

Phase 1 Management Team Minutes

Tuesday, November 28, 2019

4:00 p.m.

2M240

Attendees: Amanda Pendergast (chair), David Stokes, Alison Haynes, Norah Duggan, Laura Gillespie, Heidi Coombs, Katrin Zipperlen, Jon Church, Diana Deacon, Michael Hand, Yaswanta Gummadi, Natalie Beausoleil, Brian Kerr, Pam Pike, Debra Bergstrom, Vivian Whelan

Regrets (in alphabetical order): Tanis Adey, Vina Broderick, Steve Shorlin

Topic	Details	Action Items and person responsible
Introduction and Welcome		
Agenda review - Review for Conflict of Interest - Confirmation of Agenda		
Review and approval of prior minutes - Review of action items from previous meeting	Action item: Amanda to talk with Norah regarding speaking to the class about information about Phase 4. Norah would like to know what information the learners are looking for.	The student reps will ask the class if they would like a session regarding Phase 4.
1. The Patient I - MED 5710	Two exams are done. The third exam is ready. More foundational material is needed. Blood Flow and Oxygen block has been moved to Phase 1. Microbiology will move to Phase 2. With regard to the Biostats exam, an assignment is more suitable. 12 multiple choice questions is a poor way to assess. It was previously an assignment but it was changed to an exam. The learners feel that an assignment would be more appropriate. Dr. Gadag received the evaluation. If	Natalie Beausoleil will speak with Dr. Gadag regarding Biostats assessment. Heidi will email Natalie with some of the details from the learners that an



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	the assessment changes next year, a course change form will need to be submitted.	assignment would be better. Assessment plans go to SAS in May. Then to UGMS.
2. Clinical Skills – MED 5720	Maria Goodridge is asking to add objectives. Amanda directed her to the link for changes.	
3. Physician Competencies – MED 5730	<p>Research has no poster presentation anymore. There are a few learners who haven't submitted a form. Information about the research workshop on December 12 will be sent to the class. Research facilitators need to know about the workshop as well.</p> <p>Six learners attended How to Write a Research Question. The session was on a Thursday and the block exam was the following Monday. Can a class be cancelled if there is low attendance? It is disrespectful to the professors when there is low attendance. The issue of low attendance needs to be brought to UGMS. Should sessions be made mandatory or change to independent learning module? The Research Workshop is mandatory. Amanda will talk to the students during QI and explore why there is low attendance. It is frustrating for the instructor when the attendance is low.</p> <p>Are there different methods of teaching? Feedback to instructors isn't useful when attendance is low. Can evaluations be opened</p>	Amanda to discuss at UGMS

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	<p>before an exam? An evaluation after each session can overwhelm students. If an instructor has more than one lecture, it is not clear which lecture the comments are about.</p> <p>Some learners like learning online and would look at an online module. There are studies that show that learners who go to lectures perform better throughout medical school to residency and after.</p>	
<p>4. Community Engagement – MED 5740</p>	<p>When a group submits a Community Engagement assignment late, the whole group will receive no more than 70%. There is a policy but no resource is identified. The faculty member has the option to mark down if an assignment is late. If an assignment is late, usually the learner would submit a deferral.</p> <p>Assessment has a policy and procedure in place to cover that. It is in the assessment plan. We need to identify who should be looking to check for late assignments. The Phase lead has the authority to grant or not grant an extension for an assignment. The faculty member has the right to not accept or mark down a paper if it is late.</p> <p>SAS is meeting in January. A strategy is needed so that the information gets into the appropriate hands.</p>	<p>Amanda to discuss at UGMS</p>

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<p>5. ILS</p>	<p>There are no set of unifying objectives specific for each Phase that are progressive through the Phases. Brian will put together an expectation for each Phase.</p> <p>The first ILS was an introduction. The first actual participatory ILS, the facilitators had never facilitated so both were new to it. Debra put together a facilitator guide, which they found helpful. Debra is also creating one for the next ILS session. There has been no feedback from students. The sessions were divided up into non Can-med and the actual content. Which made ILS more relevant. Facilitators felt that it was effective.</p>	
<p>6. QI</p>	<p>There was a QI session on November 1. The students would like to take part in TAMMI but there was an exam that Monday. TAMMI is voluntary. The students provide meetings with applicants. TAMMI is always the first Saturday in November.</p> <p>The learners feel that Biostatistics and Epidemiology should be tested through an assignment, not an exam. The Biostatistics exam was stressful. One learner noted that the Biostats exam was fine in terms of appropriate level of difficulty but the lecture content was too advanced.</p>	

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	<p>The learners like the structure of the blocks but they feel that the Thursday before an exam is too late to be learning new material and it makes the exam more stressful. But another learner felt that that was adequate time. The MUN policy states that only 24 hours is required between last lecture and exam, which is based on final exams. They would like an overview lecture at the end of the block, which is the reason for ILS. They had an overview session on microbiology. It would be challenging to have one overview session on everything.</p> <p>With regard to the life-long learning assignment, the Rubric and the assignment should be one document. They are currently two separate documents. The Rubric was in a different place than the assignment. Starting with Phase 2, they will be together.</p>	
<p>7. Curricular Issues</p>	<p>No issues</p>	
<p>8. Faculty Issues</p>	<p>No issues</p>	
<p>9. Student Issues</p>	<p>There were scheduling issues with the order of clinical skills. Interviews were done before having a talk with a specialist. Kelly Penton tried to switch them around.</p> <p>There are a lot of assessments during the last two weeks in December. 16 weeks in Phase 1 makes it challenging. Will try to shift things around to make assessments more even. There are certain things</p>	



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	that the learners need to have done before an assignment can be completed.	
10. New Business		
11. Next Meeting	January 23, 2020	