



2013-2014 Report Back

Institution Name:	Northern Ontario School of Medicine
-------------------	-------------------------------------

OVERVIEW

The annual Report Back continues to provide the government with a tool for publicly reporting on the performance of Ontario postsecondary institutions on the principles of access, quality and accountability.

Where possible, to help streamline the 2013-2014 Report Back process, the Ministry pre-populated **Northern Ontario School of Medicine's** 2013-2014 Report Back with data from a variety of confirmed institutional sources, including reports (e.g. Key Performance Indicators, 2012-2013 Report Backs) and data sources (e.g. Full-Time Enrolment Headcount). Data that was pre-populated by the Ministry of Training, Colleges and Universities (the Ministry) in **Northern Ontario School of Medicine's** 2013-2014 Report Back is denoted with the symbol ⁽⁺⁾.

1) Enrolment - Headcount*

*DEFINITION: *Headcount* is the actual enrolment for Fall 2013 as of November 1, 2013 including full-time undergraduate and graduate students eligible for funding as reported to the Ministry for the 2013-2014 fiscal year (enrolment reported in 2013-2014 remains subject to audit and/or correction).

Northern Ontario School of Medicine reported to the Ministry, that the total Headcount enrolment in 2013-2014 was = **416⁽⁺⁾**.

Please indicate the number of students aged 18-24 (age as of November 1, 2013) from the total Headcount enrolment reported by **Northern Ontario School of Medicine** to the Ministry for 2013-2014 = **87**.

Please indicate the number of students aged 25+ (age as of November 1, 2013) from the total Headcount enrolment reported by **Northern Ontario School of Medicine** to the Ministry for 2013-2014 = **329**.

Please indicate the number of students under the age of 18 (age as of November 1, 2013) from the total Headcount enrolment reported by at **Northern Ontario School of Medicine** to the Ministry in 2013-2014 = **0**.

* The space below is provided for **Northern Ontario School of Medicine** to describe methodology, survey tools, caveats and other information regarding the numbers reported above re: Enrolment - Headcount.

Headcount enrolment includes 255 undergraduate learners and 161 postgraduate residents.

Please provide one or more examples, in the space provided below, of highlights from **Northern Ontario School of Medicine's** Enrolment Management Plan that **Northern Ontario School of Medicine** used during 2013-2014 to manage enrolment.

Through the NOSM Recruitment Working Group, NOSM takes a whole school approach to recruitment and engaging with our committees for the purpose of recruitment and retention. This group shares recruitment planning and needs across the school so that we can pool our resources to have maximum impact in all our endeavours. The Office of Admissions and Learner Recruitment, Aboriginal Affairs and Francophone Affairs Units work with closely with our host institutions (Lakehead and Laurentian University) to promote NOSM programs and increase application to and ultimately enrolment at NOSM. Some examples of recruitment events NOSM participates in with the host institutions are: Grade 11 day, APSEP Tour, Career Fairs, Guidance Counsellors Day, Open House (s), Liaison Training Sessions, Parent Reception, Amazing Race for IB students. Further to working with the host institutions, NOSM hosts their own recruitment events as well. Some examples of these events are: Admissions Information Sessions, the Aboriginal Multiple Mini Interview (MMI) Workshops, our own MMI process, tours of the school and presentations to any interested community or school groups who contact our office. NOSM runs Summer Health Sciences Camp for high school students. The camp provides the students going into grade 10 & 11 in September with an opportunity to explore Francophone and Aboriginal cultural awareness, healthcare careers, obtain hands-on experience.

2) Under-Represented Students: Students with Disabilities*, First Generation and Aboriginal*****

DEFINITION: Students with disabilities is the total number of students with disabilities (excluding apprentices) registered with the Office for Students with Disabilities and reported in Table 1 of **Northern Ontario School of Medicine's annual report to the Ministry for the Accessibility Fund for Students with Disabilities (AFSD).*

***DEFINITION: First Generation is a student whose parent(s)/guardian(s) has/have not attended a postsecondary institution. If a sibling of the student has attended a postsecondary institution, but the parent(s)/guardian(s) have not, the student is still considered a First Generation student.*

Parents/Guardians: one or more adults, over the age of 21, who are legally responsible for the care and management of the affairs of the student.

Postsecondary Attendance: have attended (but not necessarily having obtained a credential from) any institution of higher education in Ontario or elsewhere including outside Canada after high school (includes programs that lead to a postsecondary credential e.g. degree, diploma, certificate).

