

**FINAL ASSESSMENT REPORT AND IMPLEMENTATION PLAN**  
**Institutional Quality Assurance Process (IQAP) - Cyclical Program Review**

**Program:** Undergraduate Medical Education

**Degree:** Doctor of Medicine

**External Reviewers:**

Dr. Anthony Sanfilippo, former Associate Dean, UME, Queen's University

Dr. Alan Chaput, Vice-Dean, UME, University of Ottawa

**Internal Reviewers:**

Dr. Alain Simard, Assistant Dean Graduate Studies

Dr. Tom Crichton, Clinical Faculty

Julie Leroux, Year 3 UME learner, President, NOSM University Student Council, Sudbury Campus

Brieanne Olibris, Year 3 UME Learner, Thunder Bay Campus

**Important dates:**

November 15, 2023, AQAC reviewed the self-study package for completeness

January 30 and 31, 2024, Virtual Site Visit and Review took place

February 28, 2024, Provost received the Reviewers' Report

April 5, 2024, Provost received responses to the reviewers' report from the program leaders

April 30, 2024, Reviewed at AQAC

May 7, 2024, Approved by AQAC

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**Overview**

In accordance with NOSM University's Institutional Quality Assurance Process (IQAP), this Final Assessment Report (FAR) provides a summary of the Cyclical Program Review (CPR), the external evaluation and the internal response to the evaluation of the **Undergraduate Medical Education (UME) program**. This FAR considered the program self-study, the report from the external reviewers, as well as the responses from the UME program and academic leaders.

The FAR identifies the significant strengths of the UME program, the opportunities for program improvement and enhancement, and it sets out and prioritizes the recommendations that have been selected for implementation.

The FAR includes an Implementation Plan (IP) that identifies who will be responsible for approving and acting on the recommendations that have been selected for implementation. Furthermore, the IP identifies who will be responsible for providing any resources tied to those recommendations, who will be responsible for leading any changes in organization,

policy or governance (if applicable) that will be necessary to meet the recommendations and the timelines for acting on and monitoring the implementation of those recommendations.

The FAR (and IP) was reviewed and approved at the Academic Quality Assurance Committee (AQAC) on April 30, 2024, will be submitted for information to Senate on June 13, 2024, and will be sent to the Ontario Universities' Council on Quality Assurance (i.e. the Quality Council). Subsequently, the FAR is to be publicly accessible on NOSM University's [IQAP website](#). The FAR will be the only document made public related to this review process and all other documents will remain confidential to the Program/AQAC/Office of the Provost, which aligns with the Quality Council's expectations.

### **Executive Summary - Cyclical Program Review - UME Program**

In accordance with NOSM U's IQAP Cyclical Program Review Protocol, the review process was initiated by the Provost on August 4, 2023, by sending a Briefing Note (BN) and supporting documents to the Associate Dean (Dr. Lee Toner) and Senior Director (John Friesen) of the UME program. The timeline and target dates for each step were also outlined in the BN.

The self-study package (self-study and a series of supporting appendices including course descriptions, faculty CVs etc) was submitted to the Office of the Provost on November 3, 2023. The self-study presented the program description, learning outcomes, alignment with the university's mission, an update on the actions taken to address the recommendations from the 2012 cyclical program review, as well as a description of the program strengths and opportunities for growth. Next, AQAC reviewed the package for completeness and quality on November 15, 2023, and recommended that the review process move forward. The Provost reviewed the self-study package and approved that the package be forwarded to the review team which included two (2) arm's-length external reviewers both from Ontario and nominated by the program and approved by the Provost in consultation with the President (Drs. T. Sanfilippo, A. Chaput), two (2) internal reviewers (Drs. A. Simard and T. Crichton) and two (2) students from the UME program (J. Leroux, B. Olibris). The external reviewers determined that a virtual site visit would be most practical given the geographical distance between the two NOSM U campuses and considering the visit was scheduled on January 30 and 31, 2024 in the middle of the winter months when travel plans are more likely to be impacted by the weather. The site visit schedule was organized by the UME program leaders and staff with the support from the Office of the Provost. The self-study package, report template and instructions were sent to the external reviewers on December 1, 2024. The Provost and the Office of the Provost's Executive Assistant met with the external reviewers on December 11 to review the virtual site visit itinerary and to answer questions in advance of the site visit.

