

Cumming School of Medicine, University of Calgary

Mini-DCI

Status Report due March 15, 2023

For review at the May 2023 meeting of CACMS

Adapted from the DCI for schools with visits in 2023-2024

INSTRUCTIONS FOR COMPLETING THE MINI-DCI

Please ensure that **ALL** text is entered in **BLACK** font.

The DCI template has been formatted as follows:

- All tables are formatted in black.
- Requirement indicators (questions) are in **BLUE** font followed by blank spacing for schools' responses, pre-formatted to appear in **BLACK**. The spacing inserted between each request will expand as text is entered. Once completed, you can remove the extra spaces.

IMPORTANT

These instructions should be forwarded to any group/individuals completing the mini-DCI or sections of the mini-DCI.

If you have any questions, please feel free to contact us at cacms@afmc.ca.

9.7 TIMELY FORMATIVE ASSESSMENT AND FEEDBACK

A medical school ensures that the medical education program provides timely formative assessment consisting of appropriate measures by which medical students can measure their progress in learning. Each medical student is assessed and provided with formal formative feedback early enough during each required learning experience four or more weeks in length to allow sufficient time for remediation. Formal feedback occurs at least at the midpoint of the learning experience. In medical education programs with longer educational experiences (e.g., longitudinal integrated clerkship, year-long courses) formal feedback occurs approximately every six weeks. For required learning experiences less than four weeks in length alternate means are provided by which medical students can measure their progress in learning.

Definition taken from CACMS lexicon

- *Required learning experience: An educational unit (e.g., course, block, clerkship rotation or longitudinal integrated clerkship) that is required of a student in order to complete the medical education program. These educational units are usually associated with a university course code and appear on the student's transcript. Required learning experiences are in contradistinction to electives, which are learning experiences of the student's choosing.*

Finding:

AFMC GQ (76%) and End of Rotation Survey (63-66%) data show that the provision of timely formative feedback in Surgery is unsatisfactory. This element was cited at the time of the last full survey (2016) and is yet to achieve the rating of Satisfactory. Data demonstrating the sustained achievement of timely formative feedback throughout an entire twelve-month period are required for Surgery.

Status: Unsatisfactory

Requirement 9.7-1

The medical school ensures that the medical education program provides timely formative assessment consisting of appropriate measures by which medical students can measure their progress in learning.

- Provide a medical school policy or similar document requiring that medical students receive timely formative feedback. Label and highlight the appropriate sections related to required clinical learning experiences and the Surgery rotation in particular. (*Appendix 9.7-1 A*)

The Clerkship Student Feedback Policy is provided in Appendix 9.7-1 A. Relevant sections are highlighted in yellow.

- Describe how the medical school ensures that the medical education program provides timely formative assessment consisting of appropriate measures by which medical students can measure their progress in learning during required clinical learning experiences, and the surgery rotation in particular.

Provision of a formative assessment system across the three years is monitored by UMEC and its three subcommittees (Pre-Clerkship Committee, Clerkship Committee, and Student Evaluation Committee), as well as UME management. Central monitoring occurs by the end-of-rotation student surveys, and annual GQ survey.

C. Table 9.7-1 C

Table 9.7-1 C Timely Formative Feedback Source: School reported*

Provide school-reported data collected throughout the year from students in the Surgery rotation on the number and percentage of respondents that answered “Yes” to the statement shown in the table below. Add rows as needed for each campus. Provide at least one year of data.					Class 2021	Class 2020	Class 2019	Class 2018
Campus	Survey Question	Number of students who rotated through Surgery	Number of students responding to the survey	Number of students responding Yes (%) - Class 2022				
	The formative feedback that I received in my Surgery rotation was given in time for me to measure my progress in learning.	152	144	80.7%	76%	86.8	81.3	78.8

*This is GQ data

Requirement 9.7-2

Each medical student is assessed and provided with formal formative feedback early enough during each required learning experience four or more weeks in length to allow sufficient time for remediation.

