

Program Progress Report

Institutional Quality Assurance Program (IQAP) Review

Undergraduate Medical Education Program

Date of Site Visit: April 1-2, 2019

Progress Report Prepared by:

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Please outline below how recommendations from the initial program review have been addressed. [Please fill in one table for each recommendation from the original Final Assessment Report]

Recommendation:
Engage in discussions between University administration and UGME leadership on how to prioritize
internationalization.
Responsibility for Implementation:
Associate Dean, UGME
Vice Dean, Health Professional Education, FHS
Chair, Diversity & Engagement, UGME
Anticipated Timeline for Completion:
Ongoing
Additional Notes/Commentary:
Progress (check one)
□ Completed
X In Progress
☐ Other (please explain)
Department's Comments:
International Student Recruitment

In June 2023, the UGME Program approved an agreement to admit up to 3 Kuwaiti students per year to the Undergraduate Medical Education Program. The agreement was developed at the request of the Ministry of Higher Education of Kuwait (MHEK) and the Cultural Office of the Embassy of the State of Kuwait in Ottawa, Canada. To operationalize the agreement, the program adopted a new admissions process with specific selection requirements for an invitation to interview, as well as to receive an offer of admission. As part of the agreement, the MHEK covers funding for the students, and any funds over and above required tuition/fees flow back to the UGME Program, on a percentage basis, to be used to enhance programming for all students and increase bursaries for under-funded



students. Also, as part of the agreement, MHEK applicants are admitted as supernumerary students and therefore, do not reduce the overall number of spots in the program available to Canadian applicants. The new stream has not yet admitted any students and the program continues to work with the MHEK to develop potential applicants.

As we continue to explore the recruitment of international students, the program has looked to address the internationalization mission in other ways, some of which are highlighted below.

Curriculum Focus on Global Health

Embedded within the Professional Competencies curriculum is the Population Health, Health Equity and Determinants of Health domain and a dedicated session on Global Health. By developing knowledge and skills in global health, students will be better able to care for underserved populations and act as advocates for justice and health equity within our healthcare system and society at large. Objectives of the session include:

- Understand the Global Burden of Disease and how it affects the health of populations in Canada and abroad.
- Explore health disparities that exist between and within countries and be able to identify common barriers to optimal health experienced by individuals and communities.
- Review the various types of health data that are available and understand the limitations of data collection and analysis both locally and globally.
- Identify the major international health agencies and their role in promoting Global Public Health policies as well as their different approaches in solving public health problems.

International Electives

The program also allows students to use international electives as an opportunity to travel and to experience different cultures and medical practice in other countries. Students are encouraged to use this elective experience to obtain both knowledge and experience in areas of interest in locations that will be beneficial to their learning. International Electives are required to be at least four weeks in duration to ensure that the student is receiving a valuable learning experience abroad.

The UGME Program also has Affiliation Agreements with The Royal College of Surgeons of Ireland, University of Limerick and University of Sydney which allow for limited spots to be occupied by our students.

Service-Learning

Finally, the UGME Program has a dedicated Service Learning Program which uses structure and intentionality to integrate community service experiences within the medical curriculum and which can expose students to global health perspectives. There are many benefits to students including:

- Enhanced academic learning, particularly in areas such as population and community health, health inequities, global health and social medicine.
- Developing personal growth and skills in areas such as: leadership, inter-disciplinary care and collaboration, communication and de-escalation skills, cultural safety and humility, traumainformed care, empathy and compassion.
- Increasing awareness of social justice and health equity issues and how they relate to local communities, global communities and the overall practice of medicine.

2



Recommendation:

The Agreement with the Ministry of Higher Education of Kuwait is up for review. Data related to the program's intended outcomes will be considered in the evaluation of this Agreement. Given recent changes to the international learner environment, the FHS is considering the best ways to continue our focus on international learner recruitment. Consideration of this Agreement will be undertaken in that broader context.

The UGME Program has done admirable work in ensuring a global lens is brought to some of its curricular content; and providing international training opportunities for our medical learners. Program leadership also have a number of international collaborations around medical education and medical education research.

