



# Student Evaluation Committee (SEC) Minutes

---

## Student Evaluation Committee (SEC)

### APPROVED

Tuesday, June 16, 2020

2:00-4:00 PM

Meeting via Zoom

**Attendees:** Drs. Harish Amin, Sara Anderson, Glenda Bendiak, Ms. Fiona Burns, Kevin Busche, Ms. Karen Chadbolt, Melinda Davis, Janeve Desy, Ms. Samin Dolatabadi, Ms. Suzanne George, Adrian Harvey, Ms. Tabitha Hawes, Jolene Haws, Kent Hecker, Carol Hutchison, Teresa Killam, Kevin McLaughlin (Chair), Shannon Leskosky, Ms. Kerri Martin, Chris Naugler, Ms. Laura Palmer, Jacques Rizkallah, Wayne Rosen, Mr. Matthew Sobczak, Ms. Sibyl Tai, Sarah Weeks, Lian Willetts

**Regrets:** Ms. Sue-Ann Facchini, Drs. Deirdre Jenkins, Heather Jamniczky, Michelle Jung, Mr. Arjun Maini, Mr. Mike Paget, Mike Walsh

**Guests:** Drs. Patrick Lee, Rithesh Ram, Teresa Killam

---

### Call to Order

The meeting was conducted through Zoom and was called to order at 2:00 p.m. by Dr. K. McLaughlin (Chair). Welcome to Dr. Patrick Lee and Dr. Rithesh Ram.

1. **Approval of Meeting Agenda (updated) – Approved.**
2. **Approval of Minutes from April 14th, 2020 Meeting – Approved.**

Dr. McLaughlin introduced Drs. Lian Willetts and Sara Anderson have joined SEC as Dr. Heather Jamniczky has taken on another role. He acknowledge the contribution that Heather has made in so many ways and especially to the evaluations and was fantastic working with her.

**SEC Committee (power point):** Dr. McLaughlin presented to the SEC Committee that the Competency Committee had to be formed. This is due to the past few years when Drs. Desy and Harvey have been introducing the assessment EPAs into the curriculum, particularly in Clerkship and that provided the data to assist in helping make graduation decisions. There was a tremendous amount of work in developing the Competency Committee. The committee considered this new definition of readiness for graduation:

To graduate to residency training, there must be a consensus recommendation with respect to individuals with all available data. This is related to the EPAs content which Dr. Harvey will discuss in detail later.

A description of the Competency Committee and how it looks: There is representation from PGME, from Dean's office, from students and also from a member of the public, and we also have a consensus recommendation. We only recommend graduation of a student when there is a consensus among all these stakeholders, there will be a decision. All of the available data was very important to have because the students from Class of 2020 all missed about 4 weeks of in-person clinical experience because of the COVID 19 pandemic. This is a flexible definition that allows us to view what

missing experience they had. The accreditation requirement to ensure they have achieved their core EPAs, will be implemented, as recommended by the AFMC. This is the reason why we will be moving towards this EPA process, in order to graduate our students appropriately.

**3. Standing Items – Other Committees:**

**UMEC** – Dr. Naugler noted there was nothing to report at this time, as the UMEC will meet next week.

**PCC**

1. **Course I breakdown: 15% midpoint/70% final MCQ/15% Blood Path (previously 10/60/10 w 20% peripatetic:** Dr. Weeks – there has been lots of changes for the schedules.

**Motion:** Course I, is an online course, with the anatomy exam being moved out of the numbered courses, they would like to change their breakdown to the evaluation component to being a 15% midterm, online (as other midterms have been online), the final MCQ in person, physically-distanced, will be 70%, and the Blood Path exam will be 15% for that course breakdown. Slight modification with anatomy being taken out. **Moved by Dr. Weeks. Seconded by Dr. Joeline Haws. CARRIED**

2. **Mandatory entrustment/readiness question completion on clinical core ITER:** Dr. Weeks noted that assessment would be accomplished in a more global way around EPAs. One of the way that this can be done in PreClerkship is through Clinical Core. Clinical Core ITERS are normally filled out at the end of that, and part of that ITER is an entrustability question and this would be one way to get some more longitudinal but early data on how people are performing in that clinical environment when they are integrating, synthesizing, knowledge and skill. Dr. Weeks recommended that the Clinical Core be a ‘must complete’ component of those numbered courses. The ITER would still remain formative, but it can be utilized for its data point, but it doesn’t have to be passed. The wording for this ITER will be the same as the wording in the EPAs and some examples will be shown later in the meeting by Drs. Lee and Harvey.

