Pre-Clerkship Committee (PCC) Minutes

Pre-Clerkship Committee (PCC)
November 27, 2020
12:30-3:00PM


Regrets: Drs. N. Brager, T. Wu and S. Leskosky.

Guests: Dr. A. Ramaliu.

1. Welcome and Thanks
The meeting was called to order at 12:30 PM by S. Weeks (Chair). S. Weeks thanked everyone for coming and for everything they have continued to do throughout the COVID-19 pandemic.

2. Approval of Meeting Agenda
S. Weeks asked for a motion for the Pre-Clerkship Committee to accept the meeting agenda as circulated.
   First: A. Bromley
   Second: M. Paget
   Passed Unanimously

3. Approval of Notes from the Oct 23, 2020 minutes
S. Weeks asked for any amendments or corrections to the draft minutes as circulated from the October 23, 2020 meeting. There were none.

   S. Weeks asked for a motion for the Pre-Clerkship Committee to accept the meeting minutes as circulated.
   First: M. Paget
   Second: S. Anderson
   Passed Unanimously

4. Standing Updates

4.1 Student Reports
L. Palmer (class of 2022) provided a student report to the committee. The students have almost completed Course 6. The final exam is scheduled on December 18.
The next Pre-Clerkship elective week is taking place the week of November 30. L. Palmer indicated some students’ electives have been cancelled last minute due to COVID-19, however everyone has been accommodating in getting the students new electives. On December 8 students will be putting in their elective requests for the first two elective blocks.
In January the students will be going into a transition phase towards Clerkship with ICP Integrative followed by Junior Clerkship and Boot Camp.
E. Lindquist (class of 2023) provided a student report to the committee. The students had their midterm exam for the Orthopaedic part of Course 2, an anatomy exam, procedural skills and the physical exams
this week.
E. Lindquist added the students have really enjoyed the Family Medicine experience. This provided the students with the clinical core experiences that they might not be getting.
The students are currently learning the Global Health component which they are enjoying.
E. Lindquist thanked the Course 2 and Anatomy Coordinators for being so responsive in getting last minute information to them due to unexpected changes.
M. Paget thanked K. Busche and S. Tai for their help with the Clerkship lottery. M. Paget has prepared a podcast for students on how the lottery works and will be offering online evening information sessions too.

4.2 Undergraduate Medical Education Committee (UMEC) Update
In C. Naugler’s absence S. Weeks reported on UMEC. The annual review of the “Big 10 Educational Objectives” were reviewed. The decision was to keep the “Big Ten”, however there will be ongoing discussions with regards to making slight adjustments. These were compared/contrasted to the 12 AFMC EPAs and it was felt they were complementary and served somewhat different purposes.
Developing the TOR for the Equity, Diversity and Inclusion (EDI) UMEC subcommittee was discussed. The subcommittee will be seeking applications/nominations from those who are interesting in participating.
It has been decided A Re-Imagining Medical Education (RIME) Implementation Subcommittee will be developed to explore feasibility of revamping the first- and second-year curriculums. S. Weeks invited the RIME “champions” to present on this at the next PCC meeting in January. The subcommittee will be seeking applications/nominations from those who are interesting in participating.

4.3 Clerkship Committee (CC) Update
K. Busche indicated emails will be sent out to students with regards to the Clerkship lottery and information on choosing their electives.
Planning with Heather Baxter and Amy Gausvik from the Indigenous Global and Local Health Office for the Community Engagement learning electives is moving forward. Finding placements for the Interprofessional learning electives is also in progress.
K. Busche indicated the students are currently completing the EPA assessments. The students are required to demonstrate the ability to carry out all the 12 EPA’s successfully with indirect supervision. The students are completing the EPA’s on average and on schedule.
Revisions have been made to the Student-Patient Interaction Guidelines around the kinds of patient’s students are and are not allowed to be involved with, and refitting students with the most current N95 masks for the Anesthesia and ICU rotations. UME is putting together a proposal to buy goggles for the Clerks in areas where goggles are in short supply. Wearing goggles are now required for all patient assessments.
Pre-planning has been put in place in the event students will not have access to a clinical learning environment. Plan A would be to have the Clerks continue their clinical activities without any disruptions. If there are some closures plan B would be to shuffle the Clerks and move them to clinical environments. If Clerks are removed from clinical environments plan C would include specific activities through online learning.

4.4 Student Evaluation Committee (SEC) Update
In K. McLaughlin’s absence A. Harvey reported on SEC. The process for the delivery in which non final summative marks is presented has changed. The students are now given their grade, the mean of the class and the standard deviation. This has been changed to encourage the students seek mentorship if they are two standard deviations or more below the mean. Previously students were graded as satisfactory or unsatisfactory. If a student does require mentorship an email is sent to the student with that advice, however it is not mandatory.
A second policy change was put in place. A process was approved to remove the contribution of the peripatetic exams. This was put in place due to how much higher than the traditional MPL they were, and the percentage of the mark they contributed to the numbered courses. This change will maintain the integrity of the evaluations.

