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BAQAI MEDICAL UNIVERSITY

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BAQAI MEDICAL UNIVERSITY

Assessment Policy

(Version-2)

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Baqai Medical University

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1. Overview

The purpose is to outline a policy for assessment of undergraduate and postgraduate students / trainees of Baqai Medical University as well as for the admission test for all institutes and colleges of the University. This will guide all constituent and affiliated institutions in students' admission and their subsequent assessment. This will cover both internal assessments by the institutes and that conducted directly by the University for face to face, Distance learning and online learning.

2. Definitions

2.1. **Formative assessment:** An assessment that is intended to stimulate student learning and provides detailed qualitative feedback to the learner by the faculty about their progress towards achievement of objectives, and pinpoints areas for improvement. This can also to termed as assessment FOR LEARNING

2.2. **Summative assessment:** An assessment used to measure students' achievement on a predetermined scale of objectives after teaching a chapter, unit, module, or course. May also provide formative evidence for future learning. This can be termed as Assessment of LEARNING

2.3. **Checklist:** A predetermined set out specific criteria, which faculty will use to gauge skill development or progress.

2.4. **Rubric:** A set of criteria against which a performance is judged for competence, with details outlining what would be required to achieve the various grade levels. This is a way of approving and making a subjective assessment more objective and consistent across multiple assessors.

2.5. **Reliability:** This is a measure of the consistency or reproducibility of the given assessment. If an individual or a group of students were assessed on a different day on the same contents or by a different examiner, how close the score would be.

2.6. **Validity:** It is scale of measuring of what the assessment is actually assessing that which it is designed to assess.

2.7. Co**urse/Module/Semester/Rotation Objective Assessment Map or ToS**: A document detailing how each of the learning objectives comprising the unit

of instruction (i.e. course, module, semester, rotation) will be assessed. It usually takes the form of a table aligning the objectives with assessment items and reflects the relative weighting of the individual objectives within the unit.

2.8. **Examination Blueprint:** A document developed for each assessment, which could be termed medium or high stakes, outlining the course objectives it assesses, and mapping them to the relevant component of the assessment, including attention to the adequacy of sampling from the course objectives and representation as guided by the relative importance. Selection of specific tools like MCQs, OSPEs, OSCEs etc will be part of this process.

2.9. **Standard setting procedure:** A procedure that is used to fix a defensible cut score for an examination. Numerous methods can be employed to establish a score representing the minimally acceptable performance of a student or a group of students in achieving the objectives from which the examination samples. This initially could be an option if the Deans, Principals or Directors decide.

2.10. **Tools of Assessment:** Techniques used to measure a student's academic abilities, fluency and skills in a specific subject or to measure one's progress toward academic proficiency in a specific subject area. Examples include;

- MCQ: Multiple Choice Questions (One Best Answers, Extended Matching or any appropriate MCQ format as per program need)
- SAQ: Short Answer Question
- SEQ: Structured Essay Question
- Quiz:
- OSCE: Objective Structured/Standardized Clinical Examination
- OSPE: Objective Structured/Standardized Practical Examination
- Structured Viva: This is an examination tool that is used to assess characteristics that are difficult to measure via a written test, such as oral communication skills, interpersonal skills and analytical skills based on a checklist.

- Both long and short cases are used in the assessment of clinical competence to determine if students are safe to progress as medical practitioners.

✓ **Long Cases:** (For clinical years only) A Long Case is an assessment that usually lasts between 20-25 minutes and is split into three distinct segments including history-taking, examination of the patient and discussion of a patient management plan with the senior healthcare professional.

✓ **Short Cases:** (For clinical years only) A Short Case is normally a much shorter scenario, featuring a student and either a simulated or a real patient. It is used to assess a student's ability to quickly approach a case and highlight and interpret different key clinical signs before offering a differential diagnosis. Students are also assessed on their ability to explain medical concepts, provide patient education and demonstrate empathy and professionalism.

- Practical/ performance Assessment:
- Assignments
- Projects (Including capstone projects)
- Presentations
- Formative Assessment Only Tools:

✓ CBD: Case Based Discussions, Clinics, Mini-CEX, DOPS etc.

