

## CUMMING SCHOOL OF MEDICINE

### Pre-Clerkship Committee (PCC)

#### APPROVED - Minutes

Friday, May 3rd, 2019

*Present:* Drs. Kevin Busche (chair) Heather Baxter, Nancy Brager, Chris Brown, Edwin Cheng, Janeve Desy, Ms. Sue-Ann Facchini, Ms. Tabitha Hawes, Martina Kelly, Murray Lee, Patrick Lee, Ms. Shannon Leskosky, Mr. Arjun Maini, Kerry McBrien, Leanna McKenzie, Ms. Lily Oakenfold, Mr. Mike Paget, Lothar Resch, Wayne Rosen, Anthony Seto, Phil Stokes, Wendy Tink.

*Regrets:* Drs. Fariba Aghajafari, Billie Au, Laurie-Ann Baker, Adam Bass, Hanan Bassyouni, Sylvain Coderre, Philippe Couillard, Erika Dempsey, John Fagnou, Dawn Goodyear, Andrew Grant, Heather Janniczky, Rahim Kachra, Peter Lewkonka, Kevin McLaughlin, Dan Miller, Dan Miller, Jadine Paw, Renee Perrier, Jaime Schachar, Anthony Seto, Kim Smyth, Wendy Tink, Pamela Veale, Ian Wishart.

Dr. Busche called the meeting to order @ 12:36 p.m. and thanked members for attending. Members introduced themselves.

1. **Approval of Meeting Agenda:** Item 6.3 Program Coordinator Update was added to the Agenda. The agenda was approved, with this addition.

**Moved by Mr. M. Paget. Seconded by Dr. L. McKenzie. Unanimously approved.**

2. **Approval of March 15<sup>th</sup> Minutes:** The minutes were approved with three minor revisions: Page 1, Item, 5.1 Course II, 3<sup>rd</sup> line should read, "...Podcasts for neuro anatomy." Page 1, Item, 5.2, 7<sup>th</sup> line should read, "...family violence be reviewed with Course II and Course VI." Page 2, Item, 6.1, under Quick Wins included, 3<sup>rd</sup> bullet should read "Rolodex (structured shadowing)."

**Amended minutes were approved. Moved by Dr. L. Resch. Seconded by Dr. W. Tink. Unanimously approved.**

### 3. Standing Updates

- 3.1 **Other Committees – UMEC:** Deferred. **Clerkship:** Dr. Busche reported there was nothing to report that impacted the Pre-Clerkship Committee. There was a discussion at the last Clerkship Committee meeting centred on the CaRMS match and some interesting data that he will present to PCC at a future meeting. **SEC:** Dr. Busche noted Med Skills and Course II will be on the next meeting agenda.
- 3.2 **Academic Technologies Update:** Mr. Paget reported that the faculty performance records will be completed in the next few weeks. He noted that the addition of the work of the Course Chairs will be added to this report, including attendance. He asked for any suggestions that should be included in this report.
- 3.3 **Student Reports:** It was reported that Course IV is proceeding and the Well Man just began. Students reported that as the Well Man has begun with models, instead of SP's. Students were told by some preceptors that it would be less advantageous than how this material was taught in the past. Dr. Rosen noted the whole process was changed to a task-trainer model. This will be explained more in June when he presents his report on the Medical Skills. Ms. Hawes noted that students have survey fatigue and asked if there was some way to condense some of the surveys or reduce them, in order to obtain more meaningful responses. Dr. Busche noted from a historical viewpoint, that a previous task force which included students developed the current model of session-by-session surveys. However, he agreed that this could be reviewed to search different ways to do it. He suggested perhaps to have a course pilot different types of condensed surveys. Dr. Busche reminded members that collecting information is an accreditation standard and important for program development; therefore information must be collected in some way. This data can support preceptor improvement but needs to be carefully reviewed and only provided in a way that maintains student anonymity. He also noted that we have recently been thinking of different ways to provide great comments back to teachers. He suggested that the course chairs could take a number of the top comments and sending emails to the preceptors, indicating the positive comments. Some members noted that the feedback from the small groups doesn't appear to be useful, and that perhaps providing different feedback would be more helpful. Dr. Busche summed up the discussion that UME would like to have better quality feedback and have less quantity of feedback. Especially with feedback related to long-term preceptors. Dr. Busche noted that when feedback generates a low level response, such as a 1, that there is a process for follow-up.

