

**Phase 3 Management Team
May 6, 2015
1600- 1730
M2M240
Minutes**

Present:

Joanne Hickey, Chair
Carla Peddle
Gerona McGrath
Diana Deacon
David Stokes
Debra Bergstrom
Brian Harnett

Don McKay
Melody Marshall
Maria Mathews
Lynn Morris-Larkin
Gokul Vidyasankar
Susan Mercer
David Bradbury-Squires

1.0. Review/Approval of Agenda

Schedule added under New Business.

2.0. Review/Approval Minutes April 1, 2015

Motion to approve: Lynn Morris-Larkin
2nd: Susan Mercer
All in favour.

3.0. Business Arising

3.1. Faculty Orientation Package

- The goal is to have the new schedule published for faculty by the end of June, along with the orientation package link.
- Reminders to be sent one month before teaching block.

3.2. Availability of Phase 4 Preparation Course

- Working on final date for the Phase 4 Prep Course.
- Content is still being worked on. Hoping to have it available by mid-June.
- It was suggested to release modules as they become available. There are currently none ready.

3.3. Workload

- UGMS approved the change for the ILS assignment. The assignment will be the same, but shorter.
- Some material was shifted from the Block 6 exam to the Block 7 exam.

3.4. Assessment Policy and Procedures

- No update.
- There have been recommendations to the procedures coming from different Phase Teams.
- SAS will look at the draft procedures in the May meeting. The policy has been passed.

3.5. Independent Project Grading Plan

- There were some concerns that there were issues with clarity about who is responsible for what portion of grading the Independent Project.
- Dr. Gillispie is going to draft a formal plan for us.
- There are two parts to the actual grade of the deliverable.

Action: Carla will touch base with Dr. Gillespie re: grading scheme.

4.0. Standing Items

4.1. Integrated Learning Sessions Working Group

- Working on stories for next iteration of Phase 3.
- Waiting for schedule to align stories accordingly.
- The last session is on May 15.
- Feedback from the students is that the large group is not as useful. Some comments were that ILS is not useful at all.
- Joanne brought a change to the class to try merging the medical expert versus non-medical expert roles between the groups. Let the groups work the cases using all the Can Med roles.
- Proposed that next year do a similar thing after the first few sessions, if this one works well.
- At the last PESC meeting, the student representative requested that ILS be evaluated. Up to now, we've only evaluated it as part of the Healthy course. It was suggested to evaluate again when they finish doing their Phase 4 core rotations.

4.2. Assessment

- Last exam was challenging.
- No new issues with challenge cards.
- Community Health – change in assessment method for one of the Community Health sessions. Faculty requested a change from an assignment to a small exam -10 multiple choice. Communication was delayed to students. There were other stressors, i.e. OSCE. Dr. Sarkar agreed for the exam to be open book.
- Suggested “subject lead” would be beneficial to avoid this problem in the future. Dr. Hickey will take the motion to UGMS.
- A communication person will help solve some problems.

Motion: Maria Mathews moved that we immediately create a formal position for the current content experts to coordinate communications between the various divisions and disciplines, across all Phases.

4.3. Special Projects Working Group

- There are 3 – 4 contracts outstanding.
- There is only one student who hasn't made any updates since December. Carla has been unsuccessful communicating with that person.
- Carla will send the updated list to Joanne.
- Students are asking for the deadline for deliverables.
- There is a deadline. It is in the handbook. The deliverable is due June 19. The final presentation is on June 26.
- Give faculty a few more days the following week to have the deliverable graded.
- The majority of students requested to have community visit two weeks versus one at the expense of independent projects. This was brought to UGMS.
- There will be a portion of students who will take one week for community visit.

4.4. Teaching/Learning Methods Working Group

- There is a meeting tomorrow.
- They are going to look at the possibility of proposals for grant money.
- Histology has submitted a proposal.

4.5. Clinical Skills Report

- Some of the same questions from the students arise about the disconnect with subject material.

- The students felt that there was material examined on the OSCE that they hadn't had much exposure to in the classroom.
- There were a couple of new stations, one went fairly well.
- Over the next couple of months will look at how to integrate everything.
- Would like to hear any feedback.
- There are a lot of clinical skills in this Phase.
- Difficulty getting examiners for clinical skills. Sometimes groups had to be combined.
- There are some online modules.
- It was suggested that with the video coverage in each room, there is no need for an examiner in each room. The same team of examiners could look at every student. By doing this one thing that would be lost is, for example, if a student read a question wrong, there would be no examiner there to correct that student. Dr. Bergstrom will bring it to the next meeting.
- Dr. Gill proposed to add one or two Gyne skills sessions. He has proposed objectives. The next step is to bring it to UGMS. Dr. Hickey has looked at them.

Motion: Support Dr. Gill's proposal to move to UGMS.

2nd: Susan Mercer

All in favour.

4.6. Quality Improvement Report

- There hasn't been a QI session since the last meeting. There is one tomorrow.
- PESC talked about the interim evaluation for Phase 3. There was some concern regarding the scores.
- One thing identified is that the low scores for the stories.
- Sometimes stories are being used during regular lectures. PESC suggested to revisit the expectation of using stories as a part of a regular lecture, to use it as part of ILS only.
- It was suggested to have block themes.

4.7. Student Issues

- Rheumatology clinical skills and the rheumatology content could be coordinated better. Students felt that rheumatology wasn't something that they would pick up through other disciplines' teachings. It would help with clinical skills if rheumatology was moved back more.
- Students felt that particular topics, i.e., Neurology and Cardiology, weren't spiraling. There was a neuroanatomy lab this week that didn't seem like it was a recap of anything. The students would have liked to have a lecture as a recap before the lab. The students can go back and review themselves.
- Rheumatology sessions are near the end of Phase 3 but the rheumatology clinical skills are in the middle of Phase 3.
- Maybe have the clinical skills facilitator review the topic for half an hour before doing the patient. When students show up, they don't know what to expect.
- Could ask one of the rheumatologists who participated in the clinical skills development to have an online tutorial/demo for the students.

Action: Debra Bergstrom will approach Sean Hamilton re: online intro to rheumatology.

4.8. Faculty Issues

- Dr. Sarkar is frustrated. His course was originally put into two different courses, medical expert and special projects. Three hours with two different assessment maps. It was caught in February and it was highlighted at that time that he should be having an evaluation – multiple choice exam.
- The computer labs weren't available so it had to be an in-class exam.

- He submitted questions and they were approved. He had to change his lecture plan with very little notice.

Action: Dr. Hickey will speak with Dr. Sarkar.

4.9. Accreditation

- The summary judgment will likely occur in June.
- Dr. McKay is expecting full accreditation plus status reports.
- The reports that may affect this committee are in the areas of research, life-long learning, phase review, etc.
- ILS will likely feature heavily into the life-long learning.
- There are likely going to be two new elements for all medical schools in Canada:
1. Social accountability, 2. Leadership in the curriculum.
- There are components built into ILS that are largely related to leadership.
- We may need to consider how leadership in ILS groups and physician management training are going to be able to meet the new accreditation requirements.

5.0 Schedule

- There is a draft schedule which Dr. Hickey has reviewed.
- Juanita is going to contact the contact experts to review
- By the end of June everybody should have been contacted.
- There was some feedback from students and faculty regarding the flow. The flow did go reasonably well.
- The schedule starts early October.
- There are two weeks for independent projects and two weeks for the community visit.
- Some material did get moved from Phase 1 and Phase 2 to Phase 3.
- HIV teaching was moved earlier.

6.0 Date Next Meeting: June 3, 2015, 4-5:30