

EvaS. A Digital Evaluation System with Focus on Competences

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Abstract

For students' internship is an intensive and systematic activity in becoming a competent professional. Different clinical settings and, most of the time, several assessors within those settings are involved in evaluating the students. A transparent and objective assessment of the performances of all students is of upmost importance for the students as well as for the assessors. This is best done by means of predetermined assessment criteria and behavioural indicators that are interpreted and used in a similar way by several assessors and in different settings for each of the students. EvaS is developed at the Department of Speech Therapy and Audiology of the University College Arteveldehogeschool Ghent, Belgium. It is an evaluation tool in a formal and permanent 360 °assessment context in which several professional roles and competences are clearly identified. The instrument is used in the same manner for all periods of internship and by all the students and student's assessors, whatever the setting might be. The tool visualizes the student's competences and is therefore also a tracking system for him, for the teachers and for the mentors. The evaluation instrument allows, at any time by any assessor, to be completed electronically. The data can be consulted. EvaS is consistent with the ECTS rating system and therefore suitable for internships abroad. The instrument is very easy to use, flexible and transparent. It allows statistical analysis for improvement, teaching and research purposes.

1. Introduction

As a result of the Bologna declaration (1999) and the Belgium Reform Act (2003) the SLT programme at the University College Arteveldehogeschool was changed profoundly into an intensive 6 semester and 180 ECTS Bachelor programme with focus on competences and is now set up in different thematic modules (Fig.1.). If appropriate students may opt for a programme tailored to their specific needs. The University College Arteveldehogeschool is also in the process of developing and implementing a 5 year programme for people combining their profession with study.

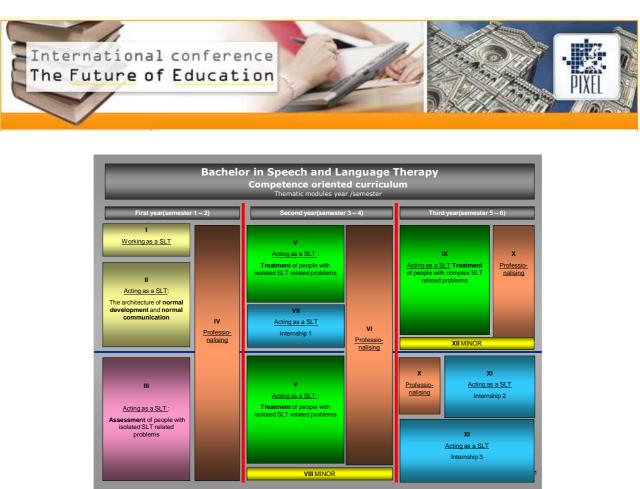


Fig.1. The SLT programme at the University College Arteveldehogeschool

With a focus on different professional roles, students have to develop 19 specific competences relating to prevention, diagnostics, therapy, a.o.. Each competence is explained and the body of knowledge, the skills and the attitudes relating to a competence are described. Educational tools, assessment procedures and criteria for evaluation are defined.

The internship is an essential part of the curriculum. It represents 28 ECTS. For students it is an intensive and systematic activity in becoming a competent professional.

2. A digital evaluation system EvaS

2.1 Why

An assessment of the performances of all students during an internship has always been of upmost importance for the students as well as for the assessors. Because of the profound changes in de SLT programme in combination with critical reflection on the evaluation system we used at that time, we decided to develop a totally new and competence oriented evaluation system. One of the major reasons for rethinking the assessment, besides the fact that it was not competence focused enough, was the lack of transparency and objectivity of the assessment tool we had at that time. Especially because different clinical settings and several assessors within those settings are involved in the evaluation of our students on internship. Last but not least self evaluation was not implemented in the assessment procedure.

2.2 General guidelines

Prior to the development of a new evaluation system we did research on competence oriented assessments for internship. On the one hand, the major goal was to prevent bottlenecks and pitfalls in the process of developing our one evaluation system. On the other hand, it was an interesting source of inspiration. The evaluation system we developed is based on several general guidelines, carefully identified in advance. Those guidelines directed us in the process.

