

## **FINAL ASSESSMENT REPORT**

### **Institutional Quality Assurance Program (IQAP) Review**

#### **Undergraduate Medical Education (UGME) PROGRAM**

**Date of Review: April 1 – 2, 2019**

*In accordance with the University Institutional Quality Assurance Process (IQAP), this final assessment report provides a synthesis of the external evaluation and the internal response and assessments of the undergraduate program delivered by the UGME program. This report identifies the significant strengths of the program, together with opportunities for program improvement and enhancement, and it sets out and prioritizes the recommendations that have been selected for implementation.*

*The report includes an Implementation Plan that identifies who will be responsible for approving the recommendations set out in the Final Assessment Report; who will be responsible for providing any resources entailed by those recommendations; any changes in organization, policy or governance that will be necessary to meet the recommendations and who will be responsible for acting on those recommendations; and timelines for acting on and monitoring the implementation of those recommendations.*

#### **Executive Summary of the Review**

In accordance with the Institutional Quality Assurance Process (IQAP), the Michael G. DeGroote School of Medicine submitted a self-study in March 2019 to the Vice-Provost (Faculty)<sup>1</sup> to initiate the cyclical program review of the Undergraduate Medical Education (UGME) program. The approved self-study presented program descriptions, learning outcomes, and analyses of data provided by the Office of Institutional Research and Analysis.

Two arm's length external reviewers and one internal reviewer were endorsed by the Executive Vice Dean, Faculty of Health Sciences and selected by the Vice-Provost (Faculty). The review team reviewed the self-study documentation and then conducted a site visit to McMaster University on April 1 – 2, 2019. The visit included interviews with the Provost and Vice-President (Academic), Vice-Provost Faculty, Executive Vice Dean and Vice President Academic, Faculty of Health Sciences, Vice-Provost and Dean of Graduate Studies, Vice Dean, Health Professional Education, and Associate Dean of the program and meetings with groups of current students, full-time faculty and support staff.

The Executive Vice-Dean and Associate Vice-President, Academic of the Faculty of Health Sciences submitted responses to the Reviewers' Report (May 2019). Specific recommendations were discussed, and clarifications and corrections were presented. Follow-up actions and timelines were included.

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<sup>1</sup> The title of this role is now referred to as Vice-Provost, Teaching and Learning.

The Michael G. DeGroote School of Medicine at McMaster has a high quality UGME Program. When the program was first developed the innovations that were considered radical at the time have become mainstream in medical schools around the world. This is a double-edged sword as the adoption of the educational strategies indicates the esteem in which the school is held but it also means that the current curriculum is similar to many of the others in the country and the world and therefore no longer innovative.

The greatest strength of the program is the people that work within UGME. This starts with the students who are selected through a validated and rigorous process to ensure that the best candidates are selected. The students are clearly invested in their own education but are just as interested in ensuring that future classes receive even better training. The leadership of UGME is of high quality and committed to the students under their charge. This has included the challenging but successful expansion onto two regional campuses.

The UGME program is embarking on the implementation of a major curriculum overhaul commencing August 2019. Processes are in place to make this transition and to evaluate the new curriculum as it rolls out (allowing for mid-course correction if necessary). It is extremely important that this initiative has support and acknowledgement within the University.

### **Strengths**

- There is an admissions process that is rigorous and is being studied in a systematic way to lead the way for the future.
- There is a high-quality Health Library that is accessible throughout the three campuses.
- A UGME team across three campuses that is committed to improving the learning experience of students across all three campuses.

### **Areas for Enhancement or Improvement**

- The most important area for enhancement has been planned for and is about to launch with the implementation of a new UGME curriculum for the inception class beginning in August 2019. This is a major undertaking and should be the focus of resources for the UGME leadership, particularly over the next 3 years.

