EVALUATION: A Medical Student’s Guide

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Toto, I have a feeling we’re not in Kansas anymore...
WHY EVALUATE?

- Liaison Committee on Medical Education Standards for Accreditations

ED-47: In assessing program quality, schools must consider student evaluations of their courses and teachers, as well as a variety of other measures.

It is expected that schools have a formal process to collect and use information from students on the quality of courses and clerkships.
WHY EVALUATE?

- College of Medicine Curriculum Committee
- Committee on Program Evaluation and Student Assessment
  - Evaluation of Student Achievement
  - Evaluation of Courses/Clerkships
  - Evaluation of Faculty Instruction
  - Evaluation of the Medical Curriculum
Formative evaluations focus on improving the quality of instruction and curriculum through the identification of strengths and weaknesses.

- Improve teaching
- Changes to learning objectives
- Adjustments to course structure
- Modification of handouts and visual aids
- Curriculum development
Summative evaluations provide information to assess merit, worth or value.

- Staffing decisions
- Annual performance evaluations
- Teaching awards
  - Society for Teaching Scholars
  - Teacher of the Year
- Merit pay increases
- Promotion
- Tenure
Types of Evaluation

1. Courses and Clerkships
   - Standard questions common to all courses/clerkships
   - Course specific questions
   - End-of-course debriefings
StudyCore: What you will see when you click on “Evaluations”
1: Please rate the course/clerkship overall.
- Poor
- Fair
- Good
- Very Good
- Excellent

2: Please comment on the following: a) specific strengths of the course/clerkship; b) specific weaknesses of the course/clerkship; c) suggestions for improvement. Please be thoughtful, professional and constructive in your feedback:

**PLEASE LEAVE THOUGHTFUL COMMENTS!**
The purpose of evaluation is to IMPROVE

3: The learning objectives of the course/clerkship were clear.
- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- No Opinion

4: The learning activities were appropriate for the specific course/clerkship competencies.
- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- No Opinion

5: The methods of instruction were consistent with the course/clerkship objectives.
- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- No Opinion

6: The methods of evaluation were consistent with the course/clerkship objectives.
- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- No Opinion

7: Formative feedback was useful.
- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- No Opinion

8: Please rate the level of the workload required for the course.
- Much Too Light
- Light
- Okay
- Heavy
- Much Too Heavy
- No Opinion

9: Overall, the instructors were sensitive to individual student differences such as gender, race, religion, sexual orientation, socioeconomic factors, ethnic origin, and students with disabilities.
- Almost Never
- Rarely
- Sometimes
- Usually
- Almost Always
- No Opinion

10: Comments on sensitivity to student differences question:
Types of Evaluation

2. Course Director
   Faculty/Instructors
AGAIN, PLEASE LEAVE WRITTEN FEEDBACK. EVALUATIONS ARE CONFIDENTIAL TO PROTECT YOUR IDENTITY.
<table>
<thead>
<tr>
<th>Question</th>
<th>Rating Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>1: Your overall rating of this instructor:</td>
<td>Poor</td>
</tr>
<tr>
<td>2: Please comment on the following: a) specific strengths of the instructor; b) specific weaknesses of the instructor; c) suggestions for improvement. Please be thoughtful, professional and constructive in your feedback.</td>
<td>Poor</td>
</tr>
<tr>
<td>3: Description of course objectives and assignments:</td>
<td>Poor</td>
</tr>
<tr>
<td>4: Communication of ideas and information:</td>
<td>Poor</td>
</tr>
<tr>
<td>5: Expression of expectations for performance:</td>
<td>Poor</td>
</tr>
<tr>
<td>6: Availability to assist students in or out of class:</td>
<td>Poor</td>
</tr>
<tr>
<td>7: Respect and concern for students:</td>
<td>Poor</td>
</tr>
<tr>
<td>8: Stimulation of your interest in the subject(s) taught:</td>
<td>Poor</td>
</tr>
<tr>
<td>9: Facilitation of your learning:</td>
<td>Poor</td>
</tr>
<tr>
<td>10: Enthusiasm for the subject:</td>
<td>Poor</td>
</tr>
<tr>
<td>11: Encouraged students to think independently, creatively and critically:</td>
<td>Poor</td>
</tr>
</tbody>
</table>
Types of Evaluation

2. Lectures
   Small Group Leaders
   Attendings and Residents
   (Preceptorships and Clerkships)
Lecture Title (Faculty Name)

Introduction to Anatomy Lab (Kyle Rarey)

1: Overall is an effective lecturer/discussion group leader.*
   - Strongly Disagree
   - Disagree
   - Neutral
   - Agree
   - Strongly Agree

2: Please comment on the following: a) specific strengths of this lecture; b) specific weaknesses of this lecture; c) suggestions for improvement. Please be thoughtful, professional and constructive in your feedback.

3: Organized content logically.
   - Strongly Disagree
   - Disagree
   - Neutral
   - Agree
   - Strongly Agree
   - Unable to evaluate

4: Presented useful information at the appropriate level.
   - Strongly Disagree
   - Disagree
   - Neutral
   - Agree
   - Strongly Agree
   - Unable to evaluate

5: Encouraged critical thinking/active participation.
   - Strongly Disagree
   - Disagree
   - Neutral
   - Agree
   - Strongly Agree
   - Unable to evaluate
Additional Components of our Evaluation System

3. Peer evaluations
4. Self-assessment & reflection
5. End-of-year curriculum evaluations
   Debriefings and town hall meetings
   Student representation on COM committees
6. Student services & facilities
7. AAMC Graduation Questionnaire
Does Medical Student Behavior Predict Professionalism Deficiencies in Practice?