Guideline 1: don't assess all the specific competences and professional roles of an SLT. Select the ones that are well known by all mentors and which can be assessed whatever the setting might be. The selected professional roles and competences have to be clearly identified.

Guideline 2: internationalisation is important. Make sure that the system is suitable for internships abroad. It has to be compatible with the ECTS rating system. Guideline 3: an objective assessment of the performances of all students is of upmost importance for the students as well as for the assessors.

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Use predetermined assessment criteria and behavioural indicators that are interpreted and used in a similar way for each of the students by several assessors and in different settings. Guideline 4: it has to be a formative as well as a summative assessment tool. Used as a summative assessment, it has to be a formal and permanent 360 ° assessment tool, used to measure the student's growth in order to determine whether long term learning goals have been met. Guideline 5: the assessment has to be an expert assessment as well as a self evaluation tool. The instrument must be used in the same manner for all periods of the internship, by each student and the student's assessors, whatever the setting. A hard copy is necessary as a backup. Guideline 6: the evaluation instrument has to be completed electronically at any time by any assessor, the student included. Guideline 7: be sure that the system visualises the evolution in the competence profile of the student. It has the function of a tracking system. Guideline 8: the instrument has to be easy and efficient to use. Guideline 9: the tool has to be available on the digital learning platform for mentors, teachers as well as students. Guideline 10: the system must allow statistical analysis for improvement, teaching and research purposes.

2.3 Professional roles and competences

We selected three out of the seven professional roles of an SLT: therapist, manager and professional. Those professional roles are most common and well known by the assessors in the field, regardless the setting. Each professional role is linked to different specific competences. The role of therapist is linked to 6 competences grouped in two clusters; the cluster diagnostician and the cluster therapist. The role of manager is linked to the competence administration and the role of professional with two competences; sensitivity and learning ability. Each of the competences is represented by a keyword in the second column of the score sheet (Fig.2.).

		DO	0	v	G	26	opns	score
THERAPEUT duster onderzoek	plannen	24	×	34	20	34	4	
	uitvoeren	26	26	×	20	26	4	
	scoren en interpreteren	36	34	×	×	×	44	
	rapporteren	- X.	.26	30	×	×	4	
THERAPEUT cluster therapie	plannen	×	*	34	×	34	4	
	uityperen	26	24	ж	34	×	4	
	rapporteren	- 26	36	. 36	×	- 36	4	
MANAGER	administratie	*	24	26	×	20	4	
			0	v	OP		opms	
BERDEPSBEDEFENAAR	sensitiviteit		24	30	24		4	
	lerend vertrogen		35	.36	- 26		4	
			51	¥6	60		opns	
	stem		24	. 34.	- 26		4	
	articulatie		26	- 36	20		4	

Fig.2. The EvaS score sheet

By scrolling the cursor over one of the keywords, a box with a description of the competence and a list with indicators appear. The indicators are described behaviours that the student must meet at the end of the internship because they are essential for that competence. In that way the assessors as well as the student know in advance what behaviours have to be performed and will be evaluated. The descriptions prevent misinterpretation and contribute to objectivity of the assessment.

3. Marks

The performances of the student are evaluated by professionals. A 360° assessment is known as a type of assessment that promotes objectivity because more than one assessor is involved in the evaluation. The student is evaluated by at least two assessors; his mentor who is an experienced SLT and a teacher of the University College. Both assessors and the student who evaluates himself/herself, have their one digital score sheet. Most of the time other SLTs and sometimes other professionals are involved in the assessment.

