

<b>Faculty / Affiliated University College</b>	Schulich School of Medicine and Dentistry	
<b>Degrees Offered</b>	MCISc PhD	
<b>Date of Last Review</b>	2012-2013	
<b>Approved Fields</b>	None	
<b>External Reviewers</b>	Dr. Glenn Regehr, University of British Columbia	Dr. Peter Selby, University of Toronto
<b>Internal Reviewers</b>	Dr. Dianne Bryant, Assistant Dean, Graduate Faculty of Health Sciences	Julia Gevaert, PhD Candidate Medical Biophysics
<b>Date of Site Visit</b>	February 10-11, 2022	
<b>Date Review Report Received</b>	February 22, 2022	
<b>Date Program/Faculty Response Received</b>	Program – March 22, 2022 Faculty – May 5, 2022	
<b>Evaluation</b>	Conditionally Approved with interim report due Sept 2023 and full report Sept 2024	
<b>Approval Dates</b>	SUPR-G: June 27, 2022 <b>ACA</b> September 7, 2022 <b>Senate</b> (FYI for program recommendation, approval for academic program changes): September 16, 2022	
<b>Year of Next Review</b>	Year of next cyclical review: 2028-2029	

## **Overview of Western's Cyclical Review Assessment Reporting Process**

In accordance with Western's Institutional Quality Assurance Process (IQAP), the Final Assessment Report (FAR) provides a summary of the cyclical review, internal responses, and assessment and evaluation of the Family Medicine Program delivered by the Schulich School of Medicine and Dentistry.

This FAR considers the following documents:

- the program's self-study brief;
- the external reviewers' report;
- the response from the Program; and
- the response from the Dean's Office, Schulich School of Medicine and Dentistry.

This FAR identifies the strengths of the Program and opportunities for program enhancement and improvement, and details the recommendations of the external reviewers – noting those recommendations to be prioritized for implementation.

The Implementation Plan details the recommendations from the FAR that have been selected for implementation, identifies who is responsible for approving and acting on the recommendations, specifies any action or follow-up that is required, and defines the timeline for completion.

The FAR (including Implementation Plan) is sent for approval through the Senate Graduate Program Review Committee (SUPR-G) and SCAPA, then for information to Senate and to the Ontario Universities' Council on Quality Assurance. Subsequently, it is publicly accessible on Western's IQAP website. The FAR is the only document from the graduate cyclical review process that is made public; all other documents are confidential to the Program/School/Faculty, the School of Graduate & Postdoctoral Studies (SGPS), and SUPR-G.

## **Executive Summary**

Leading to the degree of MCISc in Family Medicine, the first iteration of the Program commenced with both full-time and part-time options for family physicians in 1977. Still hosting the full and part-time options, the MCISc now features a thesis and course-based stream and is offered via an online learning platform with an on-site component (typically) during the last two weeks of September at Western University. The MCISc Program attracts Family Physicians who wish to enhance their knowledge, skills, and leadership within the discipline of Family Medicine. This includes their understanding of the theoretical foundation of Family Medicine, enhancing their competence as teachers of Family Medicine and their ability to conduct research.

The first PhD cohort commenced in September of 2009. This Program is also offered either full or part-time via an online learning platform with an on-site component during the last two weeks of September. The PhD Program attracts both national and international family physicians currently practicing in their home communities who aspire to become exemplary researchers in the discipline of Family Medicine.

In recent years, total enrollment in the MCISc Program has approximated 32 students, with about 8 full and part-time students in the PhD Program.

Informing the self-study process, the programs drew heavily from regular evaluations and feedback shared following the on-site component of each degree program as well as the exit evaluations upon graduation. In addition, a Graduate Committee retreat was held in the spring of 2020 and surveys were administered to current students and recent alumni.

The external reviewers shared a positive assessment of the graduate programs in Family Medicine, indicating that *“the quality of the experience is perceived positively by students, and the faculty are highly dedicated.”* They offer many constructive considerations for further program enhancement and conclude their report with four recommendations.