On January 30 and 31, 2024 the review team interviewed current UME students, full-time and stipendiary faculty from all divisions, the Associate Dean and Senior Director UME, UME support staff, Admission and Learner Support Services Directors and Assistant Deans, the Registrar and several senior administrators including the Vice-President and Associate VP Administration and

Finance, the Provost and Vice-President Academic and the President, Dean, Vice-Chancellor and CEO.

On February 28, 2024, the external reviewers submitted their final comprehensive report to the Office of the Provost. Shortly thereafter, the reviewers' report was shared with the UME program and academic leaders along with the response template. The Associate Dean UME submitted the combined response from both UME program and academic leaders to the Office of the Provost on April 5, 2024. The reviewers' report and in particular their recommendations and the UME program and academic leaders' responses to these recommendations were carefully reviewed by AQAC on April 30, 2024, and form the basis of this FAR. Specific recommendations were discussed and clarifications and corrections were presented. Follow-up actions and timelines were included.

### **Strengths of the UME Program**

In their report, the Reviewers highlighted that the following UME program strengths "position NOSM U well to develop and provide further much-needed innovation in medical education as needs expand and outstrip the traditional models." The noted strengths were 1) a committed and engaged student body, 2) institutional independence, 3) opportunities for expansion aligned with institutional goals and 4) a history of and potential for future innovation.

### **Areas of Improvement**

The reviewers' report identified six (6) potential areas for improvement, including: 1) more deliberate alignment of program goals with educational content, 2) a review and improvement of basic science curriculum, 3) better curricular governance, 4) improved assessment standards, and more consistency and integration, 5) enhanced research/scholarship and 6) more responsiveness to student feedback.

### **Summary of the Reviewers' Recommendations with the Program Responses**

The reviewers' report contained 10 recommendations, which have all been retained in the implementation plan.

The Associate Dean and Senior Director of the UME, in consultation with the Assistant Deans and other program Directors shall be responsible for monitoring the proposed actions and their timely implementation. The actions required in the implementation plan shall be the responsibility of the individuals in the roles as detailed in the following Table under 'Responsibility'.

**Table 1. Summary of the Reviewers' Recommendations with the Program Responses, Proposed Actions and Timelines**

UME Program Leaders = Senior Director; Administrative Director, Curriculum and Learning Environment; Director Assessment and Program Evaluation; Administrative Manager, Program Delivery; Administrative Manager, Educational Resources

UME Academic Leaders = Associate Dean; Assistant Dean, Phase 1; Assistant Dean, Clinical Education; Assistant Dean, Learner Affairs, Phase 2 Director, Phase 3 co-Directors, Theme Chairs

Recommendations	Responses and Proposed Actions	Responsibility	Timeline
<p><b><u>Recommendation 1</u></b> <b>Review Curricular Framework</b></p> <p><i>"Key goals would be to: Ensuring the MEPOs are sub-categorized and translated through the phase, module and sessional levels.</i></p> <p><i>Developing more consistency across themes.</i></p> <p><i>Clarifying the relationship and positioning of courses within the framework</i></p> <p><i>Ensuring the curricular content relevant to each MEPO can be tracked and reviewed through the overall curricular framework."</i></p>	<p><b>A) Response from Program Leaders:</b> <i>In agreement with the recommendation.</i></p> <p><u>Organizational, Policy, or Governance Changes:</u> Areas for Improvement directed from UME Curriculum Committee (UME CC).</p> <p><u>Required Resources:</u> Appropriate time commitments from Theme Chairs, Committee Chairs, Instructional Designers, and Faculty Development from CEPD to better understand MEPOs and leveling of curriculum. Institute UME CC working group consisting of all Theme Chairs to address consistency across themes.</p> <p><b>B) Response from Academic Leaders:</b> <i>In agreement with the recommendation and with Program Leaders' Response.</i></p> <p><u>Organizational, Policy, or Governance Changes:</u> Appropriate role for UME CC. Discussions initiated at the March 2024 UME CC meeting.</p> <p><u>Required Resources:</u> Additional curricular resources including Faculty time and Instructional</p>	<p><b>UME CC Co-Chairs;</b> Phase Committee Chairs; Theme Chairs; Instructional Designers; Database Administrator</p> <p><b>Oversight by UME CC and UMEC</b></p>	<p>6 to 18 months</p> <p>Starting September 1, 2024</p> <p>Ending between March 1, 2025, and March 1, 2026</p>

