

ASSESSMENT IN PHASE III AND IV IN GENERAL PRACTICE

Below we describe assessment of students in both phase III and Phase IV in general practice. Phase III assessment is formative, whereas Phase IV assessment is summative. Please see **Appendix 12** for descriptions of different types of assessment.

PHASE III - FORMATIVE ASSESSMENT

The assessment marks that the students take from this block are formative (see above). The students are however expected to pass in order to progress to the degree exams at the end of phase III.

The mark given to the students is expressed as a CAS mark out of twenty (Common Assessment Scale see **Appendix 13**) and is made up of 3 components:

1. The Tutor's Assessment – 50%
2. The Case Study – 30%
3. Online MCQ – 20%

We also stipulate that each student should be observed doing and receive feedback on at least 12 consultations (Please see Phase III Community Course Handbook)

Case Study

The full marking criteria for the case study presentations are in the student and tutor handbooks so that the students should be able to put a reasonable presentation together without too much assistance from the tutor. It is important that the tutor chooses an appropriate patient for a student.

The criteria are in the handbook plus please read the marking sheet carefully before selecting the patient. Problems have occurred for students when there is no involvement of members of primary care team with a patient as this is a core criterion. It is also probably inappropriate to choose patients with *very rare* diagnoses.

Please can you ensure that the patient's privacy is fully preserved in the student's final presentation - e.g. no name or other personal data and no digital images of the patient.

As tutor you do not have to mark the presentation - it will be assessed in the department or at the UGTC in Inverness at the end of block. You will, however, accumulate an understanding of what makes a good case study - especially if you keep a copy of all the presentations prepared by your students. These will be useful for you to refer to - *please do not show to students* - there is guidance in the handbook for them and they have had experience at this in previous years.

The Online MCQ

The MCQ takes place on the last Thursday of their GP attachment. Students will be emailed one week prior to the assessment taking place and again the day before, with details of the direct online link. They will be able to log on any time between 9am and 5pm at a time that is mutually convenient to the Tutor and student. It is likely to be completed in approximately 30 minutes and students will be timed out after one hour. There is only one correct answer per question and on completion; students are immediately given their mark and feedback on their answer.

Supervision is required to avoid any cheating and it is recommended that you agree a time with the student early on in their attachment that is mutually convenient to you both during which the student will complete the assessment. Another member of staff can act as invigilator and whoever is appointed can

be working alongside the student so long as they are aware that there is no dishonesty eg use of textbooks or websites. Please also make sure the student does not print the MCQ.

There is bank of almost 100 questions in clinical topics related to General Practice as well as in Public Health and OEM. Students are given a handout of the topics in the current question bank at their Introduction and they are also advised to look at the list of Core Clinical Material in the Handbook

The direct link for the MCQ is www.abdn.ac.uk/mrc/qm/test

PHASE III MCQ: SUMMARY OF GUIDANCE FOR GP TUTORS

- 1) MCQ will take place in your Practice on the last **THURSDAY** of the student attachment to you ie. The second last Thursday of the Block.
- 2) Please provide supervision for this assessment to avoid any dishonesty. Any member of staff working alongside can be delegated this duty.
- 3) Students will need access to a computer in your Practice for a maximum of an hour to complete the MCQ.
- 4) Students are required to log on to the MedCal site between 9am and 5pm on the day ie the latest they can start is 4pm.
- 5) They will be automatically timed out after one hour and if they exit the MCQ before the hour is up they cannot re-enter. They receive their mark and feedback immediately.
- 6) The average time for completion is approximately 30minutes
- 7) Students are asked not to print out questions etc from this MCQ
- 8) If for any reason a student misses the MCQ, they must contact either Ann Christie in Aberdeen (a.christie@abdn.ac.uk) or Alison MacKay in Inverness (invernessugtc@abdn.ac.uk)

TUTOR FORMATIVE ASSESSMENT GLOBAL MARK

This is reasonably self-explanatory reading the handbook. Tutors are expected to formally go through an assessment proforma based on Good Medical Practice and including the GP Learning Objectives for the block. Please see the learning log at the end of the Phase III handbook for further details. .

The criteria used to assess the student are taken from The Scottish Doctor.

It is important for the student to be fully involved with the formative assessment process. Some tutors ask the students to fill it out for themselves the night before (in pencil or on a photocopy) and then the assessment session is a discussion around the student's thoughts as well as the tutors!

PHASE IV – SUMMATIVE ASSESSMENT

See professional practice handbook for guidance marking criteria

The tutor evaluation is **summative** in Phase IV. Tutors will be asked to undertake at least 2 Mini-CEX assessments with the student - one in the middle of the attachment and at least one towards the end of the attachment. Tutors should ensure that the student returns the completed forms to the block secretary.

The Mini-CEX is a short structured clinical examination. It involves observing the student taking a history and/or examining a patient in the primary care setting. The benefits of the assessment are that it allows interaction with the student and direct feedback of any constructive criticism or commendation. Details of

the Mini-CEX can be found in the GP attachment Handbook and the student will bring an Assessment Handbook to the attachment with the Mini-CEX forms. More information is available at www.mmc.nhs.uk/pages/assessment/minicex

The tutor is also asked to complete two Formative Assessment forms; one midway through the attachment and one at the end. The student will bring copies of these forms but they can also be downloaded from the CAPC Teaching and Learning page

The Reflective Log Diary is marked centrally in the Centre of Academic Primary Care to the marking schedule described in the GP Attachment Handbook. However, the tutor should monitor the student's completion of the log diary during their attachment, helping the student to reflect and recognise their strengths and weaknesses. The diary includes a small audit and we encourage the student to present the results of the audit to the practice.

The Mini-CEX and log diary marks are summative marks and go towards the student's final degree mark.

GENERAL PRACTICE PRIZES

Shelia McLennan Prize: Most distinguished student in Phase III GP attachment. Eligible students must gain overall Excellent in the Global assessment rating (CAS mark 18-20) in their formative assessment.

Richardson Prize: Most distinguished student in Phase IV GP attachment. Eligible students must gain overall Excellent in the Global assessment rating (CAS mark 18-20) in their Phase III formative assessment and a minimum of CAS mark 17 in their Phase IV summative assessment.

If >2 students eligible for these prizes, they will be invited to participate in a 15 minute oral exam at the end of the academic year.

MBCHB EXAMS

Phase III

December - the students have a dry run for the summer exams. There are written (MCQ, MEQ, & EMQ) papers and then OSCEs (approx. 16 stations). These exams are considered to be **formative** and all struggling and borderline students identified by this process are given feedback during an interview and any appropriate remedial sessions organised.

June – written final degree exams (MEQ, MCQ & EMQ) and OSCEs (approx 16 stations) are **summative**. Re-sits for these exams are held in August.

Phase IV

June – exit Clinical Degree Exams. 2 days of OSCEs with each day has approx. 15 stations – total of 30 stations. No written exams.

Because of arrangements in place for the foundation programme, students who fail final exams will have to repeat the final year again, taking exams in June at end of repeat year.