The proposal is that the entrustment question is to be included to manage completion of part of the Clinical Core ITER. **APPROVED.**

3. **Revised Assessment for virtual ICP:** Dr. McLaughlin noted the evaluation was approved previously but there are some modifications as it will be a virtual ICP and it’s a short course, where students learn in groups. The evaluation that was approved previously is that the students had to attend and also had to complete a reflection exercise. Dr. Seto was asking for a slight modification, noting that it is the same assessment but it is a virtual course now. For future discussion – attendance and reflective exercise are not really learning objectives and therefore work will be done on learning objectives, perhaps in incorporating the EPAs.

Proposal is that the previously approved assessment format where the students had to attend and do a reflective exercise would be approved for the virtual ICP during the pandemic. **APPROVED.**

**4. AEBM current and future plan:** Dr. Harvey explained that the assessment of AEBM follows the two portions of the course. In the first portion of the course, follows a couple of quizzes and a CAT is unchanged. The main problem which has led to this proposal has been the inability to place people in clinical electives. Therefore, the AEBM team have completed a great job in coming up with relevant experience for a number of students who couldn't be switched out of their clinical into academic electives at the last minute. These students were put into a 15 hour allotment to be involved as groups for AHS novel COVID virus scientific advisory groups. They've been given assignments to do a literary review, to review new studies and make recommendations after critical appraisal of the literature.

**Clerkship:** Dr. Busche noted the already radical changes to get the Class of 2020 graduated. The current clerks

Proposal is that the sub-portion of the AEBM requires a pandemic-specific approval; to have a group log of this project with a 40% assessment of each individual's contribution that group and the completion of the group log, with the remaining 60% of the mark of assignment assigned to the literature review, critical appraisal and recommendation of edits, for a short-term solution during the pandemic. This is with the agreement and moving towards EPA assessments in the coming years.

**APPROVED.**

(Class of 2021) have just begun. The 'fit for work' rules are different at different sites, with different processes. He noted that at the ACH, UME has to come up with a mechanism for all of the clerks to have their 'fit for work' responses recorded some how, even though that is not the case at any other hospital. UCLIC exams will need to be discussed when Dr. Ram joins the meeting.

**UCLIC MCQs on site and proctored locally:** Dr. Ram, UCLIC Chair, noted that traditionally students could come back to Calgary to do their exams, and for those in Yellowknife, they could do their exams up there. This year is different due to the pandemic therefore other options are being explored with both Yellowknife and Lethbridge. One is to have their exams in the clinic, if they have a separate room there. This is particularly pertinent for the students in Yellowknife, as when the students arrive there, they have to quarantine for two weeks. Dr. Naugler is working with them to have the students as essential workers so they do not have to quarantine. Dr. Busche noted this would be different for the proctoring process, compared to before, and exam security is a concern as well. Dr. Harvey noted that as a short-term pandemic solution, we have to accept a reasonable threat to exam security to make things logically possible and reasonable. Moving forward, the proctoring standard, if they were proctored by their own preceptor, who has a longitudinal relationship with them, is by definition different than what the rest of the students get when they return to main campus or to UME to do their exams. Preceptors may have to proctor students that are not their own students, to remove the conflict-of-interest potential. Dr. Ram has discussed this with the preceptors and they are open to do this. If the student has a question about the exam, preceptors want to know their boundaries and how to answer, if required. Dr. Busche noted that they could call either Kerri Martin or Matthew Sobczak in Calgary (and they contacting the Clerkship contact if required) if the exams are being done simultaneously. Dr. Ram also asked if there could be a separate web cam so that it could be monitored that could be seen from Calgary which would eliminate any security issues.

Dr. McLaughlin noted that this proposal could be approved during the pandemic. A longer term solution may have to be discussed and worked on further in UME with the exam team, due to security issues, as a process would have to be developed if there is a security breach (cheating). This can be brought up at a future meeting. Ms. Martin suggested that the exams be online. Typically a bundle of exams are sent for the full year. Dr. Busche noted the exams would be in a different format, writing in a different place, not on paper, but online. Dr. Busche noted that some students from the Class of 2020 felt that doing exams online, was difficult as it was a different format. Dr. McLaughlin suggested that advising the students when applying to UCLIC, their exams will be online, and therefore they are consenting to this process. Dr. Ram agreed. He noted that this would be specifically for Yellowknife, although he would be open to having

this process at the other sites, given that we are not sure what will happen with the pandemic. Ms. Haws asked if having exams online could be a potential to have this option post COVID. Dr. McLaughlin can be discussed further at subsequent meetings.