QAC Comments (to be filled in by Quality Assurance Committee):

QAC reviewed this report and had no further comments or concerns

Neconinendation.
Explore opportunities to collaborate with existing 'pipeline' programs at other medical schools to
increase engagement with Black and lower-income based future potential applicants.
Responsibility for Implementation:
Associate Dean, UGME
Chair, Diversity & Engagement, UGME
Chair, Admissions, UGME
Anticipated Timeline for Completion:
Ongoing
Additional Notes/Commentary:
Progress (check one)
☐ Completed
X In Progress
☐ Other (please explain)

The UGME Program has made significant developments in this area since the 2019 Report specifically with regard to the facilitated admissions stream for Black identifying students. The **Black Equity Stream (BESt)**: Black medical students are historically underrepresented in our medical program. Many barriers exist for Black applicants in the long journey to apply to medical school and these serve to create an inequity in the admissions process. As part of McMaster's commitment to equity in medical school admissions, our program leaders, community partners, and Black medical students, physicians, and scholars have collaborated to create an admissions stream called the Black-Equity Stream (known as BESt). This process is intended to provide equitable access to Black Canadians and

Revised: February 29, 2024

Department's Comments:



aligns with the McMaster UGME Program's commitment to the principles of equity, diversity, inclusion, and social justice in all that we do. It is also in keeping with McMaster University's statement on Building an Inclusive Community with a Shared Purpose https://secretariat.mcmaster.ca/university-policies-procedures-guidelines/. BESt was implemented at the beginning of the 2022/23 application cycle for the first time.

Increasing engagement with Black identifying students is embedded in the UGME Program's 2021-24 Strategic Plan and tremendous work has been completed already with BESt accepting the first cohort of 17 students in 2023, representing 8% of matriculants.

McMaster's Co-Chairs of Diversity & Inclusion, Dr. Kassia Johnson and Dr. Natasha Johnson, are actively engaged in several initiatives in the UGME program to promote student recruitment and retention, and assist with achieving mission-appropriate diversity outcomes. Some examples include:

- Bringing an EDI lens to UGME curriculum development and revisions, including through collaboration with students
- Providing faculty support to the UGME free MMI Preparation Day targeting underrepresented students in medicine
- Liaising with student representatives from across UGME Standing Committees, and EDIfocused committees, with an interest in EDI, through the EDI Committee
- Supervising scholarly student electives related to EDI
- Supporting EDI-focused Admissions Equity Streams (ongoing and proposed)
 - In the case of the Black Applicant Equity Stream (BESt), they have begun early work to establish a faculty-student mentorship program for admitted students, in collaboration with MRRM – McMaster Racialized Residents Mentorship Program
- Providing a UGME-wide orientation to EDI for students, which includes introducing McMaster anti-discrimination policies and introducing student support resources
- There is also the intention this year to propose, develop, and implement a Black Health curriculum

Dean's Comments:

This recommendation focuses on inter-institutional engagement with pipeline programming from other medical schools. There is significant overlap with the next recommendation in which more relevant context is provided for the current recommendation. The overall goal of these recommendations is to increase access to medical education for Black and economically disadvantaged applicants.

The UGME Program has been a faculty and institutional leader in developing facilitated admissions for Black applicants. This has led to other, similar admissions processes for Black applicants to other Health Sciences programs in our faculty; as well as interest by programs in other faculties to adopt similar admissions streams. The UGME Program should also be commended for creating increasingly robust 'wrap-around' supports for these learners once admitted, including mentors, policy revision, and curriculum renewal.

Additional context related directly to the current recommendation can be found in the following recommendation below.

QAC Comments (to be filled in by Quality Assurance Committee):



See above.

Recommendation:
Engage faculty and programmatic support for the Community of Support initiative
Responsibility for Implementation:
Associate Dean, UGME
Chair, Diversity & Engagement, UGME
Chair, Admissions, UGME
Anticipated Timeline for Completion:
Ongoing
Additional Notes/Commentary:
Progress (check one)
□ Completed
X In Progress
☐ Other (please explain)
Department's Comments:

In addition to the existing connections between the McMaster UGME Program and the Community of Support (McMaster is a partner and provides information sessions for interested applicants in the CoS, administrative support, etc.), the BESt admission process includes representation from the Community of Support.