## **Strengths and Innovative Features Identified by the Program**

- The MCISc and PhD Programs were one of the first at Western to adopt a blended instructional approach as of 1997.
- The two-week intensive on-site mandatory session during the Program’s first term has consistently been described by students as instrumental for setting context and networking.
- Offers of a Postgraduate Enhanced Skills – Academic Family Medicine Program in year three for Family Medicine residents.

- Recent alumni report that:
  - o The Program had a major impact on their professional careers as both teachers and researchers in Family Medicine.
  - o The connections made with other students in the Program have long outlasted its completion.
  - o The Program provides exposure and experience in the multiple roles of an academic family physician - patient care, teaching, research, administration and collaborator with other health care experts from a variety of backgrounds.
- The co-supervisory model has supported students with interests in mixed methods approaches to their research, and also served to mentor new/junior faculty by pairing these individuals with senior researchers as co-supervisors.

### **Concerns and Areas of Improvement Identified and Discussed by the Program**

- The onsite component of the PhD Program should be longer (e.g. 6-8 weeks), especially in the final year for protected time and close supervision of PhD thesis writing.
- The Program Chair appears to hold a disproportionate amount of supervision in the Program.
- Adding more structure to the research project proposals stage, with a dedicated process, would support a more optimal supervision experience.
- Recruitment of high-quality PhD candidates – the decline in enrollment in the Program may reflect a greater systemic problem in primary care research currently.
- Occasional time to completion and student withdrawal issues.

### **Review Process**

As part of the external review, the review committee, comprising two external reviewers, one internal reviewer and a graduate student reviewer, were provided with Volume I and II of the self-study brief in advance of the scheduled review and then met virtually (due to pandemic restrictions) over two days with the:

- Vice-Provost of the School of Graduate & Postdoctoral Studies
- Associate Vice-Provost of the School of Graduate & Postdoctoral Studies
- Vice-Provost, Academic Planning, Policy and Faculty
- Associate Dean (Graduate Studies), Schulich School of Medicine & Dentistry
- Vice Dean (Basic Medical Sciences), Schulich School of Medicine & Dentistry
- Department Chair
- Graduate Program Chair
- Program Coordinator
- Associate University Librarian

- Graduate Program and Department Staff
- Program Faculty Members
- Graduate Students

Following the virtual site visit, the external reviewers submitted a comprehensive report of their findings which was sent to the Program and the Dean for review and response. Formative documents, including Volumes I and II of the Self-Study, the External Report, and the Program and Decanal responses form the basis of this Final Assessment Report (FAR) of the Family Medicine Program. The FAR is collated and submitted to the SGPS and to SUPR-G by the Internal Reviewer with the support of the Office of Academic Quality and Enhancement.

### **Summative Assessment – External Reviewers’ Report**

*The external reviewers shared that “Both the MCISc and PhD programs are valued highly by the faculty and students alike. The quality of the experience is perceived positively by students, and the faculty are highly dedicated. The program is also recognized by stakeholders across the University, Faculty and Department as unique in its value-added proposition. It is one of the only graduate training programs in Canada solely focused on family medicine and reserved for practicing family physicians alone.”*

### **Strengths of the Program**

- Faculty members are well known in their areas of focus with many as leaders in family medicine research.
- High level of commitment to the Program by faculty and staff.
- Strong collaboration between PhD trained and clinical faculty involved in the Program that provides for an effective balance of theoretical and methodological depth and a strong sense of the contextual realities related to the clinical environment.
- Students indicated that the feedback from research supervisors was consistently of high quality.
- Theses reviewed were consistently of high quality.

### **Areas of Concern or Prospective Improvement**

1. Potential mismatch between the admissions decisions and the expressed goals and aspirational outcomes for the PhD Program in general.
  - Lack of clarity between overall programmatic objectives as linked to individual courses and milestones for PhD and Master’s thesis students.
2. Lack of clarity regarding the level of formalized, institutionally expected, commitment to the Program by faculty members.
  - Occasional challenge of identifying faculty members available to teach certain courses.

3. Ad hoc and uneven nature of MCISc thesis/essay supervision.
4. Insufficient flexibility regarding when the thesis/essay work can begin (taking into account experience and existing commitments of program students).
5. Consideration of additional program material related to leadership, EDI, Life skills, library resources, and the develop of the thesis proposal.
6. Some redundancy of readings across courses with a need for better coordination of heavy and light weeks between concurrent courses.
7. Progress in both the MCISc and the PhD programs is quite slow.
8. Students shared that the highly text-based online learning platform was somewhat onerous and isolating. Preference for more video mediated live interaction in real time.