### Summary of the Reviewers' Recommendations with the Program's and Dean's Responses

Recommendation	Responsibility for Leading Follow-Up	Timeline
<b>1. Engage in discussions between University administration and UGME leadership on how to prioritize internationalization.</b>	<b>Associate Dean, UGME &amp; Chair Admissions</b>	<b>Winter 2021</b>
<p><b>Proposed Follow-Up</b></p> <p>Discussions with the Dean and Vice-Dean, Health Professions Education, and with the Bachelor of Health Sciences Program (Honours) are ongoing regarding establishing relationships with target countries. Currently a relationship with Kuwait is under consideration. This will need to be followed by considerations around appropriate operationalization of such an arrangement through our Admissions and Program Executive Committees, as well as evaluation of these initiatives in terms of student success and impact on program. Funding arrangements around international student fees will also need to be considered to ensure that additional international students are appropriately resourced.</p>		
<b>2. Explore opportunities to collaborate with existing 'pipeline' programs at other medical schools to increase engagement with Black and lower-income based future potential applicants.</b>	<b>Associate Dean UGME; Admissions Chair; Chair Equity &amp; Inclusion</b>	<b>Fall 2020</b>
<p><b>Proposed Follow-Up</b></p> <p>Work is already underway to examine the addition of a Black student admissions stream built on the same principles as the Facilitated Indigenous Admissions Program (FIAP). The UGME Program has been working with a graduate student focused on developing the rationale for such a stream. Given the long-time horizon for medical school admissions, this process needs a roughly two-year time horizon before it can be implemented (approval during the year ahead of implementation and then the implementation year). Other appropriate, mission- oriented facilitated admissions streams or other admissions processes will be considered by the program and admissions committee based on the evolving equity-based mission of the UGME Program.</p> <p>The Chair, Equity &amp; Inclusion and the Admissions Office already support somewhat formalized interactions with the University of Toronto's Temerty Faculty of Medicine's Community of Support which is a robust and administratively integrated program that engages with communities of under-represented learners. McMaster already provides information sessions to any interested applicant in the Community of Support. These connections are likely to increase with ongoing work at the Ontario Medical School Application System (OMSAS) and Council of Ontario Faculties of Medicine (COFM) in collaboration with the Black Physicians' Association of Ontario. As the vast majority of our applicants come from the Greater Toronto-Hamilton Area, working directly with the University of Toronto's programs will generate the greatest yield for both programs and best serve our applicant constituents.</p>		

<b>3. Engage faculty and programmatic support for the Community of Support initiative</b>	<b>Admissions Chair; Chair Equity &amp; Inclusion</b>	<b>Fall 2021</b>
<p><b>Proposed Follow-Up</b></p> <p>The medical program has contributed resources to this programming in the form of contributions from the Associate Dean's fund for information events and administrative support from the Admissions Office. The Chair of Equity &amp; Inclusion will continue strengthening connections with the Community of Support. We will continue to explore increased formalization of this support. As indicated above, other work occurring provincially with OMSAS, COFM, and BPAO is also likely to lead to more formalized connections across the province.</p>		
<b>4. Consider the integration of the diversity vision with the MD/PhD application and admissions process.</b>	<b>Associate Dean UGME; Vice-Dean Graduate; MD/ PhD Director</b>	<b>Ongoing</b>
<p><b>Proposed Follow-Up</b></p> <p>Discussions in the Graduate School are already exploring how facilitated admissions processes should be introduced into graduate admissions. The MD/PhD Program only admits three applicants each year and the applicant pool is very small. This makes it particularly challenging to develop facilitated admissions processes for this program that will ultimately lead to high levels of success for both candidates and programs. It will be important to align the goals of the MD/PhD program with those of both the MD Program and the relevant PhD Programs.</p>		
<b>5. Ensure measurements of impact and outcomes of the renewed curriculum are supported with appropriate resources</b>	<b>Associate Dean UGME; Chair Preclerkship; Chair Program Quality; PESA</b>	<b>Ongoing</b>
<p><b>Proposed Follow-Up</b></p> <p>The most important measurement of the impact of the renewed curriculum is the quality of care provided by learners in practice; however, there will be multiple near-term measures of the effectiveness of the renewed curriculum – most of these are built into the existing program evaluation structure (such as learner and faculty feedback; student performance on progress and other programmatic testing (particularly as compared to prior cohorts); learner graduation and match rates; and then eventually learner performance on national examinations of knowledge and skills. Some of these measures are already being analyzed while others will need to wait several years until we have enough completed cohorts to measure national examination impacts.</p> <p>The MD Program has structures in place to facilitate these analyses, including the Program Evaluation and Student Assessment (PESA) Committee which is chaired by the Chair of Program Quality who will be responsible for looking at a number of these measures. The MD Program also resources a 0.5 FTE research assistant who is responsible for supporting the PESA and Program in required analyses.</p>		