4.5 Update on Equity, Diversity and Inclusion (EDI) Initiatives
S. Weeks clarified this committee will not only focus on the inclusion of Black, Indigenous and people of colour but also include sexual orientation, gender identity and people with disabilities. S. Weeks reminded the committee that patient presentations faculty are selecting can be purposeful. Additionally, small group cases could embed elements of EDI teaching.

5. Course Reports

5.1 Course 5
E. Dempsey delivered the Course 5 presentation to the committee (Appendix A).

S. Weeks thanked E. Dempsey for the presentation. K. Chadbolt presented the estimated Course 5 financials to the Committee. The finalized numbers will be known once the clinical core numbers are in. K. Chadbolt added the financials are going to be lower this year due to COVID.

The committee had discussion around how Course 5 can teach clinical core in a virtual environment:

- P. Stokes indicated he gave students two videos to watch of a psychiatrist interviewing a standardized patient. He then asked the students to complete a mental status exam and come up with a differential diagnosis. P. Stokes added putting a clinical core preceptor in the room may have enhanced the lesson.
- Developing case-based learning was discussed.
- S. George enjoyed the sessions where the students had no information about the patient and had to take the history of the patient and identify the problem. This was great motivator. Doing this in smaller groups (not in a presentation format) using the same skills such as Interviewing the patient would enhance the experience.
- Demonstrating a physical exam on someone within the same household would be a great way to practice.
- Being on an AHS zoom while in clinic with the patient (with the consent of the patient), would provide more clinical exposure.

S. Weeks asked for a motion for the committee to accept the Course 5 presentation, as presented by E. Dempsey.

First: K. Busche
Second: M. Paget
Passed Unanimously

6. New Business

6.1 Preventative Health
A. Ramaliu presented on Preventative Health (Appendix B).
The committee had discussion on how preventative health and health promotion could be added to the curriculum. Some suggestions and comments were:

- Incorporating this into small groups.
• Take the opportunity to have students with a health promotion or public health degree to share their knowledge.
• Looking for opportunities where this can be added. For instance, discussion on incorporating pediatric oral health to teaching was proposed. Discussing the fluoride situation in Calgary would be an opportunity to discuss this.
• Signposting.
• Liaise with forensic pathology and Office of the Medical Examiner
• Find individuals who have a population they can become a “champion” for.
• Incorporating the “lens” of the population, opposed to the “lens” of the disease.
• Having students have as many opportunities as possible to spend time at community partners/organizations eg. Mustard Seed.
• Hearing from individuals in a specific “population” is more impactful then reading about it.
• K. Busche added in the Special Electives- Community Engagement portion of Clerkship, students will spend the first day having some online training around power and privilege. The students will then work with one of the community partners (through the Indigenous, Global, Local Health office).
• Incorporating a narrative, picture or a story about an individual in a specific “population” on who they are and where they come from.
• Incorporating small group case decks.

Action item: S. Weeks suggested the Course Leaders take some time to go through the preventative health slides, and to think of ways on how preventative health can be incorporated into their courses.

A. Ramaliu indicated she is happy to assist the Course Leaders in terms of resource materials and developing the material.

S. Weeks thanked A. Ramaliu for the presentation and suggested this become an annual standing agenda item.

6.2 Simulated Training for Resilience in Various Environments (STRIVE) Website
S. Weeks shared the STRIVE link to committee members. Information on resiliency training can be found here: [https://www.cma.ca/physician-wellness-hub/content/simulated-training-for-resilience-in-various-environments](https://www.cma.ca/physician-wellness-hub/content/simulated-training-for-resilience-in-various-environments)

6.3 Timetables
S-A. Facchini asked committee members to review the timetables previously distributed and to let her know if there are any questions or concerns (Appendix C & D).

Action item: A. Ancelin to send email to PPC committee with the timetables attached for approval.

6.4 Student Course Survey Response Rate
S. Weeks indicated the survey response has gone down quite considerably and asked committee members for suggestions on how to increase the number of responses. L. Palmer indicated surveys are not a priority for a lot of students due to the high workload and condensed schedules. E. Lindquist suggested the preceptors give the students 5-10 min to fill out the surveys at the end of all mandatory lectures. S. Weeks added Student Representatives could also liaise with Course Leaders to develop the surveys together. This would decrease the number of surveys the students are filling out.
If Course Leaders are looking for specific feedback, extra surveys can be used so the process is not being duplicated and contributing to survey fatigue.

K. Busche indicated Clerkship has asked Student Representatives to encourage students to fill out the end of block surveys UME has developed.

Action item: Survey questions to be reviewed and amended.

6.5 Schedule Approval
S. weeks asked committee members to approve the timetables via email by Friday, Dec 4, 2020.

6.6 Interim Accreditation
S. Weeks indicated There will be a two-day accreditation (late April-early May), however the exact dates are to be determined.

7. Next Meeting
S. Weeks let the committee know that the next meeting would be on Friday, January 8 at 12:30PM and that the committee would be receiving a RIME update, informal update (M. Davis) on Career Exploration as well as an informal update on the Anatomy Course (S. Anderson and team).

8. Adjournment
S. Weeks (Chair) adjourned the meeting at 3:00pm.

Minutes: Andrea Ancelin – December 1, 2020
Edits: Dr. Sarah Weeks – December 9, 2020