

Enhancing Feedback on Workplace Based Assessments

Medical Education Conference

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Introduction

We will present two research projects:

- The first explores student opinions of the feedback they are given.
- The second investigates the feedback given by doctors to the 1st clinical year students of UCLMS during 2010-11.

Introduction



- WPBA – Introduced in 2008/09
 - Min. 4 per module (16 in total)
 - 2 Mini-Clinical Examination Exercise (CEX)
 - 2 Case Based Discussion (CBD) or Case Note Review (CNR)
 - Scores received contributed to the end of year score

The change over time...

- Grade
- Competency
- White space

Grade

CASE BASED DISCUSSION (CBD)

To be arranged by the student with a clinician. You are required to complete at least 3 CBD or CNR per module and to bring them to your end of attachment assessment / feedback session.

Student name:

Module / Firm:

Date: /

Assessor: Cons/GP SpR ST2 ST1 Trust grade FY2

Setting: OP clinic Ward IP A&E GP session

Patient: Age Sex: M F

Please use the anchor statements on the reverse of the page to guide your marking. The anchor statements are compatible with those used in Finals.

Domain	Fail 0	Pass 1	Clear Pass 2
History Taking		✓	
Examination		✓	
Diagnosis & Management		✓	
Insight into an aspect of the case		✓	
Record keeping		✓	
Total			8/10

8 - 10 Clear pass (CP)

5 - 7 Pass (P)

0 - 4 Fail (F)

If student deserves "Excellent" grade – surpasses FY1 standard – check this box

Diagnosis:

Points of good performance:

Points for action: (Please indicate specific problems if assigning a mark of 0)

Assessor

Sign and print name:

Contact no:

By signing this form, the assessor affirms that the student has been given feedback and the student agrees that s/he agrees with the results of the assessment and the feedback given.

Portfolio Section 5: Assessment: CBD-Y3

The change over time...

- Grade
- Competency
- White space

Competency

UCL MEDICAL SCHOOL
YEAR 4

Case Based Discussion (CBD)



Student name: _____ **Date of Assessment:** _____

Clinical setting:

<input type="checkbox"/> A&E	<input type="checkbox"/> Outpatient	<input type="checkbox"/> Inpatient	<input type="checkbox"/> GP Surgery
<input type="checkbox"/> Other (please specify): _____			

Clinical problem or diagnosis:

Assessor's rating of complexity of case (Year 4):

<input type="checkbox"/> Low	<input type="checkbox"/> Average	<input type="checkbox"/> High
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Please rate the following areas:

	Well below expectations for Year 4 completion	Below expectations for Year 4 completion	Borderline for Year 4 completion	Meets expectations for Year 4 completion	Above expectations for Year 4 completion	Well above expectations for Year 4 completion	Unable to Comment
1. History taking:							
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> UIC	
2. Examinations:							
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> UIC	
3. Clinical reasoning:							
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> UIC	
4. Insight into an aspect of the case:							
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> UIC	
5. Management plan:							
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> UIC	

Points of Good Performance:

Suggestions for Development:

Agreed Action:

Completed by (capitals): _____

Signature: _____

Student Signature: _____

Designation: _____

Date: _____

Date: _____

By signing this form, the assessor affirms that the student has been given feedback and the student has been informed of the assessment result.

The change over time...

- Grade
- Competency
- White space

What did we do?

- Project 1: Asked year 4 students in two cohorts for their views on WPBA
 - 12 statements to rate agreement with on a 5 point Likert scale
 - Free text comments
- Project 2: Analysed written feedback on paper forms
 - Using a coding framework agreed by team of six students

Open Discussion

- What are your perceptions of WPBA?
- How do you think students perceive WPBA?
- How effective is WPBA as a formative exercise?

Then shortly we will discuss:

- How can we make WPBA more effective?

Student Perception of WPBA

Students agreed or strongly agreed that feedback was useful

2009-2010 = 47.65%

2010-2011=44.06%

And that the assessments highlight things they would do differently in the future

2009-2010 = 51.77%

2010-2011 = 47.46%

Student Perception of WPBA

Students from both cohorts disagreed that assessments interfered with teaching time

2009-2010 = 44.12%

2010-2011 = 45.76%

Student Perception of WPBA – Free Text Comments

- The most common theme was “subjectivity of assessment”
 - *“I have found that for a similar performance the mark I am given might vary between 6-10 depending on the assessing doctor”*
2009/2010
- “Comments about grading” were found mostly in the 2009-2010 cohort
 - students felt that the marking system was not standardised and that this was detrimental to the assessment.