There are also ongoing connections being made through the Ontario Medical School Application Service (OMSAS), the Council of Ontario Faculties of Medicine (COFM) and the Black Physician's Association of Ontario (BPAO), participation in community calls to action from AFMC - Black Medical Students' Association of Canada (BMSAC) with responding to reporting and surveying, and a Faculty Associate Dean of Equity, Diversity and Inclusion role added.

McMaster, in collaboration with PGME, has also seen the introduction of the Racialized Residents at McMaster (RRAM) a resident-led group dedicated to a medical education environment free of racism, discrimination, and injustice. Led by Dr. Anajali Menezes, RRAM supports racialized students by connecting them with racialized near peers and faculty mentors.

Dean's Comments:

The UGME Program has had a long-standing relationship with University of Toronto's Community of Support as described above. The Program also participates in province- and nation-wide initiatives that make best use of resources and provide optimal access for interested applicants.

The Deans of Ontario's medical schools are the main members of COFM:Deans (the core decision-making group of the collection of COFM committees). The COFM Deans have been supportive of all initiatives that have emerged at a provincial level, including work with OMSAS and support of BPAO's leadership.



QAC Comments (to be filled in by Quality Assurance Committee):	
See above.	

Recommendation:

Consider the integration of the diversity vision with the MD/PhD application and admissions process.

Responsibility for Implementation:

Associate Dean, UGME

Director, MD/PhD Program, Grad Studies

Chair, Diversity & Inclusion, UGME

Chair, Admissions, UGME

Patricia Farrugia, Chair, Indigenous Health, UGME

Bernice Downey, Associate Dean, Indigenous Health, FHS

Anticipated Timeline for Completion:

Ongoing

Additional Notes/Commentary:

Progress (check one)

☐ Completed

X In Progress

☐ Other (please explain)

Department's Comments:

Both the UGME Program and Graduate Studies remain committed to exploring how the UGME Engagement/Diversity/Inclusion priorities can be better integrated into the MD/PhD admissions process. The Director of the MD/PhD program has met previously with the McMaster Indigenous Students Health Sciences (ISHS) Office (now Indigenous Health Learning Lodge) to discuss a facilitated admissions stream for Indigenous students however those discussions are ongoing. Currently, both the Chair of Admissions, UGME and the Director, MD/PhD roles are in transition so it is anticipated that discussions and exploration will resume once those roles have been appointed.

The Indigenous Health Learning Lodge is also in discussions with the School of Graduate Studies to explore how Facilitated Indigenous Admissions Processes could be applied to graduate studies programs, including the MD/PhD Program. Finally, Indigenous identity verification through the FIAP process is being reviewed by McMaster University and FIAP and any other facilitated admissions processes for Indigenous learners will be modified to align with new guidelines or policies.

Dean's Comments:

The UGME Program has always been a leader in facilitated admissions of Indigenous learners. We look forward to seeing how these practices might be applicable to the MD/PhD program. We are aware of ongoing and broad efforts in this area across all of our Graduate Programs.



QAC Comments (to be filled in by Quality Assurance Committee):

See above.

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Ensure measurements of impact and outcomes of the renewed curriculum are supported with appropriate resources.

Responsibility for Implementation:

Chair, Program Quality, UGME

Chair, Pre-Clerkship, UGME

Chair, Clerkship, UGME

Curriculum Leads

Program Evaluation and Student Assessment Committee

Anticipated Timeline for Completion:

Ongoing

Additional Notes/Commentary:

Progress (check one)

- □ Completed
- X In Progress
- ☐ Other (please explain)

Department's Comments:

Existing structures of program evaluation (learner and faculty feedback; student performance on progress and other programmatic testing) have ensured that the renewed curriculum was adequately assessed. Where appropriate, current curricular evaluations are reviewed through the Program Evaluation and Student Assessment (PESA) Committee and modified to directly address newly introduced curricular elements. If necessary, new evaluations are developed by the Chair, Program Quality with support from PESA. Metrics are reviewed at regular intervals by course planning committees, the Curriculum Committee, PESA, and UGME Executive Committee.