### 4. Old Business

- 4.1 **RIME:** Dr. Busche noted that Rahim Kachra had presented to PCC recommendations, from a design-thinking process on how we are teaching in the pre-clerkship. He noted there were some recommended 'quick wins'. He noted that Rahim will be looking for volunteers from courses to do a pilot of one or more of the quick wins. For those who missed this meeting, another meeting has been scheduled for Tuesday, May 7<sup>th</sup> @ 3:00 p.m. in Rm. G801E, and it will be podcast. Rahim Kachra worked with Dr. Alison Brown, a research assistant, and they interviewed many stakeholders in the process. The next step would be to see if they could implement some of the quick wins.

**Recruitment:** Recruitment: Mr. Paget noted UME now has all the preceptors in the Vera/Osler database; Vera tracks whether we should pay preceptors or not, based on their contracts. He presented a slide which showed the amount of teaching in each course by the preceptor's discipline. Discussions have been raised regarding fee-for-service, generalism, master teacher status and discipline exposure. He noted that UME is over budget and the largest point of leverage is the recruitment process, as preceptor payments are the biggest budget item. He noted that Vera calculates payment eligibility and provides UME a potential mechanism on how recruitment could utilize payment models. The goal is to assemble all the open teaching opportunities across all the courses and preceptors would be able to confirm themselves into appropriate teaching activities. UME could recruit from all preceptors or filter

by department, payment status, discipline, generalism and master teacher status. Feedback from departments indicates they need longer lead times for recruitment, and because the rooms are already booked a year in advance, we could facilitate this with the participation of course leadership. He noted the preceptors would choose events and receive a reminder over email. There is no mandate on how to recruit but perhaps this is a better tool set to allow UME to predict the costs more effectively. Mr. Paget noted Dr. Coderre's recommendation that we recruit AMHSP (formerly ARP) staff, who are already paid through their departments. Many of the departments and faculty are struggling to reconcile teaching time within their contracts, where it is meant to be 5%-15% of their FTE. He noted that faculty appointed preceptors have Osler accounts and they can reset their passwords and access the application at any time. Dr. Busche noted that currently, we use an online tool, Sign-Up Genius, but this new process would be quite different. This would be used for small groups and clinical core. If preceptors are not interested in registering through this process, an email would still suffice in requesting teaching. An email with their information on how to access OSLER ahead of time may help these preceptors register. Ms. Facchini indicated it is not known how many preceptors cancel ahead of time, but it is a fair number. It is an onerous task for the UME Program Coordinators to obtain confirmations and hopefully this new process will alleviate this. Mr. Paget indicated that OSLER generates a calendar with events for faculty, it is just waiting for the subscription from them. The preceptors have to opt into the calendars themselves. It was suggested to have a back-up or alternate list if there is an opening, should someone cancel. It was suggested that calendar invites are a good tool to provide confirmations. Mr. Paget indicated this process could potentially go live for Course III and Course VII with the toll being ready in Osler by late summer or early fall. Dr. Busche thanked Mike Paget and the AT team for the ongoing work on this subject.

## 5.1

### 6. Course Reports

**6.1 Family Medicine Clinical Experience 340/440:** Dr. W. Tink presented these reports to the members, as pre-circulated. Changes planned for the future include: 1. Preceptor development – ensuring preceptors are all aware that these are not shadowing events but are 1:1 participatory learning with guidance and observation. 2. Using residents as teachers, which enhances learning. 3. SOAP notes which will build on clinical reasoning preparation for clerkship. Dr. Tink noted they will be working with their family physician preceptors around the longer family medicine clerkship. Dr. Tink noted that Ms. Laura Rivera, student representative, was instrumental to the success of the course. Students noted that they overall really enjoyed the 430 experience in relation to having a debrief after the sessions. Students asked if they could have that debrief for the 330 experience as well. It was suggested that students provide a self-reflection on the experiences (330/430), much as they do for Course 1. Students asked if there was a way they could select an experience that included one of the FM PGY3 areas of expertise. Dr. Tink indicated she would be open to discussing this further. Dr. Kelly noted this would be challenging as often they are recruiting preceptors up to a few days prior to the sessions. She noted that there are many family physicians that can provide the breadth of family medicine scope and that part of the course is exposure to core family medicine. Dr. Tink noted the differences in both urban and rural and that both provide their own strengths. She recommended Dr. Tina Nicholson for the Behind-the-Scenes Award, and Ms. Laura Rivera. There will be another recommendation at a later date. Dr. Busche noted a great number of comments like: 'best experience ever' and many comments on the high quality of teaching in this part of the curriculum, which has been repeated year to year. He thanked Dr. Tink for all her work and reports.

