

**POLICY TITLE**

Clinical Summative Assessment (CSA) Policy

**PURPOSE AND SCOPE**

This policy establishes criteria and processes for the Clinical Summative Assessment (CSA), which is a must-pass element of the Clinical phase of the curriculum for eligibility for graduation. The CSA is comprised of a competency-based Objective Structured Clinical Examination (OSCE) with standardized patient encounters and a written, 300-question multiple choice examination provided by the Physician Assistant Education Association (PAEA). Successful completion of all components reflects knowledge and competency of tasks reflective of a student prepared to practice as a physician assistant.

Included in this policy are thresholds for successful completion of the assessments, minimum passing scores, and remediation for students who do not meet program standards on any or all components of the CSA. This policy is provided to all students upon matriculation and again in the case of unsuccessfully meeting program standards as it pertains to the CSA.

**RESPONSIBLE PARTY AND REVIEW CYCLE**

This policy will be reviewed in even-numbered years and as needed by the Clinical Affairs Committee, elevating any policy amendments to the Program Director for approval.

**ARC-PA STANDARD ADDRESSED**

A2.05 Principal faculty and the program director must be responsible for, and actively participate in the processes of:

- d) evaluating student performance,
- f) assuring availability of remedial instruction

A3.02 The program must define, publish, make readily available and consistently apply its policies and practices to all students.

A3.15 The program must define, publish, consistently apply and make readily available to students upon admission

- a) any required academic standards,
- b) requirements and deadlines for progression in and completion of the program,
- c) policies and procedures for remediation and deceleration,
- d) policies and procedures for student withdrawal and dismissals

B4.01: The program must conduct frequent, objective and documented evaluations of student performance for both didactic and supervised clinical practice experience competencies. The evaluations must align with what is expected and taught, as defined by the program's instructional objectives and learning outcomes.

B4.01: The program must monitor and document the progress of each student in a timely manner and according to its defined and published policies and procedures, to identify and address any deficiency in meeting program competencies in:

d) medical knowledge.

### DEFINITION(S)

Clinical Summative Evaluation (CSA): An end-of-program summative evaluation that is comprised of two components:

1. Objective Structured Clinical Examination (OSCE), which is a collection of two standardized patient encounter scenarios.
2. Written Examination, which is the End-of-Curriculum (EOC) exam provided by the Physician Assistant Education Association.

### POLICY

In order to be eligible for graduation, as a reflection of competency in the required realms defined by the UNC PA Program ([program competencies](#)), UNC-Chapel Hill Physician Assistant students are required to successfully complete a two-part Clinical Summative Assessment (CSA), which includes a 300-question multiple choice written examination provided by PAEA as the EOC exam, and an Objective Structured Clinical Examination (OSCE). These examinations are linked to program-defined and profession-defined competencies and are intended to demonstrate the appropriate knowledge and tasks of a physician assistant student prepared to practice as a physician assistant.

### Clinical Summative Evaluation Written Examination – PAEA EOC Exam

For the CSA written examination, the UNC PA Program utilizes the [PAEA End-of-Curriculum \(EOC\) examination](#), which is an objective, standardized evaluation of a student's medical knowledge and contributes to the decision of student readiness for graduation. While not intended to be the sole determinant of readiness for graduation, it is a primary component of such.

Per PAEA policy, the EOC exam must be:

- Administered within the final four months of the program.
- Proctored live and in-person using PAEA's selected lockdown browser.

The UNC PA Program administers the EOC exam in the 11<sup>th</sup> month (November) of the Clinical year, which is no earlier than one week following completion of the students' last supervised clinical practice experience (SCPE). Attendance for the exam is *mandatory*. Students should arrive 15 minutes prior to the designated start time.

Make-up exams are offered only at the discretion of the Director of Clinical Education. Late arrival to the exam is not allowed. Extenuating circumstances that result in tardiness must be 1) relayed to the Director of Clinical Education (DCE) *as soon as possible* and 2) are accepted as excused at the discretion of the DCE. Unexcused tardiness in excess of 15 minutes will result in the student not being allowed to take the exam and result in a score of zero (0).