Measuring impact and outcomes of curriculum continue to be supported by a research assistant (0.5 FTE) within the program including internal (unit pass rates, PPI, OSCE, clerkship exams) and external metrics. Performance on National Licensing Exams (Medical Council of Canada Qualifying Exam) is also analysed annually, including cohort comparisons, and presented to the UGME Executive Committee.

An analysis of McMaster UGME residency match rates has shown no significant difference in match rates between pre- and post-curriculum renewal cohorts. Match rates for the pre-curriculum renewal



cohorts: classes of 2019 (99%), 2020 (97%), and 2021 (97%) compare favourably with the classes of 2022 (99%) and 2023 (98%) which completed the renewed curriculum.

Dean's Comments:

No concerns. The Program is well-structured to conduct ongoing review of the effectiveness of the curriculum.

QAC Comments (to be filled in by Quality Assurance Committee):

See above.

Recommendation:

Consider increased opportunities for the end of unit Foundation directors to communicate with the curriculum committee, to share and coordinate the results of the Foundation annual reviews.

Responsibility for Implementation:

Chair, Pre-Clerkship, UGME Chair, Program Quality, UGME Curriculum Committee

Regional Pre-Clerkship Coordinators

Anticipated Timeline for Completion:

Additional Notes/Commentary:

Progress (check one)

X Completed

☐ In Progress

☐ Other (please explain)

Department's Comments:

Curricular Foundations are reviewed annually following the conclusion and in preparation for each subsequent year's Foundations. Monitoring is conducted by the Foundation Planning Committees and Pre-Clerkship Committee including student and tutor feedback. Monitoring is used to change problem-based learning tutorials, clinical skills, anatomy, and large group sessions content and delivery methods; faculty development and program evaluation planning. As with other curriculum components, the results of annual reviews are shared with curriculum component leads at multiple levels to solicit feedback and recommendations, including: UGME Executive Committee, Curriculum Committee, Clinical Skills Committee, and OSCE Committee.

Each foundation and clerkship director presents a review to the Curriculum Committee on a 3-year cycle so that overall course/clerkship quality data and program-wide trends and gaps are addressed.

The Chair, Program Quality works with curricular component leads to review reporting processes and determine if further opportunities for report sharing exist and would prove beneficial to the program.



As with the above recommendation, the Program has robust structures in place to ensure adequate, regular, and timely review across all components of the curriculum.

QAC Comments (to be filled in by Quality Assurance Committee):

See above.

Recommendation:

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.

Responsibility for Implementation:

Chair, Pre-Clerkship, UGME

Co-Chairs, Pro Comp, UGME

Chair, Student Assessment, UGME

Chair, Student Affairs, UGME

Director, Student Progress, UGME

Director, Student Advising, UGME

Regional Faculty Development Coordinators

Anticipated Timeline for Completion:

Ongoing

Additional Notes/Commentary:

Progress (check one)

☐ Completed

X In Progress

☐ Other (please explain)

Department's Comments:

The Pre-Clerkship Chair and Professional Competencies Co-Chairs actively orient Small Group Tutors and Longitudinal Facilitators to the renewed curriculum which has now been in place for five cohorts of students. In addition to support by the Chairs of Pre-clerkship and Professional Competencies, there is now a dedicated role for supporting tutors, a PBL Curriculum Coordinator. This role facilitates a community of practice for tutors, including regular outreach during each Foundation. Tutor training has also undergone updating since the introduction of the curriculum renewal. Tutor newsletters are sent on a regular basis with information on changes to the program, tips, new policies or policy reminders, contact information for subject matter experts, etc. which can provide just-in-time support to tutors. New tutors or tutors-in-training are mentored by a more experienced tutor and can only be the sole tutor in a maximum of 20% of tutorials if the tutor mentor is absent (with approval of Foundation Director and students in the tutorial group).



