I. PURPOSE

Program evaluation is a critical tool used to independently audit, prepare reports that advise and monitor improvements in the quality and outcomes of all curriculum learning in the Doctor of Medicine Program (the Program) or Undergraduate Medical Education (UME) at the Schulich School of Medicine & Dentistry in Western University. Through student feedback using methodology endorsed by and accountable to the Curriculum Committee, the Program will acquire and analyse necessary qualitative and quantitative data for the purposes of monitoring curricular quality and supporting a culture of ongoing continual Course and student learning improvements.

II. STATEMENT

The Program supports a culture of continual quality improvement using evaluation data as a core measure. The following process is driven by the LCME/CACMS accreditation standard:

ED-47. In evaluating program quality, a medical education program must consider medical student evaluations of their courses, clerkships (or, in Canada, clerkship rotations), and teachers, as well as a variety of other measures.

Program evaluation is governed by the Curriculum Committee (CC) and administered through the governance bodies.

a. Rationale
   i. The Curriculum Committee (CC) and governing or operational bodies of the Program understand the imperative nature of a centralized, mandatory internal review process under the auspices of the CC and administered through staff in the Undergraduate Medical Education (UME) office.
   ii. Students, staff, and faculty will contribute to the planning, implementation and review of all Program evaluation data delivered to the Program Quality Committee (QC) who shall compile this with recommendations on courses or rotations from the UME Instructional Design Committee (IDC) to report on a monthly basis directly to the CC.
   iii. Students in the Program will be educated on the need for effective Program evaluation data to drive a culture of continual improvement and quality control in UME.

There are two streams of program evaluation analysed in the Program.

a. Streams of Program Evaluation
   i. The formal Program evaluation process data shall be the official tool for overall Program decision-making.
a. Formal evaluation data is derived from survey tools administered electronically from a central process to students for the purpose of evaluating each Course or Rotation as well as instructor performance.

b. The Program evaluation process considers both quantitative and qualitative measures, both of which are components of all formal evaluation tools.

c. Survey tools are created and modified as required based on LCME standards, best practices, and internal data requirements.

d. These tools include an End-of-Course survey, End-of-Rotation survey, Clinical Sciences Instructor Evaluation, and Basic Sciences Instructor Evaluation.

e. Surveys are administered in a consistent manner, according to the context in which the individual tools are applicable.

f. The process for administration of evaluation requests is outlined at: https://www.schulich.uwo.ca/medicine/undergraduate/docs/policies_statements/linked/1-1-3-Schulich-Statement-Student-Completion-Evaluations.pdf

g. Email survey completion notifications and reminders from one45 are part of the official curriculum, are not subject to opt out, and not considered spam under Canada’s anti-spam legislation (CASL).

ii. Students in the Program have traditionally owned an independent student driven evaluation process that has qualitative and quantitative measures termed: the “Best Curriculum on Earth” (BCOE) program.

a. The Curriculum Committee of the Program values the feedback students provide through the BCOE course evaluation system.

b. The Curriculum Committee similarly encourages students to maintain their ongoing commitment to BCOE.

c. The BCOE data and report will first be discussed with Course and Rotation Chairs in person, and then reported to PIC and CEC.

d. The BCOE data will be a part of each course review session that occurs by the Instruction Design Committee (IDC) who review courses and rotations on a 3-year course review process scheduled basis and submits a report to the QC who reports to the CC.

e. The BCOE data will be made available and considered as one line-of-evidence as part of annual evaluation reviews at QC.

f. BCOE data will not at any time be seen as an official UME Program metric.

b. Committee Review Process

i. The Curriculum Committee (CC) has overall responsibility for UME Program and Rotation review.

ii. The Instructional Design Committee (IDC) will review each individual course and rotation on a 3-year cycle.

a. IDC will use a multiple-lines-of-evidence approach to course and rotation evaluation, reviewing in addition to formal program evaluation data, BCOE evaluation data, assessment and course structure data, and questionnaire information provided by course/rotation leaders.

b. IDC reports the results of course and rotation reviews to the Quality Committee.

iii. The UME Quality Committee (QC) reviews individual course and rotation reports which are comprised of an analysis of End-of-Course or End-of-Rotation surveys (including both quantitative and qualitative elements) and a synthesis of this data. Faculty instructor evaluation data is also considered in these reviews.

a. Individual course and rotation reports are prepared by UME staff approximately 2-4 weeks following the end of each course or rotation.

b. Distributed curriculum delivery will be similarly evaluated and sites compared.
c. All course and rotation program evaluation reports are presented at QC with the review focusing on a synthesis of curricular performance.

d. Individual course and rotation program evaluation reports are provided to QC committee members to review in detail and form the basis of discussion.

iv. The QC will formulate recommendations for the Curriculum Committee’s consideration based on the committee review of program or rotation evaluation data with the goal of meeting LCME/CACMS accreditation standards; assuring integration of learning in the four years of the Program curriculum and the promotion of ongoing quality improvement initiatives in the course and rotations across the curriculum.

a. It is expected that current pedagogy, standards, the medical education literature as well as societal needs and priorities will be taken into consideration to ensure that new and existing academic standards for accreditation are met.

v. The Curriculum Committee will endorse any plans of action for program, course, rotation or session delivery and followup through governance and course committees.

e. Faculty Reports

i. Faculty reports will be distributed through a standardized centralized manner according to the guidelines and/or Policies of Institutional Planning & Budgeting.