

Creating a system of assessment for graduating medical students as work-ready doctors.

STEPHEN TOBIN¹

Caroline Joyce² and Carl Parsons³

¹ ANZAHPE, ASME, WSU Medicine

² Western Sydney University

³ Western Sydney University

Abstract

Work readiness as a concept has emerged strongly over the last few years. Well-structured clinical experiences, progressive assessment with workplace-based assessments (WBAs) and examinations can assure medical schools that their final-year medical students are meeting the standards expected and required for internship (PGY1).

Students at Western Sydney University (WSU) participate in learning through clinical immersion, complemented by a system of assessment including entrustable professional activities (EPAs), term reports, long-case examination (also in workplace), online applied knowledge examinations, prescribing skills assessment, and case-based discussions (CBD). This system ensures that students are meeting graduate outcomes. Extensive use of EPAs and term reports have provided much quantitative and qualitative data since 2020. Dynamic analytics have been developed and trialled in 2023. Evaluation was conducted to determine the value and role of EPAs within this system.

Results have shown correlations between the online applied knowledge examinations and the prescribing skills assessment. The number of EPAs (mean 52) did not significantly correlate with the summative assessment scores. CBD assessments replicate clinical reasoning and management. There was some association between the number of completed EPAs and CBD performance.

This system of assessment tests applied knowledge and clinical performance. It assures that standards are met and demonstrates preparedness for PGY1. EPAs and term reports demonstrate that final-year medical students can be entrusted with common clinical tasks at specified supervision levels. CBDs provide a checkpoint. The evidence that supports the School of Medicine decision (initially COVID-19 related) to discontinue final-year OSCEs.

Our take-home messages are that EPAs have a valid role for senior stage medical students, late-in-course OSCEs are not required and that applied examinations should remain. Apart from active monitoring and coaching, the School intends to develop this system towards progress panel review.

References (maximum three)

Norcini J et al, 2018 Consensus framework for good assessment Medical Teacher 2018; 40:1102-1109

Heeneman S et al, Ottawa 2020 consensus statements for programmatic assessment - 1. Agreement on the principles Medical Teacher 2021; 43: 1139-1148

Torre D et al, Ottawa 2020 consensus statements for programmatic assessment - 2. Implementation and practice Medical Teacher 2021; 43:1149-1160