

# Progress In Action – Our Commitment to Quality Improvement

Prepared by the UME Team

## Large Group Teaching in Regional Sites\*

Distributed medical education in Canada commonly relies on videoconferenced large-group teaching, a model that preserves curricular consistency but often limits local engagement and faculty–learner relationships. Leveraging the RIME curriculum’s separation of knowledge acquisition from interactive application, the Southern Alberta Medical Program was designed to deliver all large-group sessions live, locally, and in person rather than by broadcast. Early planning demonstrated strong regional faculty enthusiasm, supported by shared learning objectives, facilitator guides, mentoring from Calgary-based educators, and feasible scheduling and infrastructure. This locally facilitated model represents a meaningful shift from broadcast delivery, with potential benefits for learner engagement, faculty ownership, and regional campus identity as implementation proceeds.

Feature	Broadcast Model	SAMP Model
Primary mode	Synchronous videoconference	Live, local facilitation
Faculty role	Content transmitter	Learning facilitator
Learner engagement	Variable, often passive	Active and discussion-based
Campus identity	Secondary	Centra
Faculty Ownership	Limited	High
Alignment with the RIME curriculum	Partial	Strong

\*Presented as a poster at the 2026 Cabin Fever Conference

## Updates to Cards driven by students

### Corresponding Authors:

For our maturing RIME Curriculum, at times we’ve had authors move on. The new authors need to be able to answer questions about their content as PCEs, so now corresponding authors can be assigned to decks, without removing the recognition of the contributions made by past PCEs. To give a sense of how much feedback these authors get, one popular deck, Acute Pelvic Pain, had over 235,200 plays and had 120 comments. \*

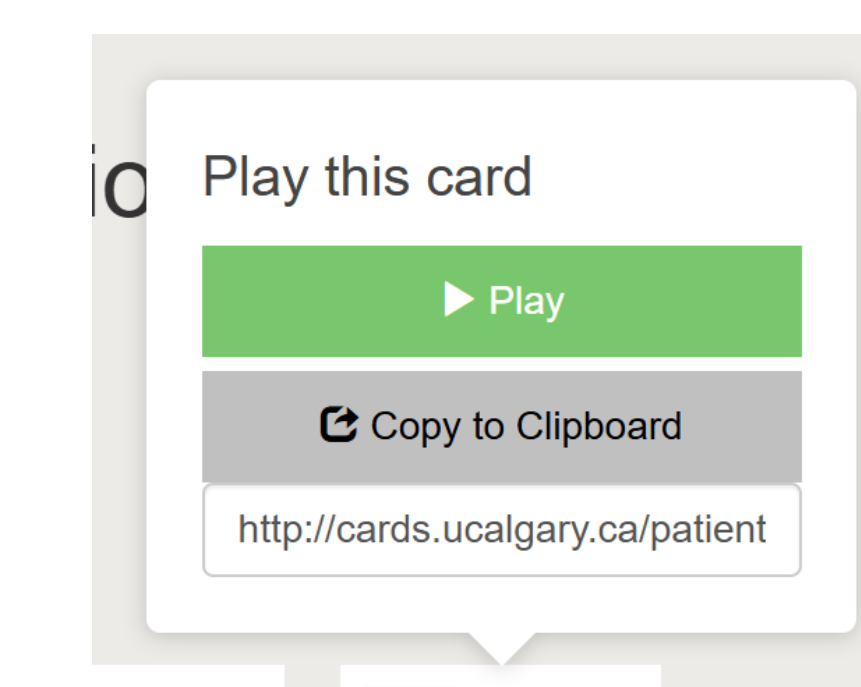
**Next Card:** Armaan and Ryan saw an opportunity to improve the rhythm of playing cards – we moved the “Next Card” button to be above the feedback to smooth things along.

### Anatomy Content:

Due to the large numbers of Anatomy cards, these would have a distorting impact on the Play All feature in a single week, so now Anatomy content has it’s own place.

### Want to play “That Card”:

Link back to specific patients in a deck – for questions or sharing with colleagues



Thanks so much to the Class of 2027 Cards representatives: Ryan Dion and Mitchell Chorney \*, and to the Class of 2028 Cards representatives: Armaan Sekhon and Ryan Chaffee.

\*Presented as a poster at the 2026 Cabin Fever Conference

\*Presented as a poster at the 2026 ICAM Conference

## EPA Zero Arrives in Clerkship

The Class of 2026 has been the first class that had EPA Zero as a non-mandatory EPA in Clerkship. This EPA is available for rotation leadership to initiate as well as students. Faculty have been using this form to recognize exceptional behaviours as well as concerns with learner accountability.

The majority of EPA Zeros submitted have been recognizing “At or above the minimum expectation for the first day of residency”.

The graduation competency committee for the Class of 2026 valued these contributions to the data presented for the progression of this cohort.

**\*EPA 0 – Learner demonstrated accountability to self, peers, and profession.**

Concerns identified during this educational activity. Describe what you observed in the comment box.	Still developing towards the minimum expectation for the first day of residency.	At or above the minimum expectation for the first day of residency. (i.e. REACTIVE SUPERVISION)*
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments

Q4 2025

Have an idea to highlight in Progress in Action? Contact [ume.manager@ucalgary.ca](mailto:ume.manager@ucalgary.ca)

