Part B: Requirements for Year 6 of the MBBS Program

This document provides details on assessment activities to be completed for the Sixth Year MBBS Program. Please read this document carefully.

1 OVERVIEW AND ACADEMIC TRANSCRIPTS

1.1 INTRODUCTION

By the commencement of a student’s sixth year, they are required to have completed MEDIC ST 5013HO - External Elective. Details regarding this elective are available from the Faculty of Health Sciences Office.

To successfully complete the requirements of the Sixth Year Program in the MBBS a student must obtain a Non-Graded Pass in:

Final (Sixth Year) MBBS Examination (MEDIC ST 6000)

This includes the following components

- MEDIC ST 6001AHO/BHO  Clinical Elective & Specials Week
- MEDIC ST 6002AHO/BHO  Medicine Student Internship & Common Program
- MEDIC ST 6003AHO/BHO  Surgery Student Internship
- MEDIC ST 6004AHO/BHO  Emergency Medicine Student Internship
- MEDIC ST 6005AHO/BHO  Primary Care SCAP*
- MEDIC ST 6006AHO/BHO  Psychological Health
- MEDIC ST 6007AHO/BHO  Medicine SCAP
- MEDIC ST 6008AHO/BHO  Surgery SCAP

(*Specialist, Community or Ambulatory Placements)

For successful completion of the Sixth Year Program, a student will be awarded a Non-Graded Pass.

For the purpose of feedback to students, a banded result will be provided for each attachment. This result will not appear on students’ academic transcripts.

Bands of achievement are:

A (High pass)
B (Pass)
C (Borderline pass)
D (Borderline fail)
E (Fail)

1.2 FORMATIVE AND SUMMATIVE ASSESSMENT

The assessment for the MBBS Program is integrated and includes formative and summative components. All students must complete the summative and compulsory formative components unless formally exempted on significant medical or compassionate grounds.
Summative activities will be used to determine whether students have met the requirements of the Sixth Year program. Formative assessment is a shared process between students and teachers and requires students to review and discuss their performance with relevant clinical teachers.

Formative assessments may assist in the identification of students ‘at risk’ of an unsatisfactory clinical attachment summative assessment. Opportunities for feedback to students may occur in a number of settings both formal and informal.

1.2.1 Summative Assessment Elements

The four-week terms include:
- Three Student Internships – Medicine, Surgery and Emergency Medicine
- One Clinical Elective or a Directed Elective
- Four SCAPs (Specialist, Community or Ambulatory Placements): Primary Care, Psychological Health, Medicine, Surgery

The Student Internships, Directed Electives, Primary Care SCAP and Psychological Health SCAP will be assessed using the framework for student performance provided by the Year 6 Placement Assessment Form (Appendix A). The Clinical Electives, Medicine SCAP and Surgery SCAP will be assessed using the Placement Assessment Form in Appendix B. In all cases there may also be assessments tailored to the specific needs of each discipline.

Wherever possible, students will be assessed by a team, rather than an individual.

Other assessments, such as written tasks or clinical examination (eg: mini-CEX, Long Case Assessment, Short Case Assessment) can be part of a suite of assessment tools considered in an overall result.

For each placement, two assessments will be made: Medical Competence and Professional Behaviour. Students are expected to be Satisfactory (bands A, B and C) in both areas. The Attachment Supervisor will make the preliminary assessment. The Year 6 MBBS Committee will confirm a definitive assessment. Confidential feedback will be provided electronically to the student.

A band D performance in either Professional Behaviour or Medical Competence will also be discussed at Committee level. Specific remedial advice will be provided.