A. Table 9.7-2 A

Table 9.7-2 A | Formal Formative Assessment Source: School-Reported

For the Surgery rotation, identify the length (in weeks) of the learning experience and the timing of formal formative feedback within the learning experience. Add rows as needed for each campus.			
Campus	Required learning experience	Length of learning experience (in weeks)	Timing of formal formative feedback to students
	Surgery	4 + 2 weeks	4-week rotation: last weekday of week 2 2-week rotation: last weekday of week 1

B. Describe the formal formative assessment measures by which medical students can measure their progress in the Surgery rotation.

EPAs: All Clinical Clerks are required to complete a minimum of 43 assessments of the 12 AFMC UME Entrustable Professional Activities with a minimum rating of “Ready for Reactive Supervision” (see Appendix 9.7-3 A pp. 38-39). There is no maximum number of EPA assessments. As students may ask for EPA assessments as many times as they wish during clerkship, these also function as a form of formative assessment. Although a minimum requirement of one EPA must be completed in surgery clerkship rotations, internal data show that for the graduating class of 2022 (most recent year that full data is available), 727 EPAs were completed by unique 138 students during surgery rotations. Of

these 138 students, 126 answered “yes” at least once to the "Did you have an opportunity to discuss your performance with your preceptor/supervisor?" (91.3%). Although there were 152 in the graduating class, results are only available for 138 as the remainder may have distributed an EPA form to a surgeon, but it wasn't completed. Another possibility is that they may have been on a modified University of Calgary Longitudinal Integrated Clerkship (UCLIC) experience that would have covered surgery, but not required a specific “surgery” EPA.

Mid-Point formative feedback: There is mandatory mid-point formative feedback at the halfway point of the 4-week and 2-week surgery rotations. If the student is not currently meeting expectations, this formative feedback MUST be provided in both verbal and written form (see 9.7-1 A, section 6.B).

Formative MCQ: Surgery Clinical Clerkship students must complete a mid-point formative MCQ. The formative exam must be complete prior to the end of the second week of the four-week block. Students who have not completed the formative exam by the cut-off time will not be allowed to write the final examination and will have to defer the exam to the deferral period. Students who are unsuccessful on this exam meet with their preceptor to discuss strategies and resources to promote success on the rotation as a whole.

Requirement 9.7-3

Formal feedback occurs at least at the midpoint of the learning experience.

- A. Provide an excerpt from a medical school policy or similar document requiring that medical students receive formative feedback by at least the mid-point of required learning experiences of four weeks (or longer) duration and the Surgery rotation in particular (*Appendix 9.7-3 A*)

Section 6.A.i of the Clerkship Student Feedback Policy states that “It is expected that preceptors will provide verbal (and/or written) feedback to ALL students at the mid-point of each clerkship component of 4 or more weeks duration.” The requirement to provide this feedback to all students necessarily includes surgery clerkship students. The relevant policy is provided in Appendix 9.7-1 A.

The Clerkship Handbook is provided in Appendix 9.7-3. Page 20 highlights that a formative midpoint MCQ is a must complete before rotation deadline. Failure to complete this formative MCQ will result in the student being required to defer the end of rotation summative examination. This ensures that all students must complete this midpoint MCQ exam for their Core Surgery Clerkship rotation.

B. Table 9.7-3 B

Table 9.7-3 B		Formal Formative Feedback at Midpoint of the Required Learning Experience		
		Source: School-Reported(GQ)		
Provide the data on the number and percentage of respondents that answered “Yes” to the statement shown in the table below. Add rows as needed for each campus.				
Campus	Survey Question	Number of students who rotated through Surgery	Number of student responding to the survey	Number of students responding Yes (%)
All Calgary Surgical Clerkship	I was given formative feedback by the midpoint of my Surgery rotation*	152	144	80.7%

rotations, 2022				
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* The actual question asked on the rotation surveys is: “The formative feedback that I received in my Surgery rotation was given in time for me to measure my progress in learning.” Although there are no data to present on this, our assumption is that a certain percentage of students may have received midpoint formative feedback that was not considered actionable, therefore the total percentage of students who higher would have received midpoint formative feedback may be higher than 80.7%. Going forward, the end of rotation surveys will be modified to specifically ask the question “I was given formative feedback by the midpoint of my Surgery rotation”.