****DEFINITION: Aboriginal is a collective name for the original people of North America and their descendants. The Canadian Constitution, Constitution Act 1982, recognizes three groups of Aboriginal peoples - Indians (First Nation), Métis and Inuit. These are three separate peoples with unique heritages, languages, cultural practices and spiritual beliefs.*

*NOTE: Please do not include International Students in the calculations below.

Students With Disabilities	First Generation Students	Aboriginal Students
<p>Please indicate the total number of Full-Time <i>Students with Disabilities</i> at Northern Ontario School of Medicine who registered with the Office for Students with Disabilities and received support services in 2013-2014= <u>17</u></p> <p>The total indicated above as a comparative % of Northern Ontario School of Medicine's 2013-2014 Enrolment Headcount: (Insert Total From Above) <u>17</u> ÷ <u>416</u>⁽⁺⁾ (2013-2014 Enrolment Headcount) x 100 = <u>4.1</u>%</p>	<p>Please indicate the total number of Full-Time <i>First Generation Students</i> enrolled at Northern Ontario School of Medicine in 2013-2014= <u>0</u></p> <p>The total indicated above as a comparative % of Northern Ontario School of Medicine's 2013-2014 Enrolment Headcount: (Insert Total From Above) <u>0</u> ÷ <u>416</u>⁽⁺⁾ (2013-2014 Enrolment Headcount) x 100 = <u>0</u>%</p> <p>Please also indicate the total number of Part-Time <i>First Generation Students</i> enrolled at Northern Ontario School of Medicine in 2013-2014 = <u>0</u></p>	<p>Please indicate the total number of Full-Time <i>Aboriginal Students</i> enrolled at Northern Ontario School of Medicine in 2013-2014= <u>20</u></p> <p>The total indicated above as a comparative % of Northern Ontario School of Medicine's 2013-2014 Enrolment Headcount: (Insert Total From Above) <u>20</u> ÷ <u>416</u>⁽⁺⁾ (2013-2014 Enrolment Headcount) x 100 = <u>4.8</u>%</p> <p>Please also indicate the total number of Part-Time <i>Aboriginal Students</i> enrolled at Northern Ontario School of Medicine in 2013-2014 = <u>0</u></p>

* The space below is provided for **Northern Ontario School of Medicine** to describe methodology, survey tools, caveats and other information regarding the numbers reported above re: Students with Disabilities, First Generation and Aboriginal Students.

Students With Disabilities	First Generation Students	Aboriginal Students
<p>Please provide one or more highlights, in the space provided below of an activity in 2013-2014, which contributed to maintaining or improving Northern Ontario School of Medicine's initiatives for <i>Students with Disabilities</i>. A highlight could be a strategy, initiative or program viewed by Northern Ontario School of Medicine to be an innovative practice, success story and/or key accomplishment.</p>	<p>Please provide one or more highlights, in the space provided below of an activity in 2013-2014, which contributed to maintaining or improving Northern Ontario School of Medicine's initiatives for <i>First Generation Students</i>. A highlight could be a strategy, initiative or program viewed by Northern Ontario School of Medicine to be an innovative practice, success story and/or key accomplishment.</p>	<p>Please provide one or more highlights, in the space provided below of an activity in 2013-2014, which contributed to maintaining or improving Northern Ontario School of Medicine's initiatives for <i>Aboriginal Students</i>. A highlight could be a strategy, initiative or program viewed by Northern Ontario School of Medicine to be an innovative practice, success story and/or key accomplishment.</p>
<p>The Phase 2 (Year 3) of the NOSM MD program is a mandatory eight month longitudinal clerkship known as the Comprehensive Community Clerkship (CCC). During the CCC, NOSM provides students with clinical experiences away from the campuses of Sudbury and Thunder Bay. Students live and learn as small groups of up to eight learners in one Northern Ontario small urban or large rural communities for the entire eight-month period in which they are assigned to primary care practice settings. The aim of the Phase 2 curriculum is to provide academic and professionally relevant learning opportunities that, through small group sessions and clinical practice, exemplify reflective learning and comprehensive interprofessional care. The students increase their knowledge of medical care through clinical encounters and through the sociocultural context in which the patient and their family cope and adapt to their health care needs. The CCC experience is designed to enhance the NOSM learner's personal and professional development. Additionally, the nature of the course work and the learning-centered environment promotes critical thinking and lifelong learning skills. It is critical that UME learners with disabilities are well supported in these CCC placements. Although the community-based faculty member provides direction for the learner in achieving their academic goals, the learner must maintain a high level of motivation and a self-directed</p>	<p>Not Applicable since NOSM does not track the number of First Generation Students.</p>	<p>NOSM's Aboriginal Affairs Unit (AAU) strives to develop all of their programming through the Aboriginal world-view lens. NOSM has a resource of 20 Aboriginal Elders who support, provide direction, and facilitate cultural understanding. The continued involvement of the Elders assists NOSM in continued improvements on initiatives for the Aboriginal learners.</p> <p>AAU has an Elder-on-Campus Program which involves the UME students in various learning sessions, such as: Traditional cultural teachings & ceremonies, the four sacred medicines and the medicine wheel. Other sessions of mention are: treaties and governance, Aboriginal language, and cultural diversity.</p> <p>The AAU team includes Aboriginal Support Workers who maintain and improve internal initiatives for the successes of the Aboriginal learners through a number of activities and committees. These include the Elder-on-Campus program, Recruitment Working Group, Elders Gatherings, Orientation Week, Graduation, Health Science Summer (1-week) Camp (for youth), Aboriginal MMI Workshops (MMI interview prep), as well as supporting membership and attendance for UME Aboriginal learners to attend the Indigenous Health Conference, and Indigenous Physicians Association of Canada conferences and meetings.</p> <p>The Aboriginal Reference Group (ARG)</p>