Student Perception of WPBA – Free Text Comments

- Educational value of WPBA
 - *“Workplace based assessments are a useful exercise (when done properly) to get personalised feedback in examination and presentation skills”*
 - *“they are seen by most as a necessity to get done before the end of the module, stressing most students out, rather than being used as a learning tool”*

Student Perception of WPBA – Free Text Comments

- Students had mixed views on the quality of feedback they received.
 - *“I always found the verbal/written feedback far more useful, as it specifically stated which aspects were good and which needed improvement”*
 - *“many a time, the doctors just give any mark without any proper feedback or teaching”*

Student Perception of WPBA – Free Text Comments

- Students suggested that assessments were most valuable when assigned a mentor, whose role was to aid in assessment and development

Student Perception of WPBA – Free Text Comments

- In both cohorts the attitude of assessors was highlighted negatively:
 - *“the forms are seen, seemingly, as an annoyance – especially by more senior staff”*
 - *“some assessors seem to want to do the bare minimum box ticking to get rid of the student, without even properly reading the form”*
 - *“while some doctors understand and use these forms correctly there will always be enough doctors who are willing to just give full marks on them because they know that they are just a formality to make these forms meaningless”*

Student Perception of WPBA – Free Text Comments

- Unprofessionalism was also highlighted:
 - *“many people fabricate high marks, which is frustrating to those who don’t”*
 - *“I have received numerous CEXs for examining patients even though I did not do so under supervision”*

Written Feedback on WPBA Forms

With student opinion in mind we have explored the feedback given to the students.

A **10% sample of the 367 students** completing year four at UCLMS in July 2011 were asked to hand in their complete set of 16 WPBA forms for analysis.

A total of **250 forms** were handed in: 121 mini-CEX (these assess observed clinical examination skills), 122 CBD (these assess presentation skills) and 7 CNR (these assess clerkings using submitted notes).

The Feedback Form:

We explored the written feedback sections, where the assessor is asked to provide ‘*points of good performance*’ and ‘*areas for improvement*’.

We then classified and analysed the feedback using Nvivo qualitative data handling software.

We also noted extra details, such as the overall standard of performance.

Clinical Assessment Exercise Year 3 (CEX)

To be arranged by the student with a clinician. You are required to complete at least 2 CBD or CNR per module and to bring them to your end of module assessment / feedback session.

Student name: _____

Module / Firm: _____ **Date:** _____

Assessor: Cons/GP SpR ST2 ST1 Trust grade

Details of case: _____

Please use the anchor statements on the reverse of the page to guide your marking. The anchor statements are compatible with those used in Finals.

Domain	Below expected for stage of training	As expected for stage of training	Above expected for stage of training
Observed consultation OR examination			
	Below expected for stage of training	As expected for stage of training	Above expected for stage of training
Communication			
Interpretation of findings			
Professionalism			

Please indicate overall standard of performance

Below expected for first clinical year student	As expected for first clinical year student	As expected for early final year student	As expected for end of clinical training	Above expected for end of clinical training
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Points of good performance:

Areas for improvement:

Assessor Sign and print name: _____ Student Sign: _____

Contact no: _____

By signing this form, the assessor affirms that the student has been given feedback and the student agrees that s/he agrees with the results of the assessment and the feedback given.