Lower scores on professionalism evaluations during clerkships were predicted by student behaviors:

- Non-compliance in providing evidence of required immunizations
- Failure to complete course evaluations
PAPILY ON STUDENT EVALUATION OF COURSES, CLERKSHIPS, AND FACULTY

- Office for Student Affairs – UF COM Policies

http://osa.med.ufl.edu/policies/policy-on-student-evaluations-of-courses-clerkships-and-faculty

- You will be receiving an email with link to the evaluation policy for your “electronic signature”

https://medinfo.ufl.edu/cgi/canvass.cgi?evalpolicyfall2014
Policy on Student Evaluation Responses

The Evaluation committee, with the approval of the Curriculum Committee, has established the following guidelines in order to elicit the meaningful participation of every student in the evaluation process.

• Every required course/clerkship will be evaluated by students. Students will have a minimum expectation of responses based on the needs of each course or clerkship as defined in the syllabus. Each student must complete at least 75% of all assigned faculty, resident, and small group leader evaluation forms associated with a courses/clerkship in each year of enrollment. There is an expectation of 100% completion on overall course and clerkship evaluations.

• Every student is expected to respond in a professional manner to each item which she/he feels qualified to answer.

• Strict confidentiality of responses is assured. Evaluation data (numerical ratings and student comments) is de-identified. However, the completion of evaluations will be tracked.

Failure to complete course/clerkship evaluations within the established timeframe will be noted as a professional concern in a student’s professionalism competency evaluation and may impact the overall grade in the course/clerkship. Repeated failure to respond in a timely and reasonable fashion or failure to achieve the required completion rate will be brought to the attention of the Academic Status Committee.
Evaluation of Courses and Faculty

- Evaluations open 3 days before the official end date for the course (usually the day of the final exam) and close 7 days after.
- Email tickler is sent to remind you.
- We expect all students (100%) will complete both course and course director evaluations and 75% of other evaluations (instructors; lecture evaluations).
- Deficiency report.
LET YOUR VOICE BE HEARD: WRITTEN COMMENTS

Tips for leaving effective feedback
EFFECTIVE FEEDBACK

- Avoid personalization
- Don’t use emotionally charged words
- Steer clear of inflammatory language
CONTRAST

“He was worthless!”

vs.

“His presentation was fine, but relevance to the course is questionable. I never understood why arts and medicine are related and I still don’t.”
EFFECTIVE FEEDBACK

- Concrete information
- Accurate data and objective evidence
- Specific examples familiar to the instructor
CONTRAST

“instructor was disorganized”

vs.

“She could have been a more active participant in discussions. She should come prepared and offer useful information and practical suggestions.”
EFFECTIVE FEEDBACK

- Focus on observable behavior
- Don’t infer thoughts or feelings
“Dr. Jones doesn’t care about students.”

vs.

“I e-mailed Dr. Jones daily for four straight days before the exam because I had a question and he never responded.”
CONTRAST

“She was so nice!”

vs.

“Dr. Davis takes the time to get to know her students personally. She clearly wants to understand each student’s needs so she can adapt her teaching skills as needed. Very flexible!”
EFFECTIVE FEEDBACK

- Descriptive rather than evaluative
  - Stick to descriptions of actual incidents
  - Describe the effect the behavior had on you – gives teacher a different perspective
CONTRAST

“Great group leader!”

vs.

“Dr. Moore is very well organized and tries to make sure we are focusing on pertinent material for our clinical years. She was never intimidating and always gave useful feedback.”
EFFECTIVE FEEDBACK

- Feedback should offer alternatives to behavior being criticized
- Feedback should point out good and bad aspects of behavior
“Lectures were unnecessary.”

vs.

“The lectures that included video clips, simulation, and class participation were the most helpful, but I often left lecture feeling like the notes could have been handed to us. If you could examine a real patient in front of us, that would be great!”
“Boring discussions…”

vs.

“You are a very good teacher. I really appreciated the clinical correlates you brought into our discussions. If you kept the discussion moving at a faster pace it would probably seem more productive. Long pauses may be meant to encourage participation, but it made things drag at times.”
OPPORTUNITIES FOR PARTICIPATION

Need Volunteers:

Orientation Debriefing
Standing Debriefing Committee
  Academic Chair
  Student Advocate
  Two appointed/elected members
Member(s) to represent the Class of 2018 on Committee for Program Evaluation and Student Assessment
TIPS FOR EVALUATIONS

There are a lot of evaluations and they never seem to come to a good time!

- Do them in a timely manner. Although you will be tickled by email, after this presentation you should now be aware that evaluation is your professional responsibility.

- Take a break if you find you aren’t paying attention and giving good feedback.

- Resist the temptation to give the same numerical rating for all questions. Few people are truly excellent on all dimensions of teaching.
THANK YOU FOR YOUR ATTENTION AND HAVE A NICE WEEKEND!

GO

GATORS!