Going beyond “Great Job!”

Best practices in narrative assessment to improve teaching and learning

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Workshop Objectives

In this workshop participants will begin to develop the tools to incorporate meaningful narrative assessment in their teaching.

1. Identify program objectives best evaluated by narrative assessment.
2. Develop a framework for providing narrative assessment that is concise, specific and provides learners with actionable suggestions for improved performance.
3. Explore ways in which assessment data collected over time can support programmatic evaluation of competence for habits of mind and behavior.
The Interprofessional Team Reasoning Framework
https://www.mededportal.org/publication/9460
Setting: Discharge case conference
Task #1

Based on the observed interaction, provide narrative feedback for Landon (nurse, sitting in the middle).
Task #2

1. Share your narrative feedback with your team.
2. Discuss the merits of each individual feedback.
3. Construct a final written feedback that captures everyone’s perspective.
Discussion
What is feedback?

“Feedback refers to information describing a student’s performance in a given activity that is intended to guide their future performance in that same or in a related activity.”

* Ende, J. MD, Feedback in Clinical Medical Education, JAMA 1983; 250:777-781
What feedback is NOT

- Praise or blame, approval or disapproval.

Feedback is *value neutral*. It merely describes what you did or did not accomplish, given a standard or intent.

- A solution to performance problems or issues
What is Narrative Feedback?

A written description of a student's performance, organized in logical order to illustrate the "story" or account of a student's progress and performance, including strengths and areas for improvement...to guide future efforts.
Keys to effective narrative feedback

- Linked to pre-defined learning goals
- Assesses how well the student is achieving learning goals
  - Identifies strengths and weaknesses by providing examples, quotations, etc.
  - Uses constructive and specific language
  - Summarizes suggested areas and strategies for improvement
- Reviews student progress over time
# Start - Stop - Continue Feedback Format

<table>
<thead>
<tr>
<th>Quadrants</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Continue...</strong></td>
<td>Comment on aspects of performance that were effective. Be specific and describe impact. Highlight things you would like to be done in the future.</td>
</tr>
<tr>
<td><strong>Start, or do more...</strong></td>
<td>Identify behavior the student knows how to do, and could do, or do more often.</td>
</tr>
<tr>
<td><strong>Consider...</strong></td>
<td>Highlight a point of growth for the learner, a “doable” challenge for future interactions.</td>
</tr>
<tr>
<td><strong>Stop, or do less</strong></td>
<td>Point out actions that were not helpful, or could be harmful. Be specific, and indicate potential impact.</td>
</tr>
</tbody>
</table>

Walsh, 2006, Adapted from the Coaching Feedback Format, Bayer Institute for Health Care communication
Is Narrative feedback the same as Narrative Assessment?
What is assessment?

The systematic basis for making inferences about the learning and development of students. It is the process of defining, selecting, designing, collecting, analyzing, interpreting, and using information to increase students’ learning and development.

What is assessment?

The process of gathering and discussing information from multiple and diverse sources in order to develop a deep understanding of what students know, understand, and can do with their knowledge as a result of their educational experiences; the process culminates when assessment results are used to improve subsequent learning.

*(Learner-Centered Assessment on College Campuses: shifting the focus from teaching to learning by Huba and Freed 2000)*
Assessment-informed model of teaching

- Define **learning outcomes** (program goals and learning objectives)
- Develop and implement **assessment strategies** (those that measure the types and quality of learning you expect).
- Analyze the assessment data to **assess** progress toward outcomes.
- Create an **action plan** (needed changes to improve learning outcomes).
Objects of assessment (the “what”)

- Knowledge
- Skills
- Attitudes, Values and Behaviors
  - Professionalism
  - Functioning in a team setting
  - Communication
Assessment formats

Assessment of knowledge
• Multiple choice questions
• Open-ended questions
• Written assignments

Assessment of Performance (based on observation)
• Checklists
• Rating scale
• Narrative comments
Assessments come in 2 flavors

- Formative
- Summative
Formative vs. Summative Assessment

**Formative Assessments**
Are designed primarily to give the trainee a sense of their progress toward achievement of learning objectives. It should encourage self-reflection, actively reinforces knowledge and good medical skills, and provides specific strategies for improving performance.