Additional policies regarding taking the PAEA EOC, per UNC MHSPAS policy and [PAEA Assessment exam policy](#), include but are not limited to:

1. Students are required to follow pre-exam procedures – any delay or inability to do so will compromise exam time.
2. Students are required to adhere to PAEA Assessment academic integrity instructions and the [UNC Honor code](#).
3. Students are only allowed three resources in the exam room, including: 1) a laptop computer, 2) a pen or pencil, and 3) one blank sheet of scratch paper.
  - a. No other items are allowed in the room.
4. Foam ear plugs are allowed to be worn, but students are not allowed to wear smart watches, virtual glasses, or other headphone or Bluetooth devices of any kind, including noise-cancelling devices.
5. Talking is not allowed during the exam.
6. No questions will be answered during the exam.
7. Any duplication, copying, or distribution of the exam is considered a violation of honor code and is expressly prohibited.
  - a. Students in violation of this policy for any reason will be referred to the Academic Excellence Committee (AEC) for consideration of disciplinary action, to include but not limited to: failure of the exam, failure of the course, academic or professionalism probation, and/ or program dismissal.

### **Clinical Summative Examination OSCE Exam**

The CSA OSCE consists of standardized patient encounter scenarios in which students are tasked with obtaining a patient history, performing an appropriate physical examination, formulating a differential diagnosis, and providing an assessment and plan of care. The student may be tasked with performing and/ or interpreting diagnostic tests, which may include use of point-of-care ultrasound and/ or high-fidelity clinical simulation models. The student must also communicate the information from the encounter through an oral patient presentation to a simulated preceptor and in written documentation of a patient note.

This assessment evaluates clinical students across all program competency domains, which include patient care, medical knowledge, interpersonal and communication skills, professionalism and cultural sensitivity and humility, systems-based practice, and self-assessment and ongoing professional development. The OSCE is a component of student assessment of readiness for graduation and is a must pass element of the CSA and the clinical year.

The CSA OSCE exam is administered in the 11<sup>th</sup> month (November) of the Clinical year, which is no earlier than one week following completion of the students' last supervised clinical practice experience (SCPE). Attendance for the exam is *mandatory*. Students should arrive 15 minutes prior to the designated start time.

Make-up exams are offered only at the discretion of the Director of Clinical Education. Late arrival to the OSCE encounters is not allowed. Extenuating circumstances that result in tardiness must be 1) relayed to the Director of Clinical Education (DCE) *as soon as possible* and 2) are accepted as excused at the discretion of the DCE. Unexcused tardiness in excess of 15 minutes will result in the student not being allowed to perform the encounter and result in a score of zero (0).

CSA OSCE encounters may utilize the following resources, including but not limited to: standardized patient actors, high-fidelity clinical simulation models, procedural skills task trainers, point-of-care ultrasound equipment (probes, machinery, models, etc.), clinical diagnostic devices, and clinical skills simulation space. Appropriate care and utilization of these resources is paramount to demonstration of professionalism and academic integrity. Disregard, disrespect, or avoidable damage to these resources during any CSA OSCE encounter will result in automatic referral of the student to the AEC for consideration of disciplinary action, to include but not limited to: failure of the exam, failure of the course, academic or professionalism probation, and/ or program dismissal.

## PROCEDURES

### Clinical Summative Evaluation Written Examination – PAEA EOC Exam

- 1) Clinical Summative Assessment (CSA) Written Examination – PAEA EOC Exam Procedure
  - a) The CSA written examination is the End-of-Curriculum (EOC) exam provided by PAEA.
  - b) The exam is a 300-question multiple choice exam devised by PAEA to reflect specific areas of content with published and universally accessible core tasks and objectives ([EOC information website](#)).

- i) The exam is divided into 5 60-question sections with a 10-minute break between sections.
- ii) 250 questions are scored.
- iii) The exam is 5 hours long and taken in 1 setting in 1 day.
  - (1) Students with documented accommodations through UNC Accessibility Resources and Services ([UNC ARS website](#)) are allowed their accommodations when taking the exam.

2) CSA Written Examination Grading & Passing Threshold

- a) The CSA written examination grade is embedded in the course Clinical Seminar III (PASC 820). This is detailed in the syllabus for that course.
- b) Students *must* pass the EOC exam to successfully pass the Clinical Seminar III course based on weighting.
- c) The EOC utilizes scale scores that have been mathematically transformed from a raw score, with all numbers set by PAEA ([EOC scoring reference](#)).
  - i) The scale for the EOC exam is 1200 to 1800.
  - ii) The CSA written examination/ PAEA EOC exam is **pass/ fail**.
  - iii) UNC MHSPAS defines a passing score as  $\geq 1400$ .
  - iv) PAEA defines performance as follows:

	<b>Limited Medical Knowledge 1200 – 1399</b>	<b>Satisfactory Medical Knowledge 1400 – 1554</b>	<b>Advanced Medical Knowledge 1555 – 1800</b>
<b>Definition</b>	The learner demonstrates partial understanding of general medical knowledge.	The learner demonstrates a sufficient understanding of general medical knowledge.	The learner demonstrates a comprehensive understanding of general medical knowledge.