Recommendations	Responses and Proposed Actions	Responsibility	Timeline
	<p>Designer time to perform environmental scan of MEPOs at other Canadian medical schools. Review at UME CC level. Review RCLE list in Phase 2 and 3 to ensure alignment within the curriculum. Consider assigning task to Faculty members with curricular expertise.</p> <p><b>C) Proposed Actions:</b></p> <ol style="list-style-type: none"> <li>1) Ensure the MEPOs* are sub-categorized and translated through the phases, modules, and sessional levels (may require professional development support from CEPD, additional time from Instructional Designers, Theme Chairs which could include support from an external expert or consultant).</li> <li>2) Develop more consistency across Themes.</li> <li>3) Clarify the relationship and positioning of courses within the framework.</li> <li>4) Ensure the curricular content relevant to each MEPO can be tracked and reviewed through the overall curricular framework.</li> </ol> <p>*Medical Education Program Objectives</p>		
<p><b><u>Recommendation 2</u></b> <b><u>Basic Science Review</u></b></p> <p><i>"Undertake a review of basic science</i></p>	<p><b>A) Response from Program Leaders: In agreement with the recommendation.</b></p> <p><u>Organizational, Policy, or Governance Changes:</u></p>	<p><b>UME CC Co-Chairs;</b> Phase Committee Chairs; <b>Theme 4 Chair;</b> Theme 5 co-Chairs;</p>	<p>12-24 months</p> <p>Starting September 1, 2024</p>

Recommendations	Responses and Proposed Actions	Responsibility	Timeline
<p><i>within the curriculum, informed by a consideration of the scientific foundations of medical practice. That review should inform the curricular review suggested in Recommendation 1."</i></p>	<p>Area for Improvement directed from UME CC; add full-time clinical faculty positions in UME.</p> <p><u>Required Resources:</u> Appropriate time commitments from: Theme 4 Committee and Instructional Designers; Theme 5 to integrate basic sciences with clinical relevance; Clinical faculty members should become part of all Themes.</p> <p><b>B) Response from Academic Leaders:</b> <i>In agreement with the recommendation and with Program Leaders' Response.</i></p> <p><u>Organizational, Policy, or Governance Changes:</u> Review of basic science within the curriculum is an ongoing duty of the UME CC as part of curriculum renewal; A current initiative is in process that is looking at better alignment of basic and integrated medical sciences in the Phase 1.</p> <p><u>Required Resources:</u> Funding for full time clinical faculty position (hiring pending by Faculty Affairs). Dedicated resources for curriculum renewal as above including input from clinical faculty members. Hiring of full-time academic clinical faculty members. Support for clinical faculty members to partner with full-time faculty in delivery of basic science content. Consider external curriculum expert(s). Consider the addition of a rural clinical faculty member to each of the Theme committees.</p>	<p>Instructional Designers</p> <p><b>Oversight by UME CC and UMEC</b></p> <p>Collaboration with Faculty Affairs</p>	<p>Ending between September 1, 2025, and September 1, 2026</p>

Recommendations	Responses and Proposed Actions	Responsibility	Timeline
	<p><b>C) Proposed Actions:</b></p> <ol style="list-style-type: none"> <li>1) Continue to undertake a review of basic science within the curriculum, informed by a consideration of the scientific foundations of medical practice.</li> <li>2) Review Theme 4 MEPOs and their alignment with Theme 4 Module and Session Objectives and make changes as required to optimize alignment.</li> <li>3) Review the alignment between Theme 4 learning objectives and assessment items and implement changes to optimize alignment.</li> <li>4) Integrate Clinical Faculty members in all Theme Committees</li> <li>5) Create structures to foster collaboration between full-time faculty members and clinical faculty members in the delivery of basic science content.</li> </ol>		
<p><b><u>Recommendation 3</u></b> <b>Curricular Management</b></p> <p><i>“Review curricular governance and key educational leadership roles with the aim of developing greater clarity with respect to responsibility and authority for content delivery</i></p>	<p><b>A) Response from Program Leaders:</b> <i>In agreement with the recommendation.</i></p> <p><u>Organizational, Policy, or Governance Changes:</u> Theme Chairs and Theme/Module Content Coordinators be provided with support and resources to help coordinate learning objectives across Themes. UME CC to take a stronger lead</p>	<p><b>UME CC Co-Chairs;</b> Phase Committee Chairs; <b>Theme Chairs;</b></p> <p>Theme/Module Content Coordinators; Assistant Dean Phase 1; Assistant Dean Clinical</p>	<p>12-24 months</p> <p>Starting September 1, 2024</p> <p>Ending between September 1, 2025, and September 1, 2026</p>