<p><b>6. Consider increased opportunities for the end of unit MF directors to communicate with the curriculum committee, to share and coordinate the results of the MF annual reviews.</b></p>	<p><b>Associate Dean, UGME; Chair, Preclerkship</b></p>	<p><b>Sept 2021</b></p>
<p><b>Proposed Follow-Up</b>  New systems for program review were put in place just prior to this review including a 3-year cyclical review process that incorporates student feedback. The process includes direct reporting by the leader responsible for the curriculum component (e.g. the MF Director in the case of Medical Foundations). The first full cycle was completed leading into the review.  This process of 3-year cyclical review, including the content and areas of review, will be evaluated as we head into the second cycle. We will consider the frequency and method of reporting to the Curriculum Committee, including the possibility of reporting through the Pre-Clerkship Committee rather than directly to the Curriculum Committee.</p>		
<p><b>7. Ongoing attention to tutor and student advisor training will be needed, especially with the roll out of the new curriculum. Faculty development has been embedded into the new curriculum, but ongoing monitoring of the quality/consistency of teachers/faculty will be critical.</b></p>	<p><b>Preclerkship Chair; Student Advising Director</b></p>	<p><b>Ongoing</b></p>
<p><b>Proposed Follow-Up</b>  Most certainly with the roll out of the new curriculum, it will be important to ensure that faculty are adequately informed and supported around curriculum change processes. Various approaches are being used to engage or update faculty of these changes, including information sessions, newsletters, and more structured support within Tutor Guides within the problem-based learning curriculum.   The ongoing training and evaluation of tutors and advisors is overseen, respectively, by the Chair of Preclerkship and the Director of Student Advising. Tutor evaluation by students is embedded into program evaluation structures (i.e. through MedSIS) and student performance on Foundation-based testing (e.g. Concept Application Exercises) is monitored by Foundation Directors.</p>		
<p><b>8. Ensure that processes to identify students in difficulty earlier have been developed and that the impact of these changes is reviewed over time.</b></p>	<p><b>Associate Dean UGME; Chair Student Assessment; Chair Student Affairs; Chair Student Progress; Director Student Advising</b></p>	<p><b>December 2021</b></p>

**Proposed Follow-Up**

The MD Program is rolling out a renewed curriculum, but also a new program to support student self-reflection and progress: Program for Guided Reflection and Early Student Support (PROGRESS). This program will be supported by seven new Learning Directors who will work closely with Student Advisors to ensure that both students and their Advisors are attending to ongoing measures of student performance, including in-course (i.e. Concept Exercises) and programmatic (e.g. PPI, OSCE) assessments. The program will include reflective components for students to complete and Advisors to review. Learning Directors will support these processes. It is hoped that this will support learners in seeking out supports at an earlier point of difficulty.

Also, the Progress Committee has undertaken more stringent review of performance on Clerkship Examinations. Students who are significantly underperforming on Clerkship examinations compared to prior cohort peer groups will be reviewed by the Progress Committee to determine if more fulsome review is required. This may lead to remediation activities if the review demonstrates an ongoing pattern of difficulty.

**9. A renewal of the Central University Code of Conduct on Disciplinary Action should be a priority.**

**Executive Vice-Dean; Vice-Dean, Faculty Affairs**

**N/A**

**Proposed Follow-Up**

There is currently no review planned of the Central University Code of Conduct for faculty. As a result, the Faculty of Health Sciences has developed Guidelines to help interpret the current Code; and the School of Medicine is developing Guidelines around the use of learner feedback from UGME and PGME in addressing exceptional, under-performing, and problematic faculty.

**10. The financial situation of the Faculty of Health Sciences as it relates to the UGME program requires discussion and planning.**

**Vice-Dean Health Professions Education; Associate Dean UGME**

**Ongoing**

**Proposed Follow-Up**

We will continue to monitor our ability to deliver programming in light of fiscal challenges. The program has increased leadership stipends from \$20k/d/a to \$40k/d/a. The program has also introduced several key new roles, including a Chair of Diversity & Engagement, now Equity & Inclusion, and Directors of Service Learning and Career Development. It is notable, however, that the program continues to operate with fairly meagre resources and has relatively little “wiggle room” for large, innovative projects.

