



**California University of
Science and Medicine**

BEST PRACTICES IN CLINICAL STUDENT PERFORMANCE EVALUATIONS



GOALS:

- Strengthen faculty expertise
- Assisting faculty to help you work faster and better
- Improve student experience
- Increase the integrity of student assessments



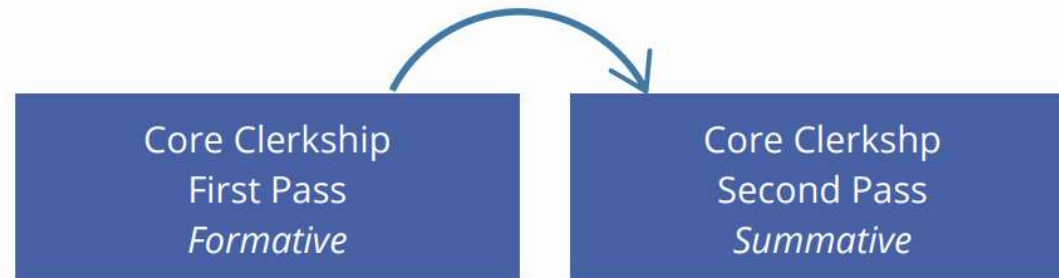
AGENDA:

- Educational context
- What do these scores mean?
- Giving critical feedback
- Aligning narrative and verbal feedback
- Writing narrative feedback and best What comments are appropriate and what aren't (include an appropriate and inappropriate list)
- Example scripts of use and do not use

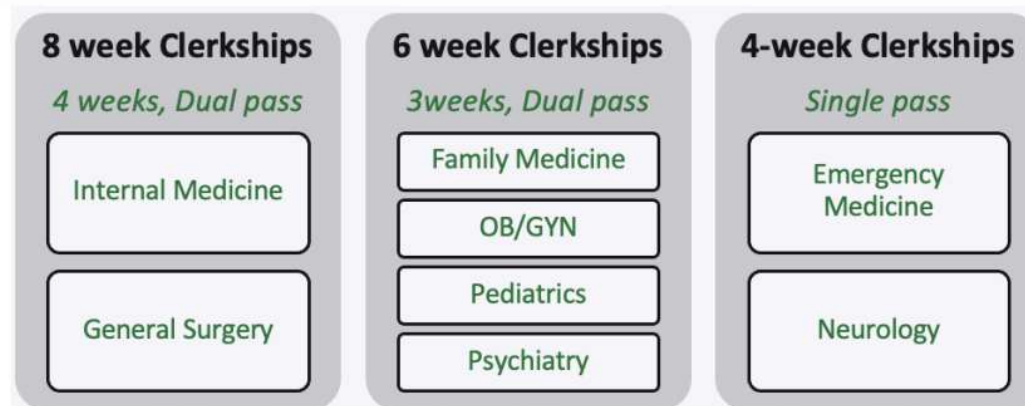
4 Year MD Program Curriculum Overview



Dual Pass Core Clerkships (DPCC)