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<p><i>and assessment through the curriculum. This might best be accomplished with an organizational review facilitated by individuals with appropriate expertise. The key positions established should interact at the Curriculum Committee level to ensure consistency and integration."</i></p>	<p>role in ensuring consistency and integration of the curriculum. A more active role by the Academic Clerkship Leads in both Phase 2 and Phase 3 is needed.</p> <p><u>Required Resources:</u> Appropriate time commitments from Faculty and Instructional Designers, Theme Chairs, Theme/Module Content Coordinators and Database Administrator to continue updating curriculum map to ensure the integration of content, objectives, and assessment items. IT resources needed to develop a framework in ExamSoft for mapping that matches Elentra curriculum map. UMEC to facilitate organizational review of governance and key educational leadership roles.</p> <p><b>B) Response from Academic Leaders:</b> <i>In agreement with the recommendation and with Program Leaders' Response.</i></p> <p><u>Organizational, Policy, or Governance Changes:</u> As above and establish Theme Chairs working group.</p> <p><u>Required Resources:</u> Define terms of reference and mandate of an operational review as suggested. Support and appropriate resourcing for UMEC to facilitate an operational review that would include input from medical and non-medical experts around governance.</p> <p><b>C) Proposed Actions:</b></p>	<p>Education; Phase Directors; Site Liaison Clinicians; Academic Clerkship Leads</p> <p><b>Oversight by UME CC and UMEC</b></p> <p>Collaboration with Faculty Affairs, NOAMA and LEGS</p>	



Recommendations	Responses and Proposed Actions	Responsibility	Timeline
	<ol style="list-style-type: none"> <li>1) UMEC to facilitate a review of curricular governance within the UME Program.</li> <li>2) Ensure consistency and integration of the curriculum.</li> <li>3) Create a Theme Chairs working group of UME CC to facilitate interactions and collaborations of individuals in key educational leadership roles with the Curriculum Committee.</li> <li>4) Create the structure and develop the process to ensure Theme Chairs and Theme/Module Content Coordinators coordinate learning objectives across Themes.</li> <li>5) Create the structure and develop the process for Phase 2 and Phase 3 Academic Clerkship Leads to be better integrated at the Curriculum Committee level.</li> </ol>		
<p><b><u>Recommendation 4</u></b> <b><u>Assessment</u></b></p> <p><i>“Develop more consistent principles and best practice standards for assessment through the program, with oversight and integration provided through a central assessment committee composed of faculty members, educational</i></p>	<p><b>A) Response from Program Leaders:</b> <i>In agreement with the recommendation.</i></p> <p><u>Organizational, Policy, or Governance Changes:</u> Expanded scope for Student Assessment and Promotions Committee (SAPC) and increased oversight of SAPC by UMEC. Revive the Assessment Working Group.</p> <p><u>Required Resources:</u> Increased time commitment</p>	<p><b>SAPC Chair;</b> <b>Director of Assessment and Program Evaluation;</b> UME CC Co-chairs; UME Administrative; Director-Curriculum Development; Assistant Dean-Clinical Education; Theme 5 Co-chairs</p>	<p>12-24 months</p> <p>Starting September 1, 2024</p> <p>Ending between September 1, 2025, and September 1, 2026</p>

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<p><i>consultants and students with appropriate interest, expertise, and authority. Such a group should have close links with the central Curriculum Committee and Faculty Development."</i></p>	<p>for faculty responsible for creating assessment items, Faculty Development from CEPD in areas of best practices for student assessment. Consider reaching out to external experts in student assessment. Additional Instructional Design resources.</p> <p><b>B) Response from Academic Leaders:</b> <i>In agreement with the recommendation and with Program Leaders' Response.</i></p> <p><u>Organizational, Policy, or Governance Changes:</u>                      Better integrate principles and best practice standards for integration in assessment through the UME Curriculum Committee; Re-establish Assessment Working Group to make recommendations to UME Curriculum Committee; Oversight of assessment practices could be provided by SAPC and UME CC.</p> <p><u>Required Resources:</u> Faculty development for UME CC and SAPC members around best practices in assessment; Resources to support audit of current assessment time and more effective mapping of assessment questions to objectives. Enhance communication and transparency with students (regular updates/reminders); Introduce a point of contact for students in the Assessment Office to seek clarification, assistance, and support.</p> <p><b>C) Proposed Actions:</b></p>		

