

Faculty of Health Sciences
School of Medicine Academic Council (SOMAC)
Minutes of Meeting, Tuesday October 21, 2014
School of Medicine Building, Room 132A @ 4:30 p.m.

1. 1. Call to Order

The Chair called the meeting to order at 4:35 p.m. with approximately 40 people present.

2. Approval of Agenda

It was moved by S. Archer and seconded by S. Maranda that the agenda be approved with the addition of “UGME Program Evaluation Committee terms of reference” to item #4 and the deferral of item #7 “Research Data Management in Health Sciences” Bracken Library. **CARRIED**

3. Approval of the Minutes of May 20, 2014

It was moved by R. Walker and seconded by J. Drover that the minutes of May 20, 2014 be approved as circulated. **CARRIED**

The Dean/Chair thanked everyone for coming and giving us quorum, as there are several policies and terms of reference of committees that need to be discussed and approved, as they are critical for our upcoming Medical accreditation.

4. Undergraduate Medical Education

T. Sanfilippo reported that the School of Medicine is on a countdown to accreditation. The visit will happen from March 29 to April 1, 2014. The last accreditation visit was in 2007. At that time we were found to be in non-compliance in 16 standards with 4 standards in transition out of 125 standards at that time. As a result we were asked to undergo another site visit in 2009. We managed to get the non-compliance issues down to 3 and 6 standards were now in transition. The Canadian accreditors thought this was good progress but the American accreditors thought that it wasn't and they threatened probation. We had to appeal that decision and we were successful. They then brought together their recommendations and rather than probation we had another visit in 2012. At this time we had only 3 standards that needed monitoring.

We are now looking at a different accreditation with brand new accreditation standards. Because of this we have a number of issues that were identified through our own survey and mock accreditation we went through recently. These are issues that relate directly to accreditation standards. All of the following documents distributed with this agenda will cover off some of these issues and standards. The 128 standards are concentrated on identification of process and procedures on everything that we do. We have to show that

these processes and procedures are in place and the requirements of the accrediting agency are met.

All of the following documents have been put together and been previously approved by the MD-PEC.

- **Updated Terms of Reference for Progress & Promotions Committee**

This is a revision to the previous document to bring it up to date and to bring it into its proper form in outlining its responsibilities more clearly. The fundamental principles and roles remain the same. The main change is that this committee now concentrates more on the supervision of the individual student.

- **Updated Terms of Reference for Professionalism Advisory Committee**

This is a revision to a previous document. This Committee is a subcommittee to the Progress & Promotions Committee which deals with individual issues of student professionalism. It adjudicates specific incidents and does not determine consequence but looks at the details of the particular incident and makes a determination of the severity and hands over to the Progress and Promotions Committee who will determine the action.

- **Diversity and Equity Statement & Background Document**

This is a new document that is a key document that gives us the ability to address diversity issues as they are laid out in accreditation. We need to embrace the University diversity principles that are directed to equity across the board. We need to have processes in place that reflect these principles. As well, the School of Medicine needs to address their own targets such as equity with the Aboriginal people and those facing economic barriers to study medicine.

- **Diversity Advisory Panel Terms of Reference**

This panel is put into place to advance the diversity targets. It will consist of students and faculty here and beyond. They will look at our practices and disperse the diversity funds to help programs already in place to function more fully. Dr. Flynn will Chair and they are also seeking a diversity lead within the faculty.

- **Updated Student Progress & Promotion Policy**

This is a revision to the current document. This outlines the criteria and processes that students are deemed to be successful and principles of the MD and QuARMS are reviewed. It speaks to processes that are in place for students who do not do well. How professionalism is dealt with. How remedial programs are put in place. How leaves of absences are dealt with. It speaks to the appeals process and is now rigorous

and consistent with Queen's and Faculty policies.

- **Academic Accommodations Policy**

This is a new policy that deals with student personal issues. It speaks to how we deal with students with special needs. It involves the Queen's disabilities Centre so students can get a review of their issue who in turn sends back recommendations to the School what is needed to accommodate that student. This allows the student to have an arms length review on their accommodation that is outside the faculty who would eventually be doing their evaluations.

- **Updated Student Professionalism Policy**

This is a revision to the current policy. It speaks to the principles of professionalism that is expected. It references a number of documents within the hospitals, University and the medical community. It speaks to types of infractions and defines them as minor, major or critical. It also speaks to exemplary behavior. It is a key document for the Student Professionalism Advisory Committee.

- **MD Program Academic Affairs Committee**

This is a new committee that has a mandate for the development of policy and oversight of the student experience. Responsibilities speak to progress and promotion and professionalism. It is also the body that deals with communicable disease and immunization, student registration, awards and transcripts and complaints of conduct.