## Summary of the Reviewers' Recommendations and Program/Faculty Responses

The following are the reviewers' recommendations in the order listed by the external reviewers. Recommendations requiring implementation have been marked with an asterisk (\*).

Reviewers' Recommendation	Program/Faculty Response
<p>1. Consider a full business case development exercise that will focus on workforce analysis, funding models for sustainability, and succession planning. *</p> <p>Specifically, we recommend a workforce analysis of the program, determining the number of hours (or FTE equivalent positions) required for effective delivery of courses and supervision of students, as well as the actual number of committed hours (FTEs) to the program that are currently represented in the faculty. Determine mechanisms to formalize these commitments and project forward five years with anticipated retirements and attrition from faculty movements to other programs as well as anticipated new clinical teaching faculty anticipated. This sort of structured analysis may provide a stronger case for new full-time faculty for the program and/or may alleviate some of the generalized anxiety with regard to sustainability and succession planning currently being experienced.</p> <p>(Related to area of concern #2 identified by the external reviewers in the list above)</p>	<p><b>Program:</b> The Program will conduct a full business case development exercise that will include: 1) A workforce analysis to determine the number of hours (or FTE equivalent positions) required for effective delivery of the courses both on-site and online and supervision of students (thesis or research project &amp; major essay). This will include the actual number of committed hours (FTEs) that are currently represented in the Faculty. 2) Stemming from existing mechanisms that formalize the commitments of clinical faculty and for the PhD faculty who are not clinicians in the Department of Family Medicine, clarification and confirmation of faculty commitments will be requested from the Chair of the Department of Family Medicine. This information will help to inform the program's faculty projection going forward in the next five years.</p> <p><b>Faculty:</b> The Dean's office is in agreement with this recommendation. In discussion with the program, the need was recognized and the Program's response to develop a better analysis of the faculty commitments to the Program is endorsed. The Dean's office will cooperate with the assessment and work with the individual faculty members to ensure that the workload is recognized.</p> <p>In addition to the responses from the Program, the Dean's office recognizes the reviewer's concerns about succession planning and will be proactive in identifying and preparing the future leaders of the Program once the faculty compliment review is completed. The Faculty will also work to ensure that future leaders have the leadership training to support them.</p>

<p>2. Consider a full internal review of the goals, objectives and values of the program, then conduct a full curriculum mapping exercise to ensure that the key content is explicitly delivered in the curriculum and assessed of all students. *</p> <p>(Related to areas of concern #1, 4, 5, 6 identified by the external reviewers in the list above)</p>	<p><b>Program:</b> The Program will conduct an internal review of the goals, objectives and values of the Program followed by a curriculum mapping exercise. This will build on work conducted during the March 2020 Graduate Studies retreat in preparation for the Periodic Review.</p> <p><b>Faculty:</b> Rethinking the Program objectives is needed and timely. There is an increasing demand for graduate studies credentials in the clinical community and to be competitive the Program needs to clearly state what it provides to the student. The Dean's office endorses the program's response on conducting an internal review of the curriculum mapping and developing clear guides and expectations for students. The Dean's office will cooperate with the Program's review and will have curriculum design experts assess the results of the exercise.</p>
<p>3. Consider further options for reducing the time in program for both the MCISc and PhD students such as: time limits in the program, earlier efforts to connect students and supervisors, structured courses (or restructuring of the methods course) to support the explicit development of a thesis/essay proposal, explicit teaching to students about strategies to manage life/ work/ school balance, more frequent meetings between supervisors and students to facilitate progress and accountability. *</p> <p>(Related to areas of concern #3, 4, 5, 7 identified by the external reviewers in the list above)</p>	<p><b>Program:</b> The Program will create and distribute an electronic student handbook detailing the objectives of the MCISc / PhD programs and the student expectations, including procedures students are to follow regarding program progression. Regarding specific items such as 1) Consistency and timeliness of advisory meetings: In September 2022, the Program will initiate a process requiring that students submit monthly meeting dates (September – June) with their assigned Advisor through an online questionnaire to the program office until their thesis or research project and major essay proposals have been approved. 2) Timing for choosing research topic: The Program will explore with faculty the expectation that students will determine their research topic by the end of the 2nd term for full time students and end of the 5th term for part time students where the majority of course work should be completed. 3) Assessment of student progress: The existing progress meeting process will be enhanced with the introduction of the SGPS PATHFINDER system in spring 2022. In addition, the Program will continue to strongly encourage students to spend one to two concentrated weeks on campus to work with their supervisor(s) writing their thesis or research project and major essay. 4) Annual Graduate Chair meetings: The Grad Chair will now include a discussion regarding work/life/school balance as part of each on-site student meeting going forward. Throughout the year the Chair will also send a targeted email to students whose progression is slow inquiring about challenges they may be facing and how the Program may assist in their timely completion. Instructors of the Research Methods course for the MCISc students and the Doctoral Seminar for the PhD students will also incorporate this topic more explicitly into their teaching.</p> <p><b>Faculty:</b> The time to completion is a clear issue that the Dean's office agrees with and would like the Program to address. In discussion with the Program about this review, it was noted that progress is being made by the Program since before the review. The early identification of an advisor to help guide the student is viewed as a positive change. The Dean's office is also cognizant that the students are practicing clinicians with significant demands on their time. Nevertheless, there is agreement with the reviewers that it is in the best interest of both the Program and the student to continue to decrease the time to completion.</p>



