WHY DOES EVERYTHING NEED TO ALIGN?

ASSESSMENT, OBJECTIVES, OUTCOMES

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OBJECTIVES

- Recognize the importance of assessment, objectives and outcomes
- Develop diverse learning activities that support your learning objectives
- Identify and develop assessments that align with your activities and objectives
- Devise a plan to review these educational elements to improve outcomes

ALIGNMENT IS

- ... the degree to which assessments yield results that provide accurate information about student performance regarding academic content standards at the desired level of detail, to meet the purposes of the assessment system ...
- ... The assessment must adequately **cover** the **content standards** with the appropriate depth,
 - **reflect** the emphasis of the content standards
 - provide scores that cover the **range** of performance standards,
 - allow all students an opportunity to demonstrate their **proficiency**, and
 - be **reported in a manner** that clearly conveys **student proficiency** as it relates to the content standards

The Encyclopedia of Middle Grades Education (2nd ed.)

FACULTY VIEW POINT

(of objectives and assessment)



Objectives



Assessment

BUT WHAT IF...

To develop physician thought leaders through inquiry, research and discovery, using an innovative curriculum based upon adult learning methods in a patient-centered context









FOUR MAJOR STEPS

- Defining the desired learning outcome (DLO)
- Choosing teaching/learning activities likely to lead to the DLO
- Assessing students actual learning outcomes to see how well they match wat was intended
- Final grade....

STEP I: DEFINE THE DESIRED LEARNING OUTCOME

VTC Virginia Tech Carilion School of Medicine

To develop physician thought leaders through inquiry, research and discovery, using an innovative curriculum based upon adult learning methods in a patient-centered context

LEARNING OBJECTIVES AND ASSESSMENT

Assessment

Where do you want your learner to be at the end of the class time? (evaluate, apply, analyze)

In class activity

Preparation

What level do you want the learner to come prepared for? (list, know, describe)



Utilize or adapt faculty developed learning outcomes to drive activity development and assessment.

THINK IN THE CONTEXT OF PROGRAM

VTC Virginia Tech Carilion School of Medicine

To develop physician thought leaders through inquiry, research and discovery, using an innovative curriculum based upon adult learning methods in a patient-centered context

•Medical knowledge.

•Patient care.

•Interpersonal and communication skills.

•Professionalism.

Practice-based learning and improvement.Systems-based practice.

Accreditation Council for Graduate Medical Education





STEP 2: CHOOSE TEACHING AND LEARNING ACTIVITIES THAT SUPPORT LEARNING OBJECTIVE



COMMON DEFINITIONS

- Learning objectives: What do I want students to know how to do when they leave this course?
- Assessments: What kinds of tasks will reveal whether students have achieved the learning objectives I have identified?
- Instructional strategies: What kinds of activities in and out of class will reinforce my learning objectives and prepare students for assessments?

https://www.cmu.edu/teaching/assessment/basics/alignment.html

INSTRUCTIONAL STRATEGIES

https://medbiq.org/curriculum/vocabularies.pdf

IM01: Case-Based Instruction/Learning IM02: Clinical Experience - Ambulatory IM03: Clinical Experience - Inpatient IM04: Concept Mapping IM05: Conference IM06: Demonstration IM07: Discussion, Large Group (>12) IM08: Discussion, Small Group (<12) IM09: Games IM10: Independent Learning IMII; Journal Club IM12: Laboratory IMI3: Lecture IM14: Mentorship **IMI5:** Patient Presentation - Faculty

IM16: Patient Presentation – Learner **IM31**: Patient Presentation - Patient IM17: Peer Teaching IM18: Preceptorship IM19: Problem-Based Learning (PBL) IM20: Reflection IM21: Research IM22: Role Play/Dramatization IM23: Self-Directed Learning IM24: Service Learning Activity IM25: Simulation IM26: Team-Based Learning (TBL) IM27: Team-Building IM28:Tutorial IM29:Ward Rounds IM30:Workshop



HOW DO I KNOW IF MY INSTRUCTIONAL STRATEGY IS EFFECTIVE?

- Classroom polls
- Direct paraphrasing
- Documented problem solving
- What is the "muddiest point" ?



