Undergraduate Medical Education

Student Assessment Policy

Student Assessment Component: Policy #SA-05 v7
Supersedes: Student Assessment Policy (Policy #SA-05 v1-6); Student Assessment during Clerkship (Policy #CC-09 v1)
Lead Writer: Dr. M. Gibson
Approved by SAC: September 6, 2018
Approved by Curriculum Committee: November 22, 2018
Revisions:
December 19, 2012 (original)
August 21, 2014 (v2)
July 8, 2015 (v3)
June 2, 2016 (v4)
July 26, 2017 (v5)
June 4, 2017 (v6)
September 6, 2018 (v7)

Effective Date: August 31, 2018

1.0 Governance of Student Assessment, Policy and Practice

1.1 Student Assessment will be directed by the Student Assessment Committee (SAC) which will develop and oversee all policies and procedures pertaining to assessment practices within Undergraduate Medical Education.

1.2 All policies developed by the SAC will be approved by Curriculum Committee prior to adoption by Undergraduate Medical Education. Procedures with significant impact on the UGME program will be approved by Curriculum Committee prior to adoption by Undergraduate Medical Education.

1.3 The Course and Faculty Review Committee (CFRC) will work with the SAC to ensure that courses are in compliance with policies and procedures set out by the SAC.

1.4 The SAC will operate under the Terms of Reference outlined on the UGME website at: http://meds.queensu.ca/education/undergraduate/committees

2.0 General Principles
2.1 All student assessment will be consistent with and based upon our overall curricular goals policy, our curricular competencies framework, the Medical Council of Canada presentations and discipline-specific standards of achievement to be established by faculty.

2.2 Student assessment will be designed with the goal of ensuring students have achieved the stated curricular objectives assigned to a particular competency.

2.3 Student assessment will be guided by available research, best practice and the LCME/CACMS Accreditation Standards relevant to assessment.

2.4 Student assessment practices will be open and transparent to all students and faculty.

2.5 Assessment must include elements specifically designed to assess all competencies outlined in the Queen’s UGME Curricular Goals and Competency-Based Objectives Document. The provision for ongoing observation and assessment of clinical skills, appropriate behaviours and attitudes must be included in the assessment strategy of every course where these opportunities exist.

2.6 Methods of assessment introduced as part of the course assessment plan that are novel to the undergraduate program must be reviewed and approved by the SAC prior to implementation in order to ensure that they conform to best practices and are in line with other assessment practices.

2.7 Narrative description of student performance must be included as part of the assessment in all courses and competencies where student-teacher interaction permits.

2.8 Assessment will be conducted according to procedures developed by the SAC which are outlined in the document Student Assessment Practices and Procedures.

3.0 Assessment in Preclerkship and Clerkship Curricular Courses – General Considerations

3.1 All statements regarding preclerkship courses will apply to Clerkship Curricular Courses unless otherwise noted.

3.2 An assessment plan for each course must be posted on the course page prior to the start of the course and this will be considered the official assessment plan for the course. This will include assessment dates for formative and summative assessments and weighting of all assessments, and mandatory assessments will be clearly noted.

3.3 A course assessment blueprint documenting how the assessment plan aligned with course objectives must be submitted to the Student Assessment Committee after a course is completed. Course Directors will also submit their plans for their assessment strategy for the next iteration of
the course, including any proposed blueprint changes, and will receive feedback from the Student Assessment Committee their plans.

3.4 Each course will offer formative assessment designed to provide feedback to students that will enable them to assess their level of achievement and ongoing learning needs. Each course must provide at least one opportunity for formative assessment that does not contribute to the final grade.

3.5 A unit test or midterm examination is usually required for each course with a duration greater than four weeks, with the exception of those courses for which a midterm or unit test would not assess the course’s learning objectives appropriately. These exams should (a) provide students with guidance as to the expected level of knowledge and comprehension required to pass the course and (b) familiarize them with the final examination format. If a Course Director wishes to use alternate forms of assessment to achieve the goals of unit tests or midterms, they will need to submit their proposal to the Student Assessment Committee for approval. Unit tests or midterms shall not represent the only opportunities for formative assessment in a course.

3.6 All courses will have, where appropriate, a separate summative examination or final assignment that provides sufficient data to make an informed judgment about student achievement at the end of the course, designed to demonstrate that the student has met the course objectives. A maximum weighting of 70% for these events is recommended to reduce the percentage of the final grade that is dependent on a single assessment. All written summative examinations must use more than one type of question, in order to vary the assessment methods used to assess performance.

3.7 The final examination schedule is determined by the Office of Undergraduate Medical Education. Final examinations will occur no later than the end of the term in which the course is completed. There must be an appropriate interval of time between the end of classes and the beginning of the final examination period to allow for study. This will be determined by the Course and Year Directors.

