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## **Does Peer and Self-Assessment Correlate to the use of the Conscientiousness Index Tool when Evaluating Professionalism in Medical Students?**

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### **Background**

Peer assessment is defined as assessment by ‘individuals who have attained to same general level of training or expertise, exercise no formal authority over each other, and share the same hierarchical status in an institution’<sup>1</sup>.

The ‘Conscientiousness Index’ (CI) has previously been used within UDQC, to provide an assessment of pre-clinical medical students’ professionalism. The Conscientiousness Index is an objective, scalar measure of student professionalism. Points are awarded to students continuously throughout the academic year for attendance, submission of assignments and any voluntary actions. Points can be deducted for unprofessional behaviour, at faculty discretion.

Our previous studies have shown a significant correlation between professionalism as measured by the CI and peer assessment. This correlation was only at the negative behaviour end of the spectrum. Additionally, students were concerned about not having adequate knowledge of their cohort and thus felt unable to accurately assessment.

The study aims to ascertain whether there is any correlation between students’ perceptions of peer professionalism and views of their own professionalism and, levels of professionalism as measured by faculty using the conscientiousness index. We wish to see whether greater familiarity with peers enhances the correlation between professionalism as measured by CI and peer assessment, and whether peer assessment could be utilised to measure professionalism during the pre-clinical years of the undergraduate medical curriculum.

### **Method**

Year 1 & 2 undergraduate medical students are invited to participate. Students will be given an anonymous histogram showing the distribution of the CI points for their cohort. They will anonymously identify the students within their PPD group that best fits their idea of most professional and least professional. Students are asked to identify these extremes as the CI only discriminates between these. Students will also identify

where on the CI distribution they view these students, as well as themselves and the rest of the students in their tutor group, to fall.

Literature suggests that peer assessment is improved by the number of assessors (all students in the group will assess each other) and the number of observations (students spend 6 hours a week within their tutor groups, on top of normal contact time)<sup>1,2</sup>.

Rankings will be produced for those nominated as most and least professional. The student peer rankings will be compared to their measured rankings from the Conscientiousness Index to ascertain any statistical correlation between student perceptions of professionalism and faculty assessed levels of professionalism.

[1] Arnold L, Shue CK, Kritt B, Ginsberg S, Stern DT. Medical Students' views on Peer Assessment of Professionalism. *Journal of General Internal Medicine*. 2005;**20**:819-824.

[2] Arnold L, Stern D. *Content and Context of Peer Assessment*. New York Oxford University Press; 2006.