<p>approach to their learning. Much of this learning is opportunistic and they are encouraged to engage in, and navigate through, specific learning needs wherever possible. In each CCC (there were 14 in 2013-14) community, students are provided with opportunities to meet all required learning objectives. This community dimension of DCEL creates significant challenges for NOSM to develop creative solutions for learners with disabilities with our community partners. As importantly, Phase 3 (Year 4 of the Undergraduate Medical Education program), which is a progression of the clerkship from the smaller distributed community hospitals in Phase 2, to an exposure to secondary and tertiary care of patients in the larger urban communities of Sudbury and Thunder Bay. The purpose of this third phase of the undergraduate curriculum is to provide students with in-depth experiences in the various specialties and subspecialties in the Academic Health Centres. In Phase 3, learners experience a continuum of care which seriously ill patients receive in the North. Phase 3 also provides students with an opportunity to experience, through core and elective experiences, various specialties which they may choose to pursue as career choices in their postgraduate training. Through core rotations in seven broad specialties, students are provided with a thorough background in women's health, internal medicine, surgery, children's health, mental health, emergency medicine and family medicine. Through electives, students experience medicine in different settings outside the traditional geographic area taught by NOSM. Finally, Phase 3 provides an important background of knowledge which will allow students to graduate and transition into the post graduate phase of medical education.</p>		<p>is considered to be the "Board" for AAU with membership from Northern Ontario Aboriginal organizations and territories. As well, Aboriginal learner representatives have official roles with ARG where they not only receive the support internally but also have a venue that will allow them to share their successes and any concerns with the members of this intricate and vital committee. The Chair of the ARG reports directly to the Dean of NOSM.</p> <p>Other unit-related activities are: the development and distribution of the "NOSM Elders Handbook: How the Medical School Engages and Works with the Aboriginal Elders"; the "Aboriginal Affairs Unit" handbook that provides information on the services and supports for new, current and potential Aboriginal learners; Recruitment postcards and promotional materials that reflect Aboriginality of NOSM; tutelage support; traditional ceremonial information, and supports for all NOSM staff, faculty and with emphasis on UME, IPE, and PGE learners. With NOSM's flagship UME module "106 Integrated Community Experience", student preparation for communities is managed by AAU with >6 mandatory sessions.</p> <p>In August 2014, NOSM hosted "Walking the Vision" Aboriginal Community Partnership Gathering offering a 3-day event with feedback to the community representatives as well as receiving input for future collaboration and success. This Gathering supports NOSM's mandate and strategic priorities in response to the social accountability of the North.</p>
---	--	--

3) Participation in the Credit Transfer System

The Ministry is developing long-term indicators for credit transfer in consultation with the sector. The Ministry anticipates that as data collection systems in institutions evolve, data sets will become more complete. In future years, the Ministry will be expecting more complete data with respect to the number and type of transfer students applying to and registering for university, number of students transferring under transfer pathways, and amount of credit granted.

Using Ontario Universities Application Centre (OUAC) reports, please provide data for 2013.

