

Minutes of Faculty Council Meeting 260
March 26, 2014
1:00 p.m.
Room 1210

Present: D. Dubins (Chair), S. Angers, V. Arora, Z. Austin, R. Bendayan, D. Boampong, H. Boon, M. Bystrin, A. Cameron, T. Chalikian, I. Crandall, N. Crown, L. Dresser, O. Fernandes, J. Grant, J. Henderson, D. Kalamut, H. Kertland, J. Kohler, L. Lavack, A. Lee, P. Lee, G. Luna, P. Macgregor, L. MacKeigan, M. Moleschi, D. Moy, K. Nataprawira, M. Nenadovich, P. O'Brien, S. Pang, S. Parna, L Raman-Wilms, T. Rubenstein, B. Sproule, A. Taddio, B. Thrush, M. Wanis, J. Wells, P. Wells, D. Becevello (Recording Secretary)

Guests:

Regrets: S. Cadarette, J. Kellar, M. Piquette-Miller, A. Sage, W. Seto, D. Shikaze, J. Uetrecht, D. White, B. Wilson, S. Wu

1.0 Approval of Minutes of February 13, 2014

MOVED: Z. Austin; **SECONDED:** L. MacKeigan; **THAT**, the Faculty Council minutes of February 13, 2014 be approved.

2.0 Proposal for the new Extra-Departmental Unit, type C (EDU-C), The Global Institute of Psychosocial and Palliative Care (GIPPC)

Professor Gary Rodin, Head, Department of Psychosocial Oncology and Palliative Care & U of T/UHN Lederman Chair in Psychosocial Oncology and Palliative Care presented information on the proposal for a new Extra-Departmental Unit, type C (EDU-C).

Professor Rodin hopes to engage the Faculty of Pharmacy in collaboration with a proposed new Extra-Departmental Unit, type C (EDU-C), the **Global Institute for Psychosocial and Palliative Care (GIPPC)** that would have a home within the Faculty of Medicine at the University of Toronto and at the Princess Margaret Cancer Centre.

The proposed **GIPPC** will be an interdepartmental and interdivisional Institute EDU, type C at the University of Toronto, devoted to promoting and developing interdisciplinary research that addresses the medical, psychological, social, legal, ethical, cultural and religious problems related to psychosocial and palliative care of individuals with advanced and terminal disease. The lead division will be the Faculty of Medicine (and its Departments of Medicine, Psychiatry, Paediatrics, Family and Community Medicine). Collaborative relationships will be sought with other divisions and departments including:

- The Lawrence S. Bloomberg Faculty of Nursing
- The Factor Inwentash Faculty of Social Work
- The Dalla Lana School of Public Health
- The Faculty of Law
- The Faculty of Arts and Science Departments of Philosophy, Sociology, Anthropology, and the Study of Religion and other University of Toronto institutes and centres, including:
 - The Institute of Health Policy Management and Evaluation
 - The Joint Centre for Bioethics

- The Centre for Comparative Literature
- The Institute of Life Course and Aging
- The Kensington Health Center, which has a collaborative letter of understanding with the University of Toronto.

The proposed GIPPC will have international partnerships with centres which may include: the Cicely Saunders Institute at King's College London; the End-of-Life Care Research Group Ghent University & Vrije Universiteit Brussels; the European Palliative Care Research Centre (PRC) based in Trondheim, Norway; the Center to Advance Palliative Care (CAPC) in the United States (based in New York City); and with the Harvard Global Equity Health Initiative in Boston.

MOVED: H. Boon; **SECONDED:** J. Henderson; **THAT**, the Leslie Dan Faculty of Pharmacy agrees to become a partner and supporter of the GIPPC EDU-C.

CARRIED

3.0 Report of the Recruitment and Admissions Committee

L. Lavack reported that the Recruitment and Admissions Committee met once on March 17, 2014 since its last report to Council. The following was presented for information:

Considerable discussion and debate took place on the matter of marketing and recruitment. Key issues raised by the ad hoc group included the following:

- We do not have an overall Faculty marketing and recruitment plan and strategy.
- Program specific endeavours may not be as effective as necessary in reaching and targeting desired and quality audiences.
- It appears prudent to consider engaging external resources to analyze our challenges objectively, and to guide the development of strategies.

In response to recommended action plans emanating from the ad hoc group's discussion, committee members agreed:

- Suitable companies who could undertake the work of analyzing our challenges and guiding development of strategies should be defined.
- Our issues, along with scope of work, must be clarified.
- Consultations must occur to determine administrative support for proceeding. This would include identifying funding sources.

Several issues requiring clarification were raised, and are being referred back to the Entry to Professional Practice Degree Program Committee. They include: ambiguity in Calendar wording related to the time limit for completing the professional degree program; consideration for admission applicants from other Pharmacy programs who are 'not in good standing'; interpretation or wording of 'admission to a reduced course load' and need for clarification.

