiting electives form and also proposed a change to visiting elective availability. [Stringer, Au, McKay] <ol style="list-style-type: none"> “Visiting Electives for Applicants from Non-Canadian/Non-LCME Accredited Medical Schools are only available from 1 April – 31 July and from 15 January to 15 February.” We must protect our students in a way that our students can get the rotations they need to complete graduation requirements. The implication is that the peak times for our own students will be guarded and the times when our students are away will be open for Caribbean/international/non-LCME Accredited schools. Drs. Farrell and Duggan asked if they should be referring all rotation requests to the UGME or are there some subspecialties that don’t need UGME vetting. In all cases requests for rotations should be arranged through the appropriate UGME channels. How will the Electives portal relate to these issues? The portal should address them satisfactorily. 	<p>ACTION:</p> <p>Will this proposal negatively impact Post-Grad? Dr. Au to contact Dr. Samrasena.</p>
	<ul style="list-style-type: none"> Item 6.3 Rural definition – Selectives Rotations 	<ul style="list-style-type: none"> Dr. Jones had a meeting with a third year student who would like to complete a selective in an international location and the current definition of rural was discussed. The student hoped to complete the rotation in a location that has a marginalized population but otherwise does not fit the current definition. [Jones] <ol style="list-style-type: none"> Right now our definition is focused on distance and population. How should the definition language address underserved and/or marginalized populations? Unfortunately, an underserved area might not be a good training site or doctor turn over may be a problem. Dr. Duggan stated that according to the World Health Organization everywhere in NL is rural. Perspective is also relevant. While distance and population match the definition in PEI a PEI resident does not feel all locations are rural. Should the onus be placed on the student to prove underserved? Dr. Jones thought it would be acceptable but Dr. Duggan was a firm no. 	<p>ACTION:</p> <p>Committee to be struck to address The Rural Definition with Drs Duggan, Jones, Allison and others yet to be named in addition to student volunteers.</p>

		f. Dr. Duggan stated that it may be better to call the selective a Global Health rotation and that way locations like Johannesburg, Soweto or even Street People in St. John’s NL could be the focus of the rotation.	
	<ul style="list-style-type: none"> Item 6.4 Clerkship Prep Course – Workshop Materials 	<ul style="list-style-type: none"> Dr. Stringer asked the CDCs who pledged their time to the Clerkship Prep Course to make contact with Dr. Harris to confirm the time, lecture objectives, class sizes and other logistical matters. [Stringer] 	
	<ul style="list-style-type: none"> Item 6.5 Clinical Observation Course: Non-Credit 	<ul style="list-style-type: none"> [McKay] 	
	<ul style="list-style-type: none"> Item 6.6 PGY1 Prescribing – Preparatory Course 	<ul style="list-style-type: none"> [McKay, Stringer] 	
	<ul style="list-style-type: none"> Item 6.7 Professionalism – Leave Notification 	<ul style="list-style-type: none"> [McKay, Stringer] 	
#7 STANDING ITEMS	<ul style="list-style-type: none"> Item 7.1 Medical Student Reports 	<ul style="list-style-type: none"> 	
#8 ADJOURNMENT		Clerkship Committee Meeting Adjourned at 5:55pm	
Next Meeting		March 20 th , 2014	