

## Assessment Sub-Committee Terms of Reference

<b>Office of Accountability:</b>	Dean, Faculty of Medicine & Dentistry
<b>Office of Administrative Responsibility:</b>	MD Program
<b>Approver:</b>	MD Curriculum & Program Committee
<b>Scope:</b>	Compliance with this policy extends to all members of the MD Program community irrespective of the geographically distributed site at which they are located.

### **OVERVIEW**

The *Post-Secondary Learning Act* of Alberta gives General Faculties Council (GFC) responsibility, subject to the authority of the Board of Governors, over “academic affairs” (Section 26(1)). Faculty councils “may determine the programs of study for which the faculty is established” (Section 29(1)). In addition, “a faculty council may delegate any of its powers, duties and functions under this act as it sees fit and may prescribe conditions governing the exercise or performance of any delegated power, duty or function, including the power of sub-delegation (Section 29(3)).”

Acknowledging the mission and vision of the Faculty of Medicine & Dentistry, Faculty Council and the dean assign the MD Curriculum & Program Committee (MDCPC) the responsibility to ensure the coordination of all academic elements of, supports for, and overall direction of the MD Program. The MD Curriculum & Program Committee oversees the overall design, management and evaluation of a coherent and coordinated curriculum.

The Assessment Sub-Committee operates as a standing committee of the MD Curriculum & Program Committee with delegated responsibility for monitoring and reviewing assessment processes across the MD curriculum.

### **PURPOSE**

Reporting to the MD Curriculum & Program Committee, the Assessment Sub-Committee is responsible for monitoring and reviewing appropriate assessment processes across the MD curriculum to ensure valid and reliable assessments of student performance and support, where possible, increased assessment data for learning.

The sub-committee is guided by the relevant Committee on Accreditation of Canadian Medical Schools (CACMS).



## **POLICY**

### **1. RESPONSIBILITIES**

- a. Develop general policies regarding assessment, including appropriate, fair and valid assessment methods including preparation, review and administration procedures to ensure sustainable student assessment programs. Establish and maintain a rigorous and defensible assessment process applied to all courses and clerkships.
- b. Support the MD Program Admissions through review of processes and content through the lens of validity and fairness
- c. Provide mechanisms to ensure fair and consistent assessment of student performance are administered throughout the program.
- d. Review grading systems to ensure that they are compatible with the demands of the program, profession and current educational practice.
- e. Ensure the implementation of an assessment data capturing mechanism to allow for the secure transmission, collection and dissemination of assessment outcomes.
- f. Provide guidance and support on appropriate assessment methods for faculty involved in assessment.
- g. Monitor assessment policies and practices to ensure consistency with evidence from the literature.
- h. Ensure the discussion of data related to student progress or special assessment materials occurs during the in-camera portion of each meeting.
- i. Respond to the requirements of the standards of the Committee on Accreditation of Canadian Medical Schools (CACMS), pertaining to assessment.
- j. To contribute to the Program Evaluation process by working with the Assistant Dean, Program Evaluation and other groups as defined in the Program Evaluation Framework to improve curricular quality, enhance the learning experience and support full accreditation.
- k. Review Canadian Graduation Questionnaire (CGQ) data and results of Medical Council of Canada examinations on an annual basis.

### **2. MEMBERSHIP AND VOTING**

- a. Ex-Officio Members
  - i. Chair: Assistant Dean, Assessment
  - ii. Associate Dean, MD Program
  - i. Assistant Dean, Academic Affairs
  - iii. Assistant Dean, Program Evaluation



- iv. Director, Comprehensive Assessments
  - v. Director, Program Quality & Accreditation
  - vi. Lead, Curriculum Management Unit
  - vii. Assessment Specialist
  - viii. Program Evaluation Specialist
  - ix. NAMP Assessment Coordinator
- b. Appointed Members (all voting)
- ii. Basic Sciences Representative – one (1) appointed representative
  - iii. Clinician Teacher or Clinician Educator – one (1) appointed representative
  - iv. Course/Block Coordinator (current or recent) – one (1) appointed representative
  - v. Clerkship Coordinator (current or recent) – one (1) appointed representative
- c. Student Members (all voting) (all of the below can send a delegate)
- i. Medical Student Association VP Education
  - ii. Indigenous Medical and Dental Students Association representative
  - iii. Black Medical Students Association representative
  - iv. Clerkship student representative

### 3. APPOINTMENTS AND TERMS

- a. For appointed positions, appointments are made by the Associate Dean, MD Program with the term lasting three (3) years, renewable at the discretion of the Associate Dean.

### 4. CHAIR

- a. Assistant Dean, Assessment

### 5. MEETING SCHEDULE AND PROCEDURAL ISSUES

- a. The committee will meet every month from September to June and as needed in July and/or August.
- b. Quorum is 50% of attendance of voting members, plus the chair.
- c. Additional meetings may be called at the discretion of the chair.
- d. Agenda and meeting materials will be pre-circulated.
- e. Minutes will be kept and pre-circulated before each meeting.
- f. Minutes will be approved by vote.
- g. The chair only votes in the event of a tie.
- h. The chair may request guests to the committee to address specific issues.
- i. Students will be excused from meetings when exam content is discussed.

## **DEFINITIONS**

Any definitions listed in the following table apply to this document only with no implied or intended institution-wide use.	
<b>Assessment</b>	Any systematic method of obtaining information from tests and other sources, used to draw inferences about an individual for the purpose of helping them improve (formative) or determining passing a stage of training (summative).
<b>Committee on Accreditation of Canadian Medical Schools (CACMS)</b>	The Committee on Accreditation of Canadian Medical Schools (CACMS) ensures that Canadian medical faculties' MD programs meet the quality expected when producing tomorrow's doctors. Medical schools demonstrating compliance are afforded accreditation, a necessary condition for a program's graduates to be licensed as physicians.
<b>Validity</b>	The degree to which accumulated evidence and theory support specific interpretations of test scores entailed by proposed uses of a test.
<b>Fairness</b>	The principle that every test taker should be assessed in an equitable way.
<b>Canadian Graduation Questionnaire (CGQ)</b>	The Canadian Medical School Graduation Questionnaire (CGQ) is an annual survey administered by the AAMC (Association of American Medical Colleges) to students graduating from participating M.D. degree-granting programs in Canada.

## **RELATED LINKS**

<a href="#">Canadian Graduation Questionnaire (CGQ)</a>
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## **APPROVAL HISTORY**

<b>APPROVER</b>	<b>STATUS</b>	<b>DATE</b>
MD Curriculum Committee	Approved	07 November 2013
MD Curriculum & Program Committee	Approved	7 December 2017



MD Curriculum & Program Committee	Approved	17 March 2022
Associate Dean, MD Program & MDCPC	Replace Curriculum Planning Specialist with Lead, Curriculum Management Unit and add Director, Comprehensive Assessments as ex officio members	22 June 2023
MD Curriculum & Program Committee	Approved  Updates to membership and minor editorial updates.	17 April 2025