Recommendations	Responses and Proposed Actions	Responsibility	Timeline
	<ol style="list-style-type: none"> <li>1) Revive the Assessment Working Group as a think tank to develop more consistent principles and best practice standards for assessment through the program, composed of faculty members and students with appropriate interest, expertise, and authority.</li> <li>2) Expand the scope of the Student Assessment and Promotions Committee (SAPC) with the appropriate support.</li> <li>3) Strengthen accountability mechanisms from SAPC to UMEC.</li> </ol>		
<p><b><u>Recommendation 5</u></b> <b>Research</b></p> <p><i>“Build on efforts already undertaken with the goal of expanding capacity for students to become engaged in active research. Faculty recruitment efforts should prioritize appointments that would contribute to student awareness and involvement. Although completion of projects need not be a curricular requirement, provision of appropriate opportunities for interested students would be welcome by them and enhance the profile of NOSM U within</i></p>	<p><b>A) Response from Program Leaders:</b> <i>In agreement with the recommendation.</i></p> <p><u>Organizational, Policy, or Governance Changes:</u> Hiring practices within Faculty Affairs.</p> <p><u>Required Resources:</u> Resources to develop catalog of research opportunities for students within the Research Office. Coordination of research opportunities with research content in the curriculum.</p> <p><b>B) Response from Academic Leaders:</b> <i>In agreement with the recommendation and with Program Leaders’ Response.</i></p>	<p>UME CC Co-Chairs;</p> <p><b>Vice Dean, Research, Innovation and International Relations;</b> Research Office; <b>Faculty Affairs</b></p>	<p>12-18 months</p> <p>Starting September 1, 2024</p> <p>Ending between September 1, 2025, to March 1, 2026</p>

Recommendations	Responses and Proposed Actions	Responsibility	Timeline
the medical community. “	<p><u>Organizational, Policy, or Governance Changes:</u> Increased integration of UME priorities and research interests of new faculty; Communicate existing clinical research opportunities within the UME program in Phase 1; Develop flexibility within the existing research curriculum to allow students to meet the requirements through their on-going research projects.</p> <p><u>Required Resources:</u> Development of a communication tool targeted at UME students that would include information about on-going research projects and research interests of human, medical and clinical science faculty members. Information about research grants, bursaries, and summer studentships could also be integrated; Communication and promotion of research opportunities in Phase 1; Development of new student research funding proportional to expanded numbers of students. Targeted recruitment of additional research faculty.</p> <p><b>C) Proposed Actions:</b></p> <ol style="list-style-type: none"> <li>1) Create more opportunities for students to become engaged in active research while building on curricular content.</li> <li>2) Develop a communication tool and/or strategy to better communicate existing research opportunities in human, medical and clinical division-led research.</li> </ol>		

Recommendations	Responses and Proposed Actions	Responsibility	Timeline
	<p>3) Develop a communication tool and/or strategy to inform students of research grants, bursaries and summer studentships.</p> <p>4) Prioritize stipendiary clinical Faculty appointments that would contribute to student research awareness and involvement.</p> <p>5) Target recruitment of new full-time research and teaching faculty.</p>		
<p><b>Recommendation 6</b> <b>Programmatic Review</b></p> <p><i>"The plan that has been developed should be supported and operationalized by developing and supporting a central Program Review Committee which:</i></p> <p><i>develops, manages, and collects ongoing internal program reviews,</i></p> <p><i>receives and examines external sources (MCC, CGQ)</i></p> <p><i>develops methods to seek feedback and monitor career directions of program graduates,</i></p>	<p><b>A) Response from Program Leaders:</b> <i>In agreement with the recommendation.</i></p> <p><u>Organizational, Policy, or Governance Changes:</u> Program Evaluation Committee (PEC) currently functions as "Program Review Committee". PEC to receive MCC annual results; Formalize link between PEC and Health Education and Workforce Impact study (formerly "Tracking" study); PEC needs to empower faculty to articulate improvements made based on PE report data; Fully implement Program Evaluation and Engagement Tracking (PEET) Tool and ensure that the UME CC, Themes and Phases are accountable to implement changes.</p> <p><u>Required Resources:</u> Tracking study data analysis may need more resources; Theme 6 membership may need to increase; Faculty and leader time to</p>	<p><b>Director, Assessment and Program Evaluation</b> Program evaluation Committee (PEC)</p> <p><b>Oversight by UME CC and UMEC</b> Collaboration with PWS, EI</p>	<p>6 - 18 months</p> <p>Starting September 1, 2024</p> <p>Ending between March 1, 2025, and March 1, 2026</p>

