



**Clerkship Committee Meeting Minutes**  
**APPROVED**  
**Tuesday, November 26th, 2019**

*Present: Drs. Tim Ayas, Susan Bannister, Kevin Busche, Melinda Davis, Janeve Desy, Gary Gelfand, Gavin Greenfield, Jolene Haws, Tabitha Haws, Rahim Kachra, Mr. William Kennedy, Jeremy LaMothe, Ms. Shannon Leskosky, Meira Louis, Mr. Arjun Maini, Caroline O'Shaughnessy, Mr. Mike Paget, Kelsey Ragan, Rithesh Ram, Mke Slawnych, Ms. Sibyl Tai, Sarah Weeks, Sonja Wicklum, Ms. Nicolle Begert (Ms. Jane MacNeill).*

*Regrets: Drs. Kelly Albrecht, Karl Darcus, David Fu, Farah Jivraj, Nicole Johnson, Martina Kelly, Kathryn Kenny, Michael Kwan, Irene Ma, Emily Macphail, Suneina Mohan, Christopher Naugler, Artan Reso, Ms. Alexander Thomas, Jimmy Vantanajal, Ian Wishart*

**Welcome:** Dr. Busche, Chair, called the meeting to order @ 12:35 p.m. He welcomed everyone and everyone introduced themselves.

**2. Approval of Meeting Agenda:** Approved

**Moved by Dr. J. Lamothe. Seconded by Dr. S. Bannister. Unanimously approved.**

**3. Approval of September 17th Minutes** Approved

**Moved by Mr. Mike Paget, Seconded by Dr. J. Haws. Unanimously approved.**

**4. Arising from Minutes:**

**a) Clerkship Template Presentation to Committee:** Deferred.

**b) Clerkship Handbook:** Dr. Busche noted this is almost complete, and will check with Dr. Albrecht, O&G for final approval of sections related to OG. It will subsequently be sent out to the class. Dr. Busche thanked the members for their input and hard work.

**Action: Dr. Busche asked members to review their clerkship core documents to ensure they match the Clerkship Handbook. If there are any discrepancies, please contact him.**

**5. Clerkship Reports**

**a) Anesthesia:** Dr. Davis presented the pre-circulated Anesthesia report for Class of 2019 (word and power point). Highlights included:

- Dr. Davis expressed concern that the 'OR culture' appears to be driving down the rating, although not confirmed by the feedback comments. She noted that the non-medical staff in the OR can be intimidating and she noted a few incidents. Students did speak up which resulted in a positive change.
- Exploring the creation of cards for anesthesia; have tried to interest residents in the project with limited interest so far
- There is a faculty burnout in anesthesia – multi-factorial: shortage of anesthesiologists so increased clinical demand; educational challenge with a disconnect with what faculty expectations are of students and what student's expectations are from the anesthesia clerkship experience.
- Dr. Louis noted that R4 and R5's could be assigned clerks for teaching.
- It was noted that teacher ratings are high with good comments and a collection of phrases that students have on feedback could be motivating for faculty.

Dr. Busche thanked Dr. Davis for her hard work and report.

**Motion: It was moved to accept the Anesthesia Report**

**Moved by Dr. R. Kachra. Seconded by Dr. M. Louis. Unanimously approved.**

**b) Surgery:** Dr. Lamothe presented the pre-circulated Surgery report (word and power point). Highlights included:

- It was reported that some students have provided negative feedback on podcasting in surgery. Some students prefer live teaching sessions, some prefer podcasts. Dr. Busche noted we are not trying to replace one hour lectures with podcasts: short podcasts (with dedicated viewing time) can then be followed by preceptor-led, case-based discussions that serve as an application of the content of the podcast.
- There is a struggle to motivate students to provide feedback. Preceptors will change lectures based on feedback

- With the new decision in the clerkship beginning in January (class of 2021) if students do not complete the logbook, they will not be permitted to write the exam.
- Dr. Lamothe noted UME is positive in recognizing preceptors (i.e. Awards night). Providing feedback to preceptors from the very positive student feedback.
- Nathan Zondervan was doing a project looking at observed histories and physicals in the surgery clerkship
- **Action: Dr. Busche will email Nathan Zondervan to see where things are regarding his project and perhaps in future, present here.** Dr. Busche thanked Dr. Lamothe for his hard work and report.

**Motion: It was moved to accept the Surgery report.**

**Moved by Mr. W. Kennedy. Seconded by Dr. S. Bannister. Unanimously approved.**

## **6. Standing Updates:**

**a) Report from Students: Work Hour Policy:** Ms. Brockman noted that the work hour policy provides a good balance, with students learning and trying to take care of themselves. However, students noted there can be student burnout on MTU and Peds, with the current 55 hr/week; anecdotally students have reported that the work hours rule is not always followed.. Residents should be made aware of the work hour policy for clerks, so they can dismiss the clerks in a timely manner and otherwise follow the work hour rules. Dr. Busche noted that unless they receive explicit data that has been collected, where the students worked more than 55 hours, it is difficult to enact change. He believes that this may be true at times, however, he requires specific details of the where and when and clear documentation through the clerkship surveys so that changes can be made. Dr. Bannister noted that there was a recent incident in Pediatrics where two students were requested to stay inappropriately longer (they had contacted Dr. Bannister directly about this). She noted she and the evaluation coordinator met with the students and received all the facts, noting this was from one resident who did this multiple times. Dr. Bannister met with the resident and this has been resolved. She is trustful that the Clerkship Directors will act on incidents, as it is brave of the students to come forward and as a result, educate the resident(s). She encouraged students to speak up, as it is the Clerkship Director's responsibility to 'regulate'.

