**Proposal Draft**

**Assessment System for the Integrated Medical Program in Egypt**

**(ASIMPE)**

**Why do the partner Egyptian universities need this project?**

Except for Suez Canal University the Medical schools in Egypt adopted the traditional 6-years discipline based program that is rewarded by the bachelor degree in medicine and surgery (MBBCH) and followed by one internship year before getting the license to practice medicine.

However, in October 2017 the prime minister has approved a new system for undergraduate medical education in Egypt. The new system implies a 5-years integrated program that is rewarded by the Bachelor degree and two foundation years. Earlier in April 2017, the National Authority for Quality Assurance and Accreditation of Education (NAQAAE) has published the second edition of the national academic reference standards (NARS-2017) for medicine. According to NARS-2017 medical education in Egypt is shifting from the outcome based education to the competency based education and the integration of the educational components of the program became mandatory. NARS-2017 requires that all faculties of medicine apply some degree of integration beginning from step 5 to step 11 on the integration ladder (Harden, 2000).

The Universities top management in addition to faculty and students are enthusiastic to these changes. They started with teams of faculty members who have postgraduate degrees in medical education in designing the new program that complies to the updated standards.

Implementing a new integrated program that adopts competency-based education is a challenge. Specially, in the context of a large students’ numbers and insufficient resources.

An effective educational program that addresses modern educational strategies should keep constructive alignment between learning outcomes, teaching modalities and available learning resources on one side and the assessment methods on the other side.

Although we have a large students’ numbers (about 1200 per year), faculty members' ratio to students’ number is accepted (1:10). However; training courses should be provided to improve the faculty members' teaching and assessment skills in order to conduct new integrated examinations that are aligned with the new integrated program.

For applying modern learning strategies that fit to the integrated program (case based learning, problem based learning etc.); teaching and learning facilities as well as assessment methods and tools should be upgraded.

Although some departments have clinical skill labs a central well prepared one should be established. Additionally; introducing and updating program components such as, professionalism, ethics, communication skills and informatics with the available resources will be a challenge.

Contrary to traditional assessment discipline-based methods; designing and implementing a variety of valid and reliable integrated assessments (written exam, objective structured clinical or practical exams-OSCE/PE) should be developed. Assessments should confront students with patients’ problems similar to what they are going to face in the real practice. Updating assessment methods and tools should goes parallel to the establishment of automated marking system.

Accordingly, several challenges are facing the implementation of the new integrated educational program and they can be summarized as follows:

1. The availability of well-trained faculty on integrated assessment techniques
2. The development of a question bank
3. Updating the clinical skill lab to cope with OSCE/PE
4. Overcoming human-errors factor, saving time and faculty efforts in the presence of students' large numbers.

**Why Egyptian medical schools need the partnership with British medical schools?**

Since the very beginning of the medical education in Egypt, the medical schools have followed the British medical education system. That is the study is discipline based, and teacher centred for 6 years followed by one internship year. About 5 years ago many medical schools in the United Kingdom (UK) started to change the duration of study to 5 years that are followed by 2 foundation years. Similarly, Egypt has changed the distribution of the undergraduate medical program years. Earlier in UK the general medical council issued 'Tomorrow's Doctor" requirements for the medical education program. The requirements included the integrated student-centred strategy. Similarly, the Egyptian National Academic Reference Standards for medicine were published NAQAAE and required integrated student-centred undergraduate medical education as well as modern assessment methods.

As the British medical schools have more experience in the medical programs reform and changes into integrated learning and assessment, the Egyptian medical schools would like to build a collaborative partnership with them.

Table 1 shows the primary draft of Egyptian partners’ objectives and activities.

Table 1: Egyptian partners’ objectives and activities.

| **Wider Objective** | **Specific Project Objective/s** | **Activities (Work packages)** |
| --- | --- | --- |
| The Development of comprehensive assessment process for the new undergraduate integrated medical program in Egypt | 1. to establish a faculty training of trainers (TOT) program on the assessment methods of the new MBBCH program in the three Egyptian partners’ medical schools. | 1. Training of the taskforce trainers on assessment methods in a European partner university.
2. Designing and implementation of Faculty development program on assessment methods for the new MBBCH program
3. Assessment expert visit from the European partner to review the training program
 |
| 2. to develop a questions bank for the new MBBCH program in the three Egyptian partners’ medical schools. | 1. Purchasing the required equipment
2. Assessment expert visit from the European partner for the Training of the Faculty taskforce trainers on the formulation of the written examination questions
3. Formulation of the written questions by the assessment expert from the European partner for the for one module in the first phase and one module in the second phase of the new MBBCH program.
4. Establishment of the Assessment committee
5. formulation of the written examinations questions for the rest of the modules by the faculty assessment committees
6. Validation of the formulated written questions
 |
| 3. to develop integrated objective structured clinical/practical examinations (OSCE/PE) tools for the new MBBCH program in the three Egyptian partners’ medical schools. | 1. Training of the taskforce trainers on the construction of the OSCE/PE checklists in a European partner university.
2. Training of the taskforce trainers on the implementation of the OSCE/PE in a European partner university.
3. Training of the faculty members by taskforce trainers on the construction of the OSCE/PE checklists
4. Training of the faculty members by taskforce trainers on the implementation of the OSCE/PEs.
5. Construction of the OSCE/PE checklists
6. Validation of the formulated OSCE/PE checklists
 |