

## **Guidelines and Procedures for Student Opinion Surveys in the MD Program**

### **Introduction**

The MD Program relies on various sources of information to provide feedback on the quality of the program as a whole, on individual components including courses, and on individual teachers. This feedback enables evidence-based, continuous quality improvement of the program and student experience. It is also a core element of a faculty member's teaching dossier, which is used for promotion and related purposes.

These feedback data come from a variety of sources, including student opinion surveys. MD Program leadership works with student representatives to ensure that the importance of timely evaluation completion is well understood by students. Course and clerkship coordinators should communicate their evaluation expectations to students at the beginning of each course or clerkship and at subsequent points as necessary.

### **Principles**

1. In all our interactions with students, learners, staff, instructors, care providers, and patients, the MD program values well-being, compassion, cultural safety, diverse perspectives, health equity and growth.
2. One of the most powerful and effective tools used to assess the quality and effectiveness of the MD Program curriculum and its teachers is actionable, constructive student feedback.
3. Students in the MD Program are in training to enter a profession that relies to a considerable extent on collegial critique for self-improvement. Both giving and receiving feedback are essential competencies for effective self-regulation and growth as a clinician and teacher.
4. The MD Program endeavours to educate medical students in a manner that fosters the development of competencies essential for effective self-regulation in the full trajectory from medical school to practice.
5. Students, administrative staff, teachers, and program leaders comprise a community of learning, and each have an obligation to foster psychological safety and trust. Student feedback about individual teaching performance that is unduly hurtful or irrelevant to the scope of the teacher may be reviewed by MD program leadership at the request of the instructor.
6. The time required to complete evaluations of teachers and evaluation of courses should be minimized by ensuring:

- a. That the process of completion of forms be as easy as possible.
- b. That the forms be concise and only include essential information.

### **How Feedback is Provided by Students**

1. In light of the preceding principles, students provide feedback about activities, faculty teaching events and faculty/residents interactions where they have substantial contact. Students are also expected to complete all end of course / clerkship opinion surveys.
2. The number of students required to complete the surveys is determined based on statistical principles as outlined in the MD Program's [Program Evaluation Framework](#).
  - a. Pre-Clerkship
    - i. Course Evaluation - Whole Class
    - ii. Lectures, Labs, Small Group Session Evaluation - 20% of class
    - iii. Discovery Learning - 1 per preceptor
  - b. Clerkship
    - i. Rotation Evaluation - Whole Class
    - ii. Lectures and Small Group Evaluation - 20% of class
    - iii. Preceptor or Resident Evaluation - 1 per preceptor or resident
3. Students are expected to complete all surveys upon receipt and will receive one reminder every 3 days (for a maximum of 3 reminders). After 14 days, students will experience a temporary delay when accessing Cally until the outstanding form(s) are complete. Immediate access to Cally will be restored after submitting the outstanding form(s).
4. Completion of all student opinion surveys will be monitored by the central MD Program administration.
5. If a student encounters a technical difficulty that hinders the completion of a form, it is the responsibility of the student to bring this problem to the attention of the course administrator, course/clerkship coordinator, or Program Evaluation Unit staff ([umeeval@ualberta.ca](mailto:umeeval@ualberta.ca)) in a timely manner.

### **Standards for the timely release of teacher assessment scores and feedback**

The MD Program places great value on the commitment of the many teachers who contribute to the education of our students. In recognition of their efforts, teaching reports (TES) and other formal feedback will be provided to teachers within three months of the end of the course (Pre-Clerkship) and within three months of the end of the academic year for clerkships. The MD Program will facilitate the provision of the TES scores for each academic faculty member to the relevant University Department Chair(s) through the Faculty Annual Report (FAR).

Teaching scores will only be released when a minimum of three evaluations have been received for a given teacher for each learning activity in order to protect the confidentiality of the students who provided the feedback.

Clerkships that run for a prolonged period of time (particularly the entire length of the academic year) and courses with multiple rotations (e.g. year 3 and 4 clerkships) may receive interim feedback when this can be done without compromising student anonymity.

### **Standards for the use of teacher evaluation scores and feedback**

Teacher effectiveness scores (TES) and other feedback about individual teachers (including course and clerkship coordinators) must not be disclosed to those outside of the MD Program, nor to individuals within the MD Program, who do not have the authority to access that data. The only exceptions are when the disclosure is required by official MD Program business, by University policy, or by law.

Letters of reference or external award nominations written by MD Program leaders for teachers must not contain teacher effectiveness scores or student comments retrieved from student opinion surveys without the specific consent of the teacher. Individuals aware of inappropriate disclosure of teacher evaluation information outside of the MD Program should inform the Associate Dean, MD Program as soon as possible.

### **Procedure for Filtering Comments from Teaching Evaluation Score (TES) Reports**

#### **Proactive Review of Comments**

To support teachers and foster an environment of trust and psychological safety, the MD Program will proactively review comments before they are published in course/clerkship evaluation reports and TES Reports and remove those comments that do not constitute constructive feedback, based on the guidelines that are outlined below.

#### **Reactive Review of Comments**

Teachers in the MD Program (including instructors of individual sessions and course/clerkship coordinators) also have the right to request a review of the comments in their Teaching Evaluation Score (TES) reports. To do this, instructors may contact the Associate Dean, MD Program to discuss their concern. At the discretion of the Associate Dean, MD Program, comments may be filtered (hidden or removed) from the individual's TES report based on the guidelines below.

For both the proactive and reactive review of comments, the Associate Dean, MD Program and the Program Evaluation Unit will track the number of filtered comments and the reason for filtering. Summary reports will be presented twice annually to MDCPC for transparency. Specifics will not be presented to ensure anonymity.

### **Guidelines for Filtering Comments from a Teaching Evaluation Score (TES) Report**

As a rule, the TES Report should include comments that constitute constructive feedback, with recommendations to allow improvement in teaching and are specific to the teacher. These types of comments are kept in the TES Report, even if the teacher disagrees with the opinion expressed.

Comments that include the following may be reviewed and considered for removal from the TES Report:

- Comments that may constitute faculty mistreatment or threaten psychological safety.
- Comments relating to other instructors (e.g. “This was not my instructor, it was Dr. X.”)
- Comments about personal, non-modifiable characteristics (e.g. “This instructor is too cheerful.”)
- Comments about the session content/format for which the individual instructor is not directly responsible. (e.g. “This DL case is boring” or “TBL should never be run in the lecture hall.”)
- Comments that are related to the course or program as a whole, that are unrelated to the specific session being evaluated (e.g. “This whole block was disorganized” or “The MD program should only offer online sessions.”).

### **Approval History**

<b>APPROVER</b>	<b>STATUS</b>	<b>DATE</b>
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Darryl Rolfson, Associate Dean, MD Program	Minor editorial changes and updates to reflect the change from MedSIS to Cally for AY 2024-2025.	15 July 2024