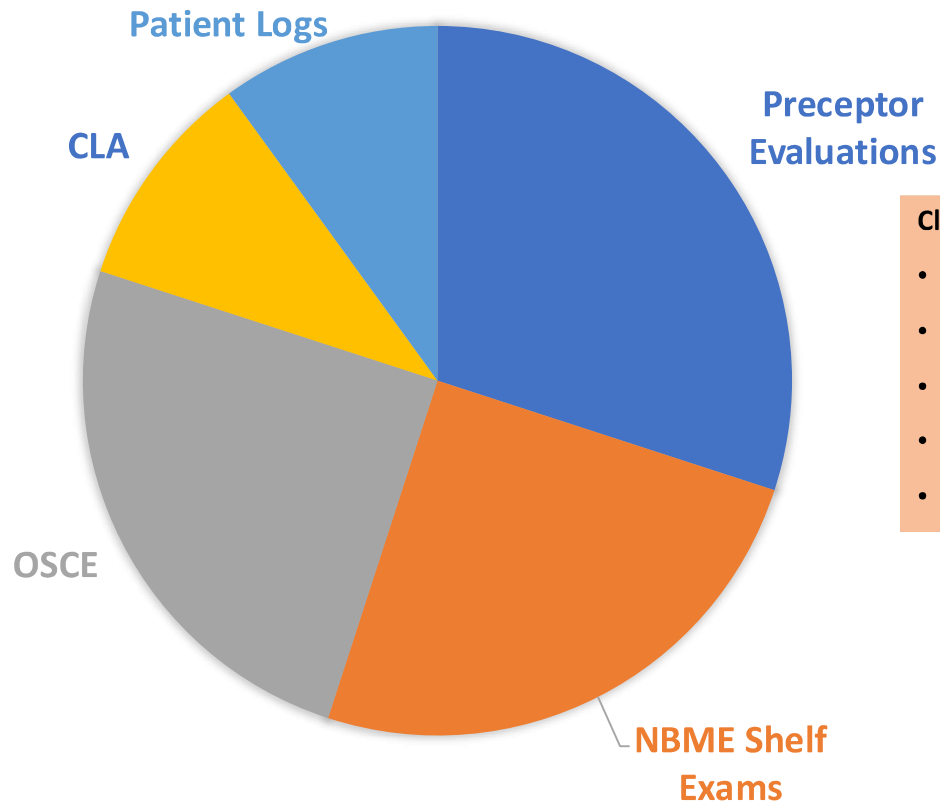
	Formative Semester																										Summative Semester																															
Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50								
Core Clerkship	Surgery				Internal Med				Neurology				Psyc				Family Med				Pediatrics				OB/GYNE				WB		Surgery				Internal Med				Emergency Med				Psyc				Family Med				Pediatrics				OB/GYNE			



CLASS OF 2027 CLERKSHIP GRADES

Faculty Evaluations of Clerkship Student Performance are Impactful.

- Valuable feedback for foundational career training
- 30% of overall Grade
- Comments seen on MSPE/Dean's Letter



Clerkship grade components:

- Preceptor Evaluations- 30%
- NBME Shelf exams- 25%
- OSCE- 25%
- Core Learning Activity 10%
- Patient logs (RCE)- 10%

Numerical Threshold

- Honors 90 – 100
- High Pass 80 – 89
- Pass 70 – 79
- Failure < 70



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CUSM Clerkship Student Performance Evaluation

Score	General Descriptor
6	Student performs skill independently with supervision and Exceptionally when compared to peers
5	Student performs skill independently with supervision and at an Above Average level when compared to peers
4	Student <u>Consistently</u> performs skills Independently with observation
3	Student <u>usually</u> performs skills independently with observation
2	Student <u>needs consistent guidance</u>
1	Student's performance is <u>unsatisfactory</u> and requires support (Please provide comment in the Formative comment section)
N/A	Please note the student must achieve competency in each EPA

	EPA	CUSM Descriptor of Competency
1	Gather a history and perform a physical	Gather relevant information for a focused history, focused physical exam, while maintaining focus of patient as a person
2	Prioritize a differential diagnosis following a clinical encounter	Applies clinical reasoning to develop a relevant and appropriate differential diagnosis
3	Recommend and interpret common diagnostic and screening tests	Identifies appropriately, cost-effective tests and accurately interprets results for decision making
4	Enter and discuss orders and prescriptions	Composes orders efficiently and effectively (verbally, on paper, electronically) while avoiding errors with a concern for patient safety; plan of care demonstrates understanding of patient perspective
5	Document a clinical encounter in the patient record	Independently provides documentation that is comprehensive without unnecessary details or redundancies; includes patient preferences and all institutionally required elements such as a problem list, differential diagnosis, and plan
6	Provide an oral presentation of a clinical encounter	Provide an accurate, concise, well-organized oral presentation integrating pertinent positive and negatives to support hypothesis and plan
7	Form clinical questions and retrieve evidence to advance patient care	Demonstrates curiosity, objectivity, and scientific reasoning to develop a well-formed, pertinent clinical question with the ability to search for and apply findings that fills a self-identified gap in knowledge