3. Scope

3.1. This policy will apply to face-to-face teaching as well as distance learning programs including blended or hybrid programs.

3.2. The processes adopted by the constituent and affiliated institutes of the university will apply to both undergraduate and postgraduate degrees, diplomas and certificate programs.

4. Responsibilities:

The assessment policy will be notified by the Registrar Office after approval from Statutory Body.

4.1. The Principals/ Director/Deans are responsible for development and

implementation of their own Assessment policy in alignment with University Assessment & Examination Policies at their respective colleges / institutes or faculties.

4.2. The Principals / Director / Deans will be responsible for the Questions Pool at the institutional level that will be developed by the individual departmental faculty members.

4.3. The Chairperson/ Head of the department will be responsible for ensuring the availability of a Departmental Pool of all type of assessment tools like MCQ, Quizzes, OSPE, OSCE etc for all Assessment components.

4.4. The Chairperson/ Head of the Department will be responsible for Internal Assessment and record of each individual student. He/ She will provide the lists of these assessments to the relevant Principal / Director/ Dean.

4.5. Item review processes will be the responsibility of Pool in charges at the Departmental and Institutional level.

4.6. Post hoc analysis will be the responsibility of Assessment Unit BMU after provision of data on excel sheet collected from OMR.

4.7. Maintaining Q-Bank will be the responsibility of the Examination Department and will be monitored by Assessment unit BMU.

5. Process

5.1. **Undergraduate Programs**:

Individual programs like MBBS, BDS, Pharm-D, BSN, will follow the guidelines provided by the respective Regulatory or Accreditation body.

5.1.1 The Assessment Cells in each individual colleges / institutes will be established for assuring implementation of assessment policies and procedures as per their respective needs.

5.1.2 The Heads of the institutes will develop their own Assessment Policy in collaboration with Department of Medical Education, based on the guidelines provided by their respective Regulatory/ Accreditation body, aligned with the Assessment Policy of the University.

5.1.3 They will define the specific tools to be used for formative and summative assessment.

5.1.4 Each course, module, semester or rotation will develop learning objectives/outcomes outlining what the student will have learned/be able to do upon completion of the course, module, semester or rotation. This will be part of the study guide with a plan of organized learning opportunities to assist students in attaining the above learning objectives/outcomes.

5.1.5 Each course, module, semester or rotation will complete the "Course, Module, semester or Rotation Table of Specification", which provides details of how students' achievement of each of the learning objectives/ outcomes will be assessed. Assessment methods selected should be appropriate to the modality of the objective(s)/ outcomes assessed: knowledge, skill or attitude.

5.1.6 Each course, module, semester or rotation will develop an "Examination Blueprint" based on the Table of Specifications (TOS) for each of the assessments (modules, finals, and any assessment comprising which is greater than 20% of the final grade for that component).

5.1.7 The assessment planning documents (TOS and blueprint) will be reviewed by the Assessment Specialist in Department of Medical Education, who will work with the course/module/rotation/ semester directors and the Assessment Cells of the institutes/ colleges to ensure appropriate representation of curricular and program objectives/ outcomes.

5.1.8 Once finalized, the assessment planning documents will be shared with the head of Departments/ Chairpersons of Department and will guide the development of the related assessments.

5.2. **Post-graduate Assessment**:

The Dean of each post graduate program will be responsible for ensuring implementation of policies and procedures for assessment of course work and research/ thesis as per HEC guidelines, program specifications and university PG Policy.

6. Standard Setting:

The process of determining the minimum pass level to separate the students who have achieved the required competency from those who do not perform well enough is called standard setting. A large number of methods are widely used to set cut-scores for both written and clinical examinations. At present PMDC is striving to incorporate this procedure to improve on undergraduate assessments. At BMU, the assessment unit will work in collaboration with the institutional heads to implement standard setting processes.

7. Student Feedback on Assessment:

7.1. Students must receive constructive formative feedback (i.e. feedback beyond a numerical grade value) on their performance in order to allow sufficient time for remediation. This should be documented and recorded in the student file or portfolio.

7.2. Students should have the opportunity to approach the appropriate Head of Department or designated Module/ semester Coordinator for assistance on the basis of feedback.