**11. The strategy for the maintenance and enhancement of the bursary program for medical students requires ongoing planning and implementation.**

**Associate Dean UGME; Education Services; Advancement**

**Ongoing**

**Proposed Follow-Up**

Ongoing reductions in central university support of the MD Program Student Access Guarantee since 2007 place ever-increasing pressures on the Program's student bursary process. In order to meet SAG requirements, endowments have been converted into bursary funds (unendowed). A new formula for calculating central university support of SAG is anticipated to further reduce university support of MD Program bursaries.

Several modest campaigns to increase philanthropic support of MD student bursaries have produced quite meagre results. Current funds are expected to run out shortly, at which point the MD Program will meet only its minimal requirements with respect to SAG via operating deficits.

**12. The UGME Program should continue to elicit student feedback and develop a systematic process for consistent review of the data that develops recommendations, possibly through the Program Evaluation Committee.**

**Associate Dean  
UGME; Chair  
Program Quality**

**September  
2021**

**Proposed Follow-Up**

New systems for program review are described in the response to recommendation #6. As this is a new system that has just completed its first cycle, it is an appropriate time to review the effectiveness of this process.

**13. Develop processes to improve the relationship and communication between the Dean and Vice Dean with the administrative structure of UGME.**

**Vice-Dean Health  
Professions  
Education;  
Associate Dean  
UGME**

**N/A**

**Proposed Follow-Up**

While we do understand the nature of this recommendation, the Associate Dean does have many avenues to interact with the Dean of the Faculty and to have impact on relevant decision-making.

Most notably, the Associate Dean is a member of the School of Medicine Council of which the Dean is the Chair. Any items relevant to the UGME Program, including fiscal concerns, may be brought to this Council for discussion. Many policy issues pertaining to the School of Medicine are discussed at the Council. Decanal roles in postgraduate medicine, physician assistant, and midwifery programs are also members of the Council, as are all of the chairs of the School of Medicine departments.

The Associate Dean has regularly scheduled meetings with the Vice-Dean, Health Professions Education at which most of the recommendations within this review could be discussed and strategies developed (perhaps other than formulating strategies around central university processes). The Vice-Dean can facilitate further discussions with the Dean or other Vice-Deans. The Vice-Dean has facilitated discussions with both the Dean, and also with the Dean/Vice-Dean (DVD) Committee which is chaired by the Dean and includes all of the Faculty's Vice-Deans.

<b>14. Increasing the time allotment for the Chair of Student Affairs should be considered.</b>	<b>Associate Dean UGME</b>	<b>September 2020</b>
<b>Proposed Follow-Up</b> The Chair of Student Affairs works closely with a large team of Student Affairs Directors and Counsellors, who all provide direct support to MD Program students. The role of the Chair is to provide vision and oversight to the Student Affairs Office and programming. Nonetheless, the complexity of the operations described in the IQAP review warrants assessment of the adequacy of the time of the Chair of Student Affairs and this role will be reassessed with the expectation of a modest increase in time commitment.		
<b>15. Establish ongoing monitoring of the quality/consistency of the Student Advisors' activities.</b>	<b>Chair Program Quality; Chair Student Affairs; Director Student Advising</b>	<b>September 2021</b>
<b>Proposed Follow-Up</b> It is expected that the Program for Guided Reflection and Early Student Support (PROGRESS) described in detail in the response to recommendation #8 in which Learning Directors will work directly with Student Advisors will help improve the quality of Student Advising.		

#### **Dean's Response, Faculty of Health Sciences:**

We were grateful to receive the Reviewers' Report of the Undergraduate Medical Education (UGME) program. We wish to extend our thanks to the external reviewers, Dr. John Drover of Queen's University and Dr. Leslie Nickell of the University of Toronto; and to our internal reviewer, Ms. Kristen Burrows. Their review of our undergraduate medical program was collegial, thorough, and thoughtful; and their insights were both affirming and supportive in the further evolution of the UGME program. We acknowledge the significant delays in completing the IQAP process for this program and we hope that these submissions will bring the process back on track.

