



## Undergraduate Medical Education Committee

**APPROVED**

**Thursday, June 29, 2017**

**Room 1508**

**Health Sciences Centre**

**Attendees:** Drs. Hanan Bassyouni, Heather Baxter, Luc Berthiaume, Ellen Burgess, Kevin Busche, Sylvain Coderre (Chair), Chip Doig, Karen Fruetel, Martina Kelly, Kevin McLaughlin, Travis Ogilvie, Ms. Na'ama Avitzur, Ms. Karen Chadbolt, Mr. Mike Paget, Ms. Sarah Smith, Ms. Jane McNeill (minutes)

**Regrets:** Drs. Walla Al-Hertani, Benedikt Hallgrimsson, Aliya Kassam, Charles Leduc, Pam Veale, Ms. Lauren Galbraith, Ms. Shannon Leskosky, Ms. Kerri Martin, Mr. David Reading

**Guest(s):** Drs. Jason Waechter, Richelle Schindler, Ms. Marianna Hofmeister

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### **1. Approval of Agenda**

**Dr. Sylvain Coderre**

The June 29, 2017 agenda was approved.

- Motion: Dr. H. Baxter      Seconded: Dr. T. Ogilvie

### **2. Approval of Minutes**

**Dr. Sylvain Coderre**

The February 24, 2017 Minutes were approved.

- Moved: Dr. T. Ogilvie      Seconded: Dr. K. Busche

### **3. Introductions**

**Dr. Sylvain Coderre**

Dr. Coderre introduced Dr. Karen Fruetel as a new UMEC member. Dr. Fruetel is taking over for Dr. Anne Roggensack. Dr. Coderre explained that the UMEC Committee approached the Nomination Committee of Faculty Council and Dr. Fruetel was appointed as our new member.

### **4. Report from Students**

**Class of 2019** – Ms. Sarah Smith reported that her class is excited about the arrival of the Class of 2020 as well as getting ready for their Preclerkship Summer Electives. She did however report that there is a concern about students from the Class of 2019 creating a negative opinion of the UME to the new class (2020) with regard to the removal of old podcasts for future classes (no access to old recordings going forward). Ms. Smith and Dr. K. Busche sent out a well thought-out email to the Class of 2019 explaining the rationale behind the decision that was made regarding podcasting. Ms. Smith reported that she is receiving positive feedback with regard to the email.

## 5. New Business

### a. **Providers of Health and Psychiatric/Psychological Services to Medical Student Policy**

Dr. Coderre explained that UMEC approved the Providers of Health and Psychiatric/Psychological Services to Medical Student Policy (accreditation standard 12.5) in February 18, 2016. However, accreditation standard 12.5 states that if a physician has provided health care for a student that the said physician would not be the primary evaluator of that student. The specifics of the Accreditation Board's concerns are 1) the onus was on the student to actually declare this conflict and the faculty was not taking responsibility, and 2) the faculty was not aware of the Policy. We have to reply to the Accreditation of Canadian Medical Schools in March, 2018. Dr. Coderre explained that we have established a process that works very well. The current process is that every ITER that is sent to every faculty member starts with a "conflict of interest" clause. If a faculty member has answered "yes" to the conflict of interest clause, Dr. P. Veale will follow-up with that faculty member and inquire as to what the conflict is. Dr. Coderre explained that once this policy is approved he would like to provide a link on every ITER to ensure that we know that the policy has been distributed. The following revisions were made to the Providers of Health and Psychiatric/Psychological Services to Medical Policy:

Please note the following **additions** were made to the Policy:

**Definitions:** 3. f. Preceptor: faculty member overseeing students' educational experience and evaluation Policy Statement.

**Policy Statement:** 4. All reasonable efforts will be undertaken to ensure that students are not taught, evaluated or have their promotion affected by a faculty member or resident who also acts (or has acted) as one of their health care providers.

