

Short Communication

Feedback of the participants on assessment sessions conducted in faculty development training at National Center for Health Professions Education Nepal

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ABSTRACT

Background and Objectives: It is essential for health professions educators to be cognizant and coached on what level, assessment is being conducted according to Blooms Taxonomy or Miller's Pyramid and trained to conduct assessment. The objective of this study was to take feedback of the participants on sessions of assessment.

Materials and Methods: Six-hours assessment sessions conducted in faculty development training organized by National Centre for Health Professionals Education, Tribhuvan University Institute of Medicine, Kathmandu Nepal in August 12-17, 2018. Principal author conducted three sessions (2 hours each)- 1) educational evaluation & assessment and fundamentals of assessment, 2) assessment of knowledge & understanding and 3) OSCE and OSPE in training. The methods utilized were tutorial, brainstorming and activity based small group work. Feedback was taken on semi-structured questionnaire. Descriptive analysis was done using SPSS.

Results: Twenty-two participants selected from basic, clinical and dental sciences and nursing faculty of seven schools. The participants rated assessment sessions on scale of 1-10 (1= poor, 10= excellent) for usefulness (8.42 ± 1.53), content (8.08 ± 1.61), relevance of session & content (8.50 ± 1.53), facilitation (8.00 ± 1.56) and overall (8.42 ± 1.31). They gained confidence for developing blueprint for assessment (2.96 ± 0.86), developing MCQs (3.67 ± 0.76), developing SAQs (3.42 ± 0.93), constructing OSCE/OSPE (2.92 ± 0.97) and conducting OSCE/OSPE (2.92 ± 0.77) rated at Likert scale 1-5 after participating in training. Sufficient number of participants suggested to allocate more time for assessment sessions and increase time for group work.

Conclusion: It is noticed that participants recognize and acknowledge the importance of assessment and their confidence level has increased for developing blueprint, MCQs, SAQs, OSCE/OSPE and conducting OSCE/OSPE examination.

Key words: Assessment, faculty development training, feedback, health profession education, Nepal

INTRODUCTION

To enrich and sustain the quality of health professions education, faculty development trainings (FDT) are imperative and obligatory. FDT focusing on teaching learning methodologies and approaches and assessment tools, processes and approaches that stimulates the teachers and boosts their confidence is one of the key programs of faculty development. This enhances the capacity, competence and capability of faculty members in teaching and learning of the students and assessing their performance [1-6].

It is said that assessment drives the learning and appropriate assessment processes promote desired learning. The core purpose of assessment is to enhance and enrich the learning of the students and its impact on learning of the students [7-10]. There are four fundamentals of assessment; why do we assess, what should we assess, when should we assess and how should we assess.¹⁰ The assessment is done at all four levels; knows, knows how, shows how and does utilizing appropriate tools in combinations [7,10].

National Centre for Health Professionals Education (NCHPE), Tribhuvan University, Institute of Medicine (TU, IOM), Kathmandu Nepal organized 6-days FDT in month of August 12-17, 2018. The principal author conducted 6-hours sessions on assessment in FDT with the objective assessment drives learning. The

objective of this study was to take feedback of the participant faculty members of FDT on sessions of assessment.

MATERIALS AND METHODS

National Centre for Health Professionals Education (NCHPE), Tribhuvan University, Institute of Medicine (TU, IOM), Kathmandu Nepal have been organizing faculty development programs (FDT) for the faculty members of its own schools/colleges and also for its affiliated medical, dental and nursing colleges.

NCHPE of TU, IOM planned to organize 6-days FDT in month of August 12-17, 2018. Executive Director NCHPE selected principal author as a resource person for FDT and assigned to conduct sessions on assessment in FDT. Executive Director allocated principal author three sessions- 1) educational evaluation & assessment and fundamentals of assessment, 2) assessment of knowledge & understanding and its tool and 3) OSCE (Objective Structured Clinical Examination) and OSPE (Objective Structured Practical Examination)- methods of assessing clinical/practical skills. Each session was of 2 hours duration (total 6 hours). The methods utilized for the assessment sessions in FDT were tutorial, brainstorming and activity based small group work and discussion.

