Undergraduate Assessment Record

Community Medicine

The TN Dr. M.G.R. Medical University
Chennai

The Tamil Nadu Dr. M.G.R. Medical University
Chennai

Under Graduate Assessment Record

Department of Community Medicine

Preface

Competency based education implemented by this university is an outcome-based learningon aframework of competencies. The present system needs an ongoing and longitudinal assessment to identify the learning, enable learning opportunities and acquire the mandated competency. Consequently, this university is enabling this assessment record to decide if the learner has acquired the mandated competencies.

This assessment record is designed to collect and analyse data of a student's learning in relation to a required competency and the learner's stage of training, based on - use of knowledge, technical skills, clinical reasoning, communication, emotions, values and reflection continuously and consistently and not isolated to the final examination.

As given in the MCI document on "Competency Based Assessment Module for Undergraduate Medical Education-2019" - "Informal assessments should happen during teaching-learning activities with the express purpose of finding out the stage of the student and taking corrective action in teaching-learning methodology on an ongoing basis. During lectures, small groups or seminars, use of techniques like clickers, one-minute papers and muddiest point provide valuable information to check understanding and provide developmental feedback. Same can be done during practical/clinical teaching using one-minute preceptor (OMP) or SNAPPS technique (Summarize history and findings, Narrow the differential; Analyse the differential; Probe preceptor about uncertainties; Plan management; Select case-related issues for self-study). Many of these do not need to be considered for pass/fail decisions but are useful to aid learning and acquire competencies. These can be planned by the teachers on a day to day basis and modified depending on the tasks at hand.

This Assessment Record for the Undergraduates is to be maintained by the Faculty of the concerned Department and shall be shown to the student during the feedback sessions and at the end of the course period.

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1. University Norms for Assessment of the Course

a. Formative / Internal Assessment

No	Type of Assessment	Methods of Assessment	Total Marks	Min Pass Mark
1	Theory Component			
A	Theory Tests (Average of 8 Tests)	MCQ, VSAQ, SAQ, LAQ	40	
B	Formative Assessment	Assignments	4	
		Integrated Sessions	4	
		Self-Directed Learning	2	
	Total		50	
2	Practical Component			
A	Practical (Average of 4 tests)	Clinical case presentation, spotting, OSPE, exercises , Viva	40	
B	Formative Assessment	DOAP	5	
		AETCOM Learning	5	
	Total		50	
	Grand Total		100	50

Note:

1. Internal assessment shall be based on day-to-day assessment. It shall relate to different ways in which learners participate in learning process including assignments, preparation for seminar, integrated classes, participation in AETCOM, SDL, Projects.
2. Regular periodic examinations shall be conducted throughout the course. There shall be no less than 8 internal assessment examinations and no less than 4 practical examinations.
3. Day to day records and log book (including required skill certifications) should be given importance in internal assessment. Internal assessment should be based on competencies and skills. Colleges and teachers should try to build their valid assessment tools.
4. Learners must secure at least 50% marks of the total marks (combined in theory and practical / clinical; not less than 40 % marks in theory and practical separately) assigned for internal assessment in a particular subject in order to be eligible for appearing at the final University examination of that subject. Internal assessment marks will reflect as separate head of passing at the summative examination. 5.

Learners must have completed the required certifiable competencies for that phase of training and completed the log book appropriate for that phase of training to be eligible for appearing at the final university examination of that subject.

6. Feedback should be provided to learners throughout the course so that they are aware of their performance and remedial action can be initiated well in time. The feedbacks need to be structured and the faculty and learners must be sensitized to giving and receiving feedback.
7. The results of IA should be displayed on notice board within 2 weeks of the test and an opportunity provided to the learners to discuss the results and get feedback on making their performance better. Remedial measures for learners who are either not able to score qualifying marks or have missed on some assessments due to any reason(s) shall be allowed with a record.
8. It is also recommended that learners should sign with date whenever they are shown IA records in token of having seen and discussed the marks.

