Complete Policy Title | Prevention of Undue Bias in Student Assessment
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Approved by | MD Executive Committee
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Supersedes/Amends Policy | Policy to prevent undue bias in the assessment of medical students who have a history of a therapeutic relationship with faculty

Policy to prevent undue bias in the assessment of medical students who have a known or potential conflict of interest with faculty

1. **Background and Principles:**

Students in the MD Program will occasionally have relationships with faculty members that precede their admission to the MD Program or develop while in MD training. These relationships may place faculty in a conflict of interest when required to assess medical student performance. Relationships may be of a nature that includes personal, familial, occupational, financial, therapeutic, etc. and are further defined below. Some of these relationships may include arrangements normally protected by conditions of confidence. Students and teachers have the right to participate in a supervisory relationship that is limited in bias based on a history of another non-supervisory relationship. As a general principle, this policy attempts to minimize the potential of this source of bias while balancing the right to confidentiality.

2. **Definitions:**

In this document, the following definitions apply:

2.1. The following definitions generally characterize relationships that may form the basis of a conflict of interest for teachers or faculty leaders that may result in inappropriate bias in medical student assessment. In all cases, it is better to be conservative in the application of these definitions with respect to preventing the risk of conflict prior to the establishment of the teaching role. For this reason, the definitions below should be interpreted in their broadest sense and should not be considered to be fully inclusive of all potential conflicts.

2.1.1. **Power and bidirectionality.** The existence of a relationship which poses a potential conflict creates unintended bias, in part, due to the power differentials that exist within such a relationship. It is explicitly noted that this power differential is not unidirectional – e.g. faculty over student – but rather,
multiple examples exist where the differential may be reversed (e.g. medical student who previously provided sensitive health care to a faculty member), and can equally impact the ability of the student to receive an appropriately unbiased assessment. Therefore, in this policy, the directionality of the conflict is considered to be irrelevant.

2.1.2. Personal Relationship. Includes long-standing or profound friendship, including between relatives of the faculty and student involved; sexual relationship of any nature, including virtual and electronic.

2.1.3. Familial Relationship. Any relationship considered to be familial.

2.1.4. Occupational Relationship. Any relationship of employment where either the faculty or student had a direct or indirect supervisory or reporting role with respect to the other.

2.1.5. Financial Relationship. Any financial relationship, including, financial arrangements between the two parties or their relatives or associates whereby money or other instruments of monetary value will be shared or exchanged; arrangements where at least one party benefits financially from an arrangement with the other party; any other financial dependence or benefit between the two parties or their relatives or associates.

2.1.6. Therapeutic Relationship. Any care, support, or otherwise that included the provision or delivery of medical care or psychiatric, psychological or other form of therapeutic counseling, or other form of healthcare, whether in the context of Western biomedicine or complementary or alternative medicine.

2.2. “Teacher” is any individual in the MD Program who has a role as a tutor, clinical skills preceptor, longitudinal facilitator, clerkship or elective supervisor, or any other role where the individual is sanctioned by the MD Program to formally assess a medical student’s performance.

2.3. “Faculty leader” is any individual in a leadership role who does not have a direct role in assessing medical students but does have a formal role in the assessment process either by signing off on summative assessments or through her/his role in the appeals process. Examples of faculty leaders include MF Directors, Professional Competencies Co-Chairs, Clerkship Directors, Evaluation Chair, Regional Education Leaders, Clerkship & Electives Chair, Regional Assistant Dean, Assistant Dean, or the members of the Academic Progress Committee).

2.4. “Formal assessment” is any assessment that contributes to a summative assessment that appears on the student's transcript or that may result in a meeting of the Academic Progress Committee or that may alter the student's normal or regular participation in the MD Program.
3. Process to prevent undue bias in the teacher-student relationship where there is a potential for a conflict of interest:

3.1. Identifying a Potential for Bias

For many activities in the MD Program, teachers will be responsible for a small group of students. Teachers will be given the opportunity to identify a potential for bias within their group and may ask to be reassigned. This process will occur before group assignments are posted or shared with students.

Either medical students or teachers may identify a potential bias based on a relationship, past or present, in which a conflict of interest may exist, as defined above. The potential for bias under these circumstances will be taken at face value once identified by either party.

As soon as the potential for bias is identified, the medical student or teacher will bring the issue to the attention of the MD Program by informing the Program Manager or Program Administrator of the student’s home base campus or campus where the learning/assessment activity is to take place. The medical student or teacher should inform the Program Manager/Administrator of the potential for bias under this policy. The nature of the relationship does not need to be disclosed; however, in the course of making appropriate arrangements, it may be necessary to identify both the student and the teacher.

The Program Manager/Administrator will work with local faculty leaders and administrators to re-assign the teacher or student appropriately. The MD Program will make a reasonable effort to make assignments that minimize disruption to students; however, there may be circumstances where some disruption is unavoidable.

