

UNIVERSITY COUNCIL
ACADEMIC PROGRAMS COMMITTEE
REQUEST FOR DECISION

PRESENTED BY: Kevin Flynn, Chair, Academic Programs Committee

DATE OF MEETING: January 19, 2017

SUBJECT: College of Medicine – changes to approved Grading System

DECISION REQUESTED:

It is recommended:

That Council provide approve the changes to the literal grade descriptors for courses in the MD program in the College of Medicine, effective September 2017.

PURPOSE:

Under University Council's authority, Registrarial Services is responsible for ensuring adherence to the university regulations on assessment that are outlined in the Academic Courses Policy. Specifically, the policy states that "University Council will receive and evaluate requests from Colleges desiring exceptions... to the percentage system of assessment."

CONTEXT AND BACKGROUND:

The College of Medicine has been operating under a pass/fail grading system since 2003, with all final grades being reported as a Pass or Fail on student transcripts. That said, most courses use a numeric grade to determine success in a course, to identify students at academic risk, and to determine eligibility for awards.

With the redesign of the College of Medicine MD Program, the internal course pass mark (i.e., the grade recorded by the College for advancement purposes, which does not appear on student transcripts) was reviewed and it was determined that a default pass mark of 70% appropriately captures the expectations of competence for a medical learner. Prior to 2000, the numeric grade required to demonstrate competence in the MD Program has exceeded the U of S's requirements of 50% for a Pass, though this has not been codified.

Grades will continue to be reported as Pass, Pass No Credit, or Fail on student transcripts, but for internal program use, the literal grade descriptors will denote any mark below 70% as a Fail.

CONSULTATION:

The Academic Programs Committee of Council reviewed the request from the College of Medicine for changes to the approved grading system at its January 4, 2017 meeting.

The Student Curriculum Review Committee (SCRC) of the College of Medicine reviewed the proposed change to the grading standard and provided their support on November 29, 2016.

ATTACHMENTS:

1. College of Medicine Grading System

Grading System for the College of Medicine MD Program

Rationale:

Students in the MD Program of the College of Medicine are expected to demonstrate competence in knowledge, skills and attitudes appropriate to their level of training.

High academic standards are expected of these medical learners, consistent with program and societal expectations of competence for learners who are being prepared to safely, effectively, and compassionately care for patients.

Context:

The MD Program has operated under a pass/fail grading system since 2003. Final grades are reported as Pass or Fail.

Within the program, most courses also use numeric grades to determine success in the course, to assist with identifying students at academic risk, and for the determination of awards. Numeric grades do not appear on the student transcript nor in any information submitted to the Canadian Resident Matching Services (CaRMS).

Historically, since prior to 2000, the numeric grades required to demonstrate competence in the MD Program (both within courses and within the promotion standards) have exceeded the University of Saskatchewan requirements for a Pass (50%). This is consistent with many medical schools across Canada, in which (when numeric grades are assigned) the grades required exceed 50%. Ranges vary from 60-70% on a recent scan of English language MD programs.

With re-design of the College of Medicine MD Program curriculum to the new “2+2” curriculum, the internal course pass mark was reviewed. The Curriculum Committee identified a default pass mark of 70% as appropriate for the expectations of competence for a medical learner. Faculty and students were extensively consulted in the curriculum development process, with student representation provided by members of the Student Curriculum Review Committee. The review of the pass mark was done in conjunction with the development of the new MD Program Assessment Policy.

The decision to select 70% as the default internal pass mark was informed by:

- Analysis of historical data on student performance
- Comparison to the literal descriptors with the U of S Academic Courses Policy. Specifically, the literal descriptors for 50-59% (“A barely acceptable performance with evidence of a familiarity with the subject material; some evidence that analytical skills have been developed; some understanding of relevant issues...”) and 60-69% (“A generally satisfactory and intellectually adequate performance with evidence of an acceptable basic grasp of the subject material; a fair understanding of the relevant issues; a general familiarity with the relevant literature and

technique”) were felt to be inadequate as requirements of medical learners to ensure future safe and effective patient care.

Motion:

That the following grading system be formally adopted for the MD Program:

Recognizing that medical students, as future physicians participating in patient care, require a high level of knowledge and competence, the College of Medicine operates on an alternate grading system as described below.

1. The College of Medicine operates on a pass/fail system. Grades submitted may include:

P – Pass - Performance demonstrates requisite knowledge and competence in that course

PN – Pass No Credit - performance demonstrates requisite knowledge and competence in that course, however student is required to repeat the course due to not meeting promotion standards in parallel integrated curriculum

F - Fail - Performance does not demonstrate requisite knowledge and competence in that course

2. Within the majority of courses a numeric grade is assigned for internal program use to determine level of knowledge and competence, to identify students at academic risk, and to assist with determination of awards. 70% is the default pass mark within the program for courses which assign a numeric mark. The pass mark is verified and supported by an accepted method of standard setting.

In some instances individual assessments may have a pass mark other than 70%, where justified by the assessment type; in this case the pass mark is verified and supported by an accepted method of standard setting.

3. The following descriptors apply to marks for internal program use:

90-100 Excellent

A superior performance with consistent strong evidence of

- a comprehensive grasp of subject matter;
 - an ability to make insightful, critical evaluation of information;
 - an exceptional capacity for self-reflection and original, creative and/or logical thinking;
 - an excellent ability to organize, analyze, synthesize, and integrate concepts, to effectively apply these to solving clinical problems, and to express thoughts fluently;
 - demonstration of excellent clinical skills including effective and compassionate patient interactions, and highly effective communication of knowledge
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80-89 Good to Very Good

A good to very good performance with evidence of

- a comprehensive grasp of subject matter;
 - an ability to make insightful, critical evaluation of information;
 - a good to very good capacity for self-reflection and original, creative and/or logical thinking;
 - a good to very good ability to organize, analyze, synthesize, and integrate concepts, to effectively apply these to solving clinical problems, and to express thoughts fluently;
 - demonstration of strong clinical skills including effective and compassionate patient interactions and communication of knowledge
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70-79 Satisfactory to Good

A satisfactory to good performance with evidence of

- a substantial knowledge of subject matter, adequate to ensure safe patient care;
 - a satisfactory to good ability to critically evaluate information;
 - a satisfactory to good capacity for self-reflection and logical thinking; and satisfactory capacity for original and creative thinking;
 - a satisfactory to good ability to organize, to analyze, and integrate concepts and apply these to solving clinical problems, and to express thoughts clearly;
 - demonstration of satisfactory to good clinical skills including effective and compassionate patient interactions and satisfactory communication of knowledge
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Less than 70 Fail

Unacceptable knowledge and/or performance, deemed inadequate to ensure future safe patient care.

4. As per the Course Syllabi and MD Program Promotion Standards, students who are otherwise successful in a course may fail a course/ fail to be promoted on the basis of unprofessional conduct.

Prepared for MD Program Assessment Committee Sept 12 2016

November 29th, 2016

The Student Curriculum Review Committee's Letter of Support for the MD Program Grading System

The Student Curriculum Review Committee (SCRC) serves to evaluate current and prospective curriculum and work to voice the opinion of the students on academic matters. One of the SCRC's primary roles is to represent the student body at the UGME Curriculum Committee and its subcommittees. SCRC members attend all UGME Curriculum Committee and subcommittee meetings, Dean's lunches and feedback forums. SCRC members were involved in discussions in both the Curriculum Committee and the 2+2 Working Group about the new grading system. The SCRC was involved in passing the 70% pass standard.



Dara Onasanya
SCRC Chair, Class of 2019