9. Internal assessment marks will not be added to University examination marks and will reflect as a separate head of passing at the summative examination.

b. Summative Assessment - University Examination

University examinations will consist of

1. Theory: 2 papers of 100 marks each. (Total 200 marks)
2. Practical Exam + Viva: 100 marks

Note:

1. Theory Examinations: Nature of questions will include different types such as structured essays (Long Answer Questions - LAQ), Short Answers Questions (SAQ) and objective type questions (e.g. Multiple-Choice Questions - MCQ). Marks for each part should be indicated separately. MCQs shall be accorded a weightage of not more than 20% of the total theory marks. In subjects that have two papers, the learner must secure at least 40% marks in each of the papers with minimum 50% of marks in aggregate (both papers together) to pass.
2. Practical/clinical examinations will be conducted in the laboratory/ clinics. The objective will be to assess proficiency and skills in History Taking, conduct physical examination, interpret data and form clinic social case diagnosis Emphasis should be on candidate's capability to demonstrate communication skills, analyse the case etc
3. Viva/oral examination should assess approach to problem solving, applied situations, attitudinal, ethical and professional values. Candidate's skill in interpretation of common factors associated with health and disease
4. Internal assessment marks are not to be added to marks of the University examinations and should be shown separately in the grade card.
5. Pass in University Exam will be 50% marks in theory and practical

These concepts have been incorporated from the "Competency Based Assessment Module for Undergraduate Medical Education-2019"

The following topics shall be covered and assessed

PY-1

1. Concepts of health of individual and community- CM 1.1- 1.10
2. Social determinants of health and behavioral factors in health- CM - 2.1 to 2.5
3. Disaster management CM 13.1 to 13.4
4. Health care delivery. CM 17.1 to 17.5
5. Communication for health education Cm 4.1-4.3

PY-2

1. Environmental health CM 3.1to 3.8
2. Epidemiology of Communicable diseases CM 7.2
3. Principles of epidemiology and epidemiological methods CM 7.1-7.9
4. Basics of biostatistics CM 6.1-6.4

Rest of the topics in PY-3

2. Curriculum Vitae

Name of Student											
Name of Parent/Guardian											
Date of Birth & Age											
Permanent Address											
Address for Postal Communication											
Landline Phone (Home)											
Mobile Phone (Parent/Guardian)											
Mobile Phone (Parent/Guardian)											
Mobile Phone (Student)											
Email ID (Parent/Guardian)											
Email ID (Student)											

Signature of Student

3. Understanding Competency Based Assessment

Assessment requires specification of measurable and observable entities. This could be in the form of whole tasks that contribute to one or more competencies or assessment of a competency per se. Another approach is to break down the individual competency into learning objectives related to the domains of knowledge, skills, attitudes, communication etc. and then assess them individually. However, as stated earlier, using individual domain framework may not always result in making an accurate assessment of the specific competency. Therefore, efforts should be made to include competencies in the assessment process as much as possible. CBA is very useful to convey a message to the learners to structure their learning around competency framework.

- CBA operates within the framework of competencies. Assessment tools should align competencies/objectives.
- CBA should help to acquire competencies/objectives (Assessment for learning) and their certification (Assessment of learning).
- CBA is continuous and ongoing process with opportunities for providing developmental feedback.
- Direct observations of learners improve utility of CBA and feedback.
- Multiple assessors, multiple tools and multiple assessments improve the validity and reliability of CBA.

Formative & Internal Assessment (IA)

Formative assessment is an assessment conducted during the instruction with the primary purpose of providing feedback for improving learning. It also helps the teachers and learners to modify their teaching learning strategies. The feedback is central to formative assessment and is linked to deep learning, seeking to explore the educational literature and its pedagogical lessons for healthcare educational practice. It provides inputs to both learners and teachers regarding adequacy of teaching-learning. A variety of feedback principles and techniques can be used depending on the context.

Although there can be a debate on the summative or formative nature of IA, it still provides the best opportunities for formative purposes. IA is when assessment is done by the teachers who have taught the subject. It overcomes the limitations of day-to-day variability and allows larger sampling of topics, competencies and skills.

In competency-based curriculum, IA provides useful avenues for both formative and summative assessment. The IA focuses on the process of learning i.e. how the learners have learnt throughout the course. This assessment gives priority to psychomotor, communication and affective domains. These are those domains which are usually not assessed by the traditional assessment methods. It should involve all faculty members of a department (Senior Residents upwards) and not just one or two senior teachers. This helps to build the ownership of teaching-learning and assessment as well as provide 'hands-on' experience in assessment to all teachers. In that way, IA can be a very useful tool for assessing all competencies in any competency-based curriculum. IA should not be considered as an assessment without external controls and can be utilized in a manner to overcome some its perceived weaknesses. Utility of IA can be further improved by involving all teachers in the department and limiting the contribution of individual teacher, test or tool.