Year	Total Applications	Total Registrations	Transfer Applications*	Transfer Registrations*
2009	0(+)	0(+)	0(+)	0(+)
2010	0(+)	0(+)	0(+)	0(+)
2011	0(+)	0(+)	0(+)	0(+)
2012	0(+)	0(+)	0(+)	0(+)
2013	0	0	0	0

*Transfers from publicly assisted colleges in Ontario

NOTE: OUAC collects information on the number of transfer student applications and registrations. The Ministry recognizes that:

- *the transfer data set only includes those students who have applied to university through OUAC and have self-identified on applications to OUAC;*
- *a significant number of transfer students apply directly to the university and as such, are not captured in OUAC data;*
- *Information only includes full-time students applying and registering in the fall to the first year of a university program.*

The Ministry encourages **Northern Ontario School of Medicine** to augment the OUAC data with its own institutional data, particularly pertaining to college graduates entering university. Reporting this data is optional. In the space provided below, **Northern Ontario School of Medicine** should report institutional data which includes data from OUAC and other sources.

Year	Northern Ontario School of Medicine's Total Applications	Northern Ontario School of Medicine's Total Registrations	Northern Ontario School of Medicine's Transfer Applications	Northern Ontario School of Medicine's Transfer Registrations
2012	1974(+)	64(+)	0(+)	0(+)
2013	2115	64	0	0

*The space below is provided for **Northern Ontario School of Medicine** to describe methodology, survey tools, caveats and other information regarding the numbers reported above re: Transfer applications and registrations - Institutional data.

We download applicant data from OUAC(OMSAS) into our database and this is where these numbers are tracked and maintained. Due to the distributed nature of the curriculum, NOSM does not accept transfer students, all students must complete all four years of the Undergraduate Medical Education degree program.



In the space provided below, please provide one or more highlights of an activity that **Northern Ontario School of Medicine** used in 2013-2014, and which contributed to maintaining or improving **Northern Ontario School of Medicine's** efforts to develop and enhance credit transfer. A highlight could be a strategy, initiative or program viewed by **Northern Ontario School of Medicine** to be an innovative practice, success story and/or key accomplishment.

Due to the integrated nature of the curriculum, NOSM cannot accept transfer students.

4) Class Size

Per 2013 Common University Data Ontario (CUDO) report for Fall 2012, **Northern Ontario School of Medicine's** undergraduate class size for first entry* programs:

Class Size	First Year		Second Year		Third Year		Fourth Year	
	Number of Classes	Percentage of Total Classes	Number of Classes	Percentage of Total Classes	Number of Classes	Percentage of Total Classes	Number of Classes	Percentage of Total Classes
Fewer than 30	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
30 to 60 students	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
61 to 100 students	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
101 to 250 students	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
251 or more	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Total	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

* First entry programs include - arts and science, applied science, engineering. Second entry programs such as dentistry, law and medicine are not included in the above.



Please provide one or more highlights, in the space provided below, of an activity that **Northern Ontario School of Medicine** used during 2013-2014, which contributed to maintaining or improving **Northern Ontario School of Medicine's** class size initiatives. This could include a strategy, initiative or program viewed by **Northern Ontario School of Medicine** to be an innovative practice, success story and/or key accomplishment that **Northern Ontario School of Medicine** would like to highlight.

All NOSM students are second degree entry programs. Class size is being maintained at the expected planned 64 students per new entry year for the MD program.

5) eLearning

As part of the government's PSE Transformation agenda, the government is interested in expanding online learning and technology enabled learning opportunities for students in Ontario. **Northern Ontario School of Medicine** is asked to provide information on e-learning courses, programs and registrations in 2013-2014.

Fully Online Learning* and Synchronous Conferencing*

**DEFINITIONS:*

Courses:

A Fully Online Learning (asynchronous) course is a form of distance learning delivered to individuals with access to the Internet, either at home, work or through an access centre. Although courses may have a set start date and set due dates for assignments, students can otherwise access and participate in courses at times and places of their own choosing. The online component is typically over 80% of the total delivery. For example, a fully online course may include occasional face-to-face meetings, a proctored exam, etc. with the remainder of the content delivered online.

A Synchronous Conferencing course is delivered through audio and video conferencing to provide synchronous communications (i.e., at the same time) between an instructor at one site and students at other sites. Conferencing can make use of the public telephone system (ISDN), dedicated wideband networks or the Internet. A course is considered to be offered via synchronous conferencing if 80% or more of the content is delivered this way. For example, a synchronous conferencing course may have occasional face-to-face meetings, a proctored exam, etc. with the remainder of the content delivered through audio and video conferencing.

Programs:

A Fully Online Learning (asynchronous) program describes a program, which is considered to be fully online if 80% or more of its courses are fully online courses. As an example, suppose a program consisted of 10 courses where: 8 courses are delivered fully online and 2 courses are delivered via traditional face-to-face. In this case, 80% of courses in the program are fully online, and the program is defined as a fully online program.