1.2.2 Determination of results

Following is the mechanism whereby pass/remediation/fail decisions will be made by the Board of Examiners for Sixth Year:

- Satisfactory (bands A, B, C) in eight terms = pass
- Satisfactory (bands A, B, C) in seven terms plus borderline (band D) one term = pass

The next three categories will need to be brought to the attention of the Board of Examiners

- Satisfactory (bands A, B, C) in seven terms plus one fail (band E) term – referred to the Board of Examiners which can then decide, after review of the reasons for failure, to pass the student without further evaluation or to recommend the student undertake a remedial term. Such a term must have clear criteria by which a pass/fail decision for the year will be determined.
- Satisfactory (bands A, B, C) in six terms plus two borderline fail (band D) terms – A directed remedial term (which may involve a combination of disciplines) will be undertaken as directed by the Board of Examiners. Criteria by which a pass/fail decision for the year will be determined by the relevant discipline/s.
Satisfactory (bands A, B, C) in six terms plus one borderline (band D) term and one fail (band E) term – A directed remedial term will be undertaken to cover the problems identified in the failed term.

All other result combinations will usually result in failure of the year.

1.2.3 Role of Board of Examiners
The Year 6 Board of Examiners will undertake an overview of the performance of all students undertaking Sixth Year of the MBBS Program.

The Board of Examiners reserves the right to review the results of each attachment in each rotation to maintain an overview of standard setting. While the results of each individual student will generally be determined within the guidelines above, the Board may amend the rules described in 1.2.1 at its discretion if there appears to be a discrepancy in the standards required in different attachments.

The Board will determine whether students have met the requirements of the program as set out above and allocate a result of Non-Graded Pass, Fail or Incomplete-Fail for the Sixth Year MBBS Program. It will also consider applications for supplementary assessment on medical and/or compassionate grounds.

In the Sixth Year program there is formative assessment and opportunities for redemption are available. Accordingly, the Board of Examiners will not award supplementary assessment opportunities on academic grounds. Even with the appropriate documentation, the Board of Examiners may determine that a substantial number of absences during the year may require a student to repeat the year.

1.3 REPEAT STUDENTS
Repeating students are required to undertake a complete Year 6 program. No credit will be given for clinical attachments that have previously been passed.

1.4 PRIZES
Schools/Disciplines within the Medical School may recommend the award of prize/s to individual medical students usually on the basis of academic merit. These recommendations are made at the discretion of each of the School/Discipline. Students should obtain further information regarding criteria and eligibility from individual departments.

2. AUTHORISED STATEMENTS CONCERNING EXAMINATION REQUIREMENTS
The procedures and arrangements for the 2006 Sixth Year MBBS Examination, approved by the Board of Examiners, are as set out in this document. Any variation in these procedures will be notified in writing. No other statements or information concerning the examination will be recognised or acted upon by the Board of Examiners.

In all matters relating to the notification or amendment of examination processes, procedures and results, the officially provided student email address shall be used. It is the responsibility of the individual student to monitor that email address, and alternative addresses will be not be utilised. Proof of delivery by the University shall be sufficient evidence of notification. Students might wish to note that procedures to forward email to another address can be found at: http://webmail.adelaide.edu.au/student_staff.html
The Curriculum Committee and Board of Examiners retain the right to amend the above documentation as required after consultation with stakeholders. Notification of amendment will be via the University student email, and will be notified 4 calendar weeks before implementation.

PROFESSOR J BEILBY
CONVENOR,
MEDICAL SCHOOL
for the SIXTH YEAR MBBS
BOARD OF EXAMINERS
Appendix A

<table>
<thead>
<tr>
<th>Year 6 Placement Assessment - 2006</th>
<th>MBBS Year 6 - The University of Adelaide</th>
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<tbody>
<tr>
<td><strong>Placement</strong></td>
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<tr>
<td><strong>Student Name</strong></td>
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<tr>
<td><strong>Rotation</strong></td>
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This formal assessment should be completed by the Team Supervisor at the end of the student's attachment following discussion of their performance with the Unit team. You are asked to make two preliminary judgements, one on Medical Competence and one on Professional Behaviour, please see over.

