

McGill University Faculty of Medicine
MD,CM Program Committee

Terms of reference

Mandate

This committee receives its mandate from the Dean, in consultation with the Faculty Leadership Council. The Chair is the Associate Dean (UGME). It has an executive function, making and enacting policies relevant to the design and delivery of the MD,CM program. It ensures that the program is aligned with the Faculty's mission statement and that it complies with relevant accreditation standards. It has responsibility for the design, management, integration, evaluation, and continual improvement of the medical curriculum.

The MD,CM Program Committee reports on a regular basis, via the Associate Dean (UGME), its decisions and recommendations to the Dean and the Faculty Leadership Council. It provides a written annual report to the Dean, with a copy to the accreditation Interim Review Coordinator. It participates in the accreditation interim review process in monitoring compliance with accreditation standards and in preparing for survey visits.

Major responsibilities

[Note: where possible, the specific responsibilities outlined below are linked to elements from the CACMS accreditation standards (document dated August, 2015)]

The MD,CM Program Committee:

- oversees the development and revision of learning objectives (at the program, component, course and session levels); the selection and sequencing of educational content for the program; the program length; curricular structure including its components, courses, themes, and required learning experiences (all eight elements of Standard 6 – Curricular design; all nine elements of Standard 7 - Curricular Content; Use of Program objectives – 8.2)
- oversees the delivery of the curriculum at all sites (including 'Campus Santé Outaouais'), instructional methods, establishment of the academic schedule, appointment of course directors and theme leaders, and recruitment and assignment of teachers (Curricular management – 8.1; Clinical supervision – 9.3; Student assignment to clinical locations – 10.11)
- establishes the student promotion regulations, sets the standard of achievement, and selects the methods of assessment appropriate to the learning objectives (Assessment system – 9.4; Narrative assessment – 9.5; Standards of achievement – 9.6)
- monitors students' academic progress and makes final decisions with respect to promotion and graduation (Student advancement – 9.9)
- evaluates the program, in part by ensuring that student feedback on learning activities, teachers and the learning environment is solicited and analyzed, via internal and national surveys (such as the Graduation Questionnaire), and by tracking student accomplishment on internal and national examinations, linking the performance levels to specific program objectives (all eight elements of Standard 8 - Curricular management, evaluation and enhancement)

- uses the findings from evaluation to revise learning objectives and content, (addressing any unintended gaps and eliminating unnecessary redundancies), and to revise instructional and assessment methods
- monitors the quality of learning and assessment activities across clinical sites to ensure that there is comparability of experiences (Comparability of education and assessment – 8.7)
- considers new developments in science and healthcare delivery to review the learning objectives and content of the curriculum
- considers new developments in medical education theory and practices, reviews proposals for innovations, and approves pilot projects and modifications to the curriculum
- ensures that teachers, including residents, are oriented, prepared, equipped and evaluated in their teaching and provided with feedback on their performance (Communicating and disseminating objectives – 6.1; Curricular review – 8.3; Preparation of residents – 9.1)
- ensures that students have access to academic and career advising and monitors the level of satisfaction with these services (Medical student support – 11.1, 11.2)
- develops codes of conduct and implements policies on student mistreatment and workload policy (Student mistreatment – 3.6)
- ensures that the procedures related to formative, summative, and global assessments of performance, used to record, transmit and present to students for their review all adhere to standard practices (Assessment – 9.7, 9.8; Medical student support – 11.4, 11.5, 11.6)
- establishes the process to ensure that the school and its affiliated clinical sites have the capacity to accommodate visiting students on elective rotations (Educational resources - 5.10)
- certifies the adequacy of educational resources (such as study space, digital learning materials, access to the internet) and those that are unique to clinical teaching contexts (e.g. on-call rooms, immunization protocols, and remedies in situations of exposures to occupational hazards) (Educational resources - 5.11; Student services - 12.7, 12.8)

While the MD,CM Program Committee has the primary authority for all of the above, it is able to delegate responsibility of certain elements of the accreditation standards to sub-committees. Its standing sub-committees are:

- *Student Promotions Committee*
- *Student Assessment Committee*
- *Program Evaluation and Curricular Outcomes Committee*
- *Learning Environment and Standards of Behaviour Committee* [Note: Under development]
- *Curricular Component Committees (FMD, TCP, Clerkship, Physicianship)*

Each sub-committee reports on a regular basis to the MD,CM Program Committee and provides an annual written report to the MD,CM Program Committee, with copies to the other sub-committees.

Shared responsibilities

Certain elements and standards fall under the jurisdiction of the Assistant Dean (Admissions) and the Admissions Committee, a committee Chaired by that Assistant Dean. The Admissions Committee oversees a medical student admission process that is responsive to the Faculty's social accountability goals and is marked by transparency, fairness, and equity (elements 10.1 to 10.7 of Standard 10).

The Assistant Dean, Student Affairs has primary responsibility for personal counseling and for advocating on behalf of the student body for health care services, disability insurance, debt management, and financial aid. In collaboration with partners (notably in Academic Affairs, PGME and the Committee of DPS), the Assistant Dean is implicated in concerted efforts to optimize the learning environment. The Assistant Dean, Student Affairs monitors the well-being of the student body during the educational experience (Personal counseling/well-being programs – 12.3). The Assistant Dean is administratively linked and accountable to the Associate Dean, UGME, (for example, reporting on process issues) but is completely independent of the Associate Dean in matters related to individual students.

