

# External Examiner's Report for the 4<sup>th</sup> Year Medical Examination in Forensic Medicine: Is It A Magician With a Wand?

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## Abstract

**Background:** External examiners are generally considered people of integrity, and honesty. The right to pass or fail students is within their discretion. The examination report that they produce must be congruent with their actions. The post examination comment by the external examiner for the 4<sup>th</sup> year medical examination in Forensic Medicine stating that students were weak in Forensic Medicine was not consistent, however, with the marks he awarded to the students.

**Objective:** To validate the report of external examiner with his action.

**Method:** Every year an external examiner is invited to conduct an examination of 4<sup>th</sup> year MB. ChB students in Forensic Medicine. There were three specialist examiners who conducted an examination of medical students. The external examiner (Mr. X) has been invited from a pioneer institute for the last three years. Mr. X also made changes, and approved course contents at the beginning of the year.

**Results:** There were 97 students who sat for the examination. Of these, 93 (96%) passed and none of them failed. Only 4% were required to write a supplementary examination. All scripts were marked by all three examiners. One third of the students (31/32%) who received the lowest marks were exposed to the external examiner for an oral examination, together with their scripts. The external examiner made no change of marks in six cases. Of the other 24 students, six students marked were decreased up to 4%, while the remaining 18 students' marks were increased by up to 20%20%. One student has awarded a distinction (75%) by the external examiner (increased from 55% to 75%).

**Conclusion:** The comment of an external examiner was, however, not congruent with his actions. Therefore, the external examiner is a magician, but without a magic wand.

**Keywords:** *Medical students, external examination, results*

## Introduction

Very little published literature is available on the role of external examiners in the assessment of medical students. The opinion of external examiners is crucial and is the gold standard. This is because they are an independent assessor of standard. Judging

educational standards is an important part of the role of external examiners. Standards are judged by the quality and quantity of students' work. They are helped by making comparisons of standards within subjects and across institutions.<sup>1</sup> It has been observed that there are variable standards of medical education

among institutions within countries. This may be due to the uneven availability of resources including quality of teachers. There is also some global variation in accreditation standards, but certain standards are considered essential.<sup>2</sup>

Generally, the educational standard is judged by the marks awarded to the students which reflect the performance of the students. The marks given by examiners range widely.<sup>3</sup> Therefore, the reliability of examination marks has yet to be confirmed, though much work has been done in this area.<sup>4</sup> Although examiners have proved to be far from infallible in their judgments.<sup>5</sup> In the British educational system, external examiners are a part of the examining process. 'External' in this context is taken to mean that the examiner is from another institution and is involved in teaching courses like those which he/she examines.<sup>6</sup>

Success in achieving the desired learning outcomes for a course or failing to do so can have far reaching consequences for the students as well as for teacher. The teachers involved have an interest in whether learning has been achieved since success or failure is going to reflect on their selection and teaching processes.<sup>6</sup> The external examiner report will reflect the performance of students and the teacher. It gives a very bad impression of the teaching staff if the external examiner makes some negative comments on the performance of students. The purpose of this study is to highlight the importance of the external

