Responses to Questionnaire Regarding Grading System Change and Relationship to Curricular Change Sent to OSR Representatives on 3-17-06

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Introduction

In March 2006 an e-mail questionnaire was sent to the OSR mailing list with the intention of examining the correlation between medical school curricular change and changes in the grading systems. 42 schools responded. Included in this document are a copy of the original survey, a brief analysis and summary of the responses, and the verbatim (de-identified) responses we received.

Questionnaire and Explanatory Letter

OSR Reps,

Members of our Student Curriculum Committee are researching the pros and cons of a Pass/Fail grading system during the pre-clinical years. A key component of this research is to understand how various grading systems may or may not affect performance on the USMLE Step 1 exam. Attached is a very short survey; it has 5 questions and should only take about 15 minutes of your time. We would really appreciate your feedback. You will find the survey at:

http://www2.umdnj.edu/~galtja/2006 survey pass fail.htm

Thank you for your time and help.

Your school's name:

1. What is your school's current grading system during the preclinical years?

- Pass/Fail
- -Pass/Fail/Honors
- -Tiered system Honors, High Pass, Pass, Low Pass, etc

2. How long has your school been using this system?

- -Always/ a long time
- -Began using this system within the past 5 years
- -Just recently switched to it

- 3. Has your school's average score on the USMLE Step 1 changed in the past 5 years?
- -Average score has remained constant
- -Average score has dropped
- -Average score has improved
- 4. If your school has made a switch within the past 5 years, what other changes in the curriculum were made around the same time/in concert with the grade change? (Examples include more/less lecture hours, earlier clinical exposure, focus on detail vs big-picture, subject vs. systems based, etc. Such changes could have occurred concurrently, before, after, or could be ongoing or planned for the future.)
- 5. If your school has changed the grading system within the past 5 years, what was the reason for the change and did the change adequately address those issues?

Summary of Results

Breakout By:	Tim	Timecourse of Change			Change in Step 1 Performance		
	No Recent	Changed in	Recent				
Grading System	Change	Last 5 Years	Change	Constant	Decrease	Increase	% of Total
Pass/Fail	100.0%	0.0%	0.0%	88.9%	0.0%	11.1%	21.4%
Pass/Fail/Honors	63.6	18.2	18.2	54.5	0.0	45.5	26.2
Tiered	90.9	4.5	4.5	63.6	0.0	36.4	52.4

Breakout By:	Grading System Pass/Fail/			Change in Step 1 Performance			
				•			
Timecourse of Change	Pass/Fail	Honors	Tiered	Constant	Decrease	Increase	% of Total
No Recent Change	25.0%	19.4%	55.6%	69.4%	0.0%	30.6%	85.7%
Changed in Last 5 Years	0.0	66.7	33.3	33.3	0.0	66.7	7.1
Recent Change	0.0	66.7	33.3	66.7	0.0	33.3	7.1

	Grading System Pass/Fail/			Timecourse of Change			
Breakout By:				No Recent	Changed in	Recent	
Change in Step 1 Performance	Pass/Fail	Honors	Tiered	Change	Last 5 Years	Change	% of Total
Constant	28.6%	21.4%	50.0%	89.3%	3.6%	7.1%	66.7%
Decrease	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Increase	7.1	35.7	57.1	78.6	14.3	7.1	33.3

Note: 42 Schools responded. Data is all self-reported

General Notes:

The general trend in the reported curricular changes is movement to increase clinical and small-group learning experiences. The curricular change is accompanied in many cases by movement away from tiered systems of grading and toward P/F or P/F/H systems. Many schools making this change listed the goals of reducing student stress levels and promoting collaboration as their motivation. The primary problem mentioned in conjunction with such a change is its potential to complicate the school's ability to distinguish levels of student performance, and frustrate the effort of students who are trying to stand out. It is important to note that changes in grading system and changes in curriculum occur both together and in isolation from one and other. Changes in one and not the other have been reported to cause some degree of strife, however. It is also important to note that other changes in grading systems are possible and not addressed here, such as changes in weighting of exams vs. small group performance.

Curricular Changes:

Curricular changes reported by schools included general re-organization of basic science curriculum structure, The implementation of block testing (examination of all subjects being taught at a given time meant to more closely resemble USMLE testing), increasing the amount of early clinical exposure, increasing the relative amount of small group learning, and movement to a systems-based curriculum.

Grading System Changes:

The schools that did report changes in grading system generally moved in the direction of P/F or P/F/H, sighting the theory that removing the pressures of numerical grading promotes collegiality, teamwork, and leeway to focus on transitioning to a physician. Such changes, however, frustrated the efforts of schools, students themselves, and potentially residency programs to distinguish between levels of student performance. Schools are beginning to generate solutions to these new problems by using new means of classifying students. For example, one school uses a grading system in which students are graded on a P/F/H scale, but data is kept regarding their percentile rank within the class for potential use in dean's letters.