4.0 Report of the Academic Standing Committee

J. Wells reported that the Committee met three times since the last Council meeting.

Entry to Professional Practice Degree Programs

Failures near the Line

At its meeting of 21st November 2013, the Committee approved a new policy respecting grades of

57–59% in individual courses (*i.e.*, ‘marginal failures’). The policy and related details are described in the document entitled ‘Policy on Marginal Failures’ (26th March 2014). It recognises that numeric grades, like all measurements, are associated with some uncertainty, and it therefore establishes a procedure whereby marginal failures are considered within the broader context of a student’s Grade Point Average (GPA).

It is proposed that each student receive one assignable percentage point, up to a maximum of three, for each increment of 0.3 in his or her GPA above 1.70; thus, GPAs of 2.00–2.29, 2.30–2.59 and 2.60 or more would yield 1, 2 and 3 assignable points, respectively. Those points could be assigned to individual grades of 57–59% in order to achieve the passing grade of 60%. The assignment of points among two or more eligible courses would be at the discretion of the student. For example, a student with a GPA of 2.00–2.29 could assign one point to any course in which the grade was 59%; a student with a GPA of 2.60 or more could assign three points to a single course in which the grade was 57% or divide them between two courses with grades of 58% and 59%. The break-point GPAs for the number of assignable points correspond to overall percentages of about 64.5% (2.00), 67.6% (2.30) and 70.6% (2.60).

Other aspects of the proposal are as follows: (1) A student would be allowed to take advantage of the process in each year of registration in the program. (2) The policy would be applied to all final grades, including those on supplemental examinations. (3) The unadjusted grade would be recorded on the transcript with an annotation to indicate that it was deemed a ‘Pass.’ (4) The unadjusted grade would be used in the calculation of the GPA and cumulative GPA. (5) The policy would be applicable only to students taking a full course-load. (6) The policy would be applied only to courses that are graded on a numeric scale. (7) A description of the policy would be included in the calendar of the Leslie Dan Faculty of Pharmacy.

Relative to current practices, the proposed policy is expected to yield decisions that are fairer to the student and more consistent at all levels: within the same course, across different courses and across different years of the program. It will reduce the number of supplemental examinations and, in all likelihood, the number of petitions and appeals. It is expected to reduce the need for arbitrary and laboured decisions on the part of examiners, course co-ordinators, boards of examiners and the Committee on Academic Standing.

MOVED: J. Wells; **SECONDED:** D. Kalamut; **THAT**, the policy respecting marginal failures adopted by the Committee on Academic Standing on 21st November 2013 and described in the document entitled ‘Policy on Marginal Failures’ (26th March 2014) be approved.

CARRIED

New award records

The Doris C. Kalamut Leadership Award

This award was established by Doris C. Kalamut, who graduated in 1978 from the Faculty of Pharmacy, University of Toronto. She returned in 1981 to teach part-time, became a full-time Co-ordinator and Lecturer in Professional Practice in 2004 and was appointed the inaugural Director of Student Experience and Academic Progress in 2012. She was much involved in student-related activities as an undergraduate, and subsequently has contributed in various ways as a member of the Faculty of Pharmacy Alumni Association.

The value of the award will be the income on an endowment of \$25,000. It will be given to a student in any year of the professional program who has achieved academic excellence, exhibits strong leadership skills, and is involved in extracurricular activities that contribute to the betterment of student life at the Leslie Dan Faculty of Pharmacy. Academic excellence will be indicated by a GPA of 3.0 or more. No student will be eligible to receive the award more than once, and no award will be given if an eligible candidate cannot be identified.

Bev Sweezey Experiential Bursary—This bursary was established by Andrea Cameron, a Senior Lecturer in the Leslie Dan Faculty of Pharmacy. It is named in memory of her aunt, Bev Sweezey, who graduated in 1953 from the Faculty of Pharmacy, University of Toronto, with the degree of B.Sc.Phm and practiced as a community pharmacist in various towns of rural eastern Ontario, in Kingston and in Toronto. She was known for her interest in helping the elderly and for her support of those who were to become the next generation of pharmacists.

The value of the award will be the income on an endowment of \$25,000. It will be given annually to a student in the fourth year of the professional program who is embarking on his or her rotations in Advanced Pharmacy Practice Experience and demonstrates financial need.

MOVED: J. Wells; **SECONDED:** D. Moy; **THAT**, the Doris C. Kalamut Leadership Award and the Bev Sweezey Experiential Bursary be approved.

CARRIED

Timing of supplemental examinations in Year 3T

The Program Committee presented a proposal to advance all supplemental examinations in the third year from early August to the end of June. Essentially the same proposal had been submitted previously to the Committee on Academic Standing by the Associate Dean, Professional Programs, and it was referred to the Program Committee for further consideration.

The proposed change was supported by those co-ordinators of third-year courses who attended the meeting of the Program Committee, and it appeared to have wide support among undergraduates. The students reportedly were willing to accept that those who failed a course in the winter term, and who were permitted to continue in a non-direct patient care rotation during the first block of rotations (*i.e.*, from mid-May to mid-June), would have only about two weeks when they were not on rotation to prepare for a supplemental examination in June. Also, the students were concerned that supplemental examinations in August would lead to a condensed regimen of rotations in Advanced Pharmacy Practice Experience (APPE) that could delay graduation.