The Director, Student Advising oversees the Student Advising Program, which selects, orients, and maintains the cadre of Student Advisors in the three campuses in coordination with each Regional Campus Director of Student Affairs. The UGME Program has also implemented the Program for Guided Reflection and Early Student Support (PROGRESS) which adds a new layer of support for student advisors with the Learning Director role. The Learning Directors provide mentoring and guidance as they oversee several student advisors and their students.

Faculty are evaluated by students at the conclusion of each course or teaching unit (e.g. Medical Foundation, Professional Competencies cohort, Clerkship rotation) and after individual teaching sessions (e.g. large group session) so the program is able to monitor the quality of teaching at appropriate intervals. When a significant problem is identified with a tutor's Teaching Effectiveness Report or a worrisome trend is observed in the tutor's Teaching Effectiveness Reports over time, the Foundation Director or the Regional Campus Pre-Clerkship Coordinator will address the problem with the tutor and outline recommended professional development activities if appropriate. Tutor evaluations are also regularly reviewed at the Program Evaluation & Student Assessment (PESA) committee level.

Dean's Comments:

The UGME Program has ensured ample training of tutors in anticipation for the renewed curriculum which is now several cohorts in. There is ample support for new tutors; and monitoring processes to ensure expected tutor performance levels are being met.

Q/	١C	Comments	(to b	e fil	led in l	оу С	Quality	[,] Assurance (Committee)	:
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See above.

Recommendation:

Ensure that processes to identify students in difficulty earlier have been developed and that the impact of these changes is reviewed over time.

Responsibility for Implementation:

Chair, Student Assessment, UGME

Chair, Program Quality, UGME

Chair, Student Affairs, UGME

Director, Student Progress, UGME

Director, Student Advising, UGME

Learning Directors

Anticipated Timeline for Completion:

Additional Notes/Commentary:



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Progress (check one)
X Completed
☐ In Progress
Other (please explain)
Department's Comments: The aforementioned PROGRESS Program, which has now been in place for several years, formalizes early detection and intervention of students at risk of facing academic difficulty. With more formalized meetings between student and advisor and student performance review self-assessments, advisors are able to more quickly identify concerning trends in performance across assessment tools or content areas. Learning Directors 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. Formative assessments predict subsequent difficulty, and are now being used by Learning Directors as part of the PROGRESS system to identify and support students.
The Student Progress Committee (formerly Academic Progress Committee) has also strengthened its processes since 2019. The SPC meets with students who have received "Provisional" or "Unsatisfactory" assessments on any element of the curriculum, including Electives, as well as below-threshold scores on the PPI and Program OSCEs. Professionalism concerns may also trigger an SPC meeting. Currently, when the SPC receives a referral (academic, professionalism, or both) the student undergoes a file review which, depending on the student's previous academic progress, may result in informal remediation or an exam rewrite, or may trigger a meeting with SPC to discuss the student's situation and potential remediation. The Student Progress Committee has reviewed successively more students year over year, and provided learning contracts for students who have underperformed on parts of the curriculum. The Chair of the Student Progress Committee provides annual reports to the UGME Executive Committee to monitor the effectiveness of the committee's interventions.
A separate pathway has been created for professionalism concerns which can now be identified before summative assessments and reviewed in a collaborative manner with student and Professionalism Chair in a dialogical process allowing students the time and space to understand professionalism standards, propose personal and professional development where appropriate and referral to Student Progress Committee where required. The Chair of Professionalism also provides annual reports to the UGME Executive Committee.
Dean's Comments:
The UGME Program has created robust processes to help identify students in academic difficulty and to provide supports at an earlier stage of their academic struggles. This has resulted in an increase in identified students. The Vice-Dean, Education will work with the Associate Dean of the UGME Program to understand if earlier identification, intervention, and support is ultimately resulting in more timely and supported progress of learners in the program.
QAC Comments (to be filled in by Quality Assurance Committee):

Revised: February 29, 2024

See above.