#### **Procedures: 8.**

- a. Prior to the beginning (or during) the rotation, if such a conflict of interest is identified by faculty and/or student, either or both parties should notify the appropriate leadership to ensure that it may be addressed promptly and appropriately. Leadership contacts can include: Assistant/Associate Dean UME, Director of Student Advising and Wellness, Course/clerkship director, Discipline-specific site leader
- b. If a conflict is noted, students will be granted an alternate placement
- c. In situations where conflict is unavoidable (e.g. emergency situations) both parties should be aware of the existence of a dual relationship and the potential for bias. UME leadership will also be made aware of this dual relationship
- d. Faculty having been, or currently involved in the health care delivery of a medical student will recuse themselves from any assessment activity or promotions discussion involving the student
- e. If the conflict does not become apparent until the end of the rotation, the current clerkship ITER offers the option for faculty to opt out of the evaluation based on the conflict. This is flagged for the Assistant Dean, who will contact the faculty member, as well as the appropriate course/clerkship director, to determine an appropriate evaluation option. This could result in the need for a student to be reassessed by a different preceptor.
- f. Students may, in the interest of their own education, request an exception to this policy, if application of this policy will adversely affect the quality of their educational experience. This will need to be approved by the supervising faculty member and the Assistant or Associate Dean UME
- g. Issues related to the health of a family member will be considered on a case-by-case basis for reassignment
- h. The UME will not maintain health records of medical students with the exception of a summary of their immunization records related to their ability to work in the healthcare field. Student can review their

immunization records at any time, upon request. Medical information submitted to UME is kept separate from the academic records, as per UME's student file policy.

- i. Students will be made aware of this policy via the MD program website and during orientation. Faculty will be made aware of this policy via a link provided with each In-training Evaluation Report.

Please note the following **deletions** were made to the Providers of Health and Psychiatric/Psychological Services to Medical Policy:

- a. A faculty member should not act in a supervisory or evaluative role for any student for whom they are or have been a treating physician.
- b. When brought to the attention of UME (by the student or faculty), a student will not be placed in a clinical learning experience in a clinic or ward in which he or she has been a patient, or with a preceptors or residents who have provided medical care to that student.
- c. Students who are assigned to work with physicians or in locations where they have previously or are currently being treated as a patient can request and will be granted an alternate placement.
- d. Students may, in the interest of their own education, request an exception to (b.) above, if application of this policy will adversely affect the quality of their educational experience (if approved by supervising faculty member). They may not request an exception to (a).
- e. Issues related to the health of a family member would also be considered on a case-by-case basis for reassignment.

**Motion:** To approve revisions to the Providers of Health and Psychiatric/Psychological Services to Medical Student Policy (as noted above).

**Moved: Dr. C. Doig                      Seconded: Dr. T. Ogilvie**  
**Motion Passed, None Opposed, None Abstained**

**Amended policy attached.**

**b. Update on Health Promotion and Disease Prevention Task Force (Dr. M. Kelly)**

Dr. Coderre reported that the MCC and the Medical Council Part 1 has currently moved their blueprint to 15% of the exam content on Health Promotion and Disease Prevention (HP/DP) with it being closer to 20% in 2019. Dr. Coderre asked Dr. M. Kelly, and her task force, to look at our current curriculum and see if we are near 15 to 20% in HP/DP, where we are in our exam bank and what the next steps should be to align our curriculum.

Dr. Kelly introduced her team, Ms. Marianna Hofmeister, and Dr. Richelle Schindler. As well, she added that they worked with a great group of students from the Classes of 2018 and 2019. Dr. Kelly gave an excellent presentation (Power Point slides attached). She discussed the aim of the task force (slide #2). As well she discussed the approach that they took, what they found and discussed some implications. She explained that a clinical prevention and population health framework is under four broad headings from which the presentation is organized (slide #4). Dr. Kelly noted that two large strands of data collection was quantitative and qualitative (slide 6).

Dr. Coderre thanked Dr. Kelly, and her team, for their amazing work. The plan going forward is that Dr. Kelly is going to present on behalf of the Health Promotion and Disease Prevention Task Force at the Preclerkship and Student Evaluation Committees in order to get different perspectives. Dr. Kelly also commented that Dr. Schindler would be very happy to help with the creation of MCQs if need be.

**c. Competency-Based Education for ECG (Dr. Jason Waechter)**

Dr. Jason Waechter gave an informative presentation on ECG Interpretation Data (Power Point presentation

attached). Dr. Waechter explained that medical students are graduating with a low diagnostic accuracy when interpreting ECGs. He suggested that the lack of curriculum content, practice and examinations are contributing factors. He brought forward a proposal to the UMEC Committee (slide #31).

Dr. Coderre informed UMEC members that with regard to Dr. Waechter's proposal, there are a number of options that could be explored. Dr. Coderre suggested that the next step should be that we inventory ECG interpretation content (formal teachings and exams) within the Clerkship year (with an emphasis on Internal Medicine), and how much of that content is reemphasized from Preclerkship teachings. He also suggested that he could incorporate ECG Interpretation questions into the formative Associate Dean's Exam. As well, the ECG Interpretation Exam will remain in Course III. He commented that the Student Evaluation Committee is opposed to using an external website for ECG exams. He noted that this year the Course III ECG exam was paper-based.

