

## Assessment data – update on proposals

### MSC Executive 28 June 2019

#### Background

- 1 At the MSC Council meeting in May we submitted a paper outlining our preliminary proposals for collection of assessment data into UKMED.
- 2 In addition to receiving MSC Council members' feedback, we consulted on our draft assessment data proposals in a series of workshops with medical schools during May and June 2019.
- 3 This paper is to provide MSC Executive with an update on our proposals following this feedback, including recommended next steps.

#### Why do we want to collect undergraduate assessment data?

- 4 Inclusion of undergraduate assessment data has been a long-term objective of UKMED since its inception. Analysis would open up long-term future opportunities to evaluate changes in medical education, allowing researchers to explore the relationship between performance at undergraduate and postgraduate level.
- 5 Medical Royal Colleges currently provide equivalent postgraduate data to UKMED, and researchers have already demonstrated the utility of these scores for assessing predictive validity of both medical school aptitude tests sat on entry to medical school, and measure of attainment in medical school. Researchers could explore whether medical school assessments offer incremental predictive validity of later outcomes such as postgraduate performance, or fitness to practise.
- 6 Collection of a UK-wide dataset would allow national level analysis of differential attainment in undergraduate assessment. Central analysis would be more efficient and informative than conducting individual analyses at school level – saving considerable resource across schools, and potentially enabling insight before the point of graduation.

- 7** In the long term, assessment data would help us evaluate the MLA. For example, comparing students' results in the applied knowledge test against their assessment performance throughout medical school would allow us to gauge its reliability.

### **Summary of feedback from the workshops**

- 8** The GMC and HESA held four workshops and one conference call with medical schools to discuss the proposal. Attendees included a mixture of school representatives and those from central records teams. We would like to thank attendees for their time and advice.

#### *What level of assessment data could be provided?*

- 9** Most schools felt it would not be possible to return assessment data at item and station level to the GMC, but considered it would be possible to return overall scores for summative assessments for all years of the course, such as those contained in the spreadsheets reviewed by exam boards.

#### *How is assessment data currently held?*

- 10** The majority of schools are recording their detailed assessment data within the school. In some cases this is held in spreadsheets, other schools hold the data on systems but these are not usually linked to the central records systems.
- 11** In most schools, limited information is loaded into the central systems such as SITS or Banner. The extent of information centrally recorded varies between: pass/fail outcome for the year, a pass/fail for a given component (described as an "individual course assessment unit module"), each student's score and the exam pass mark, and in some cases an alphanumeric grade instead of a score.

#### *How could the data be returned to HESA/the GMC?*

- 12** Some schools noted that overall assessment scores cannot currently be returned via their university's central records system. This would require system changes. Furthermore, schools noted that there are competing demands on staff time, some internal such as implementing a new student record system and others imposed by the GMC (MLA) and HESA (Data Futures). Schools felt that returns directly from the school were more feasible for the academic year 2020/21 than returns made through the central records systems via the Student record.

#### *When could data collection begin?*

- 13** Schools felt that it may not be feasible to make a return via the HESA Student record for the academic year 2020/21.
- 14** Some of the new schools are currently setting up their systems, and felt this is an appropriate juncture to agree reporting requirements.

### *Other concerns raised*

- 15** Several schools questioned the reasons for HESA and the GMC to collect this data, saying there had been a lack of clarity on the use of the data.
- 16** There were concerns about the additional resources the proposal would require of medical schools, with school representatives keen to emphasise that this be taken into account when making a decision over the proposals.
- 17** Some schools questioned whether the timescales for implementing the proposals were ambitious, and it might be hard for them to meet them – although there were also comments made that clarity on the requirements would make it easier for schools (and their system providers) to begin planning sooner.

### **Next steps**

- 18** Feedback gathered from MSC Council members and the recent workshops with medical school representatives has been of great value, and we have developed a new proposal in response to this:
  - We will ask medical schools to provide overall scores for summative assessments for all years of the course – we will no longer seek to collect station/item level data.
  - Recognising the challenges medical schools have raised, we propose to treat 2020/21 as a transition year with schools submitting spreadsheet returns to the GMC, rather than through the HESA central data return.
  - The long-term objective will be to collect the data via the central data return as part of the GMC's standard HESA extract, and we would like to work towards this for 2021/22.
  - We will work with medical schools to explore the best way to achieve this, and how we can best support them. The 2020/21 spreadsheet returns can be used to better understand the data and finalise requirements for central record systems.
- 19** HESA and the GMC will open up a consultation on these proposals with medical schools in July 2019 to gather further feedback. We will then seek to develop a specification in September 2019.