

## eOSCE delivery and remote quality assurance (eQA) during a pandemic, and its future implications

Shannon Saad<sup>1</sup>, Dr C Richmond<sup>1</sup>, Dr K Jones<sup>2</sup>, Dr H Rienits<sup>3</sup>, Dr M Schlipalius<sup>4</sup>, A/Prof B Malau-Aduli<sup>2</sup>

<sup>1</sup>University Of Notre Dame, Australia, Sydney, Australia, <sup>2</sup>James Cook University, Douglas, Australia, <sup>3</sup>University of Wollongong, Wollongong, Australia, <sup>4</sup>Monash University, Clayton, Australia

Background: Pandemic disruption to medical education has driven innovation in the delivery of assessment tasks. As a standardised method of assessing clinical competence, Objective Structured Clinical Exams (OSCEs) have traditionally relied on the congregation of large numbers of people - which would contravene COVID-19 social distancing requirements. In response to this, modified OSCE formats were rapidly developed to incorporate web-conferencing services, with a range of underlying architectures (eOSCEs). Quality assurance of these new formats is crucial to ensure that they retain the ability to derive robust information for fair and accurate measurement of student clinical performances.

The Australian Collaboration for Clinical Assessment in Medicine (ACCLAiM) is a benchmarking consortium involving 14 medical schools across Australia and New Zealand. A major aim of ACCLAiM is to provide quality assurance (QA) of exit-level OSCEs. During 2020, ACCLAiM QA visits continued in both face-to-face and online (eQA) formats. To explore participating school stakeholders' experiences of eQA and the novel eOSCE delivery formats, a qualitative study was conducted by Quality Assurance Research Group (QARG), a subspecialised research team within ACCLAiM.

### Purpose/objectives:

This PeArLs will facilitate an interactive discussion of your views and experiences regarding the feasibility of eOSCE (or similar) formats and how to assure quality in their delivery. The presenters will share their study findings following these discussions.

### Issues/questions for exploration or ideas for discussion:

1. How do online formats differ from the traditional OSCE? What are the advantages and disadvantages of these differences?
2. How can assessment teams assure the quality of their online clinical assessments?
3. What are the opportunities and disadvantages of eQA and how can it contribute to the quality of online clinical assessments?
4. What is the future of the traditional OSCE, in light of the lessons learned from the adaptation of assessments due to the pandemic?