3.8 Students must receive timely feedback regarding their performance on both formative and summative assessments. Marks and other feedback will be provided to students within 5 calendar weeks, but all efforts are made to provide feedback as soon as possible. Target timelines for the provision of feedback are included in the Student Assessment Practices and Procedures document.

3.9 Any student with a concerning pattern of performance during a course will be asked to meet with the Course Director or delegate as soon as this concern is raised in order to identify additional
supports that might be required. Further discussions may occur with the Year Director or with Student Affairs, as appropriate.

3.10 Any student with a concerning pattern of performance across multiple courses in a term will be asked to meet with the Year Director in order to identify additional supports that might be required. Students may be asked to attend meetings in Student Affairs, as appropriate.

4.0 **Principles governing final examinations - Preclerkship and Clerkship Curricular Courses**

4.1 Final Examinations (including any Objective Structured Clinical Examinations – OSCEs) will be prepared by the Course Director or designate in accordance with the course assessment blueprint. All items will be reviewed by the Course Director and a member of the SAC for quality, accuracy of the answer key, and alignment with course learning objectives and assigned Medical Council of Canada presentations, where appropriate.

4.2 For multiple choice questions (MCQs), technical analysis of the examination will consist of descriptive statistics (Mean, Standard Deviation, Range) and estimates of reliability. Item analysis will consist of item difficulty and biserial correlation.

4.3 For short answer questions (SAQs), technical analysis of the examination will consist of descriptive statistics (Mean, Standard Deviation, Range).

4.4 For OSCEs, a standard technical analysis of the pre-clerkship OSCE will consist of (a) descriptive statistics by station (Mean, Standard Deviation, Range), (b) a repeated measures analysis of the variance (ANOVA), and (c) an item analysis of checklist items to identify those posing challenges at the station level (frequency tables). In addition to the standard technical analysis, the Clerkship OSCE will also consist of descriptive statistics by examiner group and Welch’s t-tests. The impact of rotation completion on the fail status of students will also be computed if required.

4.5 Where possible, examination difficulty will be reviewed for all final examinations, by comparing the class average to that of previous years, and by any other methods possible. In cases where the examination is considered to be significantly difficult, consideration will be given to scaling the results.

4.6 At the end of each term an examiners’ meeting will take place during which student performance in each course will undergo review. The examiners will meet no more than 20 working days after the last day of the term. Examiners meetings will be governed by the procedures outlined in the Student Assessment Practices and Procedures document.
4.7 The examiners will make decisions regarding student marks based on the criteria outlined in the section 6.0 of this policy Student Grading – Preclerkship and Clerkship Curricular Courses. These decisions will be taken as recommendations to the Progress and Promotions Committee.

5.0 Exam Integrity

5.1 All items submitted for inclusion in a final examination will be newly created or drawn from the Question Bank.

5.2 Items that are identified as flawed after item analysis will be removed from the bank until edited.

5.3 Students will have an opportunity to review unit tests, midterms, and final examinations, governed by UGME exam review session regulations.

5.4 The School of Medicine exempts all of its final exams from release for student reference purposes in accordance with clause one of the Senate Policy on Confidential Exams, May 21, 2008.

6.0 Student Grading – Preclerkship and Clerkship Curricular Courses

6.1 The final mark for each course will be a composite of the various assessment methods used throughout the course. Student marks are reviewed at the examiners’ meeting.

6.2 Course Directors may determine that any component of the course must be completed satisfactorily in order to achieve standing in the course. This must be made clear to all students via the course page at the beginning of the term.

6.3 In courses that use numeric marks, the student must achieve all the following in order to receive a pass standing in the course:

6.3.1 A composite course mark of 60% or greater and

6.3.2 A mark of 60% on the final examination unless it is the opinion of the examiners that extenuating circumstances pertaining to the examination exist and

6.3.3 Satisfactory completion on all units or assessments that have been identified by the Course Director as mandatory.
6.4 In courses that use OSCEs, students must achieve all of the following in order to receive a pass standing:

   6.4.1 A mark of 60% overall on the OSCE
   6.4.2 No more than one station with a mark of less than 60%
   6.4.3 Satisfactory completion on all assessments that have been identified by the Course Director as mandatory.

6.5 If a student scores less than 60% on any summative examination, their examination will be automatically remarked (i.e. short answer questions will be remarked, OSCE videos will be reviewed), according to the processes noted in the Student Assessment Practices and Procedures document.