- **Curriculum Committee Terms of Reference**

This is a revision and the reason for this revision is that accreditation dictates that the Curriculum Committee must be the central authority for the MD program. They have altered the mandate that goes back to the jurisdiction of the Royal Charter of 1841 that established Queen's University. They have altered the document to take out any references whereby decisions of that committee require approval of the bodies. The decisions are sent to other bodies but these decisions don't require second approval by these bodies. The Curriculum Committee decisions will be reported directly to the MD-PEC but they don't require a second approval.

- **UG Conflict of Interest SOP**

This is an operating procedure and it is intended to provide procedures for our school that ensure that issues of conflict of interest are anticipated and dealt with before they actually become issues. We are asking all of our teachers and committees that any conflicts of interest be declared at the start of each year and each meeting. There will be a disclaimer on all documents.

- **Access to Student Records & Privacy Procedures**

This is a new document that outlines how the UG office is acting custodian of University records. The active records room is locked during non-business hours with limited access to the key. The storage of archived records is locked at all times with limited access to the key. All student records are still maintained in paper copy.

- **Student Assessment Committee**

This is a revision to the previous committee. There are small changes to the membership and the reporting responsibilities. This committee will now report to the Curriculum Committee.

- **UG Student Assessment Policy**

This is a revision to the current policy. This policy speaks to exams and exam marking, determining passing, determining student counseling which is mandatory for students who are close to failing. For governance and review of the system and formative assessment.

- **Teaching Learning and Innovation Committee**

This is a revision to the current terms. The only change is to add a librarian representative.

- **UGME Program Evaluation Committee**

This is a new committee designed to provide oversight on the overall program. This committee gives advice to make sure that we have processes in place to make sure we have met the competency-based objectives that we have established. This committee will be charged with putting processes in place to ensure that the data is appropriately vetted. Also charged with producing new procedures and processes.

MOTION

There being no questions, T. Sanfilippo moved that all the above policies and terms of reference be approved by the School of Medicine Academic Council.

G. Brown then seconded it. All were in favour.

CARRIED UNANIMOUSLY

- **Appointment of Dr. Chris Parker as Chair of the Professionalism Advisory Committee for a 3 year term ending June 30, 2017**

It was moved by T. Sanfilippo and seconded by B. Bennett that Dr. Christopher Parker be approved as Chair of the Professionalism Advisory Committee for a three-year term ending June 30, 2017.

CARRIED

- **Results from Mock Accreditation**

T. Sanfilippo talked about this earlier in the meeting in item #4.

- **Fall Convocation of Medical Student approved by Progress and Promotions Committee**

R. van Wylick moved and R. Fitzpatrick seconded that the one medical student be approved to graduate in the fall of 2014.

5. Postgraduate Medical Education

- **Revised Policy – Leaves of Absence and Summary of Changes**

R. Walker reported that they have moved a large part of the content out of the old policy into a new preamble. They have made it clearer on the different types of leaves. It is now more specific about unpaid leave. The major change is a component “A resident may be absent for a maximum of one week or less with pay in each academic year without academic penalty (changed from 2 weeks to 1 week). This policy has very clear procedures now when a resident takes a leave.

It was then moved by R. Walker and seconded by H. MacDonald that the revised policy Leaves of Absence for postgraduate residents be approved by SOMAC.

CARRIED UNANIMOUSLY

7. Vice-Dean Medical Education

- **Draft Policy – Conflict of Interest**

L. Flynn reported that this draft policy has been brought to this meeting for discussion and questions and will be tabled for approval at the January meeting of SOMAC.

L. Flynn gave a background on this draft policy. We discovered about a year ago that our Faculty did not have a conflict of interest policy unlike several other Universities. Queen’s had one but our individual Faculty did not. We needed clear guidelines so L. Flynn chaired a working group with representation from all three schools. They went and got guidance from the University central on how to begin putting this together. They distributed a draft far and wide including Brenda Brouwer in the School of Graduate Studies as well as our regional leads and have now completed their 13th draft. This draft was discussed at our last Council of Clinical Heads and disseminated amongst the departmental members. It was brought here today for knowledge, awareness and review. There were no questions so L. Flynn asked that this item be tabled and brought forward to the January 20, 2015 SOMAC meeting for approval. This draft will also be brought to the School of Nursing and School of Rehabilitation Therapy Academic Councils for review and approval.

If approved it will then be brought forward to the February 5, 2015 Faculty Board for final approval.

8. Bracken Library

- **Research Data Management in Health Sciences**

This item has been deferred to a future meeting.

The Chair thanked everyone for all their hard work in putting together all the documents discussed at today's meeting.

There being no other business the meeting was adjourned by the Chair at 5:20 p.m.

David R. Edgar
Secretary to the School of Medicine