Designing a system of assessment

While designing an internal assessment, all domains of learning i.e. cognitive, psychomotor and affective should be taken into account and weightage should be assigned to these domains for assessment. We can divide various domains into smaller components and assign marks to each component. Make a blueprint of assessment, then circulate to few learners and faculty, take their comments/ views/feedback and revise as per the need. Miller's pyramid (figure 2) provides a

simple way to select appropriate tool for assessment. Efforts should be made to climb higher in the pyramid.6, 13 The following adapted example illustrates this:

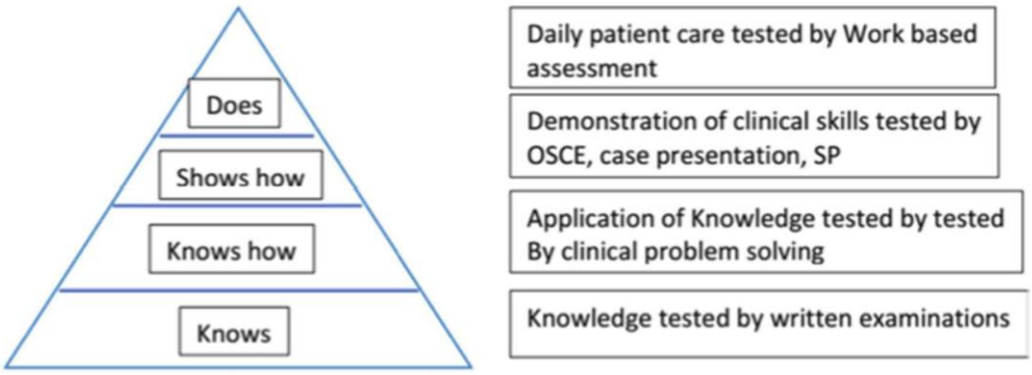

Figure 2. Assessment methods as per levels of competency (Adapted from Ramani) OSCE: Objective Structured Clinical Examination, SP: Standardised/ Simulated Patients

The key to building validity and to make CBA assessment useful is to align it with competencies/objectives. Including some aspects from competencies of other phases is useful to assess integration of concepts. Some examples of such alignment can be seen in the competency sheet given in Table1.

Table 1. Deriving assessment methods from objectives

Competency: An **observable** ability of a health professional, **integrating multiple components** such as knowledge, skills, values and attitudes.

PA42.3	**Identify** the etiology of meningitis based on given CSF parameters	K/S	SH	Y

Objective: Statement of what a learner should be able to do at the end of a specific learning experience

PA42.3.1	At the end of the session **the PII student** must be able to enumerate the most common causes of meningitis correctly	Short note or part of structured essay: Enumerate 5 causes of meningitis based on their prevalence in India
PA42.3.2	At the end of the session the PII student must be able to enumerate the components of a CSF analysis correctly	Short note or part of structured essay: Enumerate the components tested in a CSF analysis
PA4.3.3	At the end of the session the PII student must be able to **describe** the CSF features for a given etiologic of meningitis **accurately**	Short note or part of structured essay:Describe the CSF findings that are characteristic of tuberculous meningitis
PA4.3.4	At the end of the session the PII student must the able to identify the aetiology of meningitis correctly from a **given set of CSF parameters**	Short note / part of the structured essay/ Skill station/ Viva: Review the CSF findings in the following patient and identify (write or vocalise) the most likely ethology

Table 1. Deriving assessment methods from objectives

A useful approach, especially for affective, psychomotor and communication domains, is to adopt the concept of assessment toolbox. A toolbox is a listing of available tools (and rating forms, if required), which are suggested for a particular competency or sub-competency and aims at improving the value of assessment data.14 The listed tools are suggestions only and can be freely used either singly or in combination by teachers to suit particular requirements. Efforts should be made to use multiple tools even for a given competency to improve validity and reliability of assessment. While assessment will continue to be subject based, efforts must be made to ensure

that phase appropriate correlates are assessed to determine if the learner has internalised and integrated the concept and its application.