STEP 3: ASSESS

- Learning takes place in students' heads where it is invisible to others.
- This means that learning must be assessed through **performance**:
 - What students can do with their learning.
- Assessing students' performance can involve assessments that are formal or informal, high- or low-stakes, anonymous or public, individual or collective.



ASSESSMENT: TYPES AND KINDS

Formative and summative assessment types can be similar in structure but have different goals.

- The main goal of **formative assessment** is to gather feedback that can be used by the instructor and the students to guide improvements in the ongoing teaching and learning context.
- The main goal of **summative assessment** is to measure the level of success or proficiency that has been obtained at the end of an instructional unit, by comparing it against some standard or benchmark.

METHODS

- AM01: Clinical Documentation Review
- AM02: Clinical Performance Rating/Checklist
- AM03: Exam Institutionally Developed, Clinical Performance
- AMI9: Exam Institutionally Developed, Laboratory, Practical
- AM04: Exam Institutionally Developed, Written/Computerbased
- AM05: Exam Institutionally Developed, Oral
- AM06: Exam Licensure, Clinical Performance
- AM07: Exam Licensure, Written/Computer-based
- AM08: Exam Nationally Normed/Standardized, Subject

- AM09: Multisource Assessment
- AMI0: Narrative Assessment A
- AMII: Oral Patient Presentation
- AMI2: Participation
- AMI3: Peer Assessment
- AMI4: Portfolio-Based Assessment
- AMI6: Research or Project Assessment
- AMI7: Self-Assessment AMI8: Stimulated Recall



HIERARCHY OF VERBS



Learning objective	Examples of appropriate assessments		
Recall Recognize Identify	Objective test items such as fill-in-the-blank, matching, labeling, or multiple-choice questions that require students to: •recall or recognize terms, facts, and concepts		
Interpret Classify Summarize Compare Explain	Activities such as papers, exams, problem sets, class discussions, or concept maps that require students to: •summarize readings, films, or speeches •compare and contrast two or more theories, events, or processes •classify or categorize cases, elements, or events using established criteria •paraphrase documents or speeches •find or identify examples or illustrations of a concept or principle		
Apply Execute Implement	Activities such as problem sets, performances, labs, prototyping, or simulations that require students to: •use procedures to solve or complete familiar or unfamiliar tasks		
Analyze Differentiate Organize Attribute	Activities such as case studies, critiques, labs, papers, projects, debates, or concept maps that require students to: •discriminate or select relevant and irrelevant parts •determine how elements function together		
Evaluate Check Critique Assess	Activities such as journals, diaries, critiques, problem sets, product reviews, or studies that require students to: •test, monitor, judge, or critique readings, performances, or products against established criteria or standards		



Skills focused vs. information focused



Diversity of assessment is key



What students can do with their learning.

What students can do with their learning.

How they show up.

STEP 4: GRADING

- American Medical Student Association, 2012:
- "STRONGLY URGES all medical schools to adopt the use of a strictly pass/fail grading policy during the preclinical years of medical school".
- American Medical Association (AMA), 2012 approved policy entitled "Supporting Two-Interval Grading Systems for Medical Education".

MACY SCHOOLS' MI-M2 GRADING SYSTEMS



Touro College in Manhattan, New York - N/A

The Commonwealth Medical College of Pennsylvania - N/A

* no Honors in first quarter of M1

Number of Medical Schools Using Selected Grading Systems in Pre-Clerkship Courses (Excluding Physical Diagnosis/Clinical Skills)



AMU American Medical Colleg

ACADEMIC PERFORMANCE



Robins *et al.* Acad Med. 1995, 70: 327-329 Bloodwood *et al.* Acad Med. 2009, 84: 655-662 Rohe *et al.* Mayo Clin Proc. 2006, 814: 1443-1448

No change in performance

White <i>et al.</i> Adv Health Sci Educ Theory Prac 2010, 15 469-477	One course performance better, one worse
McDuff et al. BMC Medical Education 2014 14:127	Slight decrease in preclinical
H/P/F → Pass/Fail	No change in STEP 1 score