A Synchronous Conferencing program describes a program, which is considered to be offered via synchronous conferencing if 80% or more of its courses are delivered via synchronous conferencing and 2 courses are delivered via traditional face-to-face. In this case, 80% of courses in the program are delivered via synchronous conferencing, and the program is defined as a synchronous conferencing program.

Course, Program and Registration Data:

 Based on the definitions provided above, provide **Northern Ontario School of Medicine's** eLearning data for 2013-2014:

COURSES DATA	UNDERGRADUATE	GRADUATE
Number of Ministry-funded, For-credit Courses Offered Through Fully Online Learning	0	0
Number of Ministry-funded, For-credit Courses Offered Through Synchronous Conferencing	0	0
Total Number of Ministry-funded, For-credit Courses Offered in eLearning format	0	0
PROGRAMS DATA	UNDERGRADUATE	GRADUATE
Number of Ministry-funded, For-credit Programs Offered Through Fully Online Learning	0	0
Number of Ministry-funded, For-credit Programs Offered Through Synchronous Conferencing	0	0
Total Number of Ministry-funded, For-credit Programs Offered in eLearning Format	0	0
COURSE REGISTRATIONS	UNDERGRADUATE	GRADUATE
Registrations in Ministry-funded, For-credit Courses Offered Through Fully Online Learning	0	0
Registrations in Ministry-funded, For-credit Courses Offered Through Synchronous Conferencing	0	0
Total Number of Registrations in Ministry-funded, For-credit Courses Offered in eLearning format	0	0

*The space below is provided for **Northern Ontario School of Medicine** to describe methodology, survey tools, caveats and other information regarding the numbers reported above re: eLearning Course, Program and Registration Data.

Learning medicine is an essentially hands on experience and as such the NOSM undergraduate medical program is primarily focused on face-to-face educational activities. However, we do run a distributed program with our learners going out to 90+ sites. At NOSM, Northern Ontario is our campus and technology enables us to deliver quality education. Of the 400+ academic sessions that run annually, nearly half of them rely on video conferencing technology between Thunder and Sudbury. One of the most important aspects of providing audio/visual technologies to service our distributed medical education is the network availability between campuses. To succeed in this respect, partnerships were formed and investments in networking technology were undertaken. One of our key partners is Orion. Orion provides and maintains a fibre optic network connecting all educational institutions in Ontario. This fibre optic network has allowed us to provide high speed connectivity between our two campuses, in turn, providing a reliable network in which to operate. In addition we work constantly with the Ontario Telemedicine Network (OTN) to use this network to Video Conference multiple sites together for various academic activities regularly. In addition to meet with new AODA regulations we have taken active steps in recording sessions for Learners with disabilities. Communications and information technologies are therefore an essential part of how we conduct our programs.



Hybrid Learning*

*A **Hybrid Learning course** is a course where face-to-face teaching time is reduced, but not eliminated, to allow students more time for online study. This model comes in a number of formats; however the online component is typically 50%-80% of the total course delivery. In this case, a hybrid learning course may have components delivered via traditional face-to-face; however, over half of the course delivery should be online.*

*A **Hybrid Learning program** is a program in which 80% or more of its courses are hybrid learning courses.*

In the space provided below, please highlight one example of **Northern Ontario School of Medicine's** use of Hybrid Learning courses and/or Programs.

Our learners are based at a number of different distributed sites throughout their studies and they combine technologies with face-to-face activities in almost all of their curriculum sessions. For instance, whole group sessions are delivered through synchronous video and/or webconferencing. Small group learning is facilitated through face-to-face learning, teleconference and videoconference depending on the location of the learners. Curriculum materials and study guides are exclusively published through our learning management system. Learners share documents on their PCs and on their iPads electronically. Clerks (years 3 and 4) use point of care mobile technologies to support their bedside learning.

Please provide one or more highlights, in the space provided below, of an activity that **Northern Ontario School of Medicine** used during 2013-2014, which contributed to maintaining or improving eLearning opportunities at **Northern Ontario School of Medicine**. This could include a strategy, initiative or program viewed by **Northern Ontario School of Medicine** to be an innovative practice, success story and/or key accomplishment that **Northern Ontario School of Medicine** would like to highlight.

We successfully moved all of our student assessment, program and faculty evaluation, and clinical encounter tracking online using the One45 platform. This has replaced a rather fragmented set of tools and has seen a significant increase in response rates and compliance as well as making these tasks more relevant and integrated into the program. NOSM students receive most curriculum materials on-line and the NOSM digital library service ensures that NOSM students, faculty and staff members have full access to the information and educational resources as if they were in an urban academic centre.



