Student Evaluation Committee (SEC) Minutes

Call to Order
The meeting was conducted via Zoom and was called to order at 2:00 p.m. by Dr. J. Desy.

1. Approval of Meeting Agenda – The March 7, 2022 Agenda was approved.
   Motion: Dr. G. Bendiak   Seconded: Dr. S. Weeks
   All in Favor - Motion Approved

2. Approval of Minutes from September 27, 2021 SEC Meeting
   Motion: Mr. M. Paget   Seconded: Dr. K. Hecker
   All in Favor - Motion Approved

3. Standing Items
3.1 Committee Updates
   PCC: Dr. Weeks reported that the Class of 2024 (the Bilbies) is currently going through several assessments. This class is getting close to the end of year 1, which involves Course III, AEBM, Anatomy exams as well as Medical Skills. Dr. Weeks commented that PCC has no big updates to report, other than the excitement around the upcoming changes with RIME. The Class of 2023 (the Echidnas) has just moved into Clerkship. Dr. Weeks commented that thanks to Ms. M. Krbavac, our immunization specialist, a COVID-19 presentation/Q&A (webinar) from the Office of Public Health has been made available for our students.

   Clerkship: Dr. Busche was unable to attend today's SEC meeting. Dr. Desy reported that the incoming Clerks (Class of 2023) have been very busy with Interprofessional Education and Clerkship Electives. The final year Clerks (Class of 2022) are just wrapping up their Clerkship and are now in the midst of the CaRMS process (interviews). They will be having their Clerkship OSCE on March 22nd and 23rd. Dr. J. Haws has been very busy preparing the cases for the OSCE. As well, the examiners are now in place for the upcoming OSCE.

   UMEC: Dr. Naugler reported that UMEC has no additional updates to add.
3.2 Reports

Student Reports:

Class of 2022: Student representatives from the Class of 2022 were unable to attend today’s SEC meeting.

Class of 2023: Student representatives from the Class of 2023 were unable to attend today’s SEC meeting.

Class of 2024: Ms. K. Fu reported that the class is currently pushing through several exams before they take part in Career Exploration Week followed by their Spring Break.

Academic Technologies – Mr. M. Paget gave a presentation titled “Elective Early Warning” (attached). Mr. Paget and Dr. Desy reviewed the elective performance data to see if there is a difference between elective performance this year compared to previous years (data pulled back to the Class of 2018) from the January and February months. Mr. Paget reported that the average overall ITERS scores indicates that, for the most part, everything has been “in line”. As well, Mr. Paget reported that they examined how many electives ITERS were below satisfactory as well as some of the Early Elective Sub-Item Performance Data. Mr. Paget also discussed the Percentage of Early Electives with Unsatisfactory Sub-Items commenting that for the class of 2022, there were 13 Elective ITERS with sub-items below satisfactory (includes the two failures). He suggested it may be something that we should keep an eye on as this may be an early indicator of collective performance also adding that it was difficult for students to book electives and this may have had an influence on performance.

Mr. Paget also reported that Academic Technologies have been facing a general challenge with UCIT hosting seeing some slow downs with our databases. The applications are getting slightly longer times. Our Academic Technologies team is working with the UCIT team to rectify this.

Evaluation Team: Ms. Martin and Mr. Sobczak were unable to attend today’s SEC meeting.

4. Old Business/Updates

None

5. New Business:

IPE (Interprofessional Education) Reflective Assignment (Dr. J. Desy for Dr. K. Busch) – Dr. Desy explained, on behalf of Dr. Busche, that IPE is a new course that has been introduced into the Clerkship Curriculum whereas the students are spending time with other healthcare professionals outside of the MD realm. The IPE course leads were looking for a way to assess the students. The difficulties that the course leads were running into, is that not all of the supervisors and preceptors for this course are faculty appointments and so as per our accreditation rules we cannot have non-faculty members formally assessing our students. The course leaders have requested to assess the students by asking the students to complete a reflective assignment. Dr. Desy presented the IPE Reflective Assessment to SEC members (attached). She explained that it is not a graded assignment but is a must-complete component of the course. Dr. Desy noted that a member of the IPE course will review all of the assignments and if there are any red flags, or issues, those will be dealt with through a direct conversation with the student.