3) CSA Written Examination Failure and Remediation

- a) The PAEA EOC exam is a summative assessment and an important component of assessing student readiness for graduation.
- b) UNC MHSPAS defines a failing grade as any score below **1400**.
- c) Failure of the EOC will result in a series of student remediation requirements and procedures, including:
  - i) Referral of the student to the AEC.
  - ii) Required review of the PAEA exam performance report to identify “keyword feedback items” within 72 hours of their result.

- (1) Attestation must be signed upon completion.
- iii) Required meeting with the DCE (virtually or in-person) within 5 business days to discuss exam performance.
- iv) Required retake of the examination within 60 days of the initial attempt
  - (1) Failure of the initial examination, due to timing within the curriculum, *will delay graduation*.
  - (2) A failed retake of the repeat exam will again result in referral to the AEC to discuss program dismissal.
  - (3) Per PAEA policy, only *two* attempts of the EOC are allowed by any one student.

### **Clinical Summative Examination OSCE Exam**

#### 1) CSA OSCE Procedure

- a. The CSA OSCE encounters include 2 standardized patient encounter scenarios.
- b. Each OSCE encounter has a designated set time for each component. All students must complete each component in the same amount of time. Students may not move on to the next component of the OSCE until advised by the UNC Simulation, Experiential Learning, and Training (SET) Center ([UNC SET Center website](#)).
- c. Components of the OSCE include:
  - i. Preparation for the patient encounter
  - ii. Performing the patient encounter
    - 1. If applicable, performing and/ or interpreting diagnostic tests
  - iii. Preparing for an oral presentation
  - iv. Delivering an oral presentation to a simulated preceptor
  - v. Writing a patient note
- d. All simulated patient encounters are recorded and watched live.
- e. Note writing is proctored.

#### 2) CSA OSCE Grading and Passing Threshold

- a. The grade for the CSA OSCE component is embedded in the course Clinical Seminar III (PASC 820). This is also detailed in the syllabus for that course.
- b. The CSA OSCE is a *must pass* element of the CSA and clinical year for progression to graduation.
- c. A rubric is utilized to assess and grade each component of the CSA OSCE standardized patient encounter scenarios.
  - i. Rubrics are written, reviewed, and utilized by UNC PA Program faculty in alignment with UNC MHSPAS program competencies and clinical year learning outcomes.
- d. Students must achieve a score of  $\geq 70\%$  or higher on each OSCE

- standardized patient encounter scenario.
- e. The student's OSCE grade will be calculated using the score from each component of the encounter, with each item contributing as below:
    - i. Standardized patient encounter (including performing or interpreting diagnostic tests): 50%
    - ii. Oral presentation: 25%
    - iii. Written note: 25%

### 3) CSA OSCE Examination Failure and Remediation

- a. The CSA OSCE scenarios are summative assessments and provide an important component of assessing student readiness for graduation.
- b. UNC MHSPAS defines a failing grade as any score **below 70%** using the associated OSCE rubric.
- c. Failure of an OSCE scenario will result in a series of student remediation requirements and procedures, including:
  - i. Required meeting with the DCE to discuss area(s) of deficiency, considering performance on each OSCE component and rubric items. Formative feedback will be provided.
  - ii. If a student scores below 70% on both OSCE scenarios, they will require remediation of them both, equally 2 further OSCE events.
  - iii. Required completion of an additional OSCE standardized patient encounter, including all components as described above.
    1. The OSCE encounter will be comprehensive and summative of the competencies as similar to the original OSCE scenario.
  - iv. Successful remediation of the additional OSCE scenario(s) should occur within 1 week of the initial CSA OSCE.
    1. All attempts will be made to allow the student to graduate on time with their graduating class.
    2. Extenuating circumstances may delay remediation and may delay a student's graduation.
  - v. The faculty grader for the remediation OSCE(s) *must be distinct* from the grader(s) for the initial OSCE scenarios.
- d. If the student does not satisfactorily remediate to passing for either or both OSCE scenarios, the student will be referred to the AEC for discussion regarding the student's program standing.
- e. An OSCE encounter cannot be remediated more than twice.
- f. Repeated remediation *will delay graduation*.



## **PUBLISHED**

- UNC PA Program Policies and Procedures [web page](#)
- UNC PA Program Student Handbook

## **HISTORY OF APPROVAL AND UPDATES**

Initially approved by Program Director, November 2021. Updated by Policy Review Committee March 21, 2024. Approved by Program Director June 2024.