6) International Initiatives

Please provide the number of For-Credit outbound students and inbound students participating in student exchanges/study abroad/internships/international experiences that **Northern Ontario School of Medicine** had in 2013-2014:

- Outbound students* = 0

**DEFINITION: Outbound students are students who pay tuition at an Ontario college/university for credit received for study/work abroad.*

- Inbound students* = 0

**DEFINITION: Inbound students are international students participating in student exchanges/study abroad/internships/international experiences at an Ontario college/university to receive academic credit towards a credential granted by their home institution.*

Please list, in the table below, all For-Credit, Stand-Alone campuses, partner campuses or partnerships at which **Northern Ontario School of Medicine** delivers courses and/or programs **abroad (outside of Canada)** in 2013-2014, including city, country, programs offered, and total enrolment in each program offered at each campus:

Campus Name	City/Municipality/Country	List all programs offered at the Campus, Partner Campus or Partnership in 2013-2014	2013-2014 Total Enrolment by Program
N/A	N/A / N/A	0	0

*The space below is provided for **Northern Ontario School of Medicine** to describe methodology, survey tools, caveats and other information regarding the numbers reported above re: International Initiatives.

N/A

Please provide one or more highlights, in the space provided below, of an activity that **Northern Ontario School of Medicine** used during 2013-2014, which contributed to maintaining or improving **Northern Ontario School of Medicine's** international initiatives. This could include a strategy, initiative or program viewed by the institution to be an innovative practice, success story and/or key accomplishment that the institution would like to highlight.

N/A



7) Work-Integrated Learning*

As part of the Government's PSE Transformation agenda, the government is interested in expanding work-integrated learning (including co-operative education) to make future Ontario students more career and job ready. Co-ops, internships, work placements and other types of work-integrated, experiential or entrepreneurial learning are already available in colleges and universities, often in partnership with industry.

***DEFINITIONS:**

Work-Integrated Learning is the process where students learn from experiences in educational and practice settings and integrate those experiences for effective professional practice and employment (adapted from HEQCO, 2012).

A Co-operative Education Program is defined as one that formally integrates a student's academic studies with work experience. The usual plan is for the student to alternate periods of experience in career-related fields according to the following criteria (Canadian Association for Co-Operative Education, 2012):

- Each work situation is approved by the co-operative education institution as a suitable learning situation;
- The co-operative education student is engaged in productive work rather than merely observing;
- The co-operative education student receives remuneration for the work performed;
- The co-operative education student's progress on the job is monitored by the cooperative education institution;
- The co-operative education student's performance on the job is supervised and evaluated by the student's employer;
- The time spent in periods of work experience must be at least 30 per cent of the time spent in academic study.

Based on the definitions provided above, please provide WIL data for **Northern Ontario School of Medicine** in 2013-2014:

	<u>Undergraduate</u>	<u>Graduate</u>
Number of programs at Northern Ontario School of Medicine with a Co-op Stream	0	0
Number of students at Northern Ontario School of Medicine enrolled in a Co-op program	255	0

Please provide one or more highlights, in the space provided below, of an activity that **Northern Ontario School of Medicine** used during 2013-2014, which contributed to providing Work-Integrated Learning opportunities for students. Along with co-op, other examples of WIL include internships, mandatory professional practice, field experience, service learning, applied research projects, innovation incubators and other WIL opportunities. This could include a strategy, initiative or program viewed by **Northern Ontario School of Medicine** to be an innovative practice, success story and/or key accomplishment.

NOSM was the first medical school in the world in which all students undertake a longitudinal integrated clerkship, the Comprehensive Community Clerkship (CCC). Based in family practice, the CCC is the third year of the MD program. Rather than a series of clerkship block rotations, students meet patients in family practice such that “the curriculum walks through the door”. Students follow these patients and their families, including when cared by other specialists, so as to experience continuity of care in family practice. During the year, students achieve learning objectives that cover the same six-core clinical disciplines as in the traditional clerkship blocks. Students live in one of the 15 large rural or small urban communities in Northern Ontario, excluding the cities of Sudbury and Thunder Bay. This allows them to learn their core clinical medicine from the family practice, community perspective, while also gaining exposure to community-based specialist care.



8) Student Satisfaction

Please indicate the methods, in addition to the NSSE survey, that **Northern Ontario School of Medicine** used in 2013-2014 to measure student satisfaction.

