Introduction
• Self-assessment is the ability to accurately identify your own strengths and weaknesses in a specific situation by comparing your performance against an external standard. 1
• Self-assessment is an essential skill required for lifelong learning and an important component of medical curricula. 2
• Inaccuracy in self-assessment is common amongst medical students. 3
• The University of Aberdeen utilises the 1st year Student Selected Component (SSC) to introduce medical students to self- and peer-assessment.

Aim
• The aim of this study was to determine characteristics of first-year medical students who inaccurately self-assess, using a mixed methods approach.

Methods
• Data from 503 students who undertook the SSC between 2015-2018 was obtained. Students were categorised as ‘over-estimators’, ‘under-estimators’ or ‘accurate-estimators’ by comparing self- and peer-awarded marks.
• Age, gender, graduate status, rank at the end of year one and the presence of any ‘Low-Level Concerns’ (LLC’s) were compared between estimator groups in quantitative analysis.
• LLCs: C6, formal advisory meeting, informal warning meeting, >3 unauthorised absences, repeating the year, >2 session with student support
• Self and peer written reflections were used for qualitative analysis.

Results
• 442 students (87.9%) were accurate estimators, 24 (4.8%) students were ‘over-estimators’ and 37 (7.4%) under-estimators.
• Only class rank (p = 0.020) and presence of ‘low-level concerns’ (p < 0.001) were significantly associated with estimator ability (Figures 1 and 2).
• Age, gender and graduate status have minimal impact on self-assessment accuracy.
• Qualitative analysis is summarised in Figure 3.

Over-estimators
1) Elevated Perception of Contribution
“ Came up with idea. Referenced entire project. Proof read poster + spelling. Intro and science. Provided references for starting up. Attended every session.” (2016-17, M)

2) Focus on Self
“ Felt I made a good contribution however the presentation did not allow me to talk about the section of the topic that I was responsible for unfortunately.” (2015-16, M)

3) Generalisation and Compromise
“ I feel I did my part, and helped others achieve their best input as well, but I was a bit cheeky and slept in for a meeting.” (2016-17, M)

Under-estimators
1) Identifying Gaps for Improvement
“I could manage my time more efficiently” (2015-16, F)

2) Team Focus
“ I feel that I worked well in the team, not experiencing any tension with fellow members and was open to changes within my own section” (2015-16, F)

Conclusion
1. The majority of first year medical students can accurately self-assess
2. Over-estimation is associated with lower class rank and presence of low-level concerns
3. Over-estimators have an elevated perception of their contribution to teamwork and lack insight into their strengths and weaknesses
4. Age, gender and graduate status have no significant impact on self-assessment accuracy