

Episode Title: A model to understand assessment practice in medicine

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Hello. It's Laura Molway here from the Oxford Education Deanery.

Today I'm here with Dr Nici Simms. Welcome.

Thanks, Laura.

We are going to be talking about Nicky's research in the field of medical education. Um, and we're focusing in particular on assessment and models of assessment today. So great to have you here, Nicky. Welcome. I think let's kick off with just understanding a little bit about what do we mean when we talk about assessment in, in medical education?

Sure. So in a previous episode I spoke a little bit about this. But basically assessment within medicine and the health professions is high stakes and has serious consequences, especially in the long term or depending on where a student is placed. So towards the end of their undergraduate medical training where they're doing clinical assessments, you're basically signing off that they're safe to practice in public. And so you want to make sure that the doctor or a health care worker who is interacting with you is not going to do harm. And so that's why assessment needs to really be done in a very sort of effective, high quality, rigorous manner within medicine.

And so it's incredibly important, isn't it? Yes. Could you say a little bit more about the specific piece of research you're going to discuss today and why it was needed?

Yes. So often when we're trying to look at different factors that influence how assessment is practised, um, we forget about the person who's doing the assessment or we just focus on the individual and don't look at the wider context. And so we were really interested in not just looking at isolated factors that influence how clinicians actually practice assessment, but looking at a systematic model that looks at integrated factors. Um, and so the technical theory, we use something called health behaviour theory. It's basically a theory that looks at different health behaviours. So you know, I want to lose weight or I want to stop smoking or how do we get people to get a vaccine? Um, and we transposed the theory from that health perspective into the world of education. So in this study we conceptualised assessment practice as an assessment of behaviour. And so we were exploring sort of holistically the behaviour of these individuals.

Okay. I see um, really interesting um, use of a theory from one field and bringing it into another. And in very practical terms, what did that look like? How did you, uh, look at, um, behaviours?

Sure. So to sort of produce a generic model of a health behaviour theory, it's that there are personal and contextual factors that interact to influence behaviour or the observed assessment practice that we would see. And so we went to the clinician educators who were

responsible for assessment within their courses. And we interviewed them asking them, you know, how do you practice your assessment. So first have them describe it and then sort of work backwards to what are the different influences that shape why you do what you do. And then to use the health behaviour theory, we use sort of prompts of, you know, what personal factors do you think influence your assessment? And then what contextual factors do you think influence what you do?

Okay, so I can imagine you end up with a huge map of different practices and influences. Um, could you say a little bit about what you found out? Were there any common patterns?

Sure. So there are. So the model that we've put together, and there's is a figure in the Deanery Digest on the Department of Education website, but basically there's a number of personal factors that interact and a number of contextual factors that interact. I won't go into all the details, but two examples of personal factors would be the attitudes that these clinicians and educators have towards performing their behaviour. So, you know, do they see assessment as important or valuable? Is it something that seems very costly, and do they have a negative outlook towards it, but also their degree of perceived self-efficacy. So do they feel able to actually undertake assessment change or is it just sort of beyond their ability? Um, examples of contextual factors would be interpersonal interactions. So your colleagues, um, how do those around you, what do they think about assessment? How do they practice assessment. Do you feel any peer pressure to practice assessment in a certain way? Um, also think about your organisational environment. So perhaps your school culture or your university culture or the culture of a hospital. Um, also what you have access to within that organisation. Do they have assessment training? Do they have assessment policies or rules, or are you really left to your own devices to sort of have complete freedom, or is it very regulated? Um, and then perhaps an interesting factor is a distal context. So that's sort of like the society or the national context that you're operating within. Um, because we looked at three sites in the global South, two in South Africa and one in Mexico. I was very interested to see the differences between the two settings. So in South Africa it was very much 'assessment needs to be contextually relevant and contextually responsive'. Um, and in South Africa you may not know, but we have a history of racial segregation called apartheid. Um, and there's still definitely a legacy of racism. And so being mindful of student diversity and the possibility of discrimination, they spoke a lot about fairness and assessment. There needs to be fair... Um, we need to be transparent. We need to involve students. Whereas in Mexico, I found it very interesting that perhaps because of its proximity to the United States or being sort of a post-colonial setting, um, they were colonised by Spain. Their discourse was very much on the need to internationalise their assessment. So assessment needs to be at the standard of, you know, the US exams or the European exams. And I found that contrast very interesting. So looking at the local, looking at the international and perhaps how their contextual histories influence those different ways of thinking about assessments.

It's yeah, it's really fascinating to think about how, uh, a nation's history can have an impact, you know, in such sort of, uh, hard to pin down ways, but nonetheless, you see that playing out differently across two contexts. Um, so you have really you've zoomed out enormously, but you've also talked about sort of individual personal factors.

Exactly.

So this model is capturing a huge amount of complexity. Um, are there any particular factors that came to the fore as being particularly influential, or do you feel that they all play in?

So we haven't done individual factor analysis. So again this is more of a holistic perspective, and that would be future research to see, uh, do different factors have different influences in the strength of those influences. But I do think that perhaps we are quite guilty of focusing on the individual. And yes, you know, the might need to improve assessment literacy, um, or their understanding of assessment. But I don't think we can ignore the influence of, you know, colleagues or those around the person, um, the organisation, the country and societal factors. So I think adopting more of a holistic perspective is important and not just sort of focusing on changing the individual, but being mindful of the context means we need to take sort of a multifactorial approach to thinking about how we can change and improve assessments.

Absolutely. And so I suppose for, um, people, perhaps in a position where you're designing interventions or training programs to support clinicians with assessment, uh, this is a great starting point for just thinking about the range of, the range of things that could be constraining or affecting how people react.

Exactly. So it's no good saying we're going to provide assessment training, but there's no protected time. Or if your colleagues sort of don't value in like, what are you going to the assessment workshop. Um, and so it's not just about, you know, doing one thing. You need to consider all the different factors and how it could influence, you know, are your teachers or clinicians being rewarded for excellent teaching and assessment or are they valuing something else? You know, the test scores are your research outputs. And so that speaks to organisational culture and norms and values. And so you really need to think both sort of small as you said micro the individual. But then also stepping out and understanding that there's so many things that are also influencing people's behaviours and why they do what they do. It's not as simple, straightforward as we would often like to make. If you just do this one change, suddenly you're going to fix it. No, it's it's a bit more complex than that.

Oh well, I've really enjoyed talking through the messiness with you as well. Thank you very much, Nici.

Thanks Laura

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