Responses

tiered system, just recently switched, improved

pass/fail/honors, just recently switched, constant, none,

For some people it relieved stress but for others it increased stress as they now HAD to get honors in order to differentiate themselves from the people who were content to just pass.

tiered system, within the past 5 years, constant.

No other changes in curriculum along with grading change.

Major reason for the change was for admissions reasons - to match what other similar schools were doing.

tiered system, always/a long time, improved, our preclinical years are tier system- a, b, c, etc. And

our preclinical years are tier system- a, b, c, etc. And our clinical years are honor/pass/fail system,

tiered system, always/a long time, constant,

pass/fail/honors, always/a long time, constant,

NOTE: This does not address this question but expounds on our grading scale. Although our courses are technically P/F, you are ranked within the class (a percentile rank, not a number rank). Thus, students can use this number for their MSPE or Dean's Letter. So although students are technically graded on P/F/Honors (usually the top 5-16%), students usually determine how well they did in a class based upon their class percentile. This system gives faculty and residency directors more specific info on how students perform in comparison to their peers than a simple P/F system.

pass/fail/honors, within the past 5 years, improved, Re-organization of basic science curriculum structure., Previous dean who opposed pass/fail system stepped down.

tiered system, always/a long time, improved,

tiered system, always/a long time, constant,

tiered system, always/a long time, constant,

tiered system, always/a long time, constant, We use the A/B/C/D/F system for pre-clinical years.,

pass/fail, always/a long time, improved,,

pass/fail, always/a long time, constant,,

pass/fail/honors, always/a long time, constant,

Our school changed the curriculum two years ago, so this will be the first class to take the USMLE step 1 under the new curriculum. We will know the results to question 3 in June.,

pass/fail/honors, always/a long time, improved,,

tiered system, always/a long time, constant,

pass/fail/honors, always/a long time, improved,, pass/fail, always/a long time, constant,

tiered system, always/a long time, improved,

pass/fail, always/a long time, constant,,

pass/fail, always/a long time, constant, No switch made,

tiered system, always/a long time, improved,

we have 4 category grading. i believe it has been in place for more than 5 years. there have been curriculum changes in the last five years to reflect areas of weakness that students had previously had on board exams (i.e. more pharm classes, a separate micro block instead of integrated microbiology into the current systems based approach of the classes)

tiered system, always/a long time, constant,

N/A- FYI our school still uses an actual grading system (A,B,C or F). All classes must be passed with a C or better to graduate. If a student fails two classes, he or she must repeat the year. If three classes are failed, the student is out of medical school. However, our senior year is graded on a pass/fail system.,

N/A

pass/fail, always/a long time, constant,

tiered system, always/a long time, improved,

An integrated curriculum was the major adjustment five years ago. Along with the addition of a transition course for 2 months prior to boards focusing on the adaptation of basic science material to clinical medicine in each specialty.,

tiered system, always/a long time, constant,

pass/fail, always/a long time, constant.

tiered system, always/a long time, constant,

pass/fail/honors, just recently switched, constant,

Earlier clinical exposure, systems-based teaching, more small group sessions., Following the general trend of medical education. Reduce pressure on 1st year students to help focus on learning.

pass/fail, always/a long time, constant,

tiered system, always/a long time, constant,

tiered system, always/a long time, improved,

pass/fail/honors, within the past 5 years, improved.

Block testing is the major change to which improved USMLE scores have been largely attributed. Block testing for those who haven't heard of it (or referred to it as that) is the combined examination of all subjects being taught at a given time, with usually 6 equally sized sections of questions mixed from all subjects. The idea is to provide a testing environment that more closely resembles USMLE testing.,

The change was made based upon the popular philosophical argument that by removing numerical grading, students would somehow be less competitive and grade-obsessed, thus fostering increased cooperation between students in a given class.

tiered system, always/a long time, improved, pass/fail, always/a long time, constant,

pass/fail/honors, always/a long time, constant,

tiered system, always/a long time, constant,

We have had H/HP/P for a while, however, we just changed year 2 to an 8-noon schedule and it will be interesting to see how that works. At least 1 course wants P/F to decrease the anxiety/workload but the school policy is not going to change.,

tiered system, always/a long time, constant,,

tiered system, always/a long time, constant,

Grading system remained the same. Recently, for class of 2008 and beyond a new curriculum was introduced that reduced lecture hours, increased small groups, and integrated courses, i.e. microbio and immunology or pharm and path or histology and physiology. It is not organ based through out the years, but is so within a subject such as pathology.,

Did not change grading system. grades are more reflective of small groups though.

tiered system, always/a long time, constant,

pass/fail/honors, always/a long time, constant,

pass/fail/honors, always/a long time, improved,