NOSM uses one45 and regularly elicits on-line student evaluations of preceptors, modules, course, learning resources and learning outcomes. As well, the Student Independent Survey 2013 was generated to prepare for a Limited Site Visit by CACMS/LCME. The Northern Ontario School of Medicine Student Society surveyed all students in all four years. The report can be read through UMEC meeting minutes February 2014. Additionally, program evaluation completed on the UME program is robust and guided by a program Evaluation Committee that reports to UMEC monthly.

Please provide one or more highlights, in the space provided below, of an activity that **Northern Ontario School of Medicine** used during 2013-2014, which contributed to maintaining or improving student satisfaction at **Northern Ontario School of Medicine**. This could include a strategy, initiative or program viewed by **Northern Ontario School of Medicine** to be an innovative practice, success story and/or key accomplishment that **Northern Ontario School of Medicine** would like to highlight.

In the spring of 2014, the UME Committee committed to responding to each recommendation generated by the latest Student Satisfaction Survey as a result of a Limited-Site Visit from CACMS/LCME in February, 2014. Each recommendation has been discussed at many committee and working group meetings to ensure the student voices have been heard and issues addressed. Since the fall 2012, NOSM's Learner Affairs unit, through its Assistant Dean and Director, has been meeting monthly with the Learner Affairs Sub-Committee (a subcommittee of the NOSM Student Society) to discuss issues relating to the learning environment brought forward by the student body. In addition, Learner Affairs has implemented several initiatives designed to improve learner satisfaction at the school with one of the initiatives involving our Faculty Advisor Program. The program was significantly revised in an attempt to provide the learners with a better system for career and academic support. Although the intent of the program remained the same - to connect undergraduate learners with individual faculty to act as their physician mentor providing career guidance and academic support through the four years of the program - the format changed from individual meetings with one particular advisor to a combination of whole group, small group and individual advisor support.

9) Graduation Rate

*The graduation rate shown involves the selection of all First Year, New to the Institution, Undergraduate students from the Fall 2004 enrolment file who were seeking a Bachelors or First Professional degree, for whom an FTE value of 0.4 or greater is recorded, and who also have a valid Student ID number. This subset of Year One enrolments is then matched against records of students who received a Bachelors or First Professional degree from the same institution during the period 2005 - 2011 (subsequent 7 years). For students who received two or more degrees during this seven year period, every effort was made to use the initial degree awarded (based upon the year in which degree was awarded).

Please indicate any methods, in addition to the KPI survey results reported in 2013-2014, that **Northern Ontario School of Medicine** used in 2013-2014 to measure graduation rate.

N/A

Please provide one or more highlights, in the space provided below, of an activity that **Northern Ontario School of Medicine** used during 2013-2014, which contributed to maintaining or improving **Northern Ontario School of Medicine's** graduation rate initiatives. This could be a strategy, initiative or program viewed by **Northern Ontario School of Medicine** to be an innovative practice, success story and/or key accomplishment that **Northern Ontario School of Medicine** would like to highlight.

Since 2009 there have been six graduating classes with 337 graduates, from which 62% of graduates have chosen family medicine (predominantly rural) training. Almost all the other MD graduates are training in general specialities such as general internal medicine, general surgery and pediatrics, with a small number training in subspecialties like dermatology, plastic surgery and radiation oncology. NOSM offers residency training in family medicine through Family Medicine Residents of the Canadian Shield programs plus enhanced skills third-year postgraduate positions, and residency programs in eight other major general specialities. Seventy percent of residency graduates still practice in Northern Ontario. In the Medical Council of Canada (MCC) Part 1 examination, NOSM students have performed consistently above the national average, with very high scores in the section on clinical decision making.



10) Graduate Employment Rate

Please indicate any methods, in addition to the KPI survey results reported in 2013-2014, that **Northern Ontario School of Medicine** used in 2013-2014 to measure graduate employment rate.

The Canadian Residency Matching Service (CaRMS) annually releases data following the annual match process. In the final year of medical school, each student must apply for residency training to become a fully-trained physician. Postgraduate residency programs are offered at all Canadian medical schools in various disciplines (for example, family medicine, anesthesia, dermatology, orthopedic surgery, etcetera) ranging in duration from two to five years, or more. Acceptance to a residency program involves students applying to medical school in a discipline of their choice. Students are then invited to participate in an interview with the school. After the interview process, both the student and the program they have applied to rank each other for preference through CaRMS. CaRMS then matches students, based on rankings, to postgraduate residency programs across Canada.