NCHPE of TU, IOM selected 24 participants from among the basic sciences, clinical sciences, dental sciences and nursing faculty members of seven schools/colleges- 1) Karnali Academy of Health Sciences, Jumla 2) Universal College of Medical Sciences, Bhairwa 3) People's Dental College & Hospital, Kathmandu 4) Nepalese Army

Institute of Health Sciences, Kathmandu 5) Biratnagar Nursing Campus, Biratnagar, 6) Maharajung Nursing Campus, Maharajung, Kathmandu and 7) Maharajung Medicine Campus, Kathmandu.

At the end of sessions on assessment in FDT, written feedback of the participants was taken with the approval of NCHPE's executive director and consent of the participants on semi-structured questionnaire. The questionnaire was designed by principal author Rano Mal Piryani & Suneel Piryani, co-author and used for feedback of the participant faculty in training workshop conducted before. The questionnaire was also approved by NCHPE executive director.

The questionnaire contained nine questions; first six were closed ended and last three were open ended. The question one was on rating (scale 1-10; 1= poor and 10= excellent) the sessions of assessment of FDT for its usefulness, content, relevance, facilitation and overall rating. The questions two to six were on the level of confidence of participants after participation in the sessions of assessment of FDT, about developing blueprint for assessment, developing multiple choice questions (MCQs), developing short answer questions (SAQs), constructing OSCE/OSPE and conducting OSCE/OSPE examination respectively. The questions two to six were rated at Likert scale 1-5 (5= highly confident, 4= very confident, 3= confident, 2= to some extent confident 1= not confident). The question seven were about good points/strengths of workshop, eight on area of improvement and nine for additional comments.

The collected data was checked for completeness, accuracy and consistency and

entered in IBMS SPSS version 21 for analysis. Descriptive analysis was done. The frequency, mean and standard deviation were computed.

RESULTS

Twenty-four faculty members participated in the assessment sessions of faculty development training. Faculty members rated the workshop on scale of 1-10 (1= poor, 10=excellent); rating on workshop were notable. (Table 1)

Table 1: Rating of Faculty members on the assessment sessions of faculty development training (FDT)

Q-1	Items of question one	Rating (Mean ± SD)
	Usefulness (Scale 1-10)	8.42 ± 1.53
	Content (Scale 1-10)	8.08 ± 1.61
	Relevance of session & content (Scale 1-10)	8.50 ± 1.53
	Facilitation (Scale 1-10)	8.00 ± 1.56
	Overall (Scale 1-10)	8.42 ± 1.31

Mean and frequency with percentage of the confidence level of the participants on 5-points Likert's scale ranging from highly confident to not confident are given in table 2. The findings are remarkable.

Good points/strengths of assessment sessions of faculty development training (FDT) and area for improvement shared by the participants are given in tables 3 & 4 respectively.

Six participants mentioned about good work and efforts of resource person, one participant mentioned that Facilitator should speak clearly not in hurry, one participant suggest to include effective recent advances in assessment and one participants suggest include Specialty based evaluation technique.

Table 2: Mean and frequency with percentage of the confidence level of the participants on 5-points Likert's scale (highly confident to not confident) after participation in the assessment sessions of faculty development training

Question	Highly confident	Very confident	Confident	To some extent confident	Not confident	Mean ± SD
	No. (%)	No. (%)	No. (%)	No. (%)	No. (%)	
2. develop blueprint for assessment	02 (08.3)	02 (08.3)	13 (54.2)	7 (29.2)	0 (0.0)	2.96±0.86
3. develop MCQs as a tool for assessing knowledge & understanding	04 (16.7)	08 (33.3)	12 (50.0)	0 (0.0)	0 (0.0)	3.67±0.76
4. develop SAQs as a tool for assessing knowledge & understanding	04 (16.7)	05 (20.8)	12 (50.0)	3 (12.5)	0 (0.0)	3.42±0.93
5. construct OSCE/OSPE station	02 (8.3)	03 (12.5)	11 (45.8)	7 (29.2)	1 (4.2)	2.92±0.97
6. conduct OSCE /OSPE examination	05 (20.8)	13 (54.2)	05 (20.8)	1 (4.2)	0 (0.0)	2.92±0.77

MCQs (Multiple Choice Questions), SAQs (Short Answer Questions)
 OSCE (Objective Structured Clinical Examination); OSPE (Objective Structured Practical Examination)

Table 3: Good points/Strengths of assessment sessions of faculty development training (FDT) shared by the participants

