



Department of Medical Education Khyber Medical College Peshawar

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Assessment policy for undergraduate medical students in Khyber Medical College

Purpose

The purpose of this Undergraduate Medical Education Student Assessment Policy is to establish student assessment practices within undergraduate medical education program of Khyber Medical College. The policy has been developed by the department of Medical Education (DME), tasked to “establish, monitor, and update an internal assessment system throughout the entire undergraduate medical curriculum for MBBS.” This document is intended to complement the assessment policy of Khyber Medical University that is responsible for conducting annual summative assessments and certification of MBBS degree.

1) Roles of different departments in internal assessments

The structure of internal assessment in KMC will be formative, including both written and practical assessment (OSPE / OSCE) following the programmatic assessment policy of KMC. Assessment of clinical training also includes short cases, long cases and viva. Work-place based assessment techniques like Mini-CeX and Case based discussions will be gradually introduced in these years. The DME will have an oversight of the whole process of assessment. Module directors will be responsible for developing, organizing and reviewing the assessment items including MCQs and OSPE preparation in consultation with respective departments and faculty. Question bank development, written paper checking, results declaration and item analysis and its communication will be the responsibility of DME / examination department.

The schedules of assessments are developed by the College Curriculum Committee (CCC) at the start of academic years.

2) Assessment Plan

The following is the summary of internal assessments plans. The schedules of assessments are given in study guides and will be available on college website. The frequency of assessment will follow the modules and block of respective year. At least 3 internal assessments will be arranged in one academic calendar for each year (years 1-5). The assessments of year 1 and 2 will be held in same week and after each block / module to make sure the faculty and venue is available for conducting practical / written assessments. Similarly, the assessment schedule of year 3 and 4 will follow the same pattern. The written assessment of year 5 will be arranged in college while their practical assessments will be held in the hospital. MCQs / SAQs will be part of written, while OSPE / OSCE (including short and long cases) will be part of practical assessments. During clinical rotations, each Unit / ward will run its own clinical examination / TOACS at the end of the ward rotation where history copies and log books will be checked and marked. Feedback taken and marks record will be sent to DME as part of internal assessment.

The questions used in written paper will be collected by the module directors and will be presented to the department of medical education for review. A group review consisting of relevant faculty will be arranged by the DME and papers will be finalized and forwarded to the IT personnel of examination department for printing.

A cumulative 20% marks of all internal assessments (10% in written and 10% in practical) are included in summative assessments by KMU and will be communicated to the university by the DME before the start of end-of the year assessment.

3) Standard setting procedure

A procedure that is used to determine a defensible cut score for all examinations in KMC is pre-determined to be 50% in cases of both written and practical assessments in accordance with KMU.

4) Item analysis

Item analysis of all written questions will be done in examination department at the end of the examination and the results of these will be shared with the respective module director.

Questions having low reliability and validity (less than 0.5) will be discarded and appropriate changes will be done in the results of each student.

5) Question / item bank

All MCQs and OSPE / OSCE stations will be stored in an item bank to be developed and managed by the IT personnel of the examination section in a secret manner. These items will be used in future internal assessments and will also be shared with KMU to be included in summative examinations. In case of leakage of items, these will be either modified or altogether discarded.

6) Examination day

Students who have less than 50% attendance in the respective module / block will not be allowed to appear in internal examinations. The results of students who have 50-70% attendance will not be displayed until his / her attendance crosses 70% marks in next block / module. Attendance will be provided by respective departments to the examination section. No cellular phones will be allowed in examination venues. Students who try to steal the confidentiality of questions will be debarred from the current examination and his / her name will be presented to disciplinary committee for further action.

7) Remediation examinations

Remedial examinations will only be arranged for late comers of year 1 due to multiple reasons. This examination will only be conducted in block A (foundation and blood module).

8) Assessment of clinical rotations

The logbooks and history books used during clinical rotations will be used for internal assessment and 10% additional marks (during awarding marks of internal assessment of last examination in a particular academic year 3-5) will be allotted for this purpose. These documents will be presented to the DME for awarding these marks. Similarly, logbooks and history copies will be given extra marks in end of the year practical assessments. For this purpose, a TOACS station for reviewing log book and history copies will be dedicated during year-5 practical examination.

9) Appeal mechanism by students about results

In case of discrepancy or any other problem related to results of internal assessments, the students will write an application in the name of Director Medical Education highlighting the issues related to grace marks, wrong results, rechecking and re-totalling of papers marks. The DME then takes relevant decisions related to the issue in consultation with the chairperson of the relevant department or course coordinator. There will be no grace marks allocation in MCQs, whereas 5 marks can be awarded during results compilation. Fee for appeal will be decided by the Dean.

10) Students feedback on assessment

Feedback for this purpose should be a regular occurrence and will be both informal and formal. Formal feedbacks are part of routine evaluations surveys conducted each year at the end of sessions.

11) Oversight

The college Assessment committee will have an oversight for internal assessments. Similarly, the DME will provide training opportunities for module directors, course coordinators, members of the Assessment committee and any other interested faculty member to help them develop the skills and expertise in developing questions, and conducting and evaluating internal assessments.

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This document is prepared by the DME for academic year 2020-21 and reviewed by the College Assessment Committee and Dean of KMC, and needs to be regularly updated. In case of any query, please contact the following:

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