Recommendation:
A renewal of the Central University Code of Conduct on Disciplinary Action should be a priority.
Responsibility for Implementation:
Associate Dean, UGME
Vice Dean, Health Professional Education, FHS
Vice Dean, Faculty Affairs, FHS
Office of Professionalism, FHS
Anticipated Timeline for Completion:
2024-25
Additional Notes/Commentary:
Progress (check one)
□ Completed
X In Progress

Other (please explain) Department's Comments:

While significant work around the Code of Conduct has been completed, progress around approval of the document is stalled until the next academic year. Accreditation standards for undergraduate medical programs require that the learning environment is conducive to the ongoing development and explicit and appropriate behaviours of medical students, faculty and staff with the ability to identify and promptly respond to concerns in the learning environment. The Code of Conduct is highly relevant and important for this purpose.

Significant effort has been made to advance work in other ways to help meet this accreditation requirement:

- The Faculty of Health Sciences has developed Guidelines to help interpret the current Code; and the School of Medicine has developed <u>Faculty Evaluation Guidelines</u> around the use of learner feedback from UGME and PGME in addressing exceptional, under-performing, and problematic faculty. These guidelines clarify the remediation process for faculty that have been identified to have significant performance deficiencies.
- 2. The Undergraduate Medical Program reviewed its Professionalism in Practice (PIP) framework and updated it in 2023 to include a 4th domain of Equity, Diversity Inclusion and Indigenous reconciliation, to directly address concerns arising in the learning environment.
- 3. The Undergraduate and Postgraduate Medical Programs created an Office of the Learning Environment and Mistreatment (OLEM) in Fall 2022 to provide navigation for students with concerns and accolades around faculty contributions to the learning environment. The program has engaged in several feedback loops through this office, including underperforming faculty.



All constituents that are party to the Code of Conduct are in ongoing discussion around proposed updates to the current Code. As constituent groups are many and have numerous vantage points from which they experience the Code, it is expected that progress will require extensive discussions and negotiation; nonetheless, work on this important undertaking has been ongoing, progressing, and approached earnestly. We are hopeful that the forthcoming year will produce a final, updated version of this important university policy.

QAC Comments (to be filled in by Quality Assurance Committee):	
See above.	

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

Responsibility for Implementation:

Associate Dean, UGME

Regional Assistant Deans, UGME

Vice Dean, Health Professional Education, FHS

Executive Director, Education Services

Anticipated Timeline for Completion:

Ongoing

Additional Notes/Comme	ntary:
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Progress (check one)

☐ Completed

X In Progress

☐ Other (please explain)

Department's Comments:

The undergraduate medical program remains actively involved in discussions about financial planning across various levels, including the Faculty of Health Sciences, the broader university, and the provincial authorities. The leadership team at the Faculty of Health Sciences is both aware of and dedicated to collaborating closely with UGME leadership. Despite this commitment, the program continues to struggle with persistent deficits, and limited financial flexibility. These financial strains limit the program's ability to innovate and expand, with potential to affect curriculum delivery, learner experiences and learner support. Together, the program and Faculty of Health Sciences, are committed to devising and implementing effective solutions to address the financial challenges faced by the program, and share a strong commitment to the program's sustainability and success.



The faculty has acknowledged the importance of addressing fiscal issues that are impacting UGME programming. Several, ongoing discussions are continuing with engagement from the Dean, Executive Vice-Dean, Vice-Dean Education, Associate Dean UGME, Executive Director Education, and Director of Finance, among many others as relevant. Under current fiscal circumstances, although the commitment and will to support these discussions is high, options and opportunities are not plentiful. We are continuing to engage at all relevant levels to find reasonable solutions, and we look favourably towards solutions that may also come from processes outside of the Faculty, including with the University and government.

QAC Comments (to be filled in by Quality Assurance Committee):

See above.