Motion: Moved: Dr. S. Weeks, Seconded: Dr. S. Anderson
The IPE (Interprofessional Education) course leaders would like to propose that an IPE Reflective Assignment be a mandatory component of the IPE course.

Carried
Post-Exam Student Feedback & Assessment of Professionalism (Dr. A. Harvey)

Dr. Harvey presented a power point presentation titled “Post-Exam Student Feedback & Assessment of Professionalism” explaining that there are several sources of feedback regarding exams for both Pre-Clerkship and Clerkship. Dr. Harvey explained, however, that there is a challenge of low response rates from students therefore it is difficult to get an idea of what the overall perceived fairness of an assessment is. Dr. Harvey explained that exams are considered events, much like small groups, lectures and labs. Event feedback is assessed in Pre-Clerkship through student surveys (released by the UME) and is assigned to the appropriate director of a Course. Clerkship is similar, as the exams, again, are considered an event and the feedback is sent to the appropriate Clerkship Director. Dr. Harvey noted that this is not ideal to assign the likability of an exam to a specific preceptor’s portfolio. Another source of feedback is at the time of the exam, students are able to write feedback on questions (ex. if student felt the exam question was unfair, not appropriate, not taught, etc.). The final source of Clerkship exam feedback is student surveys (the evaluation rep will send out a survey to the students, collect, summarize and collate the data and forward to the UME). A possible drawback is that the raw data is housed outside of the UME therefore we have limited access possibly limiting the actionability. As well, it is questionable whether it is utilizing the evaluation reps’ time in an optimal manner.

Dr. Harvey then proposed some discussion points such as, is there a way we should simplify/organize this process deciding which of the data is most useful and would this possibly increase the response rates. With regard to the Clerkship Student Post-Exam Surveys that are housed outside of the UME (by the evaluation reps), the question of where the data is being stored and is it in a secure manner. On the other hand, Dr. Harvey commented that the Clerkship student surveys being fed through the Evaluation Reps, then passed on to the UME may provide a greater perception of anonymity and students may be more willing to provide honest feedback. Discussion ensued amongst SEC members. Dr. Desy commented that we will continue the conversations with all of the student leaders and then hopefully come up with a process that makes sense for everyone and hopefully make it a little bit easier and cleaner than having so many data sources.

Professionalism Evaluation (Dr. A. Harvey)

Dr. Harvey informed the SEC Committee that he and Dr. Desy recently met with the Community Engagement Learning (CEL) Group and there was a discussion regarding a way to evaluate professionalism (ex. respectful behaviours, openness to other viewpoints, learning about other ways of knowing, etc.) in learning activities. Dr. Harvey suggested the need for evaluations to identify concerns, as well an evaluation to establish types of non-traditional skills (ex. professionalism, empathy, etc.) as more concrete goals of medical training. The CEL Group brought up the idea of peer evaluation and the rationale behind that. Dr. Harvey stated that many times when instances of concern around professionalism arise, they do not arise clearly in front of the preceptor. When professionalism issues are fed back, it’s usually “someone repeating something that happened in their group”; therefore, it is difficult to get an exact idea on how to act on that type of feedback. The CEL group brought up the idea of peer evaluation of professionalism. Dr. Harvey brought forward discussion points for the committee in terms of the best ways to evaluate professionalism in the context of learning activities (ex. small groups, workshops, panels with members of the community, etc.). Dr. Harvey also brought up the discussion that when there are instances of more significant problems, this is not necessarily an evaluation issue but a process outside of evaluation. Dr. Harvey explained that there is a mistreatment process in place for students. This process is for when medical students feel they have been mistreated by a preceptor or other allied health professional in the clinical environment. Dr. Harvey reported that a peer evaluation process (with respect to candidates’ roles, and many of those touched upon professionalism) has been tried before from 2014 to 2017 and discussed the problems with the process at that time. Dr. Hutchinson commented that students may be directed to FAM (Faculty Advocates Against Mistreatment) if there is a student mistreatment concern. Dr. Desy reviewed a slide titled “Professionalism” which was created by the Deans across Canada explaining that this framework is for dealing with professionalism concerns. Dr. Desy suggested that as we move into RIME there needs
to be a conversation to continue to think of how we could collect this data, what we could do with it, where we would document it and how do we help students do better in this domain if they are struggling.