7.3. Students' feedback on all types of assessments will be taken after various assessment events (Module exams, midterms, professional exams, Final Comprehensive exam etc.) on the feedback form provided by QEC. The report on this feedback will follow the process outlined in University Program Evaluation & Feedback policy.

7.4. Amendments to Assessment Plans & Processes in all institutes & colleges will be undertaken on the basis of the above report as part of Continuous Quality Improvement.

8. Faculty Feedback:

The faculty feedback on assessment tools and process will be carried out as per policy and procedures defined in the Evaluation Policy of Baqai Medical University.

9. Review Process:

This will be done to define the pre-assessment quality assurance (e.g. item flaws assessment and content validity) procedures for its respective institutes / colleges. In

order to ensure that this need is fulfilled and quality assurance processes are implemented in assessment at all levels, the following item review process has been implemented at the University level.

9.1. The item review process will be initiated by the respective institutes.

9.2. The institutional head / Principal will notify the schedule of item review for each department for the entire academic year.

9.3. The Heads of Assessment Cells of each college / institute will chair the review meetings.

9.4. Following members will be present:

9.4.1 Head of Department (whose items are being reviewed).

9.4.2 Two faculty members from the same Department.

9.4.3 Medical Educationist

9.5. Head of Department will recommend the names of the following:

9.5.1 Two Professors/ Associate Professors from other subjects, preferably same course year)

9.5.2 One Professor/ Associate Professor from clinical/ basic sciences (for clinical sciences the Basic sciences faulty member will be nominated and vice versa). For institutes other than BMC and BDC, this member will be nominated as per institutional requirements.

9.5.3 Any other member (if needed)

9.6. These names will be approved by the Head of Assessment Cell before the review process is initiated.

9.7. The Head of the Department, going through the review process, will present his/her items from the departmental pool, one by one. In case of MCQs the items should be presented on the given template (see Annexure 1). (Note: Only those items will be presented which have gone through departmental review)

9.8. The above-mentioned committee will review the items to ensure the

following components:

9.8.1 Content validity (is the item aligned with TOS)

9.8.2 Face validity (is the item understandable in the context being asked)

9.8.3 Item flaw assessment (based on the template provided- stem, lead-in, options/distractors are correct)

9.9. The reviewed items will be added to the Institutional pool for subsequent use. Once the items are used in "internal exams" the process of item analysis will be conducted by the Examination Department and Assessment Unit in collaboration.

9.9.1 Item analysis reports will be generated by the examination department and shared after declaration of results of the internal exams, with the concerned Chairperson/ HOD to review the questions / items. The finalized items will be added to the University Question Bank for subsequent use in final exams.

9.9.2 Student feedback on test items, and other statistical reports for all assessments shall also considered and incorporated in this process.

9.10. Any adverse assessment performance report of high numbers of poorly performing questions, or significant concerns arising from qualitative student feedback, will require a review of the course/module/rotation/semester framework.

9.11. The Assessment Unit and Department of Medical Education will work with the course team in revising the course framework for any course where problems are identified.

9.12. The Assessment Unit with input from the various institutional Curriculum Committees is responsible for evaluating, reviewing, and updating this policy every three years. These committees will ask for input from the Department of Medical Education during this review process.

10. Admission Test:

For admission in any program of the University, the admission policy will be followed. If as per policy admission test needs to be taken, the process will be as follows:

10.1. For undergraduate programs syllabus will include Chemistry, Physics and English as mandatory and Biology or Math as per requirement of the program.

10.2. The weightage of each of these subjects will be decided by the respective institutes' policy.

10.3. For admission test of post graduate programs, the content will be decided as per the institutional and subject needs.

10.4. The test will comprise of MCQs developed as per the given MCQ template.

10.5. Each institute will have to submit 25MCQs in the question pool at examination department, for every admission year.

10.6. These MCQs will go through the review process by the Assessment Unit and Examination Department as outlined above.

10.7. The pool will be maintained, used, updated and revised by the examination Department as and when needed.

11. Non-compliance:

Any occurrences of non-compliance of this policy will be initially dealt with Principal / Director then placed before the Vice Chancellor.