Recommendations	Responses and Proposed Actions	Responsibility	Timeline
<p><i>examines and reports on findings to curricular and program leadership,</i></p> <p><i>ensures “loop closure” on key issues.”</i></p>	<p>populate and implement PEET Tool; Information Technology to support processes.</p> <p><b>B) Response from Academic Leaders:</b> <i>In agreement with the recommendation and with Program Leaders’ Response.</i></p> <p><u>Organizational, Policy, or Governance Changes:</u> The role of Program Review Committee is currently being filled by the Program Evaluation Committee. The PEET Tool is designed to collect internal (student program evaluation data) and external data (MCC Results, CaRMS match, AFMP Graduation Questionnaire, accreditation reports) and report to program leaders. Once fully implemented, it will also ensure “loop closure” on key issues; UME CC has formalized the UME Program Curriculum Review, Revision and Renewal – Continuous Quality Improvement Cycle in March 2024; Development of communication strategies to ensure further “loop closure” on key issues (live dashboard, update on MyCurriculum, Town Halls)</p> <p><u>Required Resources:</u> Development of “Dashboard” for live PE/CQI tracking (such as Program Evaluation Engagement Tracking (PEET) Tool); Develop a live “Element Rating Tool” for on-going monitoring of accreditation requirements; Software and IT resources.</p> <p><b>C) Proposed Actions:</b></p>		

Recommendations	Responses and Proposed Actions	Responsibility	Timeline
	<ol style="list-style-type: none"> <li>1) Fully implement PEET tool. Build upon the newly approved UME Program Curriculum Review, Revision and Renewal - CQI framework.</li> <li>2) Develop methods to seek additional feedback internally (from e.g. Office of Physician Workforce Strategy (PWS), Office of Equity and Inclusion (EI)).</li> <li>3) Develop methods to monitor career directions of program graduates.</li> <li>4) Develop and implement a communication strategy to ensure 'loop closure' on key curriculum improvement initiatives (via Program Evaluation Engagement Tracking (PEET) Tool, dashboard/virtual banner, MyCurriculum, implement formal office hours for UME Academic Leaders and report back to program leadership.</li> </ol>		
<p><b><u>Recommendation 7</u></b> <b><u>Student Feedback</u></b></p> <p><i>"Explore methods to promote more effective student feedback."</i></p>	<p><b>A) Response from Program Leaders:</b> <i>In agreement with the recommendation.</i></p> <p><u>Organizational, Policy, or Governance Changes:</u> Students provide regular feedback through program evaluation surveys. Students are also represented on key UME committees (UMEC, UME CC, Phase 1, 2 and 3 committees) and meet</p>	<p><b>UMEC Chair;</b> UME CC Co-Chairs; Associate Dean-UME; Assistant Dean-Phase 1; Assistant Dean-Clinical Education; Phase 2 Director; Phase 3 Co-Directors; Director of Assessment;</p>	<p>6 - 12 months</p> <p>Starting September 1, 2024</p> <p>Ending between March 1, 2024, and September 1, 2025</p>