Please provide one or more highlights, in the space provided below, of an activity that **Northern Ontario School of Medicine** used during 2013-2014, which contributed to maintaining or improving **Northern Ontario School of Medicine's** graduate employment rate. This could be a strategy, initiative or program viewed by **Northern Ontario School of Medicine** to be an innovative practice, success story and/or key accomplishment that **Northern Ontario School of Medicine** would like to highlight.

This year, all NOSM students except one were matched in the first CaRMS round (i.e. residency matching program) with 56% matched to family medicine (predominantly rural) residency programs, 36% matched to other general specialties like internal medicine, general surgery and paediatrics and 7% matched to subspecialties, including Dermatology, Radiation Oncology, ENT and Urology. 35% of this year's NOSM MD graduates will be undertaking their residency with NOSM. 52 of 57 places in NOSM residency programs were filled in this round including five of the seven Royal College programs (Psychiatry, Anesthesiology, Orthopedic Surgery General Surgery and Pediatrics), and six of the seven Family Medicine streams (including Rural).



11) Student Retention

Using data from **Northern Ontario School of Medicine's** Institutional Consortium for Student Retention Data Exchange (CSRDE) submissions, please provide **Northern Ontario School of Medicine's** achieved results for all years in the table below:

Entering Cohort	2009 Cohort	2010 Cohort	2011 Cohort	2012 Cohort
1st to 2nd Year	96.9%(+)	96.9%(+)	98.4%(+)	100%
1st to 3rd Year	100%(+)	96.9%(+)	95.5%	N/A(+)

*The space below is provided for **Northern Ontario School of Medicine** to describe the methodology, survey tools, caveats and other information regarding the numbers reported above re: Full-Time Student Retention Rate.

N/A

Please provide one or more highlights, in the space provided below, of an activity that **Northern Ontario School of Medicine** used during 2013-2014, which contributed to maintaining or improving **Northern Ontario School of Medicine's** retention initiatives. This could be a strategy, initiative or program viewed by **Northern Ontario School of Medicine** to be an innovative practice, success story and/or key accomplishment that **Northern Ontario School of Medicine** would like to highlight.

NOSM takes pride in providing individual attention to any and all medical students who may need a little extra service, advice, or accommodation to succeed. Additionally, our Learner Affairs programs, as well as, our early detection programs from Year 1 and 2 exams, allows us to work with our students very early in their medical studies to ensure proper remediation and overall success in the program.

12) Productivity and Innovation Fund (PIF)

Productivity and Innovation Fund (PIF) records indicate that **Northern Ontario School of Medicine** participated in the following institutional or multi-institutional PIF projects. Please indicate one or more examples of ongoing initiatives that resulted from the project that will continue in 2014-2015, such as knowledge sharing, expanded scope or expanded number of partner institutions.

Project Name	Project Number	Cost Savings/Cost Avoidance*	Ongoing Activity
Advancing Competency Based Education in NOSM's Anesthesiology Residency Program (Postgraduate Education) ⁽⁺⁾	NOSM-CPR1-1(+)	Decreasing resident travel and curriculum delivery costs.	All NOSM residency programs are now building on the customizations of the Anesthesia online learning environment and deploying their own uses of NOSM enhanced Learning Management System. It is anticipated that by July 2015 all of NOSM's residency programs will be actively using the LMS.

**DEFINITION: Cost Savings/Cost Avoidance is as reported in the Productivity and Innovation Final Report, June 30, 2014.*

Note: The cost savings/cost avoidance for multi-institutional projects has not been pre-populated as this information was provided to the Ministry at the project level, not by institution.

*The space below is provided for **Northern Ontario School of Medicine** to describe methodology, survey tools, caveats and other information regarding the numbers reported above re: Cost Savings/Cost Avoidance.

Cost-savings/avoidance description results from a qualitative review with the NOSM Anesthesia Program Director and NOSM's Chief Information Officer. Budget data has been reviewed for reduction/management of travel spending in the Anesthesia program.

Attestation:



Northern Ontario School of Medicine confirms that all information being submitted to the Ministry as part of the 2013-2014 Report Back is accurate and has received approval from **Northern Ontario School of Medicine's** Executive Head.

Contact:

For additional information regarding **Northern Ontario School of Medicine's** 2013-2014 Report Back please contact -

- Name: Grace Vita
- Telephone: 807-776-7396
- Email: gvita@nosm.ca

Please indicate the address on **Northern Ontario School of Medicine's** website where a PDF copy of this 2013-2014 Report Back will be posted once it has been approved by the Ministry (the Ministry will contact the individual listed above once the 2013-2014 Report Back has been approved):

- <http://nosm.ca>