



TUSM Evaluation Process Principles for Student's Clinical Performance

Basic Steps in the Evaluation Process

- Review learning objectives, expectations and competencies with the student at the beginning of the rotation.
- Provide the student with periodic constructive feedback (reinforce strengths and suggest areas for improvement).
- Conduct periodic **direct observations** of the student's clinical performance throughout the rotation: most reliable method of collecting performance data, e.g. watching the student take a history, perform an examination or counsel a patient.
- Do not infer performance in the history and physical exam based on indirect sources such as written reports or presentations (these sources are likely to inflate the student's ability).
- Review student's written records.
- Listen to student's oral presentations.
- Collect information from student's responses to probing, hypothetical, and alternative scenario questions.
- Observe student's interactions with office staff.
- Consider patient's comments of student's performance.
- Ask the student for his/her self-evaluation.
- Use specific examples of behaviors that justify your evaluation rating.
- Meet with interns and residents to discuss student's evaluations and evaluation criteria, which contributes to removing evaluation errors.

Common Types of Evaluation Errors

- **The Halo/Horn Effect:** Evaluation biased by the student's past ratings rather than an objective evaluation of current performance, e.g. either having heard that a student is outstanding and submitting an "excellent" evaluation despite an "average" actual performance of the student in the rotation *or* having heard that a student is terrible and submitting a lower rating despite having a good experience with the student in the rotation. The evaluator could also extrapolate from grades, e.g. a student is highly graded for his/her patient presentation, and the evaluator assumes that the student takes an excellent history and physical even though the evaluator may have not directly observed the student's performance.
- **Restriction of Range:** Tendency to circle the same numerical/descriptive rating for all competencies rather than fully considering and rating each characteristic separately. This rating strategy increases the chances to submit an inaccurate evaluation, e.g. on a scale representing performance attributes from "unsatisfactorily" to "outstanding," the preceptor circles the same score for all characteristics being evaluated.
- **The Lake Wobegon Effect:** Rating all students "above average" and fails to discriminate between the inadequate student, the student meeting all expectations, and the truly exceptional student. The poorly performing student is not properly identified and fails to receive corrective remediation. Use the entire range of the evaluation and justify the evaluation with specific observed behaviors, skills, attitudes and written work.
- **Rating Nonperformance Attributes:** Factoring in "nonperformance attributes" when evaluating a competency, e.g. a nice, eager student with poor physical exam and presentation skills may be given a higher rating than deserved because "he's such a nice student."
- **Identifying Competencies Inaccurately:** Precisely identifying the categories/competencies of poor performance has important implications for student remediation, e.g. a lazy, bright student who has mastered the cognitive competencies should be reflected in the attitudinal competency section, not the cognitive section of the evaluation.

References

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