Recommendations	Responses and Proposed Actions	Responsibility	Timeline
	<p>with Chairs of those committees prior to meetings. Data is also gathered through accreditation related activities. Better communication around actions taken as a result of feedback would help improve the effectiveness of student feedback.</p> <p><u>Required Resources:</u> Time for curricular leaders to meet with students. Communication strategy to effectively follow up on actions taken as a result of student feedback.</p> <p><b>B) Response from Academic Leaders:</b> <i>In agreement with the recommendation and in partial agreement with Program Leaders' Response.</i></p> <p><u>Organizational, Policy, or Governance Changes:</u> Develop curricular initiatives within Theme 2 to educate students on how to provide feedback in a professional manner; Add invited guests from leadership to UME Town Hall meetings as needed.; Continue with Phase 2 Roundtable discussions; Student representatives currently meet with Chairs of UMEC, UME CC and Phase 1 Committee; Phase 2 and 3 meetings include standing agenda items for student concerns; Continue to meet regularly with NOSM U Student Council leaders.</p> <p><u>Required Resources:</u> Curriculum development and delivery resources for Theme 2; Coordination</p>	<p>SAPC Chairs; Theme Chairs; NOSMU SC leaders</p>	



Recommendations	Responses and Proposed Actions	Responsibility	Timeline
	<p>and planning of sessions to ensure students and key leaders can attend; Coordination and planning of pre-meetings to ensure that key leaders can attend.</p> <p><b>C) Proposed Actions:</b></p> <ol style="list-style-type: none"> <li>1) Explore methods to promote more effective student feedback.</li> <li>2) Add invited guests from leadership to UME Town Hall meetings as needed. Create a regular Town Hall meeting schedule a year ahead to maximize student participation.</li> <li>3) Encourage use of existing PE tracks. Disseminate widely, promote and maintain Student Feedback pages per Phase in order to assist students as to where their feedback should go and where they can find assistance.</li> <li>4) Move the standing agenda item to receive student feedback to the start of UMEC, UME CC and Phase Committee meetings.</li> <li>5) Provide a leadership and training program for the NOSM U Student Council Representatives who sit on committees to support their participation and development.</li> </ol>		
<b><u>Recommendation 8</u></b>	<b>A) Response from Program Leaders: In</b>	<b>UME CC Co-Chairs;</b>	12-24 months

Recommendations	Responses and Proposed Actions	Responsibility	Timeline
<p><b>Monitoring of progress and student support through Clerkship</b></p> <p><i>"Consider establishment of milestones at various points where academic and professional development can be assessed, utilizing multiple assessment modalities. Consider "360" approaches incorporating input from other professionals and patient feedback to fully assess progress in all competency domains."</i></p>	<p><i>agreement with the recommendation.</i></p> <p><u>Organizational, Policy, or Governance Changes:</u> Consider changes to the SAPC Terms of Reference. Explore the option of developing a "student progress sub-committee" of SAPC to evaluate student milestones as they progress through the program.</p> <p><u>Required Resources:</u> Support and resources for "progress sub-committee".</p> <p><b>B) Response from Academic Leaders:</b> <i>In agreement with the recommendation and in partial agreement with Program Leaders' Response.</i></p> <p><u>Organizational, Policy, or Governance Changes:</u> Establishment of milestones throughout the 4 years of the program where academic and clinical skill development can be assessed; Develop clinical assessment activities in Phase 2 and 3 that incorporate feedback from patients and other professionals. Development of "progress committee".</p> <p><u>Required Resources:</u> Additional support for Assessment office and OSCE Committee to develop new assessment tools. Support for a new "progress committee".</p> <p><b>C) Proposed Actions:</b></p>	<p>Director of Assessment and Program Evaluation; Assistant Dean-Clinical Education; OSCE Committee Chair; Phase 2 Director; Phase 3 Co-Directors; <b>UMEC Chair</b></p>	<p>Starting September 1, 2024</p> <p>Ending between September 1, 2025, and September 1, 2026</p>

Recommendations	Responses and Proposed Actions	Responsibility	Timeline
	<ol style="list-style-type: none"> <li>1) Task the revived Assessment Working Group to establish milestones throughout the 4 years of the program at various points where academic and professional development can be assessed, utilizing multiple assessment modalities.</li> <li>2) Develop clinical assessment activities in Phase 2 and 3 that incorporate input from other professionals and patient feedback to fully assess progress in all competency domains.</li> <li>3) Develop a “student progress” committee to assess progress of students in the program by enhancing and supporting the In Camera session of the SAPC in order to highlight appropriate milestones.</li> </ol>		
<p><b><u>Recommendation 9</u></b> <b>Financial Support for UME</b></p> <p><i>“This review did not explore all aspects of funding the UME program but did hear that the annual budgeting process does not provide discretionary (uncommitted) funding. Any unanticipated expenses require specific ad hoc submission and acceptance. Although no major concerns were raised by those</i></p>	<p><b>A) Response from Program Leaders:</b> In agreement with the recommendation.</p> <p><u>Organizational, Policy, or Governance Changes:</u> Create a new budget code for this money.</p> <p><u>Required Resources:</u> Increased funding to UME.</p> <p><b>B) Response from Academic Leaders:</b> In agreement with the recommendation and in partial agreement with Program Leaders’ Response.</p>	<p><b>UME Senior Director; UME Associate Dean</b></p>	<p>Starting May 1, 2024, and ongoing yearly</p>

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Recommendations	Responses and Proposed Actions	Responsibility	Timeline
<p>contributor. However, it brings both opportunities and threats. During the review some preliminary strategies for expansion were shared. It seems clear from this review that a simple expansion of current operations and approaches could seriously threaten the quality of the educational experience in a number of ways. Rather, a fundamental change in approach and design will likely be required, building on the unique strengths noted above.</p> <p>It is critical that as expansion plans are developed, a careful and parallel analysis of their educational impact be carried out and used to both modify plans as they are developed and consider dramatically different approaches as needed. This should be carried out by individuals focused primarily (solely) on educational goals. It is suggested that an <b>Educational Impact Review Group</b> be developed, consisting of faculty, administrative staff, students and potentially consultants with educational focus and expertise, to be tasked with undertaking a thoughtful, educationally-focused review of expansion plans and</p>	<p>expertise across the program.</p> <p><u>Required Resources:</u> Time and funding for membership of review group; Project Manager for UME Expansion.</p> <p><b>B) Response from Academic Leaders:</b> In agreement with the recommendation and in partial agreement with Program Leaders' Response.</p> <p><u>Organizational, Policy, or Governance Changes:</u> Develop Educational Impact Review Group as an advisory group to UME CC with membership that includes students, faculty, administrative staff, and community partners; Task would be to conduct an educational review of expansion plans and look for creative opportunities to develop unique NOSM U curricular structures that will improve the educational experience of students.</p> <p><u>Required Resources:</u> Resources to support the work of the group including administrative support; Consultant with educational focus and expertise; Manager/Director for UME expansion.</p> <p><b>C) Proposed Actions:</b></p> <p>1) Before adding the additional proposed Educational Impact Review Group (EIRG), determine whether existing committee structures within the UME program are</p>	<p>Education; Phase Directors; Site Liaison Clinicians; Academic Clerkship Leads</p> <p><b>Oversight by UME CC and UMEC</b></p>	

Recommendations	Responses and Proposed Actions	Responsibility	Timeline
<i>creative development of new opportunities and approaches that will allow NOSM U to undertake expansion without compromising, but rather improving the educational experience of its students."</i>	<p>sufficient to monitor the impact of expansion on the medical education program.</p> <p>The EIRG or an existing UME committee will make recommendations to:</p> <ol style="list-style-type: none"> <li>2) Adjust program delivery methods or propose different approaches to program delivery that will maintain program goals during program expansion.</li> <li>3) Adjust program delivery methods or propose different approaches to program delivery that will maintain or improve the educational experience of students during program expansion.</li> <li>4) Monitor the impact of program adjustments or changes due to expansion on program goals and learning outcomes on a yearly basis.</li> </ol>		

### **Academic Quality Assurance Committee Recommendation**

NOSM University's AQAC reviewed the above documentation, and the committee recommends that the UME program should follow the course of action as detailed in Table 1 above. The details of the progress made for each recommendation will be presented in the 18-month progress report as stipulated in the Cyclical Program Review Protocol in NOSM University's IQAP. In this case, **the 18-month progress report will be due no later than December 13, 2025**, and will be submitted to the Office of Provost and Vice-President Academic.

**The next full external cyclical program review is to be initiated no later than August 1, 2028, and the entire process concluded before June 30, 2029.** This shorter interval (< 8 yrs, 2023-2024 and 2028-2029) is because the review process should normally have taken place within 8 years after the 2012 review (i.e. 2011-2012 and 2019-2020) but was delayed due to the pandemic and other matters out of the program's control including NOSM U's transition to an autonomous university. If there are no serious concerns with the UME program after the 2028-2029 review, the program can return to the regular 8-year cycle between reviews (2028-2029 and 2036-2037).