

COMMUNIQUE

15 April 2015

Over thirty medical assessment leaders representing 17 medical schools, the Australian Medical Council and the Commonwealth Department of Health met in Sydney today to discuss ways to further develop best practice in quality improvement in assessment in Australia and New Zealand.

At the meeting, funded by the Commonwealth Department of Health through the former Health Workforce Australia and hosted by Medical Deans Australia and New Zealand (Medical Deans), discussions included:

The purpose of Assessment Collaborations. All participants agreed that the development of a large collaboration around assessment activity must fundamentally 'value add' to those activities already undertaken by individual bodies or small groups of bodies. Participants agreed that a binational collaboration should have the following attributes:

- Increase the overall assessment expertise and capacity in the 2 countries
- Bring efficiencies of scale and cost effectiveness
- Provide robust quality assurance and quality improvement processes
- Ultimately enable improvements in the standard of performance
- Provide evidence to internal and external stakeholders, including the public, that medical schools are performing well and producing quality graduates
- Promote innovation in assessment and support diversity and richness within individual medical schools
- Provide support for the development of good science in medical assessment
- Enable long term strategic planning in medical assessment
- Provide opportunities to address curriculum areas previously difficult to assess or poorly developed
- Promote the importance of the alignment of curriculum development with assessment processes and outcome
- Have a positive impact on local educational culture and change processes

What we have learnt from existing assessment collaborations. Participants heard from the leads of current collaborations including Australian Medical Schools Assessment Collaboration (AMSAC), Australian Collaboration for Clinical Assessment in Medicine (ACCLaIM), the IDEAL Collaboration and the Medical Deans Assessment Benchmarking project. A number of factors were identified as key to the success of these and any future ventures. These included:

- Flexible processes that can fit into local circumstances and processes
- Strong support and additional work at the local level
- Building trust and a spirit of collaboration across all participants
- Being very clear about the rules of engagement
- Having responsive leadership and local champions
- Setting realistic budgets
- Preparedness to 'look behind the numbers' and provide a realistic analysis

Participants agreed some caution was required around limited critical expertise across the two countries that could impact on the ability of all schools to take full advantage of the outcomes of such activities.

Presentation of the Results of the Medical Deans Assessment Benchmarking Project. Dan Dumbrell, on behalf of Medical Deans, presented the results of the 12 month benchmarking project. 19 out of 20 universities with medical schools provided data for this analysis which included the performance of 3,994 medical students from the penultimate or final year of medical studies on an agreed set of 60 MCQs. A detailed analysis of the performance of the assessment items, the participating students and the participating schools was provided to participants using Rasch analysis. In the next few months participant schools will be provided with a de-identified report of their performance and the Steering Committee will wrap up this part of the project with a detailed review of the process and outcomes.

Panel discussion about the role of benchmarking clinical assessment vs written assessment. Professor Lambert Schuwirth led the panel and large group discussion about the merits and challenges of benchmarking using different assessment modalities. There was strong support for calibration activities (of examiners and processes) for clinical assessment despite some debate about the definition and purpose of calibration. Participants noted the potential wider impact and perceived 'legitimacy' of clinical assessment benchmarking over written while also noting that the cultural impact of any benchmarking processes is generally positive.

New opportunities for benchmarking. Ian Frank, CEO of the Australian Medical Council, presented an exciting new benchmarking and collaboration opportunity for medical schools, through Medical Deans, utilising the AMC MCQ database and expertise.

Participants agreed to

- Establish the framework for a single binational assessment collaboration
- Commence this work through an expanded Assessment Working Group, Chaired by Professor Gary Rogers, under the umbrella of Medical Deans Australia and New Zealand
- Include in this initial framework the terms of engagement of the new collaboration and its host and members
- Through this working group examine potential quality improvement activities in the 3 areas of knowledge, skills and professional behavior
- Develop formal relationships, where necessary, across other bodies developing related initiatives including (but not exclusive) the AMC and its working groups, the Medical Board of Australia etc
- Acknowledge and support the ongoing work of existing and new collaborations during the development of a larger binational collaboration
- Host a repeat workshop in 12 months to review progress

Media contact: Professor Judy Searle, CEO, Medical Deans Australia and New Zealand

0498 138 035