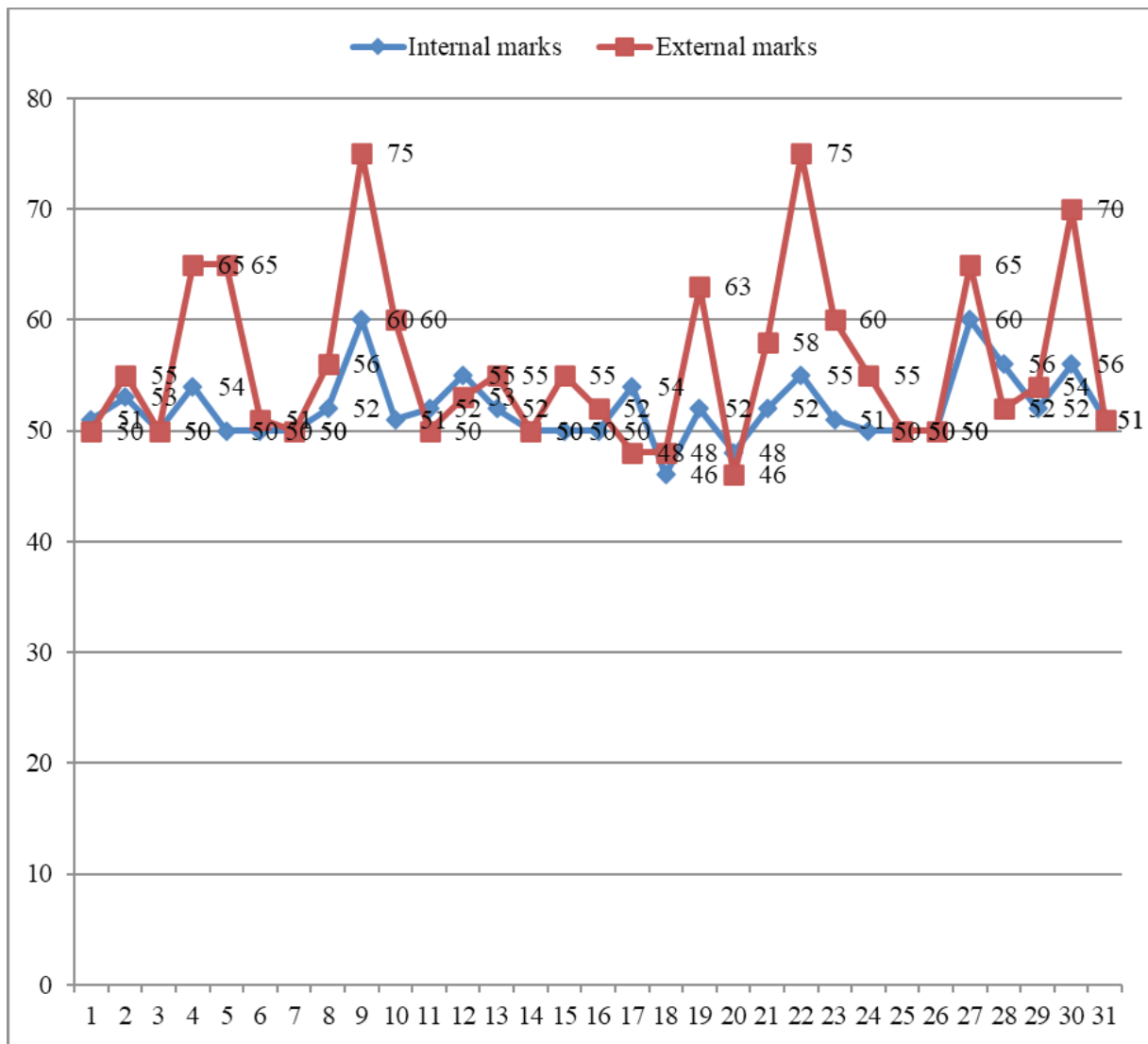
examiner. It will also provide some critical discussion regarding the need for an external examiner.

### **Method**

Every year an external examiner has been invited to conduct an examination in 4<sup>th</sup> year MB. ChB students in Forensic Medicine. They used to come a day before of the date of a written examination. There were three specialist examiners who conducted examination of medical students. Only one was an external examiner but he has been examining students for the last three years. He also made changes and approved course content at the beginning of the year.

### **Results**

There were 97 students who sat for the examination. Of these, 93 (96%) passed and none of them failed. Only 4% were required to write a supplementary examination. All scripts were marked by all three examiners. One third of the students (31/32%) who received the lowest marks were exposed to the external examiner for an oral examination, together with their scripts (Figure 1). The external examiner made no change of marks in six cases. Of the other 24 students, six students' marks were decreased up to 4%, while the remaining 18 students' marks were increased by up to 20%. One student has awarded a distinction (75%) by the external examiner (increased from 55% to 75%) (Figure 1).



**Figure 1: Relationship in marks awarded to fourth year medical students in Forensic Medicine by an external and internal examiner.**

**Discussion**

This case study report is of an external examiner who is named as Mr. X who was approved by the university council of a rural university for the fourth year MBChB students. He came from a so called top urban university where Mr. X is a quality examiner. His feedback, however, contradicted his own marks. He described that students’ knowledge of Forensic Medicine is poor and it is not in keeping with other institutions in South Africa. The author received a message through his faculty head and was surprised

to read the negative remark made by Mr. X. There are clear contradictions between his words and his actions. He examined all the scripts, and 31 students in oral examination. The marks of the students generally increased, and one student was even given a distinction by him.