3.2. Anticipating a Teacher-Student Relationship with a Potential for Bias

Medical students and teachers will often be aware of a potential for bias in future curriculum components of the Program (e.g. a medical student in the pre-clerkship who once received care by a Psychiatrist who is a clinical preceptor in the MD Program). Medical students and teachers who anticipate the potential for a future teacher-student relationship with a potential for bias can identify this potential through the same process described above. The MD Program will make assignments to avoid a teacher-student relationship with a potential for bias. This may require working with faculty leaders and administrators in specific components of the program and disclosure of the need for alternate arrangements will be limited to the smallest number of people that still enable arrangements to proceed.
3.3. Potential for Bias in MD Program Faculty Leaders

Medical students may also have a history of a relationship which may pose a potential conflict of interest with faculty leaders in the MD Program who have a formal role in the assessment of medical students (e.g. MF Director signs off on final MF assessment; appeal of final MF assessment begins with MF Director).

Medical students or faculty leaders should follow the same process outlined above under "Identifying a Potential for Bias".

As soon as the potential for bias is identified, the medical student or teacher will bring the issue to the attention of the MD Program by informing the Program Manager or Program Administrator of the student’s home base campus or the campus where the assessment activity is occurring. The medical student or teacher should inform the Program Manager/Administrator of the potential for bias under this policy. The nature of the relationship does not need to be disclosed; however, in the course of making appropriate arrangements, it may be necessary to identify both the student and the teacher.

The Program Manager/Administrator will identify the potential for bias to the appropriate faculty leader. The faculty leader will find an appropriate substitute and recuse him/herself from any formal role in the student’s assessment. An appropriate substitute is a faculty leader with an equal or higher level of responsibility with respect to the assessment of medical students (e.g. MF Director can defer to another MF Director, Preclerkship Chair, Evaluation Chair, or Assistant Dean).

3.4. Members of the Academic Progress Committee

Members of the Academic Progress Committee (APC) should recuse themselves from a committee meeting involving a student who is being reviewed by the committee where there is a potential for bias based on a relationship, past or present, in which a conflict of interest may exist, as defined above. A medical student being reviewed by the committee should identify a potential for bias based on a relationship, past or present, in which a conflict of interest may exist, as defined above, as soon as it is known. The Chair of the APC will ensure that this policy is followed. Where the potential for bias is identified in the Chair of the APC, the Chair will identify an alternate Chair and then recuse him/herself from the committee.

3.5. Electives

Generally, students should avoid setting up horizontal and block electives with supervisors who have the potential for bias based on a history of a relationship in which a conflict of interest may exist, as defined above. There may be unusual circumstances where supervisors with this potential for bias are appropriate. A formal request to pursue an elective with such a supervisor should be submitted to the Chair, Electives for approval far enough in advance of the elective to enable
appropriate review, to meet all electives deadlines, and to reschedule the elective if necessary. Students are encouraged to discuss such arrangements with their Student Advisors and with the proposed Elective Supervisor.

3.6. Formal Assessment Activities

Where the potential for bias presents during a formal assessment activity (e.g. OSCE, end-of-rotation examination), teachers and students should adopt a course of action that is least disruptive to the student being assessed. Options include: (a) continue with the assessment activity and inform the faculty lead responsible for the assessment (e.g. OSCE Director, Clerkship Director, etc.) after the assessment is complete for alternate arrangements which may include removal of any assessments made by the assessor who had the potential for bias under this policy; (b) stop the assessment activity at that time, report the potential for bias to the local assessment administrator, and continue the assessment with the next element (e.g. OSCE station); or (c) any other approach which limits biased assessment as defined by this policy and which limits the impact of enforcing the policy on the student's continued assessment. Occasionally, it may be necessary to substitute another form of assessment to adequately assess the learner's performance.

3.7. Limited Capacity of Faculty because of field of expertise or geography

Where there are a limited number of alternate teachers or faculty leaders because of the teacher's or faculty leader's field of expertise or geographical location, the MD Program will ensure that an appropriate alternate teacher or faculty leader is identified consistent with the policy and processes above.

4. Challenging the identification of a potential for bias:

The identification of a potential for bias will be taken at face value as indicated above; however, there may be occasions when one party or the other wishes to challenge the identification of a potential for bias. In such circumstances, either individual may bring the challenge to the Assistant Dean or Regional Assistant Dean of the student's home base campus. The appropriate Assistant Dean or Regional Assistant Dean will make an assessment of the identification of a potential for bias and inform the individuals involved and the Program Manager/Administrator of the student's home base campus of the decision. Any confidential information considered by MD Program faculty and staff will remain confidential; however, challenges brought forward under this policy may be discussed between the Assistant Dean and Regional Assistant Deans to ensure fairness and consistency across campuses. The decision of the Assistant Dean or Regional Assistant Dean of the student's home base campus will be considered final. Any further appeals will proceed through the McMaster University Appeals process via the McMaster University Ombudsperson.

Reviewed February 1, 2012 (MD Exec)
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