6.6 Student achieving a course mark or exam mark between 60% to 70% will be required to undergo mandatory review by the examiners, according to the procedures outlined in the Student Assessment Practices and Procedures document. Recommendations made at the examiners’ meeting will be brought to Progress and Promotions Committee by the Director of Student Assessment or delegate and will be based on identified deficiencies and may include recommendations for remediation.

6.7 For courses whose assessment plans are not based on numeric marks, students must achieve satisfactory completion according to the assessment plan outlined on the course page.

6.8 Students who achieve satisfactory marks, but who are identified by the Course Director or designate at the examiners meeting as having deficiencies in any area (e.g. professional or ethical behaviour, areas of academic concern, tutor or peer assessment concerns, or challenges in any competency) will be reviewed at the examiners meeting, and if appropriate, the Director of Student Assessment or delegate will bring these concerns, with any recommended courses of action to the Progress and Promotions Committee.

6.9 If a student does not successfully complete any required component of a course, a comprehensive review of the student’s performance in that term (or time period) should be conducted in order to identify appropriate resources to support the student, and to determine the most appropriate method(s) to reassess the student to ensure that they have met the course objectives. This review should be conducted by the Course Director, Year Director, and other examiners as needed, in order to provide recommendation to the Progress and Promotions Committee.

6.10 The Director of Student Assessment or delegate will report on student performance and relevant recommendations to the Progress and Promotions Committee.
7.0 **Assessment in Clerkship Clinical Courses – General Considerations**

7.1 All students must receive a formal mid-rotation assessment, which will be documented on the appropriate form no later than the beginning of the fourth week of the course. Any marginal notations will mandate a meeting with the Course Director or faculty delegate.

7.2 End of Block Assessment forms may be compiled from a collection of daily or weekly assessments at the discretion of the Course Director.

7.3 All students will participate in an exit meeting in person or by telephone with the Course Director or faculty delegate, during which the assessments are shared with the student.

7.4 When paper forms are used, students are be required to review and sign their End of Block Assessment forms within 10 days of completing the rotation. The End of Block Assessment forms will be deemed incomplete until signed by both the faculty member and student and delivered to the Undergraduate Office.

7.5 The examiners will make decisions regarding student grades based on the criteria outlined in the section 9.0 of this policy- Student Grading- Clerkship Clinical Courses. These decisions will be taken as recommendations to the Progress and Promotions Committee.

8.0 **Principles of Final Examinations – Clerkship Clinical Courses**

8.1 Examinations are to be scheduled within the last two weeks of a block. A schedule of examination dates will be made available to students at the beginning of clerkship.

8.2 Students will write NBME examinations for Medicine (Core, Subspecialty) and Surgery (Surgery, Peri-Operative Medicine) at the end of the second of these paired courses. Students with special circumstances may be offered the opportunity to write after only one of the relevant courses, if deemed appropriate by the Course Director. NBME examination timing for the Integrated Clerkship will be determined by the Integrated Clerkship Director in consultation with the relevant Course Directors.

8.3 Locally developed written clerkship examinations are to be developed as described for preclerkship courses and will undergo the same technical analysis described above in section 4.0.

8.4 Students will be released from their clinical duties by 6 pm the night prior to any written examination or OSCE with no evening/overnight call assigned. Students on regional rotations which require final written exams are generally excused from duty on the day of the examination.
8.5 An examiners’ meeting will take place at the end of each term to review student performance in all courses from that term and will be conducted in accordance with the Student Assessment Practices and Procedures document.

8.6 Recommendations from the examiners’ meeting will be taken to the Progress and Promotions Committee by the Director of Student Assessment or delegate.

9.0 Student Grading – Clerkship Clinical Courses

9.1 In order to achieve standing in a clerkship course, the student must achieve all of the following:

   9.1.1 A satisfactory standard on the final written exam determined by the Student Assessment Committee, in consultation with the Clerkship Committee (if the course uses a final written exam). The standard required will be published on the Course Page;

   9.1.2 Satisfactory assessment on the End of Block Assessment form;

   9.1.3 Logging of 100% of mandatory clinical encounters/procedures for the course;

   9.1.4 Achievement of the required standard on all other mandatory assessment tasks such as examinations or course-designated assignments.

9.2 If a student does not successfully complete any required component of a course, a comprehensive review of individual performance in the clerkship clinical course will be conducted in order to identify appropriate resources to support the student, and to determine the most appropriate method(s) to reassess the student to ensure that they have met the course objectives. This review should be conducted by the Course Director, Year Director, and other examiners as needed, in order to provide recommendation to the Progress and Promotions Committee.

9.3 If a student does not meet any of the criteria outlined in 9.1, the student must meet with the Course Director to discuss his/her performance and identify any necessary remedial measures.