Internal Assessment

Scheduling of IA

A student who has not taken minimum required number of tests for IA each in theory and practical will not be eligible for University examinations. Proper records of the work should be maintained which will form the basis for the learners' internal assessment and should be available to the assessors at the time of inspection of the college by the Medical Council of India.

Components of IA

(i) Theory IA can include: theory tests, send ups, seminars, quizzes, interest in subject, scientific attitude etc. Written tests should have short notes and creative writing experiences.

(ii) Practical/Clinical IA can include: clinical case presentation, practical tests, Objective Structured Practical Examination (OSPE), Directly Observed Procedural Skills (DOPS), Mini Clinical Evaluation Exercise (mini-CEX), records maintenance and attitudinal assessment.

Colleges and teachers should try to build capacity to use a variety of assessment tools. A number of tools are available in the form of assessment toolbox. The construct validity and predictive utility of internal assessment is high. Many of the tools mentioned for IA may appear subjective. However, by virtue of being high on validity and by conveying a message to the learners to not ignore skills, attitudes and communication (educational impact), they contribute to better learning. Since stakes at IA are low, the use of expert subjective assessments to cover areas which are not assessable by conventional objectivised assessment tools is appropriate. There is plenty of evidence in literature to suggest that expert subjective assessments can be as reliable as highly objective ones.

There should be at least one assessment based on direct observation of skills, attitudes and communication at all levels. Communication and attitudinal assessment should also be built in all assessments as far as possible.

Feedback in IA

Feedback should be provided to learners throughout the course so that they are aware of their performance and remedial action can be initiated well in time. The feedbacks need to be structured and the faculty and learners must be sensitized to giving and receiving feedback. The results of IA should be displayed on notice board within 2 weeks of the test and an opportunity provided to the learners to discuss the results and get feedback on making their performance better. It is also recommended that learners should sign with date whenever they are shown IA records in token of having seen and discussed the marks. Internal assessment marks will not be added to University examination marks and will reflect as a separate head of passing at the summative examination.

(These concepts have been incorporated in the proposed Regulations in Graduate Medical Education, 2019 (GMER 2019) and are reproduced here.

4. a. Hours of Course Work Completed

Professional Year - 1

Period of Study _____ to _____

No	Month	No of Hours of the Course				Hours Attended by the Student			
		CL	PL	SDL	AET	CL	PL	SDL	AET
1	September								
2	October								
3	November								
4	December								
5	January								
6	February								
7	March								
8	April								
9	May								
10	June								
11	July								
12	August								

Note:
CL: Classroom Hours incl Lectures, Integrated Teaching, Small Group Learning
PL: Practical Learning
SDL: Self-Directed Learning
AET: Attitude Ethics and Communication

Compensatory Study Hours offered if any

_____

_____

_____

_____

4.b. Hours of Course Work Completed

Professional Year - 2

Period of Study _____ to _____

No	Month	No of Hours of the Course					Hours Attended by the Student				
		CL	CT	PL	SDL	AET	CL	CT	PL	SDL	AET
1	October										
2	November										
3	December										
4	January										
5	February										
6	March										
7	April										
8	May										
9	June										
10	July										
11	August										

Note:
CL: Classroom Hours incl Lectures, Integrated Teaching, Small Group Learning
CT: Clinical Training
SDL: Self-Directed Learning
AET: Attitude Ethics and Communication

Compensatory Study Hours offered if any

_____

_____

_____

_____

4c. Hours of Course Work Completed

Professional Year - 3 (Part-1)

Period of Study _____ to _____

No	Month	No of Hours of the Course					Hours Attended by the Student				
		CL	CT	PL	SDL	AET	CL	CT	PL	SDL	AET
1	October										
2	November										
3	December										
4	January										
5	February										
6	March										
7	April										
8	May										
9	June										
10	July										
11	August										

Note:
CL: Classroom Hours incl Lectures, Integrated Teaching, Small Group Learning
PL: Clinical training
SDL: Self-Directed Learning
AET: Attitude Ethics and Communication

Compensatory Study Hours offered if any

_____

_____

_____

_____

5. Formative Assessment of Classroom / Clinical Training

The term "Classroom Learning" mentioned here includes any learning that happens within the ambit of the department as large group and small group teaching, demonstrations, dissection classes, practical classes, museum classes etc. The learning in the department predominantly fits into the Scale of 1 and2of the 5 level Blooms Taxonomy.