Portfolio Section 6: Assessment: CEX

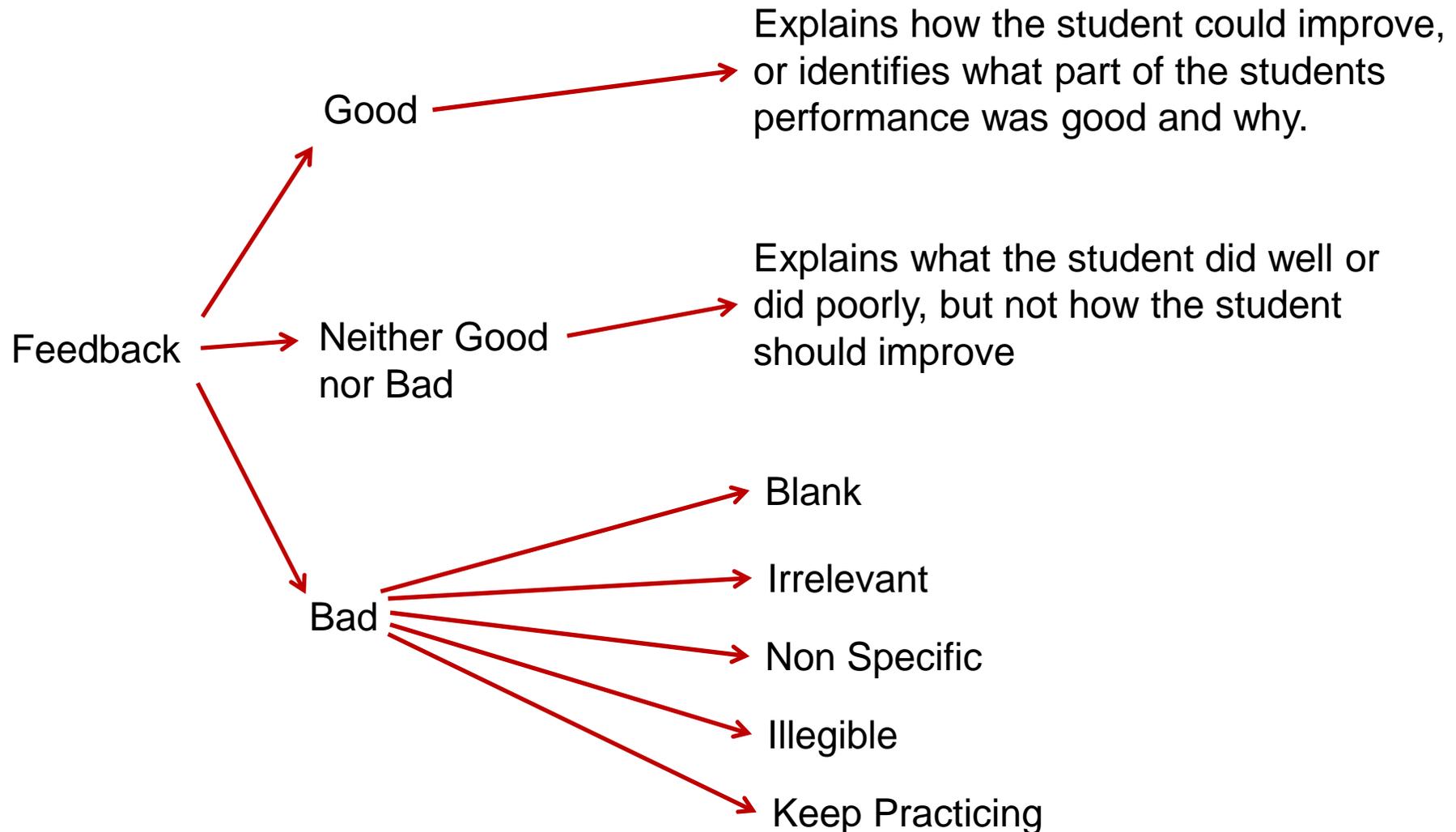
Open Discussion

How can we make WPBA more effective?

Focusing on:

- What makes good / bad feedback?
- How can we improve feedback?

How Feedback was Classified:



Examples of Feedback:

Bad:

“keep practising”.

Neither Good nor Bad:

“significant improvements needed in upper limb neurological exam”.

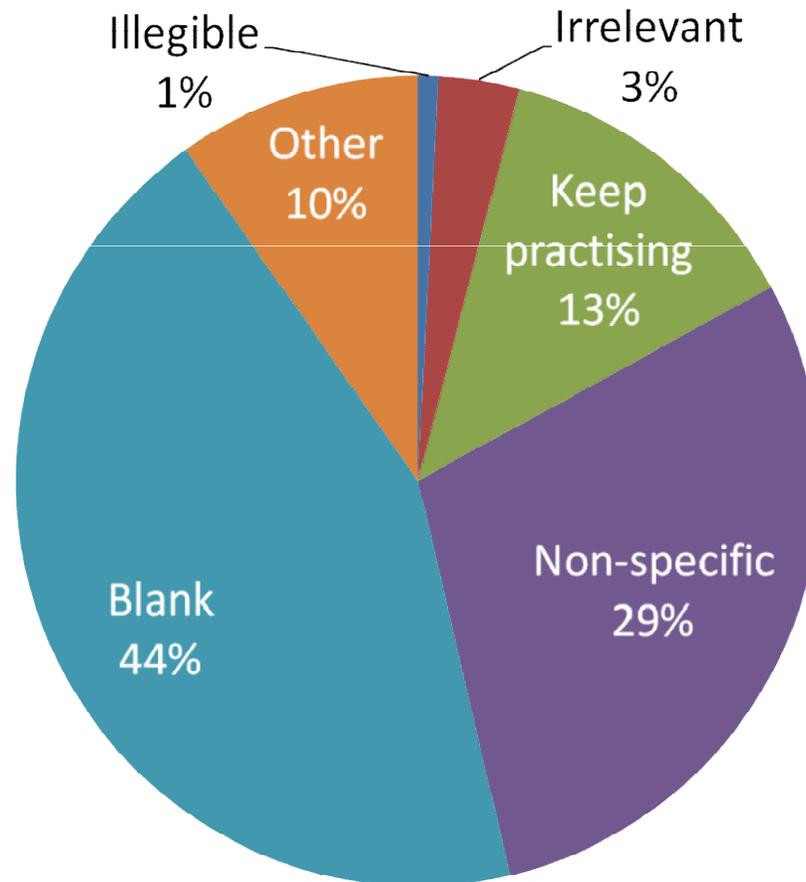
Good:

“To practice a systematic approach to CVS examination to make sure relevant aspects are not forgotten eg. measuring BP, collapsing pulse and radio-radial delay”.

The Results

	CBD (%)	CNR (%)	CEX (%)	ALL FORMS (%)
Bad Unit	54.2	81.8	69.3	62.0
Neither Good nor Bad Unit	33.5	18.2	21.7	27.6
Good Unit	12.3	0.0	9.0	10.4

Reasons Why Feedback Was Classified As Bad:



Written Feedback on WPBA Forms

If we return to student opinion on the assessment process:

*“I always found the verbal/written feedback far more useful, as it **specifically** stated which aspects were good and which needed improvement”*

Giving Good Feedback:

The key message is:

BE SPECIFIC and EXPLAIN THE GAP

(i.e what exactly has the student done well or what must the student improve to achieve your desired standard)