**The Family Medicine Clinical Experience 330/430 reports were accepted as circulated.**

**Moved by Dr. Murray Lee. Seconded by Dr. Patrick Lee. Unanimously approved.**

**6.2 Integrative:** Dr. Patrick Lee presented the pre-circulated report. Changes planned for the future will be utilizing the Patients Medical Home Model and Inter-Professional Collaboration (IPC) within a Primary Care Network. There will also be a marked change in the schedule of the course this year with the time being reduced and split into two separate parts – one prior to summer electives and the other prior to clerkship. Nominations for the Behind-the-Scenes Awards are: Drs. Anthony Seto, Amy Tan and Ms. Kelsey O'Donnell. Dr. Lee noted the anticipated challenges related to student attendance being mandatory in these sessions. This could be a challenge given that the second part of the course is just after the winter break. Should a student be graded as 'incomplete', the make-up session with the Course Chair may take place during IST in Course 5 (for the first part of the course) or Course 8/electives (for the second part of the course). Students asked whether they should amalgamate their student representation for ICP and Integrative with one student, instead of two. Dr. Lee suggested it might be better to have it remain as two, as there is much information on both sides of the course, but he recommended that the CMSA could decide. The evaluation process is being discussed with Dr. McLaughlin and this will be worked out. It will also include the entrustable professional activities. Dr. Busche thanked Dr. Lee for his report and hard work on this course.

**The Integrative report was accepted as circulated.**

**Moved by Dr. W. Tink. Seconded by Mr. A. Maini. Unanimously approved.**

### 7. New Business

**7.1 Highlighting Course Changes from Student Feedback:** Dr. Busche noted that he has been involved in accreditation at other medical schools, and is in the midst of the interim accreditation for 2020. He noted that the CSM UME program is doing a lot of things really well, in comparison to other schools. One idea that he has taken away from another school is that students really appreciate when the course chairs provide an introduction to their courses that includes a description of the changes that have occurred, **due to the feedback from students**. Dr. Busche encouraged Course Chairs to provide the actual pertinent changes that have been made in their courses in response to the student's feedback. Mr. Maini indicated this may also provide buy-in for students to do the surveys.

**7.2 Update on Family Medicine on Course Committees:** Dr. Kelly provided a slide of names/faces of Family Medicine representatives on each of the Pre-Clerkship Courses. She noted they will be able to provide support to assist with small groups and/or objectives or anything else within the courses. She noted they are willing workers and passionate. Dr. Kelly thanked Dr. Tink for all her work as Course Chair for Family Medicine Clinical Experiences, and welcomed Dr. Joyce Chu who will be taking over this role while Dr. Tink is on sabbatical. She noted Dr. Anila Ramaliu who is going to continue to work on the prior task force on Disease Prevention and Health Promotion Curriculum; she will lead the work of helping PCC Course Chairs to work on the disease prevention/health promotion component of their course. Dr. Busche requested that she could contact the course chairs, so they are aware of this. Dr. Busche thanked Dr. Kelly in having family physicians being involved in medical education and assisting to integrate.

**7.3 Program coordinator Update:** Ms. Sue-Ann Facchini noted some changes to the portfolios that the UME Program Coordinators are

responsible for, and highlighted the courses that will have new Program Coordinators (for both PreClerkship and Clerkship). Dr. Busche noted that they try to balance the workload for both PCC and Clerkship, and that recognition of when the workload occurs, can also be onerous as an individual program coordinator can be looking after multiple courses/clerkships at the same time. It is a large amount of work to organize this. Ms. Facchini said there will be a period of transition before it becomes to fruition.

Dr. Busche thanked members for their participation.

**Next Meeting: Friday, June 7<sup>th</sup>, with Next Reports due: Medical Skills, Population Health.** Meeting adjourned @ 2:50 p.m.

*Submitted by L. Oakenfold – Edited by Dr. K. Busche*