Reed, D *et. al.* Acad Med. 2011, 86 : 1367-1373 No change in STEP 1 score

ABCF

- Increased wellbeing
- Decreases
 "burnout"
- Less stress, better mood

- Greater satisfaction in academic performance
- Greater group cohesion
- Increased satisfaction with evaluation system
- Improved learning environment
- More time for other academic pursuits

- Greater satisfaction with personal life
- More time for family

Pass/Fail

- More time for exercise
- More time to improve personal wellness

"when students consciously pursued [such] honors, 70% felt it increased their stress level; of students consciously choosing to not pursue the honors option, 92% felt it decreased their stress."

Reed, D et. al. Acad Med. 2011, 86 : 1367-1373 Williams *et al*, Acad Psychiatry. 2015, 39:47-54. Bloodwood et. al. Acad Med. 2009, 816 : 1443-1448 Robins *et al.* Acad Med. 1995, 70: 327-329 White *et al.* Adv Health Sci Educ Theory Prac 2010, 15 469-477 Rohe *et al.* Mayo Clin Proc. 2006, 814: 1443-1448 Jacobs *et al.* Med Teach. 2014, 36:164-8



Perceived Cohesion Scale (six items, Likert scale, designed to measure sense of belonging and morale associated with group membership)

Rohe et al. Mayo Clin Proc. 2006, 814: 1443-1448

SUMMARY

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		Figure 1 All Specialties Percentage of Programs Citing Each Fa Factor in Selecting Applicants to Intervi	ctor And Mean Importance ew	Rating ¹ for Each
		(11-1,755)	Percent Citing Factor	Average Rating
		USMLE Step 1/COMLEX Level 1 score	94%	4.1
	• 10	Letters of recommendation in the specialty	86%	4.2
1960s	Curricular reform	Medical Student Performance Evaluation (MSPE/Dean's Letter)	84%	4.0
	<u> </u>	USMLE Step 2 CK/COMLEX Level 2 CE score	80%	4.1
	Selection of m	Personal Statement	78%	3.6
		Graduate of U.S. allopathic medical school	75%	4.1
1978	e versus grades	Grades in required clerkships	70%	4.0
	2 Moss Th Deat	Gaps in medical education	70%	4.1
	je 🚊 🗧 👌 🖓 (2) U	Honors in clinical clerkships	69%	4.0
		Perceived commitment to specialty	69%	4.3
1983		Class ranking/quartile	69%	3.9
1705	» О а т (4) 1	Evidence of professionalism and ethics	65%	4.5
	one from "page	Personal prior knowledge of the applicant	65%	4.1
	A performance	Audition elective/rotation within your department	63%	4.0
1991	Dietr	Leadership qualities	63%	4.0
1771	performed sign	Honors in clerkship in desired specialty	61%	4.3
	from a pa	Grades in clerkship in desired specialty	61%	4.3
	cours	Alpha Omega Alpha (AOA) membership	61%	3.8
1005	this group direc	Pass USMLE Step2 CS/COMLEX LVI2 PE	57%	4.1
1995	15th perc	Perceived interest in program	5/%	4.1
	consi	Consistency of grades	50%	4.0
	excellence and c	Volupteer/extracursicular experience	54%	3.6
	preferenti	Graduate of highly regarded U.S. medical school	48%	3.8
2009	in the	Demonstrated involvement and interest in research	43%	3.7
	a specific maki	Visa status*	39%	4.0
	studelongrsan Basi	C Applicant was flagged with Match violation by the NRMP	34%	4.8
	Science 25	Interest in academic career	28%	3.7
2010	Ø a 96,28 M has,	Honors in basic sciences	27%	3.5
	universityportage	Gold Society membership	27%	3.7
	M/hite of al 267	Away rotation in your specialty at another institution	25%	3.7
		Fluency in language spoken by your patient population	25%	3.6
2014		USMLE/COMLEX Step 3 score	18%	3.5
		* Ratings on a scale from 1 (not at all important) to 5 (very important).	% 50% 0%	1 2 3 4 5
		NRMP Program Director Survey Results, 2014 3		

NRMP Program Director Survey Results, 2014