**Action: Dr. Busche will contact PGME in regards to training residents as to the clerkship work hours' policy.**

Mr. Kennedy noted it is extremely uncomfortable for students to bring up these kind of issues. Ms. Brockman will inform and encourage students to provide information about excessive work hours either to the Clerkship Director or through the end of clerkship survey. This will be better in clerkship for the class of 2021, as the end of 'rotation' survey will be collected at the end of each sub-rotation (via a shorter survey).

**Evening Call vs 24 hour Call:** Ms. Brockman, noted that in some situation, student would prefer overnight call rather than evening call. She noted that the evening call is difficult, by leaving at 11 p.m. and potentially having to return early the next day. Dr. Lamothe noted that prior changes from overnight call to evening call were in response to student feedback to maximize the educational experience.. Dr. Busche noted that there is a practical issue as well, as students are not permitted 24 hour call if there is no call room to use overnight, for safety reasons.

**Shadowing in Clerkship:** It was noted that there were interesting discussions at the Western Deans sessions about shadowing in the clerkship. Dr. Haws perceived that the long term goal appears to be pushing the electives further into Clerkship. Mr. Kennedy noted that he continues to hear from clerks that they would like to shadow, and it is occurring. He noted that the U of S discourages shadowing but does not regulate it. At UBC, third and fourth year are able to do some type of non-official electives. Dr. Busche reminded clerks that the current liability policy does not cover clerks in a clinical environment, outside of the clerkship they are currently completing. Shadowing creates the risk of diluting the educational experience for all learners. It also could create challenges to the 55 hour work policy rule, if students are working over to 'shadow', after the normal clinical hours. He noted this was discussed in the spring at UMEC, and it was voted against clerks shadowing. Students are putting themselves at risk should something go wrong. When clerks are working, preceptors are not aware of the distinction of whether clerks are on clinical work or shadowing. **Action: Dr. Busche advised the students to take this issue back to UMEC with advice from the Clerkship Committee leaders, if they would like to see if we can explore this further, specifically asking UMEC to consider situations where clerks change their speciality of interest later in clerkship, after completing electives. Ms. Leskosky will review this with risk management.**

**b) Other UME Committees – UMEC:** Last meeting was cancelled, therefore, nothing new to report. **PCC:** There was nothing new to report. **SEC:** Some changes in the mark breakdowns for courses have been reviewed. Dr. Desy will forward exam questions that are repeated on A and B exams to the relevant clerkships: A and B exams should not have the same questions. **Action: If any of the clerkships are going to change their distribution of marks or change must completes or remediation strategies, to please send it to Dr. Busche and he can bring it forward to the next SEC meeting.**

## **7. New Business**

**a) IM OSCE:** The question is when to run the OSCE. Dr. Kachra noted that the IM will be broken into two separate four week chunks. Therefore, the challenge is when to have the IM OSCE (formative with feedback).. Dr. Slawnych noted that timing is a challenge as performing an OSCE without any IM experience would be too difficult. Dr. Busche suggested doing the OSCE before the

Clerkship OSCE (moved in February) would be ideal (to serve as a practice OSCE). However, that would result in ¼ of students having no IM experience (depending on the block) before doing the IM OSCE; therefore, we have abandoned that requirement. Discussion ensued on the variabilities of when to run the IM OSCE. It was suggested to run the IM OSCE on a Course 8 day. It was noted that would be difficult for students to prepare for an IM OSCE while on another rotation. Dr. Wicklum indicated she would look at the objectives, and might be willing to give up a half-day. Dr. Haws will look at the scheduling issues and work with Sibyl Tai. The directors of the EM and Anesthesia clerkships would both be willing to let IM have the students on Friday afternoons for this. It was noted that the duration of the IM OSCE is two hours, and purely formative. They would like to run the IM OSCE's four times, and are asking to take a ½ day away from the other clerkships for the students to perform the OSCE's. Drs. Kachra and Slawnych will discuss with Dr. Wicklum and follow up with program supervisor Sibyl Tai.

**b) End of Rotations Feedback form** – Deferred.

**c) Terms of Reference** – Deferred.

**d) Review of Objectives – The Big Ten** – Deferred

**e) Certificates** – Deferred.

Dr. Busche thanked members for their participation and input.

Meeting adjourned at 3:07 p.m.

**Next meeting is Tuesday, November 26th @ 12:30 – 2:30 p.m. in G750, HSC Bldg. Reports due: Surgery, UCLIC and Anesthesia.**

jm/lo/edits by KB