**d. Update on Clerkship OSCE (Dr. K. McLaughlin)**

Dr. McLaughlin gave an informative presentation on OSCE Clerkship Scoring (Power Point presentation attached) comparing Global Rating Scoring to Checklist Scoring. Dr. McLaughlin suggested that the scoring system for the Clerkship OSCE be changed to reflect how we actually evaluate students in terms of level of entrustment (reflecting the 12 EPA's). Discussion ensued with regard to the comparison of Global Rating Scoring to Checklist scoring.

**Motion:** We should use Global Rating for pass/fail decision on the Clerkship OSCE and use checklist to provide feedback on performance.

**Moved: Dr. K. McLaughlin                      Seconded: Dr. K. Busche**  
**Motion Passed, None Opposed, None Abstained**

**e. PCC Annual Report (Dr. K. Busche)**

Dr. K. Busche explained that the PCC Annual Report (attached) was originally submitted in February, 2017. He suggested that the content should stand as submitted. Dr. Busche reported that PCC is a "great, well-functioning and well-attended committee".

**Motion:** To approve the changes in Course Leadership as listed in the PCC Annual Report (February, 2017).

**Moved: Dr. K. Busche                              Seconded: Dr. L. Berthiaume**  
**Motion Passed, None Opposed, None Abstained**

**f. Clerkship Workload Policy Changes for Approval (Dr. S. Coderre on behalf of Dr. P. Veale)**

The following additions were recommended for the Clerkship Workload Policy:

**Addition:** - page 3, paragraph 3: "Similarly, due to the nature of patient care on the Hepatobiliary Service (HPB) during surgery rotations, students on this service may also have long days at times. As a result, one less call will be assigned [5 total (general surgery and trauma) compared to 6] in the three week block"

**Addition:** - page 2, below "Special Cases": "In rotations that require shift-work schedules, the usual work week and work hour maximums may be difficult to apply. In that case, rotations are asked to ensure that:

- In a two week period, there are a minimum of two 24 hour periods with no scheduled shifts.

- Shifts should not exceed 12 hours duration.
- When moving “forward” in shift times, these may be scheduled on consecutive days [for example from day shift (8 a.m. – 5 p.m.) on Monday to evening shift (5 p.m. to 11 p.m. on Tuesday]
- When moving “backward” in shift times, there should be a minimum of 10 hours between shifts [for example from evening shift (5 p.m. to 11 p.m.) on Wednesday would not start shift on Thursday until after 9 a.m.].
- Students should not be scheduled for “split shifts” in a single day with the exception of time blocked for academic sessions.

**Motion:** The two additions noted above be added to the Clerkship Workload Policy.

**Moved: Dr. H. Baxter                      Seconded: Dr. M. Kelly**  
**Motion Passed, None Opposed, None Abstained**

**Amended Policy Attached.**

**g. SEC Proposal for TOR Change            (Dr. S. Coderre for Dr. T. Ogilvie)**

The changes stated below were brought forward by Dr. Coderre on behalf of Dr. Ogilvie. The purpose of the changes are to ensure that voting quorum is attained for upcoming SEC meetings.

The change that does **NOT** need alteration to The Student Evaluation Committee’s Terms of Reference is:

- Change from fixed meeting days determined months in advance to flexible meeting dates determined by availability of members organized by poll (doodle poll) two weeks in advance of planned meeting date. Date picked to ensure most voting members are available including student representation.

Changes that **DO** require alteration to TOR are as follows:

- Change e-learning name to “Academic Technologies”
- Change TOR to allow alternate delegate to attend if the primary member is unable to attend for the following positions :  
 Director Master Teacher (Alternate master teacher)  
 First year evaluation representative (alternate first year evaluation representative from pool of evaluation representatives for 1<sup>st</sup> year courses)  
 Second year representative (alternate second year evaluation representative from pool of evaluation representatives for 2<sup>nd</sup> year courses)  
 Clerkship Evaluation representative (alternate clerkship year evaluation representative from pool of evaluation representatives for clerkship courses)
- Change TOR to allow student representatives to provide an alternate person from the pool of the entire class

**Motion:** To make changes to the Student Evaluation Committee’s Terms of Reference as stated above.

**Moved: Dr. K. Busche                      Seconded: Dr. K. McLaughlin**  
**Motion Passed, None Opposed, None Abstained**

**Meeting adjourned at 3:35 p.m.**

**Next Meeting: September 22, 2017 in Room G750 from 1:00 p.m. – 3:00 p.m.**