Medical education in South Africa is grossly divided in medical schools even though country has achieved independence. The mind-set of apartheid is still in existence although it was removed in the Constitution. There are poor communication skills

among the students at the disadvantaged universities and therefore performance is underestimated. The students have gone from problem-based learning to community-oriented problems and have good practical knowledge of the subject. Despite the relevance of communication skills in medical teaching, gender differences in the performance of the students in the OSCE are still under reported.<sup>7</sup> Individualized Personal Assessment (IPA) has been widely adopted as a method to assess students in various disciplines. The validity and reliability of IPA, however, are often questioned. The lack of correlation between marks scored in IPA and other modalities of assessment seems to support this. The inter-examiner variability and a lack of objectivity on the part of an examiner creates the potential for bias. The examiners are not only influenced by the content of answers, but also by students' verbal style, ability to communicate, and the level of confidence. A study conducted by the author showed that Problem Based Learning (PBL) encourages a strong sense of autonomy, flexibility, and openness, and the system seems to inspire the students with confidence.<sup>8</sup> With students evaluating the system, there is also a danger that the evaluation may priorities students' needs, and by giving them a free hand they may be too subjective in their appraisal.<sup>8</sup>

Several methods of assessing the clinical competence of medical students exist. Traditional methods include short cases and long cases and the viva voce examination, all of which have been criticised for lacking structure and standardisation, having poor inter-rater reliability, and not minimising examiner bias.<sup>1</sup> A proposed the OSCE in medical school as a means of overcoming these issues and improving the quality of the clinical performance of the students.<sup>9</sup> In this study, students and examiners reported favourable opinions of the process and organisation of the OSCE conducted during the Medicine and Therapeutics exit exam. However, students felt that the OSCE was stressful and intimidating, and the

time allocation was inadequate for the assigned tasks. More practice sessions/mock exams with adequate feedback may better prepare students and create a better environment to assess skills expected of a doctor in clinical practice. Further, multi-centred studies are required to be carried out to assess whether there is any difference in actual clinical performance between students assessed by traditional formats compared to those assessed by an OSCE, and to ascertain the long-term impacts of OSCE on clinical management of patients later in their professional life.<sup>9</sup>

The examiner's questionnaire evaluated the perception of the overall fairness of the OSCE, the range of clinical skills and knowledge tested, the validity of the measure of clinical competence, exam administration, the level of information required and clarity of instructions at each station, the adequacy of the time allocation for each station, and the level of stress experienced by the students to minimise their chances of failing.

The jealousy is not limited to within the department, but it is also interdepartmental and relates to other institutions as well. The head of the faculty abuses his power by suppressing others so that he can get an authorship in gift. This is the reason you will probably see that there is a professor who has published without doing anything. This author has undergone multiple disciplinary inquiries, which has affected not only my health and work but also my teaching. Mr. X commented that MBChB 4 students' knowledge of Forensic Medicine and Forensic Pathology is not in keeping with other institutions in South Africa. He further wrote that the Forensic Medicine MBChB course at the rural university may require significant revision. This was the language of the external examiner – the so-called Mr. Magician – who has external examiner experience in only two universities, but Mr. X claims all South Africa. Furthermore, Mr. X suggested that a more integrated

forensic pathology course is needed with standardized international textbooks. Mr. Magician (Mr. X) does not even know that we are carrying out a teaching programme based on problem-based learning (PBL). It is dangerous to restrict resources in learning. Mr. X's intention is to look for financial gain by offering his services in the rural university as Mr. X is more than willing to assist with the revision of the rural Forensic Medicine course curriculum.

The Faculty of Health Sciences at the rural university has completed the first five years of its problem-based community-oriented teaching curriculum. The use of SWOT analysis to evaluate current and future directions can lead to the successful evolution of any organisation. Most of the student groups indicated that, in terms of quality, the strengths of the system were stronger than its weaknesses. They also pointed out that there were more opportunities than threats. It was concluded that the PBL curriculum empowers the students by increasing skills that are relevant to existing health problems in the community.

### Conclusion

The comment was submitted to the faculty head by the external examiner without any consultation with internal teachers and thus was malicious and damaging. It was unprofessional as prime facie evidence showed that he has promoted students by himself. Mr. X is a magician of coin but not having any wand. This kind of external examiner must be banned from the role of examiner in other universities.

### Ethical Issue

The university's name and the name of the external examiner were kept confidential. If somehow, he or she comes to know, then it is not the intention to defame any individual. It is the interest of the author to improve the quality of the examining process. This article was supposed to have been published long ago but because of time constraints it has been submitted

for publication only now. The author has ethical permission for case report publication (approved project No. 4114/1999) from the Ethical Committee of the University of Transkei, South Africa.

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