We have reviewed the report carefully alongside the Program's responses to the recommendations raised by the reviewers. We thank the reviewers for acknowledging the program's many strengths, including the UGME team, our rigorous admissions process, our distributed medical campuses, and our high-quality health library system across the three medical campuses.

We feel that that program has earnestly reviewed the recommendations and provided reasonable plans to move forward with these. More specifically, we acknowledge the program's several types of responses that include full support of the reviewers' recommendations with targets for completion; and descriptions of work that is already occurring within the program that addresses recommendations and



is usually “ongoing” in nature. Some recommendations were also felt to be unnecessary by the program and others are well beyond the program’s purview. We will address these below along with the others.

The UGME program expressed strong agreement with the reviewers and provided specific plans for recommendations related to advancing internationalization, review of the Student Affairs Chair time allotment, review of a number of suggested reporting opportunities, and improved monitoring of Student Advisors’ quality.

The UGME Program also pointed to several places where they are already doing work in recommended areas or agreed that ongoing reflection and review was needed, including, bringing equity pathways to the MD/PhD program, enriching pipeline programming, ensuring measurement of the effectiveness of the renewed curriculum and preparation of tutors and advisors for anticipated changes, developing earlier detection opportunities for students having difficulty, and collection and monitoring of student feedback.

The UGME program did provide feedback regarding access of the Associate Dean, UGME to the Dean of the Faculty. There are currently many pathways to ensure that opportunities exist for the Dean to understand issues of concern to both the UGME Program and the Associate Dean; and for the Associate Dean to address issues requiring the Dean’s input or involvement.

There are two recommendations that are well beyond the purview of the UGME program. At the time of the original review and the subsequent program response, there was no obvious or imminent activity arising to advance these issues, but since that time, both issues have progressed as described below:

1. Recommendation 9: renewal of the central university Code of Conduct on Disciplinary Action [for Faculty]. The Code of Conduct for Faculty continues to be significantly outdated. The Code is now under review with penultimate drafts sitting with constituent groups before final edits will be undertaken to finalize the Code. This process is anticipated to conclude during the current academic year and proceed to approval at the Senate and Board immediately thereafter.
2. Recommendation 10: financial situation of the Faculty of Health Sciences (FHS) as it relates to the UGME Program. Several significant fiscal issues contribute to the context for this recommendation. Very recently, three important processes have been undertaken that are likely to have impact on this recommendation:
  - a. The FHS has conducted a review of the financing of the UGME Program and is able to make a modest increase to funding to cover the current in-year deficit in anticipation of realizing future revenues related UGME Program expansion under the current Provincial government’s response to physician resource planning.
  - b. The University has conducted an external review of the current activity-based funding model and is in discussions with the FHS about some modifications to the model that should result in some increase in revenue to the FHS.

- c. The Province has undertaken a *Blue Ribbon Panel* review of the post-secondary education sector fiscal circumstances and several recommendations have now come out of that process and are being considered by the current government. It is currently unknown how these may contribute to a change in the fiscal circumstances of Ontario's universities, including McMaster.

Collectively, these three processes will provide some fiscal reprieve to the UGME Program, but ongoing monitoring and review will be required as any proposed changes are realized, or not.

Finally, we note with respect to recommendation 11, UGME Program bursaries, considerable additional exploration of this recommendation will be necessary. Several earnest reviews have been conducted with subsequent programming implemented with continued worsening of the circumstances related to student bursaries over time. This matter will be closely reviewed with the UGME Program. The FHS has made significant changes to our Advancement team and this is likely to result in new opportunities with respect to this recommendation.

Again, we thank the reviewers for their thoughtfulness and expertise in broadly considering the many issues facing our UGME program; and for working with our UGME program team to conduct a successful review. We acknowledge the excellent organization of this review by the UGME Program; and thank them for their earnest consideration of the recommendations put forward by the reviewers.

*Dean's Response completed by Dean's designate – Executive Vice-Dean & Associate Vice-President, Academic, Faculty of Health Sciences.*

#### **Quality Assurance Committee Recommendation:**

McMaster's Quality Assurance Committee (QAC) reviewed the above documentation at the February 14, 2024, meeting. The committee recommends that the **UGME** program should follow the regular course of action with a progress report to be submitted no later than two month, and subsequent full external cyclical review to be conducted no later than seven years after the start of the last review.