The Assessment Methods would include

1. End of Lecture Class/Module Assessment: 5-8 MCQ's solved over 5-8minutes
2. End of clinical training : OSPE of 10-12minutes
3. End of Practicals /Module: Spotting / OSPE/ Epidemiological exercises

For effective assessment and grading of performances a Likert's scale is given as under:

Grade	Characteristic
1	Score < 35% marks in the end of class assessments
2	Score 35%-50% marks in the end of class assessments
3	Score 50%-60% marks in the end of class assessments
4	Score 60%-75% marks in the end of class assessments
5	Score > 75% marks in the end of class assessments

Number	COMPETENCY: The student should be able to	Level	Grading Scale					Initial of
			1	2	3	4	5	Facilitator
Topic: Concept of Health and Disease								
CM1.1	Define and describe the concept of Public Health	KH						
CM1.2	Define health; describe the concept of holistic health including concept of spiritual health and the relativeness & determinants of health	KH						
CM1.3	Describe the characteristics of agent, host and environmental factors in health and disease and the multi factorial etiology of disease	KH						
CM1.4	Describe and discuss the natural history of disease	KH						
CM1.5	Describe the application of interventions at various levels of prevention	KH						
CM1.6	Describe and discuss the concepts, the principles of Health promotion and Education, IEC and Behavioral change communication (BCC)	KH						
CM1.7	Enumerate and describe health indicators	KH						
CM1.8	Describe the Demographic profile of India and discuss its impact on health	KH						
CM1.9	Demonstrate the role of effective Communication skills in health in a simulated environment	SH						
CM1.10	Demonstrate the important aspects of the doctor patient relationship in a simulated environment	SH						
Topic: Relationship of social and behavioural to health and disease								
CM2.1	Describe the steps and perform clinico socio-cultural and demographic assessment of the individual, family and community	SH						
CM2.2	Describe the socio-cultural factors, family (types), its role in health and disease &	SH						

	demonstrate in a simulated environment thecorrect assessment of socio-economicstatus							
CM2.3	Describe and demonstrate in a simulated environment the assessment of barriers to good health and health seeking behavior	SH						
CM2.4	Describe social psychology, community behaviour and community relationship and their impact on health and disease	KH						
CM2.5	Describe poverty and social security measures and its relationship to health and disease	KH						
Topic: Environmental Health Problems								
CM3.1	Describe the health hazards of air, water, noise, radiation and pollution	KH						
CM3.2	Describe concepts of safe and wholesome water, sanitary sources of water, water purification processes, water quality standards, concepts of water conservation and rainwater harvesting	KH						
CM3.3	Describe the aetiology and basis of water borne diseases /jaundice/hepatitis/ diarrheal diseases	KH						
CM3.4	Describe the concept of solid waste, human excreta and sewage disposal	KH						
CM3.5	Describe the standards of housing and the effect of housing on health	KH						
CM3.6	Describe the role of vectors in the causation of diseases. Also discuss National Vector Borne disease Control Program	KH						
CM3.7	Identify and describe the identifying features and life cycles of vectors of Public Health importance and their control measures	SH						
CM3.8	Describe the mode of action, application cycle of commonly used insecticides and rodenticides	KH						

Topic: Principles of health promotion and education								
CM4.1	Describe various methods of health education with their advantages and limitations	KH						
CM4.2	Describe the methods of organizing health promotion and education and counselling activities at individual family and community settings	KH						
CM4.3	Demonstrate and describe the steps in evaluation of health promotion and education program	SH						
Topic: Nutrition								
CM5.1	Describe the common sources of various nutrients and special nutritional requirements according to age, sex, activity, physiological conditions	KH						
CM5.2	Describe and demonstrate the correct method of performing a nutritional assessment of individuals, families and the community by using the appropriate method	SH						
CM5.3	Define and describe common nutrition related health disorders (including macro-PEM, Micro-	KH						