**MOTION:** Proposal during the pandemic, for the class of 2021, UCLIC students located in Yellowknife, will write their exams locally, proctored by an individual from the clinic where they are working and that those exams will be written as a paper examination, which will be forwarded from the UME. **Moved by Dr. Ram. Seconded by Ms. T. Haws.**

**CARRIED**

**Student Reports – Mandatory events around exams:** Ms. George, Class of 2022, wanted to discuss what happens 24 hours before and after an exam. Students prepare for exams, but also on other activities, like small groups, etc. She suggested if possible, as a general policy, to not schedule mandatory events within 24 hours of the exams. Dr. Weeks noted that all efforts are always made, when the schedule is being developed to ensure that mandatory events are not in the day before an exam and they try very hard to put evaluations on a Friday morning instead of a Friday afternoon. With two classes, this does not always work. This current fall situation is very unique where medical skills has been tightly scheduled from April, May, June and August, and all of that is moved to September, October, November. The groups have had to be spread out and there are more people in medical skills, more than normal. The result of this is that the flexibility has become very limited. Dr. Weeks said it may not be conducive to have a policy to never be permitted to have mandatory events before exams because the schedules are so complicated. She suggested this could be discussed further at PCC. Dr. Weeks noted that when the schedule is being developed in ‘normal’ times, they try hard not to schedule any mandatory events before exams.

Ms. Haws, Class of 2021, thanked everyone in moving forward to beginning clerkship in the sites. She reported that the class indicated that in regards to exams, with the way the schedule has been moved around, many of the exams are much later and much closer together. Some students will have one exam in December and then many exams around CaRMS. It is recognized that the exam can not be completed without completion of the full rotation. However students have asked if they could complete exams at the halfway point in their completion, for example, Family Medicine, with 4 weeks now, and 2 weeks later, if they could complete their exam after the 4 weeks, as opposed to after the 2 weeks later. Dr. McLaughlin indicated that this would have to be discussed further with the Clerkship Committee and also with Sibyl, to see what the logistics would be. He noted that this can be discussed further at the next SEC meeting or have a vote in between that time. Dr. Busche suggested to look at deferrals as opposed to changing that policy and thereby affecting clerkships in the future that don’t need that change. The default for a request from students in the form of an exam deferral. This will be communicated to the class.

**Academic Technologies:** Discussed in the exam security concerns that Dr. Harvey will discuss.

**Evaluation Team – Deferral of exam scrambling:** Ms. Martin noted that prior to COVID, they had started an exam scramble which worked well for the Course III exam. Going forward for Preclerkship, the exam scramble will be shelved, as the students will be well spaced in the Theatres, trying to maintain 2 meter distance, trying to have alternate exams in there too, therefore there will be only a single exam for PreClerkship now.

**Motion:** Proposal is that we abandon exam scrambling during the pandemic conditions. **Moved by Ms. K. Martin. Seconded by Dr. S. Weeks.**

**CARRIED.**

**EPAs during clerkship:** Dr. Harvey noted that competency based medicine is an outcomes based form of education and therefore, it shows what our students should look like when they have completed their UME. They should have achieved the AFMC EPAs. All of the students that graduate should have at least this skill set (as distributed on the slides). He noted that specific challenges arises from the interruption of clinical rotations (COVID-19), and long-term, move towards competency based style of evaluation. He noted that when there is less in-person evaluation time, organization of the assessment needs to be developed so that students can graduate as safe, competent residents. This is being accomplished by many hours input by clerkship directors and others, and he suggested that we maximize the existing framework/infrastructure in the short-term plans as well as minimize the work for clerkships (already strained by COVID-19). Dr. Harvey noted Ms. Fachhini's question has to do with the preceptors – how are the preceptors going to manage the difference in judgement as to what is acceptable, what is above average, etc. Entrustability scale [O-SCORE] (as noted in the distributed slide), as they use simple language that mean roughly the same thing to everybody. It describes a level of performance that the student has, rather than asking them to compare where they should be. This five level score was developed by competency by residents of mine. PreClerkship usually would utilize the level 1 and 2. Dr. Harvey noted the next slide of an ITER, that shows added EPAs to the clerkship with minimal work. It has been taken from a 5 point scale, to a 2 point scale centred around that red line. It's a simplified form that is being suggested. Dr. Harvey thanked Mike Paget for developing this. How to implement – this should be largely student initiated. Students send out one request/week, maximum 3/week. Daily anes forms, for example, this type of tool could be added to these forms to further reduce the work that is required. Advantages: For clerks – more data points for assessment, more specific feedback, more resident feedback. For clerkships – needs assessment for learners, mid-point feedback. For UME – increased quantity and quality of data, learner curve across the clerkship, curricular needs assessment.

Dr. McLaughlin suggested that it be a 'stand-alone' form. Dr. Harvey noted that they are looking at this to provide additional data and this is contingent upon the Competency Based Committee which will need to be approved at UMEC. This is for the purposes of learning and not summative. They can show growth curves, with the advantage that the students will get feedback throughout as opposed to only at the end. The hope is that this type of feedback will improve their performance during their rotations. Other tools will be used as well in the Competency Based Committee.

It was suggested that the EPA be discussed with the student. Dr. Rosen – will there be milestones or further? Dr. Harvey – long term plan is to have a binary decision on one of the 12 EPAs in order to make this simply as possible. The platform will be this simple format when one receives an email.