Other points in favour of the change included previous experience in the fourth year of the B.Sc.Phm. program, where a similar arrangement had proven to be satisfactory; in that case, students who failed courses in the fall term wrote supplemental examinations in mid-January, allowing those who passed to proceed directly to the Structured Practical Experience Program. Also, third-year students who passed supplemental examinations in June would begin APPE in July and therefore would be counted for Basic Income Units (BIUs) from the provincial government in the summer term.

MOVED: J Wells; **SECONDED:** J. Henderson; **THAT**, the period for supplemental examinations in fall and winter courses of the third year be moved from August to the end of June, and that the change be evaluated after one year by the Committee for Entry to Professional Practice Degree Programs.

CARRIED For Information

Rules for the Conduct of Examinations

An incident in which a student's bag and its contents were stolen from the area designated for such items during an examination has prompted a review of the rules and procedures governing examinations in the Leslie Dan Faculty of Pharmacy. The Registrar presented the Committee with a list of excerpts culled from the rules published by several other divisions of the University and dealing in particular with materials and electronic devices. A sub-committee comprising Vinita Arora, Doris Kalamut, David White and the Registrar has been established to develop an updated policy for the conduct of examinations in the Faculty.

Supplemental Examinations

The grade of 'Fail' obtained by one student on a supplemental examination in PHM144H1 (Pharmacokinetics) in December 2013 was approved.

5.0 **Report of the Curriculum and Assessment Committee**

Z. Austin reported that the Committee met three times since the last Faculty Council meeting. The following items were presented for information.

The Committee approved motions brought forward by the Committee for Entry to Professional Practice Degree Programs (CEPPDP) related to:

- A downward revision to the total number of hours in PHM 105H (Medication Therapy Management 1). Previously, the Committee had approved the addition of 2 hours to this course to facilitate inclusion of a MedCheck activity; subsequent to this approval, the course coordinator was able to identify a mechanism to incorporate this new activity without additional time requirements. The course has now reverted to its original allocation of 39 contact hours.
- A change in the description of the Institutional Core Direct Patient Care Rotations to facilitate greater flexibility in offering a wider range of rotations within partner institutions (including speciality sites).
- Placement of the new Calculations Course requirement, beginning with the 1T8 cohort, in the fall semester of Year I.
- A proposal brought forward jointly by the Office of Experiential Education and the coordinators of the Medication Therapy Management stream of courses for enhanced integration of teaching and assessment related to medication reconciliation and MedsCheck across the curriculum. This proposal will necessitate minor revisions to Medication Therapy Management and Early Practice Experience course outlines, which will be brought forward for information to the Committee of Curriculum and Assessment.

The Committee approved a motion brought forward by the Post-Baccalaureate Professional Degree Programs Committee (PBDPC) related to:

- A revised course outline for PHM 614H (Advanced Pharmacotherapy-General Medicine II) which included minor changes in the assessment methods used in the course in order to better assess students' learning and performance.

Information Received:

The Committee received a report from the PBDPC for a major modification to the post-baccalaureate Pharm D program, to align curriculum with changes to the entry-to-practice degree offered at the Faculty. Further discussion is anticipated, particularly with respect to implications for

the Office of Experiential Education and (in light of the current review of the Faculty's financial situation) anticipated financial costs and benefits associated with implementation of these major modifications.

6.0 Report of the Program Evaluation and Assessment Committee

M. Bystrin reported that the Committee met twice since the last report to Council.

The following is presented as information only:

1. The Committee provided input into the UTQAP Provostial response document which was submitted by the Interim Dean on March 10th. It will subsequently be presented to AP&P on April 1st and to Governing Council on May 1st. All documents are available in the UTQAP Dropbox.
2. The Committee identified that the next faculty-wide initiative related to program evaluation is the CCAPP interim report which is due in late spring 2015.
3. In light of the fact that the individual hired to assist in developing an overarching Faculty framework for program evaluation was unable to complete his employment term with us, the Committee recommends that we hire someone to carry on with this work. This will be pivotal in our ability to make progress on a framework. In the short-term, the Committee will be making a recommendation to all Program Standing Committees of Council to identify five key performance indicators.

7.0 Strategic Planning for Global Health

J. Kohler presented information on the Strategic Planning for Global Health.

The purpose of this strategic plan is to promote an integrated approach to the global health activities at LDFP, and strengthen our credibility in an area we have expertise, whilst adding to our reputation as a world-class Faculty of Pharmacy.

We want to encourage international collaboration and coherence in Global Health. Please let J. Kohler know of new partnerships.

8.0 Other Business

PTR

Interim Dean Boon reported that the call for PTR reports would be going out soon with a deadline of April 30, 2014. Ray Reilly is the Chair of the Research Committee; Lalitha Raman-Wilms is the Chair of the Service Committee; and Zubin Austin is the Chair of the Teaching Committee.

Meeting adjourned: 3:00 p.m.