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

Responsibility for Implementation:

Program Manager, UGME FHS Development Office

Anticipated Timeline for Completion:

Ongoing

Additional Notes/Commentary:

Progress (check one)

☐ Completed

X In Progress

☐ Other (please explain)

Department's Comments:

Maintenance and enhancement of the bursary program continues to require planning. Currently, half of the cost of student bursaries is drawn from program and educational operating budgets representing one-third of the program's operating deficit. This is despite bursary distributions halving since 2019, and tuition remaining unchanged – students are therefore receiving less support for the same costs.

The program has engaged with University Advancement to support additional initiatives. This team spends a significant amount of time cultivating relationships with existing and potential funders. This has resulted in a 24% increase in the value of MD student bursary endowments and a 27% increase in the total value of trust funds supporting MD students from 2020 to 2024. Fundraising efforts for the medical school are focused on supporting student success through access to high-caliber education and research opportunities. The primary funding push in the Faculty of Health Sciences is to increase bursary support for all MD students, with additional supports and awards for members of Indigenous,



Black and other equity-deserving communities. This funding represents a 96% increase in dollars raised for the express purpose of inclusive excellence and student support since 2020.

The UGME Program has also recently approved the formation of the UGME Awards Committee. This new committee will develop and maintain a resource of available bursaries (internal and external) to ensure that students have access to all available funding. The committee will also think more broadly about what services we can offer our students (debt management counselling, financial advising, etc.) so that a reliance on bursaries to fund their education is not necessitated.

Dean's Comments:

The UGME Program continues working with Faculty Advancement to ensure that UGME bursaries are available to learners. While growth in bursary funds has been realized, demand continues to outstrip supply. We anticipate this work to be ongoing and the Faculty remains committed to exploring all options to ensure that students are not precluded from a career in medicine because of their financial circumstances. Para-curricular programming around individual financial management will also support these goals.

QAC Comments (to	be filled in b	y Quality A	Assurance	Committee):
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See above.

Recommendation	R	ec	O	m	m	en	da	ati	o	n	:
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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.

Responsibility for Implementation:

Chair, Program Quality, UGME

Program Evaluation and Student Assessment Committee

Director, Clinical Site Reviews

Anticipated Timeline for Completion:

Additional Notes/Commentary:

Progress (check one)

X Completed

□ In Progress

☐ Other (please explain)

Department's Comments:

For individual curriculum committees (Pre-Clerkship, Professional Competencies, Clinical Skills, Clerkship) student feedback is aggregated, filtered by Campus or Clinical Teaching Site, and distributed to the Chair, Program Quality, the Chair, Pre-Clerkship, Foundation and Clerkship Directors



and Regional Campus Clinical Education Coordinators. These reports are distributed 6 weeks after the end of each Pre-Clerkship curricular block and bi-annually (January and July) to each Clerkship rotation. The Directors and Chairs together with the component curricular committees review aggregate data regularly to ensure concerns regarding required learning experiences are addressed immediately. Outcome data is reviewed as part of the annual curricular component reviews (see comments on recommendation 'Consider increased opportunities for the end of unit Foundation directors to communicate with the curriculum committee') and at multiple additional levels including PESA (curricular evaluations), Curriculum Committee and Executive Committee (outcome data).

The Curriculum Committee maintains a Quality Improvement Dashboard to facilitate ongoing improvement and follow up of planned curricular changes identified within the curricular review process. The PDSA table is updated prior to each committee meeting and reviewed as a standing item at each meeting.

In 2022, the program implemented a Clinical Learning Site Review process through which the Program routinely monitors (3 year cycle) the learning environment of institutional sites employed for required clinical learning experiences to identify ways in which the learning climate can be optimized and aligned with accreditation standards. Student feedback is a critical part of this review process. The process includes: identifying concerns from end of rotation evaluations (completed by students) at site since last site Review, a learner debrief with students who have rotated through the clinical site, and correspondence with site educational lead via email, phone, virtual or in-person meeting. The results of each site review are presented to PESA and feedback is fed back to the clinical sites and clerkship teams.

Dean's Comments:

As with other program evaluation recommendations, the structures supporting this recommendation are robust, systemic, and layered. The opportunities for students to provide anonymous feedback are similarly robust and are systematically considered in the ongoing evaluation of their educational experiences.