	<p>The Dean's office is supportive of the Program's proposed actions and commits to supporting the implementation of these changes.</p> <p>In discussion with the Program, it was proposed that having students paired with a specific project/ supervisor before starting the Program might also be beneficial. It was felt that this would be difficult to implement at this time, but if the proposed changes do not have the desired impact, this could be further considered.</p>
<p><b>4.</b> Consider restructuring the Program into a modularized system of progressive commitment by students such that a certain set of courses leads a certificate, an additional set leads to a diploma, and the thesis/essay leads to the MCISc degree.</p> <p>Also consider restructuring the program to leverage the value of other programs such as the MPH and CERI, thereby reducing redundancies and optimizing the program's resources for aspects of the program that convey the values and lenses of the family medicine approach. Given the relatively small size of the program, also consider collaborative programs with other Departments of Family Medicine to grow the research workforce for family medicine in Canada.</p>	<p><b>Program:</b> The Program will explore the possibilities of providing a modularized approach and examine the option of a Graduate Studies diploma with the SGPS. The Program will also undertake an environmental scan of what other certificate / diplomas are available in Family Medicine at other universities across Canada and review the benefits of a graduate diploma versus a master's degree, in terms of career advancement, with both students and alumni.</p> <p>In terms of possible collaborations with other programs, fundamental to the MCISc in Family Medicine Program is the linkage between teaching, research, and clinical practice. Taking this into consideration, the Program has thoroughly investigated potential collaborations with the Master of Public Health (MPH) Program and Department of Epidemiology/Biostatistics. Leadership from all three programs have acknowledged the very unique populations that the programs serve as well as the very different delivery systems used by each program. They have concluded that sharing courses and bringing the three groups of students together was not feasible or appropriate. Currently there are faculty collaborations with the Centre for Education, Research and Innovation (CERI) but they do not, at this time, have a degree program. The Program will work towards enhancing our collaborations with CERI in the future and will explore opportunities to collaborate with other Departments of Family Medicine regarding capacity building of family medicine research.</p> <p><b>Faculty:</b> This is a very positive contribution from the reviewers and one that fits well with other Faculty initiatives. In addition to the Program's responses about doing an environmental scan and discussion with current students and alumni, the Dean's office will initiate a discussion with other clinical faculty about the value of a graduate diploma versus the Master's degree to determine if such an addition with fit with current trends in clinical careers.</p> <p>Once the curriculum mapping exercise outlined above is completed, the Dean's office will also compare and contrast the results with other graduate programs, including the Master's in Public Health, Interdisciplinary Medical Sciences, and other clinical graduate programs to see if there can be collaborative efforts in graduate training that might promote interdisciplinarity and building a larger learning cohort.</p>

<p>(Related to area of concern #7 identified by the external reviewers in the list above)</p>	
-------------------------------------------------------------------------------------------------------	--

## Implementation Plan

The Implementation Plan provides a summary of the recommendations that require action and/or follow-up. In each case, the Chair of the Graduate Program, in consultation with the SGPS and the Dean of the Schulich School of Medicine and Dentistry is responsible for enacting and monitoring the actions noted in Implementation Plan.

