

## Ensuring adequate and equitable clinical assessments in a general practice longitudinal integrated clerkship

### Background:

General practice (GP) models for a longitudinal integrated clerkship (LIC), in which family medicine preceptors teach and assess students across multiple specialties, provide a unique educational opportunity and means of addressing the challenge of finding clinical preceptors.

### Objective:

Ensuring comparability in assessment in a medical school with both GP and multi-specialty LICs is essential.

### Methods:

To decrease assessment burden for preceptors teaching in a GP LIC, a single assessment form was created allowing preceptors to assess medical students in multiple specialties at once. In addition, brief assessment forms were developed to capture shorter feedback for one or multiple specialties. In-person and virtual faculty development sessions around assessment were available to all LIC preceptors with specific sessions for GP LIC preceptors. Preliminary data about this approach is provided.

### Results:

Informal feedback on the faculty development sessions was positive and revealed a key take-home related to the importance of specificity when assessing across multiple specialties. To achieve the goal of using the brief forms for multiple specialties, small incremental changes to the form were made over the course of the year. By the mid-point of the first year, the GP LIC students had an average of 9.33 (range 3-19) brief forms completed compared to 8.18 (range 1-24) forms for students in the standard LIC model. Formal evaluation of this model will be completed at the end of the academic year.

### Discussion:

A GP LIC creates unique challenges for preceptors to assess medical students in multiple specialties over time. We present one way of overcoming the challenge of ensuring students receive assessments with adequate detail for each individual specialty while not overburdening preceptors."