**MEDICAL COMPETENCE**

**CLINICAL ASSESSMENT / PRESENTATION:**

<table>
<thead>
<tr>
<th>Incomplete or inaccurate history taking and/or physical examination. Generally poor presentations.</th>
<th>Sometimes incomplete or inaccurate history taking and/or physical examination. Case presentations of variable quality.</th>
<th>Competent history taking and physical examination. Acceptable case presentations.</th>
<th>Thorough history taking and physical examination completed in an efficient manner. Concise and accurate case presentations.</th>
<th>Outstanding patient assessment skills. Superb case presentations.</th>
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**CLINICAL JUDGEMENT / PROBLEM SOLVING:**

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<tr>
<th>Unable to identify sick patients. Unable to prioritise problems and develop differential diagnoses. Unable to develop appropriate management plans.</th>
<th>Tends to overestimate or underestimate severity of illness. Sometimes unable to prioritise and develop differential diagnoses. Sometimes unable to develop appropriate management plans.</th>
<th>Accurately identifies most medical problems. Generally able to prioritise diagnostics and therapeutic efforts.</th>
<th>Accurately and competently assesses and manages a wide variety of medical problems.</th>
<th>Outstanding clinical judgement and competence.</th>
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**ONGOING PATIENT MANAGEMENT:**

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<tr>
<th>Cannot be relied upon to monitor patient progress or carry out management plans.</th>
<th>Variable performance, sometimes fails to monitor patient progress, may need reminder to carry out management plans.</th>
<th>Generally reliable, adequately monitors patient progress and carries out management plans.</th>
<th>Monitors patient progress, executes management plans effectively, recognises when modifications may be needed.</th>
<th>Not only monitors patients effectively, but is able to anticipate changes in patient progress and to modify management plans accordingly.</th>
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**DOCUMENTATION:**

<table>
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<tr>
<th>Inaccurate and/or incomplete and/or illegible documentation.</th>
<th>Documentation completed regularly but poor in standard and content, and/or barely legible.</th>
<th>Acceptable standard of documentation. Documentation done in a reasonable time frame.</th>
<th>Documentation well organised, timely and thorough.</th>
<th>Outstanding level of documentation.</th>
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</table>

**THEORETICAL KNOWLEDGE:**

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<tr>
<th>Major deficiencies in theoretical knowledge, which may contribute to risky management decisions.</th>
<th>Deficient in some significant areas but unlikely to put patients at risk.</th>
<th>Knowledge as expected for present level.</th>
<th>Good knowledge base and able to apply to clinical situations.</th>
<th>Displays exceptional knowledge and the ability to apply it to the clinical setting.</th>
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Please comment on any specific areas of concern: ...........................................................................................................

Supervisor's name: ........................................... Supervisor's signature: ........................................... date: ..........................

Please Return This Form to the Year 6 Coordinator
C/O University of Adelaide, Medical School, Medicine Learning and Teaching Unit, Frome Road, Adelaide 5005.

THIS SECTION TO BE COMPLETED BY MED 6 ASSESSMENT COMMITTEE:

Overall Assessment of Medical Competence: .............................................................

2006 Yr 6 Assessment Document - Amended

Page 5 of 7
## Year 6 Placement Assessment - 2006

### Placement

#### Student Name

Rotation

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This formal assessment should be completed by the Team Supervisor at the end of the student's attachment following discussion of their performance with the Unit team. You are asked to make two preliminary judgements, this one on Professional Behaviour and one on Medical Competence, please see over.

### Professional Behaviour

#### Interaction with Health Care Team:

- [ ] Unco-operative; does not acknowledge skills of others. May cut off discussions be obstructive and unhelpful.
- [ ] Tends to operate as a loner, will contact other disciplines but not engage with them or work in a team setting.
- [ ] Modify/co-operative; works satisfactorily with both peers and colleagues in other disciplines.
- [ ] Well liked by colleagues and peers as a supportive and helpful person. Recognises and is appreciative of the skills of others.
- [ ] Highly regarded by all as a friendly and helpful person who goes out of the way to assist and cooperate.

#### Interaction with Senior Colleagues:

- [ ] Overestimates his/her abilities and fails to seek help or notify senior colleagues as needed. Does not follow directions when given.
- [ ] Does not communicate effectively with senior colleagues. Needs repeated reminding to carry out tasks.
- [ ] Just aware of his/her limitations and usually seeks help appropriately.
- [ ] Seeks consultation to confirm/modify a well developed management plan.
- [ ] Keeps senior's abreast of all appropriate activities, highly reliable and trustworthy. Actively seeks teaching.