Formative assessments are designed to give students frequent feedback on their individual learning - the emphasis is on learning, not on grades.
Formative vs. Summative Assessment

Summative Assessments
Summative assessments provide information to students as to whether learning objectives were achieved, and information to faculty regarding the extent of student mastery.

They are used to make an **overall judgment about competence**, fitness to practice, or qualification for advancement to higher levels of responsibility.
Narrative assessment, like all forms of assessment, can be formative or summative.
Accuracy as an important goal in assessment

The accuracy is defined by:

• **Validity**: refers to whether an instrument actually does measure what it is purported to

• **Reliability**: refers to the consistency and precision of the test measurements (the reproducibility of the scores obtained from an assessment)
There are proven accurate assessments instrument that focus on cognitive achievements (knows).

**Why?** The learning objectives are amenable to being measured → they are specific and the proof of competence is intuitive

*Calculate the rate of elimination of a drug given its clearance and plasma concentration.*
The assessment of “shows and does” is difficult to design to be objective, valid and reliable.

Within any observed situation (task) that reflects professional practice there will inevitably be integration between the relevant cognitive, psychomotor and affective skills.
OSCE – The best known success story in reliability for “shows and does”

OSCE = Objective Structured Clinical Examination

• It is comprised of several "stations" in which examinees are expected to perform a variety of clinical tasks within a specified time period against criteria formulated to the clinical skill, thus demonstrating competency of skills and/or attitudes.

• All students get examined on predetermined criteria on same or similar clinical scenario or tasks with marks written down against those criteria thus enabling recall, teaching audit and determination of standards.

• Can cover broader range like problem solving, communication skills, decision-making and patient management abilities.

http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3191703/
Competencies

• Work collaboratively and effectively in inter-professional teams.
• Communicate effectively with members, including both physician and non-physician professionals, of the health care team.
• Maintain a professionally appropriate demeanor in their interactions with the health care team.
The Formal Approach

1. Identify the overarching competency to be assessed
2. Think about how the context of the assessment will inform true work-based competency in this area
3. Outline the measurable behaviors (criteria for your assessment)
4. Define what exemplary performance looks like for each criteria
5. Create distinct categories of performance

Narrative comments are utilized to summarize the collected data, provide specific examples and offer suggestions for improvement.
Accuracy, consistency, fairness

The wording of the criteria is not clear or lacks sufficient detail to result in decisions that are fair, accurate, and consistent.

The wording of the criteria is clear, performance levels are distinct, and will result in decisions that are fair, accurate, and consistent.

Measurability

The performance levels describe expectations and/or behaviors that are not measurable in the prescribed setting.

The performance levels describe expectations and/or behaviors that are measurable in the prescribed setting at clearly distinct categories of performance.
Task #3

Based on the video we watched, think about developing a tool to guide the collection of reliable narrative assessment for the following competencies:

- *Work collaboratively and effectively in inter-professional teams.*
- *Communicate effectively with members, including both physician and non-physician professionals, of the health care team.*
- *Maintain a professionally appropriate demeanor in their interactions with the health care team.*

What are the barriers you can immediately identify?
Competence for habits of mind and behavior:

Is developmental - gained incrementally through deliberate practice.

Is intertwined with cognitive and psychomotor skills
- How do you break the competency into smaller units?
- Does mastery of the parts automatically lead to competent performance of the integrated whole?

Relies on tacit knowledge - that which we know but cannot easily explain.
- What are the actions/behaviors discriminate good performance from poor one?
Real life Approach

- Begin by observing
- Make notes on your observations
  
  *Try to use a systematic approach like Start-Stop-Continue*

- Organize your notes over time
  
  What are the consistent measurable behaviors?  
  What do really good students do at this level of training?  
  What are common performance issues?  
  Can you create a gradient of behaviors?