The MD,CM Program Committee, under the direction of the Associate Dean, develops and maintains role descriptions for educational leaders in the MD,CM program, advocating for adequate professional development, financial support, and academic advancement. The Faculty Leadership Council has primary responsibility for professional development, financial support, and academic advancement. The Associate Dean, UGME is a member of the Faculty Leadership Council, at which he or she can represent the MD,CM program and its needs (Faculty policies - all elements of Standard 4).

The MD,CM Program Committee also collaborates with other leaders, committees and bodies of McGill University and its Faculty of Medicine in ensuring compliance with additional elements of the CACMS accreditation standards, most notably: the promotion of social accountability, equity and diversity; faculty appointments; timely completion of affiliation agreements; nurturing of an academic community of scholars, with opportunities for scholarly pursuits; and the creation and dissemination of anti-discrimination policies.

Membership

Associate Dean (UGME)
UGME staff -- Associate Director, Administration of Medical Education Services
Assistant Dean, Gatineau site (Campus Santé Outaouais)*
Director of the Fundamentals of Medicine and Dentistry Component
Director of the Transition to Clinical Practice Component
Director of the Clerkship Component
Director of the Physicianship Component
Chair of the Student Assessment Committee**
Chair of the Program Evaluation and Curricular Outcomes Committee**
Chair of the Learning Environment and Standards of Behaviour Committee**
Assistant Dean, Student Affairs
Student representative (junior) – Medical Student Society, VP-Academic†
Student representative (senior) – Med 3 Class president^
Representative from one of the Basic Science Departments***
Representative from one of the Clinical Departments***
Two representative from the curricular themes or interest groups¶
Representative from Postgraduate Medical Education (PGME)
Interim Review Coordinator (IRC) or other member of the accreditation office∞

The Directors of the components may appoint a delegate to act on their behalf at any meeting. For example, the Director of Clerkships may appoint the Associate Director. The delegate has voting privileges. In the event of unavailability for meetings, the representatives from the Basic Science and Clinical Department may appoint another delegate to represent her/him, with the approval of the Chair.

* It is understood that the Assistant Dean will not be able to attend regular meetings due to the physical distance. The Assistant Dean will nonetheless receive all agendas, minutes and documents and will be invited to participate at meetings using video-conferencing when issues of particular relevance to the Gatineau site are to be discussed.

**The Chairs of the sub-committees are not expected to attend all meetings. They are expected to attend when issues relevant to their mandates are to be discussed and when they give their annual report.

*** These members are selected and appointed by the Associate Dean (UGME) in consultation with the component directors and the Basic Science Committee (for the representative from the Basic Science Departments). Their term of office is for 3 years, renewable.

¶These two members are selected and appointed, on a rotating basis, by the Associate Dean (UGME). The curricular themes are: Interprofessionalism, Equity & Diversity, Student Wellness, Indigenous Health, Patient Safety, Professionalism, Public Health, Research, Longitudinal Family Medicine Experience, and Evidence-based medicine. The interest groups include: dermatology, oncology, palliative medicine, ultra-sound, social studies of medicine.

†The alternative to the MSS VP-Academic is the MSS President. The students can choose to attend weekly meetings on an alternating basis. One vote is assigned to this position.

^The alternative to the Med 3 Class president is the past MSS VP-Academic. The students can choose to attend weekly meetings on an alternating basis. One vote is assigned to this position.

∞Although the IRC is invited to all meetings and receives all agendas, minutes and other documentation, it is not expected that he or she will be able to attend all meetings.

In the event of unavailability for meetings, members (including student members) may appoint another delegate to represent her/him, with the approval of the Chair.

Term of Office

Ex officio members remain on the committee for their term of office. The student representatives are appointed for one year (i.e. their term of office on the Medical Student Society).
For other members, the term of office is 3 years (renewable once).

The Committee reports to the Dean of the Faculty of Medicine.

Conduct of Meetings

There shall be regular meetings (generally twice per month during the academic year).

Quorum is 50% plus one of the voting members.

The Chair will aim to build consensus, however, final decisions will be made by voting.

Normally, the Chair will not vote, except when it is necessary to break a tie.

Decisions will require a simple majority of the voting members present, either in person or via teleconference.

Voting will be required for substantive decisions and for recommendations that concern accreditation standards (e.g. Faculty appointments) which are not primarily under the jurisdiction of the UGME office and its committees.

An e-vote may be conducted for certain issues.

Minutes of all meetings will be taken and distributed electronically to all members.

The Chair may invite external experts and consultants for specific discussions. Specific UGME staff members (e.g. student records officer, accreditation officers) are invited at the discretion of the Chair.

The Chair may create ad hoc sub-committees to study or review any particular issue.

Policies are posted to: <http://www.mcgill.ca/ugme/academic-policies>

HISTORY OF DOCUMENT

Approved in principle by Deanery, October 19, 2015

Presented to the Curriculum Committee, October 26, 2015

Final version to be completed by Program Committee: expected January 11, 2016