#### Doctor/Patient Interactions:

- [ ] Little empathy, lacks respect for, and ability to, communicate with patients and relatives.
- [ ] Empathy and communication skills need improvement.
- [ ] Respectful and communicates adequately with patient and relatives.
- [ ] Very professional and empathetic, very good communication skills.
- [ ] Excellent professional attitude and empathy with outstanding communication skills.

#### Organisation and Time Management Skills:

- [ ] Unable to establish priorities. Disorganised. Tasks often not completed. Not punctual or reliable.
- [ ] Difficulty in establishing priorities. Poorly organised. Tasks not always completed. Sometimes unreliable.
- [ ] Able to establish priorities. Generally completed tasks on time. Generally punctual and reliable.
- [ ] Good at establishing priorities; able to delegate appropriately and ensures tasks are completed. Always punctual and reliable.
- [ ] Excellent time manager; able to anticipate and forward plan.

#### Ethics and Integrity:

- [ ] Fails to uphold professional and ethical standards.
- [ ] Doubts about professional and ethical standards.
- [ ] Generally adheres to professional and/or ethical standards.
- [ ] Able to handle difficult ethical situations.
- [ ] Outstanding ability to handle difficult ethical situations.

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Please comment on any specific areas of concern:

__________________________________________________________

Supervisor's name: ___________________________  Signature: ___________________________  Date: ____________

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Please return this form to the Year 6 Coordinator

C/o University of Adelaide, Medical School, Medicine Learning and Teaching Unit, Frome Road, Adelaide 5005

THIS SECTION TO BE COMPLETED BY MED 6 ASSESSMENT COMMITTEE:

Overall Assessment of Professional Behaviour: ___________________________
Appendix B

### Year 6 Placement Assessment - 2006

**MBBS Year 6 - The University of Adelaide**

**Placement**

**Student Name**

**Rotation**

The intent of the assessment is to document, on the basis of direct observation of the student's behaviour in your practice setting, your professional judgment of the student's progress in managing their role as a developing medical professional, in relation to the following Student Performance Bands for that of a final year medical undergraduate.

The five bands available are A (High Pass), B (Pass), C (Borderline Pass), D (Borderline Fail) and E (Fail). Please note, Band A (High Pass) is a CREDIT PERFORMANCE or BETTER.

<table>
<thead>
<tr>
<th></th>
<th>A High Pass</th>
<th>B Pass</th>
<th>C Borderline Pass</th>
<th>D Borderline Fail</th>
<th>E Fail</th>
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<tbody>
<tr>
<td><strong>Achievement of effective patient care / research / teaching outcomes relevant to placement term</strong></td>
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<td>Knowledge base, exploratory skills, reasoning, decision-making, procedural skills, humanistic, communication and counselling skills appropriate to the initial and ongoing management of each patient or challenge in its particular presentation context.</td>
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<td><strong>Management of the practice environment</strong></td>
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<td>Understanding and adaptation to the practice community environment and standards, appropriate attendance, interpersonal and inter-professional collaboration skills, professional behaviour appropriate to the social, cultural, ethical, economic, technological, legal, occupational administrative and quality assurance aspects of the practice environment.</td>
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<td><strong>Management of self as a developing professional</strong></td>
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<td>Direction and management of own learning; goal setting, initiative and participation, valuing of performance feedback, self-reflection, development of insight as to own limitations, responsiveness to own learning needs, adaptation and growth during placement term; Personal health and self-care, coping with balancing professional role within personal life.</td>
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<tr>
<td><strong>Overall performance</strong></td>
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Please comment on the student's performance:

**Areas to be improved:**

**Areas above average:**

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Supervisor's name: ____________________________

Supervisor's signature: ________________________ Date: ______

Student's signature: __________________________ Date: ______

Please submit this form no later than 1 week after placement completion to:

Clinical Studies Office, Eleanor Harrald Building, RAH.

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ipAssessment (Yr 6) - Medical School 171 Monday, 20 March 2000