QAC Comments (to be filled in by Quality Assurance Committee):

See above.

Recommendation:

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

Responsibility for Implementation:

Dean & Vice President, FHS Associate Dean, UGME Regional Assistant Deans, UGME

Anticipated Timeline for Completion:

16



Additional Notes/Commentary:
Progress (check one)
☐ Completed
☐ In Progress
X Other (please explain): There are no timelines as we are not developing new processes in this
area
Department's Comments:
Multiple avenues exist for the Associate Dean, UGME to interact with the Dean & VP, FHS whereby
the Associate Dean can impact decision-making around the medical education program. Notably, the
Associate Dean, UGME sits on the School of Medicine Council which the Dean & VP chairs and also
meets regularly with the Vice Dean, Education who can facilitate further discussions with the Dean or
other Vice-Deans. The Associate Dean, UGME also communicates regularly with the Dean via ad hoc
meetings as necessary.
Dean's Comments:
As described above, there are multiple points of direct, regular and ad hoc access to both the Dean
and the Vice-Dean, Education.
QAC Comments (to be filled in by Quality Assurance Committee):
See above.
Recommendation:
Increasing the time allotment for the Chair of Student Affairs should be considered.
Responsibility for Implementation:
Chair, Student Affairs, UGME
Director, Student Affairs, Hamilton
Director, Student Affairs, Niagara
Director, Student Affairs, Waterloo
Anticipated Timeline for Completion:
Additional Notes/Commentary:
Progress (check one)
X Completed
☐ In Progress
☐ Other (please explain)
Care. (prease explain)



Department's Comments:

Since the 2019 review, the scope of work of the Chair of Student Affairs has changed as a result of the introduction of several new roles, including Learning Directors, and the Faculty Navigator at OLEM which have increased supports for students. The time commitment of the Chair of Student Affairs role was however increased to a 1.5 day/week (from 1.0) prior to a recent search. The time commitment was felt to be consistent with other roles.

The Chair of Student Affairs is a member of the UGME Executive Committee which has oversight of all aspects of the UGME program. They also participate in accreditation, strategic planning, curricular retreats, and quality improvement activities within the UGME Program and have significant opportunities for facilitating student-centred discussion.

Dean's Comments:
No further comments.
QAC Comments (to be filled in by Quality Assurance Committee):
See above.
Recommendation:
Establish ongoing monitoring of the quality/consistency of the Student Advisors' activities.
Desperability for handemontation.
Responsibility for Implementation:
Chair, Student Assessment, UGME
Chair, Student Affairs, UGME
Director, Student Progress, UGME
Director, Student Advising, UGME
Author de la minute de la constate de
Anticipated Timeline for Completion:
Additional Notes/Commentary:
Additional Notes/Commentary.
Progress (check one)
X Completed
☐ In Progress
· · · · · · · · · · · · · · · · · · ·
Other (please explain)
Department's Comments:

As part of PROGRESS the framework around student advisors' meetings with students is strengthened and formalized. Each learner completes a performance review self-assessment and goal setting exercise prior to each scheduled meeting with their Student Advisor. Advisors and students review performance and the self-assessment together and document a performance plan. At its essence, the PROGRESS program serves as a standardizing and equalization process for Student Advisors and their engagement with students.



Learning Directors also work with Student Advisors, and have been an active part of student journey support through routine involvement in Student Progress committee meetings. Student Advisors continue to be supported by a Director of Student Advising & by Student Affairs.

Dean's Comments:

As with other recommendations, the UGME Program has created a layered and systemic approach to supporting the Student Advising programming to ensure that the Advisors' activities are more 'standardized' and 'equal' across Advisors.

QAC Comments (to be filled in by Quality Assurance Committee):

Executive Vice-Dean & Associate Vice-President, Academic

See above.

Die Brooks

Dr. Dina Brooks April 26, 2024

Faculty of Health Sciences

Dr. Rob Whyte, Vice-Dean, Education

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Faculty of Health Sciences

April 25, 2024