SUCCESS Update (Dr. J. Desy)

Dr. Desy reported that they have officially hired four additional SUCCESS mentors who will bring a variety of life experience and skills and will be excellent to help our students going forward. The new mentors are: Drs. Jolene Haws (GIM), Titi Oluyomi-Obi (Maternal Fetal Medicine), Marie Jeanne L. Walsh (Family Medicine) and Kevin McLaughlin (Nephro, QI Focus).

RIME Update (Dr. J. Desy)

Dr. Desy explained that the assessment piece of RIME is not in development yet, as it is taking a “backseat” waiting for the core structure and seeing how things will be delivered first. Dr. Desy reviewed the current curriculum map as well as a very basic description of a new curriculum map. She explained that the new Pre-clerkship curriculum will be broken into three six-month blocks and gave a brief description of each block. Dr. Desy noted that there are less courses with the new curriculum and suggested that we start thinking about where we want to place the assessments, how we determine pass/fail, and how we determine the progression of our students. As well, Dr. Desy explained that the most immediate thing that we need to think about is that the university calendar that is being created for the new RIME year. The required items for the calendar are what competencies are needed to pass each of the units and what are the consequences if you fail one of those units; therefore, those are the pieces that the assessment committee will be working on shortly. Dr. Desy explained that one of the goals is to see more frequent lower-stakes exams delivered through the card system. As well, Dr. Desy questioned whether we should personalize each student summative exam and base that personalization on their performance on previous assessments that they have done up until that point. Dr. Desy also discussed the next steps such as how do we assess some of the other domains that we haven’t been historically assessing (ex. professionalism). She also noted that three block lead positions have recently been posted and the next step will be to hire three eval leads. Dr. Desy reported that the Assessment Committee is going to define the competencies needed for each of the 12 units as well as what the consequences are of failing. Dr. Desy commented that she is very open to feedback and suggestions and welcomed members to email her anytime.

Clerkship Midpoint Feedback (Dr. Desy on behalf of Dr. Busche)

Dr. Desy explained that when it comes to all of the clerkship rotations, students should receive some sort of feedback at the midpoint of the rotation, preferably in person (verbal) followed by a documented written format. Dr. Desy explained that the importance of the feedback is for a student’s growth so they can identify areas to continue to improve on as the rotation progresses, but it is also very important when a student is deemed unsatisfactory on a rotation. Noting that if a student doesn’t know that they are at risk of failing a rotation until the very end of their rotation that it’s not fair, or valid, and a student can appeal the failed ITER if they did not receive midpoint feedback. Dr. Desy noted that with regard to the Surgery Clerkship, the Clerkship Director has been emailing students at midpoint to give feedback. In addition to the written midpoint feedback email, Clerkship is hoping to add a statement in the student Clerkship logbook that asks if the student has requested midpoint feedback. Dr. Busche wanted to ask the SEC Committee members if they thought that it was a reasonable thing to add to the student logbook that “the student requested midpoint feedback”. If any members have other thoughts or ideas regarding this, please reach out to Dr. K. Busche.

6. Next SEC Meeting – May 30 @ 2:00 to 4:00 p.m. Zoom link pending.