The student's performances in the roles of a therapist and a manager are situated in five zones: clearly insufficient (DO), insufficient (O), sufficient (V), good (G) and very good (ZG) (Fig.2.). In order to evaluate the student's performance as objective as possible, each of the zones have transparent



and clearly described evaluation criteria. In each zone we use the same three criteria. They relate to the correctness, the degree of autonomy and the completeness of the performance. By scrolling the cursor over a cross, a box with a description of the criteria appears. Clicking a cross in a zone means giving a mark for the corresponding competence. The colour of the mark changes into orange. The coloured cross indicates the mark of the assessor. Note that also the student evaluates himself/herself. The student's performances in the role of a professional is situated in three zones: insufficient (O), sufficient (V), optimal(OP) (Fig.2.). Each of the zones have also transparent and clearly described evaluation criteria. The two remaining keywords in the second column of the score sheet represent voice quality and articulation. The assessors situate the student in one of the three zones: disturbing (ST), calls attention (VG) and optimal (OP). The marks on voice quality and articulation training.

The second last column (OPM) enables the assessor to motivate the mark given. The assessor as well as the student have to write comments in a text box by clicking on the symbol (Fig.2.).

Once the marking is done, a web diagram with an overview of one's own evaluation appears. When the final score is determined by the teacher (heading 4), a web diagram with an overview of the marks of the 3 assessors appears (Fig.3.).

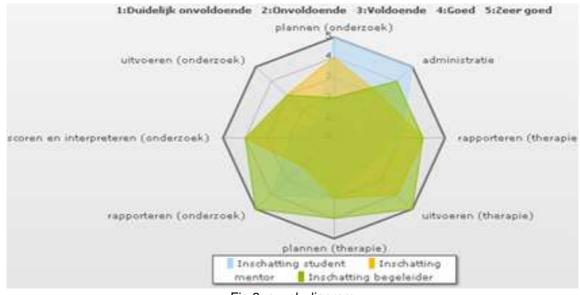


Fig.3. a web diagram

Guidelines for marking are carefully identified in advance. Those guidelines directed us in the process of developing decision trees. A decision tree enables us to convert marks into a score. The maximum score is 20/20. Guideline 1: to pass, the student must have at least the mark 'sufficient' in the professional role as therapist. Guideline 2: slight compensation is only possible within the cluster diagnostician and the cluster therapist. Guideline 3: no compensation between clusters.

4. Cluster marks, sub scores and final score

After the marks have been given, the system determines cluster marks, a minimum scores, a plus score, an extra score and a final score by means of several decision trees. A decision tree is a tool used to describe processes/procedures in a systematic manner. It is a graphical view of successive decision steps in a process (Fig.3.).



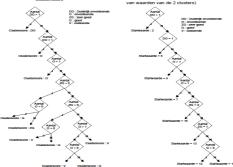


Fig.3. decision tree.

Guidelines for scores are carefully identified in advance. Guideline 1: only the marks on the competences in the role of a therapist (diagnostician and therapist) are determining for the core score. Guideline 2: in case of a core score \ge 10/20, the student can distinguish himself from other students based on bonus marks.

The cluster marks on diagnostician and therapist are determined by means of one decision tree. Another one determines the minimum score (../20). In case of a minimum score \geq 10/20, two additional decision trees will compute bonuses. One that determines a plus score (max score is 2). The plus score is determined by the ratio between the scores on the seven competences of the therapist. The other one determines an extra score (max score is 2). The extra score is determined by the marks on administration, sensitivity and learning ability. Finally the system determines a final score which is the sum of the core score + the plus score + the extra score. A final score of 20/20 is possible.

5. The evaluation procedure

As stated above the student is evaluated by at least two assessors. Both assessors and the student who evaluates himself/herself, have their one digital score sheet. They give their marks independently prior to the evaluation. The mentor and the teacher evaluate the student at least 2 times. Once formative sometime in the middle of the period of internship and summative at the end of that period. The final marks are given in consensus by the teacher, after consultation with all the assessors and the student at the institute or the private practice of the mentor. The fact that the marks have to be given in advance gives the teacher the opportunity to prepare himself/herself for the evaluation. The mentor's and the student's marks are advisory for the teacher. The responsibility for the final marks and score lies with the teacher and the members of the office 'clinical placement'.