Recommendation	Proposed Action and Follow-up	Responsibility	Timeline
<p><b>Recommendation #1:</b> Consider a full business case development exercise.</p>	<p>Conduct a full business case development exercise that will include:</p> <ul style="list-style-type: none"> <li>- A workforce analysis</li> <li>- An analysis of faculty member commitments to the Program</li> <li>- A strategy for succession planning</li> </ul> <p>Renew mechanisms to formalize the commitments of clinical faculty and PhD faculty who are not clinicians in the Department of Family Medicine.</p>	<p>Chair of Graduate Programs Program Coordinator Chair of Family Medicine</p> <p>With support from the Dean's Office</p>	<p>May 2023</p>
<p><b>Recommendation #2:</b> Consider a review of the goals, objectives and values of the Program, then conduct a full curriculum mapping exercise.</p>	<ul style="list-style-type: none"> <li>- Conduct an internal review of the goals, objectives and values of the Program. <ul style="list-style-type: none"> <li>o Distinguish between course-based and thesis-based options.</li> <li>o Develop clear expectations for students and ensure that these, along with program goals are articulated in documentation shared with students.</li> </ul> </li> <li>- Undertake a curriculum mapping exercise.</li> </ul>	<p>Chair of Graduate Programs Program Coordinator</p>	<p>September 2023</p>
<p><b>Recommendation #3:</b> Consider further options for reducing the time in program for both the MCISc and PhD students.</p>	<ul style="list-style-type: none"> <li>- Create and distribute an electronic student handbook that outlines program goals, student expectations and procedures students are to follow regarding program progression.</li> <li>- Initiate a process requiring that students submit monthly meeting dates with their assigned advisor.</li> </ul>	<p>Chair of Graduate Programs Program Coordinator</p>	<p>September 2023</p>

	<ul style="list-style-type: none"> <li>- Explore with faculty members the expectation that students could determine their research topic by the end of the 2nd term for full-time students and end of the 5th term for part-time students.</li> <li>- Introduce the SGPS PATHFINDER system in spring 2022.</li> <li>- Include a discussion regarding work/life/school balance as part of each on-site student meeting with the Grad Chair.</li> <li>- Send a targeted email to students whose progression is slow on an annual basis.</li> <li>- Incorporate the topic of work/life/school balance in the Research Methods course for the MCISc students and the Doctoral Seminar for the PhD students.</li> <li>- Consider pairing students with a project supervisor before beginning the program.</li> <li>- Review and refine strategies to reduce time in program on an ongoing basis.</li> </ul>		
<p><b>Recommendation #4:</b> Consider restructuring the Program into a modularized system and to leverage the value of other programs.</p>	<ul style="list-style-type: none"> <li>- Examine the option of a Graduate Studies diploma.</li> <li>- Undertake an environmental scan of what other modular credentials are available in Family Medicine at other universities.</li> <li>- Review the benefits of a graduate diploma versus a master's degree, in terms of career advancement, with both students, alumni and clinical faculty.</li> <li>- Enhance program collaborations with CERI and other relevant departments and programs both inside and outside of the Schulich School of Medicine &amp; Dentistry (e.g., the Advanced Health Care Practice Program).</li> </ul>	<p>Chair of Graduate Programs Program Coordinator Chair of Family Medicine</p> <p>With support from the Dean's Office</p>	September 2023

**Other Opportunities for Program Improvement and Enhancement**

- Consider how the Program can enhance community building opportunities among students (within and between cohorts) and integrate more video mediated live interaction in real time on the learning platform.

- Consider offering a “publication style” option as part of the model of thesis expected for the MCISc Program.
- Integrate clear descriptions of the major essay and thesis in the prospective handbook, along with a rationale about why a student might wish to select one path over the other.