Dr. Hecker noted that in the vet school, regarding the EPAS, the quality of written feedback has increased, in terms of what they need to be improved on, the specificity associated with that. That will actually be coming out in a publication shortly as well as relationship between those scores in order to show some strengths and challenges that are going to be there. Dr. Hecker noted he is generally in favour of these components but is wary of the potential measurement concerns that could arise from a dichotomous scale as well as the idea of making it mandatory. This sounds like this is moving towards more programmatic assessments. The assessment are meant to be low stakes but can be used in conjunction with all the other measurements in more of a summative decision within these curriculum or competency committees that you are developing.

Dr. McLaughlin noted that one can use the dichotomous scale if required. This allows the Competency Based Committee to review all of the data and it is all contributing to ultimately a summative decision, however, an EPA wouldn't stand alone to make a graduation decision.

Ms. T. Haws liked this suggestion, however, suggested not making it mandatory, as it this has been brought forward in the middle of clerkship. She suggested to communicate how this will affect MSPR. Dr. McLaughlin indicated that they have to have some data collection in order to prove that they are using competency based tools. This tool will permit

them to add enough data to be able to graduate a student. Dr. Harvey indicated this would not be mandatory in clerkship. This is extra data that the Competency Based Committee would need to promote a student. Dr. McLaughlin indicated that this is initiated by the student so that the student has the option of having the EPA assessed.

This will be discussed as well at the Clerkship.

Proposal – approve the collection of EPA data using the proposed forms and methods in principle leading to:

- a) Assistant Dean (Dr. K. Busche) to seek support for implementation within the clerkships (non-mandatory in the short-term).
- b) Option to leverage existing evaluations (added EPA components) as per the wishes of each clerkship.

To be discussed further.

#### **4. Old Business/Updates:**

##### **4.1 Fixed Hofstee margins or clerkship exams (sensitivity analysis):** Deferred

##### **5. Reports – n/a**

##### **6. New Business**

##### **6.1 Update on Onsite Exams – Exam Security Initiatives –** Deferred

##### **6.2 Integrative Course Proposal Moving to Competency Based Evaluation Scale for Summative Evaluations:**

Dr. Lee asked the Committee to make a change for the Integrative Course which is divided into Part I and Part II, to change the overall assessment from an EPA scale from 1 to 3. Part I is one week just before you go into preclerkship elective and Part II will be, before students go into clerkship rotation. Overall integrative is a two week course, and class is divided into groups of 5 to approach 4 cases. He showed slides as noted. Course purpose is as noted on the slides. Evaluation Criteria is formative and summative. Current online one45 evaluation has 8 sets of individuals ITERS and an overall assessment.

Proposed keeping the 8 sets of ITERS and change the overall assessment to EPA level 1 – 3 scale. Due to the pandemic, all the teaching will be online via zoom, and Dr. Lee provided an example of the sessions on the slide. Each of the scenarios will be different and it will be discussed with the preceptors (privately). There will be a group discussion later, and then they have a follow-up discussion with the SP. This will integrate courses 1 to 5. Proposed changes were shown on the slide EPA Level 1, Level 2, Level 3. Dr. Weeks commended Dr. Lee on this proposal and integration of these courses. An orientation will also be provided before the course.

**Motion:** Dr. Lee’s Proposal – for future iterations of the Integrative Course, a 3 point 0 scale will be used to rate the overall assessment of student performance. **Moved by Dr. K. McLaughlin. Seconded by Dr. P. Lee** **CARRIED**

Dr. Lee will discuss this further to implement it into One45 with Mike Paget.

##### **6.3 Exam Security –** Deferred

**6.4 Evaluation Implications for Class of 2021:** Dr. Harvey showed a slide of the Evaluation Implications. During this time, COVID 19 interrupted, for 13/14 weeks. The Clerkship Committee has done much work to accomplish this. There is 12 weeks to make up, and clerkship has been extended 4 more weeks. This will allow on time graduation, electives preserved. Given reduction work based assessment, how to graduate students to be safe for the next stage of training. Core clerkship weeks – 82% to observe clerks. The possibility of we apply last year’s competency committee guidelines, we may not be able to graduate students. There are no academic 1/w days online. Proposed increased data through collection of EPAs. We have to reconvene the Competency Committee at the approval and discretion of UMEC.

**6.5 Budget - Deferred**

Dr. McLaughlin indicated that this could be resolved at the next SEC meeting. It’s not a perfect tool, but there are some issues related to the Class of 2021, to ensure that these students are ready for graduation. Dr. Busche will have less time being observed but will still generate same amount of data for assessments.

Dr. McLaughlin thanked members for their input. **Meeting adjourned @ 4:00 p.m.**

**Minutes by: Lily Oakenfold**

**Edited by Dr. K. McLaughlin**