Good Points/strengths	No of the participants
Content of assessment sessions	7
Very interactive sessions	7
Practice session (Group work)	6
Attractive teaching technique/approach	5
Sessions on MCQs, SAQs & OSCE	3
Clarity on assessment tools/process	3
Friendly learning environment	3
Learnt new assessment tools and technique	2
Brief but to the point sessions	1
Good management	1

DISCUSSION

Assessment is one of the essential components of teaching and learning. It portrays what students learn and what teachers educate [10]. Also assessment

Table 4: Area for improvement in assessment sessions of faculty development training (FDT) shared by the participants

Area for improvement	No of the participants
Incorporate more practice sessions (Group work)	12
Allocate more time for assessment sessions	7
Refresher training required	2
Make sessions more interactive	1
Provide handouts	1
Improve presentation	1
More break between sessions needed	1

enriches the teaching and learning processes. There is close relationship between objective, teaching, learning and assessment [11].

Hence, it is imperative to train the faculty members of health professions education in assessment strategy, approaches, tools and processes.

Keeping importance of assessment in health professions NCHPE of TU-IOM Nepal

allocated around 15% (6-hours) time for sessions on assessment in FDT. Principal author conducted three sessions on assessment (each of two hours); 1) educational evaluation & assessment and fundamentals of assessment, 2) assessment of knowledge & understanding and its tool and 3) OSCE and OSPE- methods of assessing clinical/practical skills.

Blueprint is a chart or map with specific description that connect assessment with teaching learning objectives and embodies with the sampling content, competencies and assessment tools used for the assessment with a rational and balanced approach [12,13].

The participants during this training were sensitized about the blueprinting for assessment and its importance. In group exercise, they developed sample blueprint for assessment. It is critical from perspective of health professions education that educators must be aware of and trained on what level assessment is being conducted according to Blooms Taxonomy (remember, understand, apply, analyze, evaluate and create) or Miller's Pyramid (knowledge, competence, performance and action) [14].

The participants during this training were briefed about the assessment done at a cognitive level (selection methods, e.g. MCQs and Supply methods, e.g. SAQs) and the assessment done at a performance level (e.g. OSCE/OSPE, MiniCEX).

The reflections of the participants in the form of feedback serves guide for upgrading the presentation [15]. The feedback of the participants on assessment sessions

conducted in FDT was remarkable and noteworthy.

The participants rated the assessment sessions conducted in FDT on scale of 1-10 (1= poor, 10= excellent) for usefulness (8.42 ± 1.53), content (8.08 ± 1.61), relevance of session & content (8.50 ± 1.53), facilitation (8.00 ± 1.56) and overall (8.42 ± 1.31). After participation in assessment sessions conducted in FDT participants felt confident for developing blueprint for the assessment (2.96 ± 0.86), developing MCQs (3.67 ± 0.76), and developing SAQs (3.42 ± 0.93) as tools for assessment of knowledge and understanding and constructing OSCE/OSPE (2.92 ± 0.97) as a tool for performance, and conducting OSCE/OSPE examination as a process (2.92 ± 0.77).

Content of assessment sessions, very interactive sessions, practice session (group work), attractive teaching technique/approach, sessions on MCQs, SAQs & OSCE/OSPE, clarity on assessment tools/process, friendly learning environment, learnt new methods of assessment were among the good points/strengths of assessment sessions conducted in FDT. Participants suggested incorporating more practice sessions (group work), allocating more time for assessment sessions and organizing refresher trainings.

It is perceived and noticed from feedback of the participant faculty that they recognize and acknowledge the importance of assessment and their confidence level has increased for developing blueprint, MCQs, SAQs, OSCE/OSPE and conducting examination.

They demand for increasing time for assessment sessions and for practice in group and organize refresher trainings in health professions education.

CONCLUSION

It is noticed that participants recognize and acknowledge the importance of assessment and their confidence level has increased for developing blueprint, MCQs, SAQs, OSCE/OSPE and conducting examination.

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AUTHOR'S CONTRIBUTION

RMP-Questionnaire design, Collection, analysis and interpretation of data, manuscript writing, editing and reviewing manuscript; **SP**-Questionnaire design, analysis and interpretation of data, manuscript editing and reviewing manuscript; **MS**-Collection of data, manuscript editing and reviewing manuscript.

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CONFLICT OF INTEREST

Authors declared that there is no conflict of interest regarding publication of this manuscript.

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