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	EPA	CUSM Descriptor of Competency
8	Give or receive a patient handover to transition care responsibly	Conducts handover using communication strategies known to minimize threats to transition of care such as an efficient summary of patient care with appropriate format in both documentation and verbal handover
9	Collaborate as a member of an interprofessional team	Identifies team members' roles and responsibilities and communicates with the team to optimize health care delivery; establish and maintain a climate of mutual respect, dignity, integrity and trust
10	Recognize a patient requiring urgent or emergent care and initiate evaluation and management	Recognize the severity of a patient's illness and indications for escalating care; where appropriate, communicates with the patient and family to ensure they understand the intervention. Seeks timely help
11	Supports and understands the process of obtaining informed	While participating in or observing the process of obtaining informed consent, the student recognizes shared decision making when presenting key elements of informed consent and independently recognizes when it is required
12	Perform general procedures of a physician relevant to each clinical setting	Demonstrate technical skills required for all varieties of procedures including surgical and non-surgical and is able to communicate the associated anatomy, physiology, risks and indications
13	Identify system failures and contribute to a culture of safety and improvement	Self-identifies and admits to real or potential errors by themselves or system errors, reflects on one's contribution, and develops an individual improvement plan

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To Summarize:

- An **overall average of 4 is passing.**
 - That's aligned with the student consistently being able to perform the skill with necessary supervision
- An overall average close to **6 is an exceptional student.**
- We are **comparing students to the expectations of a medical student** at their level.
 - When we say a student performs these skills exceptionally it is as a medical student and not compared to residents or attendings expectations of skill

Student Performance Evaluations: Comment Boxes

16.* Formative comments (comments for the student that will not appear in their record)

- Specific, observable behaviors
- Be cognizant of bias

17.* Summative comments (for MSPE/Dean's Letter)

- Comments here are eligible for inclusion in the students' deans letter submitted with their residency application and carefully reviewed by Program Directors considering this student.



Do Not use

- Good job
- Student not interested in this field
- Student appears shy
- CUSM curriculum is not ideal

Recommended

- A specific and observed skill of the student:
 - Good job with organized and efficient patient presentations
 - Student consistently took initiative to follow up on our patients' needs.
 - Showed improvement in building differentials.



NARRATIVE COMPONENT OF THE FEEDBACK

- **Formative: Written and Verbal**
 - What could they improve on for next rotation or next pass?
 - Verbal feedback must be congruent with written evaluation.
- **Summative:**
 - What specific observable behavior is notable to include for the MSPE?
 - Can be shared vocabulary with the assessment tool and similar for students who are performing at the same level. However, specific observed behaviors to that individual student provide stronger and more valuable assessments.



ALIGNING NARRATIVE AND VERBAL FEEDBACK

- Your presentation was missing some key elements of the history.
- Your note on that patient earlier was disorganized.
- Work on presenting your differential with supporting evidence tomorrow.

What scores would you expect these verbal comments to align with?



ALIGNING NARRATIVE AND VERBAL FEEDBACK

- Good job today
- You presented that case well
- You have made some significant improvements

What scores would you expect these verbal comments to align with?



ALIGNING NARRATIVE AND VERBAL FEEDBACK

- Fantastic high-level work from you today.
- You presented that case efficiently and thoroughly
- You are performing at an exceptional and above average level.

What scores would you expect these verbal comments to align with?

Take home points:

- Your evaluations of students' performance is a valuable and significant piece of their clinical training.
- Your verbal feedback informs foundational aspects of the rest of their career.
- Your written feedback is reviewed by program directors and residency faculty.

Thank you

Use this QR
code to link to
Clinical
Educator
resources:

