

Undergraduate Medical Education

Course and Faculty Review Committee Terms of Reference



Approved by Curriculum Committee: November 23, 2017

Supersedes: All previous UGME Course and Faculty Review Committee (CFRC) Terms of Reference

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Revision: July 10, 2017

October 20, 2014

Original date unknown

Effective Date: July 1, 2017

Part I: Mandate and Responsibilities

Mandate

The Course and Faculty Review Committee, reporting to the Curriculum Committee, provides systematic and impartial course and faculty reviews and develops reporting processes ensuring compliance with relevant accreditation standards.

Major Responsibilities

1. Establish parameters for evaluation of all medical courses, subject to review and approval by Curriculum Committee.
2. Approve faculty and course evaluation methodology including the content of questionnaires.
3. Determine if additional evaluation tools or processes are required and initiate the process of development and implementation of additional evaluation tools.
4. Review data from course evaluations and faculty evaluations.
5. Prepare course evaluation reports to the Curriculum Committee at least annually or as required.
6. Report on strengths, weaknesses, and recommendations for course and faculty improvement.
7. Liaise with Student Assessment Committee and Teaching, Learning and Integration Committee.
8. Ensure compliance with and provide content material for all of the following elements of the accreditation standards that pertain to course and faculty review (described in Appendix B):

- 8.3 Curricular Design, Review, Revision/Content Monitoring
- 8.5 Medical Student Feedback

Part II: Leadership & Membership

Leadership

The Chair of the Committee will be held by the Director, Course and Faculty Review, as appointed by the UGME Associate Dean.

Membership

Voting Members

Director, Course and Faculty Review (ex officio)

Minimum of 6 Faculty of Health Science faculty members as appointed by the UGME Associate Dean as follows:

- at least one basic science faculty
- at least one faculty member involved in clerkship curriculum
- at least one faculty member involved in preclerkship curriculum

4 students: curricular reps for each year (represent one vote)

UGME Educational Developer

Resources (non-voting)

UGME Associate Dean (ex officio)

Director, Accreditation and Quality Improvement (ex officio)

Representative from Student Assessment Committee

Representative from the Teaching, Learning and Integration Committee

Committee Secretary

Exclusions to Membership

Faculty members with major curricular portfolios are ineligible for membership. This includes, but is not limited to Year Directors, Clerkship Director, and Clinical Skills Director.

The Chair may invite such guests as are necessary to conduct the meeting.

All new members will receive a copy of the Terms of Reference and will be oriented to the position by the Chair.

Responsibilities of Members

All members will participate actively in the committee by:

- Reviewing all pre-circulated material
- Attending at least 70% of the meetings and electronic votes
- Participating in working groups, as required
- Completing In Depth Course Reviews, as required
- Communicating committee activities and decisions as appropriate

Term of Membership

Members will normally serve a three-year term, renewable once, unless a member by virtue of office in which case the term of membership will coincide with the term of office. Terms will be overlapping in order to ensure continuity of experience.

Part III: Meeting Procedures

Frequency and Duration of Meetings

Meetings will be held at least once per academic term and otherwise at the call of the Chair.

Conflict of Interest

Members are expected to declare a conflict of interest if their real or perceived personal interests might be seen to influence their ability to assess any matter before the committee objectively. They can do so either by personal declaration at a meeting or in writing to the Chair. They will be excused from any discussions regarding the matter in question. The declaration and absences will be recorded in the minutes.

Committee Members also holding the role of Course Director must declare a conflict of interest in discussions and votes involving the course they direct.

Decision-Making

Decisions will be made by majority vote of a quorum of members present.

Quorum for the purpose of approving minutes or passing motions will be 50% plus one of all voting members, either present in person or via teleconference.

Meetings may be held in the absence of a quorum, but no decisions will be made.

Decisions will be discussed in the context of specific motions, passed by a majority vote of members and recorded in the minutes.

Decisions will be discussed in the context of specific motions, passed by a majority vote of members and recorded in the minutes. The Chair will aim to build consensus, if possible (see Appendix A), but the final decision will be made by voting.

Votes may be conducted electronically, if necessary.

The Chair, or Acting Chair, will only vote in order to break a tie.

Part IV: Administrative Support & Communication

Administrative Support

The Secretary will be a member of the staff of the Undergraduate Medical Education Office, appointed by a Manager.

Agenda & Minutes

- Agendas and minutes of committee meetings are to be distributed to the committee members by the recording secretary.
- Minutes are normally distributed electronically to all members within one week of meetings.

Reporting Relationship

The committee will produce an annual report of its activities to be submitted to the Curriculum Committee.

Part V: Evaluation

The committee will review its membership, terms of reference, rules and procedures at least every three years, and as necessary. The Chair will report the results of the review to the Curriculum Committee.

Part VI: Policy References

The School of Medicine's policies are posted to <http://meds.queensu.ca/undergraduate/policies>

Rules of Order

The School of Medicine's committees follow *Bourinot's Rules of Order*.

A summary of *Bourinot's Rules of Order* is available at:

<http://www.queensu.ca/secretariat/senate/rules-glance>

APPENDIX A

Consensus-Based Decision Making *Rules for Building a Consensus*

A consensus requires that everyone involved in the decision must agree on the individual points discussed before they become part of the decision. Not every point will meet with everyone's complete approval. Unanimity is not the goal, although it may be reached unintentionally. It is not necessary that everyone is satisfied, but everyone's ideas should be reviewed thoroughly. The goal is for individuals to understand the relevant data, and if need be, accept the logic of differing points of view.

The following rules are helpful in reaching a consensus:

- Avoid arguing over individual ranking or position. Present a position as lucidly as possible, but consider seriously what the other group members are presenting.
- Avoid "win-lose" stalemates. Discard the notion that someone must win and, therefore, someone else must lose. When an impasse occurs, look for the next most acceptable alternative for both parties.
- Avoid trying to change minds only in order to avoid conflict and achieve harmony.
- Withstand the pressure to yield to views that have no basis in logic or the supporting data.
- Avoid majority voting, averaging, bargaining or coin flipping. These techniques do not lead to a consensus. Treat differences of opinion as indicative of an incomplete sharing of information -- so keep probing.
- Keep the attitude that the holding of different views by group members is both natural and healthy. Diversity is a normal state; continuous agreement is not.
- View initial agreement as suspect. Explore the reasons underlying apparent agreement on a decision and make sure that all members understand the implication of the decision and support it willingly.

APPENDIX B

CACMS Standards and Elements Effective July 1, 2018

8.3 Curricular Design, Review, Revision/Content Monitoring

The faculty of a medical school are responsible for the detailed development, design, and implementation of all components of the medical education program, including the medical education program objectives, the learning objectives for each required learning experience, and instructional and assessment methods appropriate for the achievement of those objectives. The curriculum committee oversees content and content sequencing, ongoing review and updating of content, and evaluation of required learning experiences, and teacher quality. The medical education program objectives, learning objectives, content, and instructional and assessment methods are subject to ongoing monitoring, review, and revision by the curriculum committee to ensure that the curriculum functions effectively as a whole such that medical students achieve the medical education program objectives.

8.5 Medical Student Feedback

In evaluating medical education program quality, a medical school has formal processes in place to collect and consider medical student evaluations of their required learning experiences, teachers, and other relevant aspects of the medical education program.