



Phase 2 Management Team Minutes

Monday, October 5, 2020
4:00 p.m.
Webex

Attendees: Heather Jackman (Chair), Stephanie Atkinson, Heidi Coombs, Jacqueline Costello, Maria Goodridge, Alison Haynes, Brian Kerr, Fiona Landells, Jennifer Leonard, Maisam Najafizada, Steve Shorlin, David Stokes, Barton Thiessen, Carla Peddle, Katrin Zipperlen

Regrets: Tanis Adey, Amanda Pendergast, Norah Duggan

Recorded by: Vivian Whelan

Topic	Details	Action Items and person responsible
Introduction and Welcome		
Agenda review - Review for Conflict of Interest - Confirmation of Agenda	No issues	
Review and approval of prior minutes - Review of action items from previous meeting	<p>May 4, 2020 minutes Motion to approve: Maisam Najafizada Seconded by: Jennifer Leonard All in favour</p> <p>June 1, 2020 minutes Motion to approve: Barton Thiessen Seconded by: Maisam Najafizada All in favour</p>	

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1. Business Arising		
2. Assessment	<p>The exam is no longer open book. It is invigilated using Proctorio. The integrity of questions needs to be kept. Meetings are ongoing.</p> <p>SAS reviewed the course assessment reports, now response from Phase 2 Team and Phase Lead is needed.</p> <p>MED6750 the exams were open book April – June 2020. The mean of blocks 3, 4, and 5 during open book exams went up. Block 5 received a mean of 91.5%. Learners had no issues. The Hofstee pass mark remained below 70%. Overall course mean was 84.5%. The mean item difficulty went up for open book exams. Block 5 had the highest mean item difficulty as well as the highest minimum item difficulty. There will be a meeting on Friday regarding invigilation and setting of review standards for Proctorio.</p> <p>MED6770 was least affected by COVID 19. IPE received the highest mean assessment score for a course component (94.4%). The research block had the highest assessment mean score (90.2%)</p>	<p>Heather will provide response to the course assessment reports using the template. The response will go to SAS for review and approval.</p>

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	<p>compared to the other course blocks. The overall course mean was 87.3% and in line with previous years.</p> <p>MED6780 was most affected by the cancellation of the community visit. The essay and workbook usually are worth 75% of the course. But the reflection assignment this year was worth 100%. The assessment mean score for the assignment, and thus for the course overall, was 84.4%. The main concern regarding assessment for this iteration of MED6780 is having only one assessment component contribute to the overall course grade.</p> <p>Waiting for a report for clinical skills.</p>	
<p>3. Evaluation Summary reports and course evaluations</p>	<p>MED6750 – Heidi reported that the overall mean was up from last year from 3.7 to 4.0, though the response rate was down from 27% to 21%. A new section was added to the evaluation forms to capture student feedback on curriculum delivery during COVID-19. As in previous years, the availability of online materials in advance of the session was the lowest rated item (3.6). Students also rates the organization of the course low (3.6). Students felt the timing of the last two exams</p>	

Commented [k1]: Everything from here on until the next agenda item is program evaluation. Contact Heidi if you want more details.

