

<b>Work:</b>	Independent Assessment Review
<b>Reporting to:</b>	PSA Executive Board
<b>Functional responsibility to:</b>	British Pharmacological Society CEO; Medical Schools Council Assessment CEO; Co-Chairs of the PSA Executive Board
<b>Contract:</b>	Part time temporary (6 months)
<b>Location:</b>	Remote working

## **Main tasks**

---

### **Purpose of the role**

To deliver a report to the Executive Board of the PSA, setting out responses to the agreed scope of review (below). The report is expected to help the Executive Board understand the success of the assessment in achieving its aims, and to consider whether further improvements may be made to meet the highest standards in medical education.

### **The detailed scope and outputs of the independent review:**

#### **1) Standard setting process**

- What improvements might be made to the PSA's standard setting processes?
- Is Modified Angoff the most appropriate method of standard setting?
- What alternative approaches to Angoff might be considered?
- What processes should be used to define the description of the 'just passing' candidate?
- Is the process for test equating appropriate, (e.g. should test equating be performed as part of the post-assessment review process)?
- Does the PSA standard setting process meet best international practice in medical assessments of this type?
- What benefits might arise from aligning all assessment events on a single day?

#### **2) Reliability, assessment length and pass mark**

- What improvements might be made to the PSA to ensure that the reliability and external validity of the assessment are at a level that is acceptable for a high stakes examination?
- What compromises might have to be made in an effort to increase the internal consistency of the PSA?
- Is there room for compromise on the reliability statistic?
- How might the apparent tension between selecting items that discriminate well (in order to achieve a high reliability coefficient, Cronbach's alpha), and the impact that this approach has on lowering the pass mark, in what is intended to be a safety assessment, be addressed?
- Might a strategy of repeated testing overcome the limitations of having a shorter assessment with a lower Alpha value?

#### **3) Item and assessment development**

- Is the item bank of an appropriate size to service the future needs of the assessment?
- Are the content authors trained and supported?
- Is the item bank secure with access rights appropriately controlled?
- Are the quality assurance and peer review methods sufficient to maintain quality in a rapidly developing area of practice?

- Could the input of important national bodies (e.g. NICE, BNF) improve the quality of the assessment?

#### **4) Administration and delivery**

- What improvements might be made to the administration and delivery of the PSA? Do the candidates have long enough to prepare?
- Are the candidates given sufficient information regarding the PSA in advance of sitting?
- Is the user journey through the interface appropriate?
- Do local PSA teams have sufficient information and support to run the assessment? Should there be more practice content?
- Is access to the BNF sufficient?
- Should other sources of information be permitted?
- Are disadvantaged groups appropriately supported?

#### **5) Governance and management**

- What improvements might be made to the PSA's governance and management policies and processes?
- Are the data handling processes defensible?
- Is there an appropriate and transparent appeals process in place?
- Are all stakeholders able to make opinions known?
- Are the financial and accounting processes transparent?

#### **6) Given the above, is the PSA a valid assessment of prescribing competency?**

- To what extent has the PSA fulfilled its original objectives as a reliable pass/fail assessment of minimal competence to prescribe safely at the boundary between medical school and work in the NHS as a Foundation Year 1 doctor?

## **Outputs**

The independent review will be presented to the PSA Executive Board (comprising leads from MSC Assessment and the British Pharmacological Society) in the form of presentation and a written report, which should include:

- Description of objectives for the review
- Description of evaluation methodologies, including an explanation of limitations wherever they have been encountered
- Clear and detailed answers to key, pre-agreed questions
- Recommendations for improvement or development of the PSA

## **Intellectual property rights / research outputs**

It is expected that all outputs of the independent review, including any intellectual property and / or copyright, will reside with MSC Assessment and BPS, and that all outputs, conclusions and recommendations will remain confidential until or unless agreed by all parties in advance.

### Person specification

The reviewer(s) should have experience in the field of UK medical education and assessment psychometrics. The reviewer(s) must appreciate the need and challenges of improving prescribing competency for newly qualified junior doctors in the UK NHS.

The successful applicant will meet the following competencies:

Requirements	Essential	Desirable
<b>Experience</b> <ul style="list-style-type: none"><li>• Previous experience of completing independent review work on medical assessments</li><li>• Familiarity of the UK medical education curriculum and training in a wider healthcare setting</li><li>• Knowledge of prescribing</li><li>• Strong track record of research in education and assessment</li><li>• Experience of working with computer based assessment and familiarity with the advantages and limitations of the approach</li><li>• Experience of multiple methods for standard setting for medical undergraduate assessments</li><li>• Proven ability with item writing for assessment in multiple choice question formats</li><li>• An understanding of psychometric analysis for reviewing assessment reliability</li><li>• A leader in the field of evaluation of assessment strategies for medical education</li></ul>	<ul style="list-style-type: none"><li></li><li>*</li><li></li><li>*</li><li>*</li><li>*</li><li></li><li>*</li><li></li></ul>	<ul style="list-style-type: none"><li>*</li><li></li><li>*</li><li></li><li></li><li></li><li>*</li><li></li><li>*</li></ul>