- DON”T DO IT ALONE! Incorporate additional assessment data
Some interesting findings...

In recent years a number of studies have shown that reliability can also be achieved with less standardized assessment situations and more subjective evaluations, provided the sampling is appropriate.

No method is inherently unreliable and any method can be sufficiently reliable, provided sampling is appropriate across conditions of measurement.

Reviewed by Cees P M van der Vleuten
Multisource narrative assessment

360-Degree Evaluation/Multisource Assessment consists of measurement tools completed by multiple individuals in a person’s sphere of influence (e.g. peers, other members of the clinical team, patients)

ACGME recommends 360 degree evaluations for house staff. There are no current recommendation from LCME for students.
If you subject each trainee to multiple assessments focused on specific behaviors, patterns will emerge, even if you are using methods which are less structured or standardized.
From sole feedback provider to Feedback facilitator

A facilitator can:

- resolve disparate evaluations
- Identify themes across evaluations
- Align assessments with evaluation framework and program goals
- Weigh relative merits of sources
- Ensure the format is accepted by the learner as accurate, credible, and useful
- Ensure inclusion of self-assessment
- Collaborate with learners to form action plans
A role for self-monitoring

Self monitoring requires that individuals are able not only to work independently but also engage in purposeful reflection on their own performance and progress.
Putting it all together...

Identify your goals - clear and actionable goals for what a student will learn, master (knowledge and skills) and/or how the student will behave

Success Criteria - Define what competency looks like

Design assessment (observation) tool

→ Collect all feedback from observation
  - Instructor narrative assessment
  - Team member narrative assessment
  - Peer narrative assessment
  - Self-Assessment

Facilitate the integration of all assessments, ensuring alignment with the evaluation framework and program goals

Collaborate with learners to form action plans
Summative assessment?

There is an institutional responsibility to respond to lack of demonstrated competence (denial of promotion, mandated remediation)

The answer: Rinse and repeat!

Create a continual process of narrative feedback that documents progression and is linked to an improvement plan—holds individuals accountable, ensures remediation.
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1. Identify program objectives best evaluated by narrative assessment.
Box 1. Dimensions of Professional Competence

Cognitive
- Core knowledge
- Basic communication skills
- Information management
- Applying knowledge to real-world situations
- Using tacit knowledge and personal experience
- Abstract problem-solving
- Self-directed acquisition of new knowledge
- Recognizing gaps in knowledge
- Generating questions
- Using resources (e.g., published evidence, colleagues)
- Learning from experience

Technical
- Physical examination skills
- Surgical/procedural skills

Integrative
- Incorporating scientific, clinical, and humanistic judgment
- Using clinical reasoning strategies appropriately (hypothetico-deductive, pattern-recognition, elaborated knowledge)
- Linking basic and clinical knowledge across disciplines
- Managing uncertainty

Context
- Clinical setting
- Use of time

Relationship
- Communication skills
- Handling conflict
- Teamwork
- Teaching others (e.g., patients, students, and colleagues)

Affective/Moral
- Tolerance of ambiguity and anxiety
- Emotional intelligence
- Respect for patients
- Responsiveness to patients and society
- Caring

Habits of Mind
- Observations of one's own thinking, emotions, and techniques
- Attentiveness
- Critical curiosity
- Recognition of and response to cognitive and emotional biases
- Willingness to acknowledge and correct errors

From: Defining and Assessing Professional Competence
Ronald M. Epstein, MD Edward M. Hundert, MD
Workshop Objectives

2. Develop a framework for providing narrative assessment that is concise, specific and provides learners with actionable suggestions for improved performance.

Competency

Specific Goals

Success criteria

Informative, actionable, value neutral feedback

Utility of multisource feedback
Workshop Objectives

3. Explore ways in which assessment data collected over time can support programmatic evaluation of competence for habits of mind and behavior.
My knowledge on narrative assessment, this is.
With you may the narrative assessment force be.
You success I wish!

http://www.yodaspeak.co.uk
Thank you!

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