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	<p>could have been improved. In terms of the delivery of content, live lecture by teleconference was the lowest rated (2.5); live lecture by Webex was rated 3.4; and the highest rated method was a mixed approach of Pre-recorded combined with PowerPoint presentation (4.5). Teleconference has been identified as problematic in all course evaluation reports. Students also found the anatomy labs difficult to learn online.</p> <p>Heather and Heidi will draft the response reports based on today's discussion.</p> <p>Alison clarified with respect to the timing of the last two exams that the blocks were condensed due to COVID 19.</p> <p>David explained that the vast majority of sessions have online materials posted in advance. For example, Phase 3 had 300 sessions and only 13 sessions did not include material in advance. HSIMS uploads material from faculty as soon as they receive it. He recommended that faculty submit online material one week prior to session, in order to address the ongoing issues with online materials being available in advance of the session. D2L has to process recorded presentations which can take up to three hours.</p>	
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	<p>MED6760 – Maria noted that it might be more difficult to align clinical skills with the patient course under the current circumstances. Phase 3 clinical skills are taking longer to get through.</p> <p>Heidi reported that the overall mean was up from last year, from 4.1 to 4.2, and the response rate was down from 25% to 23%. Students find the learning environment for Clinical Skills to be positive (4.4). They did note, however, that learning how to conduct a physical online is not ideal. The mean for specific sessions was 4.1, down from 4.4 last year. Respiratory had the highest at 4.5. In terms of learned skills, Professionalism was rated 4.7. Content Delivery during COVID-19 was rated at 3.9, with live lecture by teleconference the lowest at 3.6 and a mixed approach combining pre-recorded lecture with PowerPoint presentation highest (4.3).</p> <p>Students found online learning worked for some sessions but that in-person learning is best for clinical skills. They do not feel prepared to conduct a physical exam. Small group sessions are better than watching videos/demos. Maria explained that adjusting Clinical Skills to online teaching was</p>	<p>Heather will provide responses to the evaluation reports and present the Response Reports to PESC for review and approval.</p>
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	<p>difficult and took a lot of faculty time and organizational time.</p> <p>MED6780 – Heidi reported that the mean was down slightly to 3.6, from 3.7 last year. Content delivery during COVID-19 received 3.6. T Students suggested that small group discussion could work better for some sessions in this course. Assessment received 3.2, down from 3.6 last year. The assessment for this course changed because of COVID-19, with one essay worth 100%. Curriculum evaluation received 3.9, consistent with last year. The highest rated item was Global Health & Non-communicable Diseases at 4.1. In terms of content delivery during COVID-19, live lecture by teleconference was rated the lowest at 3.0; live lecture by webcast was rated 3.4; and the highest rated method was a mixed approach of pre-recorded lecture combined with PowerPoint presentation at 4.3.</p> <p>There were issues with teleconference in all courses. Online classes are usually more engaging than pre-recorded, but attending live sessions is sometimes difficult for students studying at home.</p>	
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	<p>In terms of assessment, the rubric was changed because it originally reflected an assignment that was supposed to be worth 25%.</p> <p>The COVID-19 task force has not decided yet if the community visit will be feasible for 2021. If it is not feasible, students will do group assignments. A number of assignments and rubrics will be available if the community visit does not go ahead.</p> <p>One student identified the lack of nutrition education in the curriculum. Alison explained that there is much more nutrition-related content in Phases 3 and 4.</p> <p>MED6770 – Heidi reported that the overall mean for Physician Competencies was up from last year, from 3.9 to 4.2; the assessment mean was up, from 3.9 to 4.2; and the curriculum mean was up from 3.8 to 4.2. Content delivery during COVID-19 was rated 3.8. The response rate was consistent with last year, at 28%.</p> <p>Opportunities for self-directed learning was the highest rated item at 4.5; the organization of the course was the lowest at 4.0. The Ethics & Law sessions were very well received, at 4.3</p>	
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	In terms of content delivery during COVID-19, live lecture by teleconference was rated the lowest at 3.0; live lecture by webcast was rated 3.4; and a mixed approach combining pre-recorded lecture with PowerPoint presentation was the highest rated at 4.3.	
4. The Patient		
5. Community Health		
6. Physician Competencies		
7. Clinical Skills		
8. Student Issues	Main concern is online learning vs. in-person. It is not easy to learn online. Hoping to know in the next month or so if we will return to in-person or continue remotely for 2021. There are a lot of questions going to Dr. Pendergast, Phase 1 Lead. The class is anxious.	
9. Promotions Discussion		
10. New Business Assessment Plans Curriculum changes Team Membership	<p>The assessment for clinical skills is the same as last year, pre-COVID. Language for the exam is the same as MUN calendar. There are tentative dates for OSCE. CLSE will see what can be accommodated.</p> <p>Motion to approve clinical skills as is by Heather Jackman Passed</p>	

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	<p>No objections.</p> <p>6750 Patient 2 Infection and Fever moved into Phase 2. Blood flow was moved out. Assessment was changed for Emerging Infections. Would like to have MCQ on the block exams.</p> <p>Approve to move No objections Approved to present at SAS</p> <p>6770 Physician Competencies Minor changes. Leadership modules were moved into the Physician Competencies block. Professionalism is based on the White Coat Ceremony, which has moved into Phase 3 due to COVID 19.</p> <p>Assessment of HELM will be in-class group assignments. For IPE, active participation is replaced with content quiz. Approved</p> <p>6780 Community Engagement It is based on last year pre-COVID. Reflection assignment is worth 25%, essay 50% and the workbook is worth 25%.</p>	
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	<p>Approved</p> <p>Curriculum changes June Harris – add one objective to the anatomy labs for clinical correlations Move to pass</p> <p>Remove Travel Case Study as it is redundant. Replace with Case & Outbreak Management tutorial with new objectives. COWG has reviewed and it is appropriate. No loss of time. Move to pass</p> <p>Team members Need to update the list of team members for Phase 2. Then they will be posted on the UGME website. Looking for permission to post the email addresses on the website.</p> <p>TOR – Jacinta and Heather have not finalized.</p>	
Next Meeting	November 2, 2020	

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