	iron, Zn, iodine, Vit. A), their control and management							
CM5.4	Plan and recommend a suitable diet for the individuals and families based on local availability of foods and economic status, etc in a simulated environment	SH						
CM5.5	Describe the methods of nutritional surveillance, principles of nutritional education and rehabilitation in the context of socio- cultural factors.	KH						
CM5.6	Enumerate and discuss the National Nutrition Policy, important national nutritional Programs including the Integrated Child Development Services Scheme (ICDS) etc	KH						
CM5.7	Describe food hygiene	KH						
CM5.8	Describe and discuss the importance and methods of food fortification and effects of additives and adulteration	KH						
Topic: Basic statistics and its applications								
CM6.1	Formulate a research question for a study	KH						
CM6.2	Describe and discuss the principles and demonstrate the methods of collection, classification, analysis, interpretation and presentation of statistical data	SH						
CM6.3	Describe, discuss and demonstrate the application of elementary statistical methods including test of significance in various study designs	SH						
CM6.4	Enumerate, discuss and demonstrate Common sampling techniques, simple statistical methods, frequency distribution, measures of central tendency and dispersion	SH						
	Topic: Epidemiology							
CM7.1	Define Epidemiology and describe and enumerate the principles, concepts and uses	KH						
CM7.2	Enumerate, describe and discuss the modes of transmission and measures for prevention and control of communicable and non-communicable diseases	KH						
CM7.3	Enumerate, describe and discuss the sources of epidemiological data	KH						
CM7.4	Define, calculate and interpret morbidity and mortality indicators based on given set of data	SH						
CM7.5	Enumerate, define, describe and discuss epidemiological study designs	KH						
CM7.6	Enumerate and evaluate the need of screening tests	SH						
CM7.7	Describe and demonstrate the steps in the Investigation of an epidemic of communicable disease and describe the principles of control measures	SH						

CM7.8	Describe the principles of association, causation and biases in epidemiological studies	KH						
CM7.9	Describe and demonstrate the application of computers in epidemiology	KH						

Topic: Epidemiology of communicable and non-communicable diseases								
CM8.1	Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for communicable diseases	KH						
CM8.2	Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for Non Communicable diseases (diabetes, Hypertension, Stroke, obesity and cancer etc.)	KH						
CM8.3	Enumerate and describe disease specific National Health Programs including their prevention and treatment of a case	KH						
CM8.4	Describe the principles and enumerate the measures to control a disease epidemic	KH						
CM8.5	Describe and discuss the principles of planning, implementing and evaluating control measures for disease at community level bearing in mind the public health importance of the disease	KH						
CM8.6	Educate and train health workers in disease surveillance, control & treatment and health education	SH						
CM8.7	Describe the principles of management of information systems	KH						
Topic: Demography and vital statistics								
CM9.1	Define and describe the principles of Demography, Demographic cycle, Vital statistics	KH						
CM9.2	Define, calculate and interpret demographic indices including birth rate, death rate, fertility rates	SH						
CM9.3	Enumerate and describe the causes of declining sex ratio and its social and health implications	KH						
CM9.4	Enumerate and describe the causes and consequences of population explosion and population dynamics of India.	KH						
CM9.5	Describe the methods of population control	KH						
CM9.6	Describe the National Population Policy	KH						
CM9.7	Enumerate the sources of vital statistics including census, SRS, NFHS, NSSO etc	KH						
Topic: Reproductive maternal and child health								
CM10.1	Describe the current status of Reproductive, maternal, newborn and Child Health	KH						
CM10.2	Enumerate and describe the methods of screening high risk groups and common health problems	KH						

CM10.3	Describe local customs and practices during pregnancy, childbirth, lactation and child feeding practices	KH						
CM10.4	Describe the reproductive, maternal, newborn& child health (RMCH); child survival and safe motherhood interventions	KH						
CM10.5	Describe Universal Immunization Program; Integrated Management of Neonatal and Childhood Illness (IMNCI) and other existing Programs.	KH						
CM10.6	Enumerate and describe various family planning methods, their advantages and shortcomings	KH						
CM10.7	Enumerate and describe the basis and principles of the Family Welfare Program including the organization, technical and operational aspects	KH						
CM10.8	Describe the physiology, clinical management and principles of adolescent health including ARSH	KH						
CM10.9	Describe and discuss gender issues and women empowerment	KH						

	Topic: Occupational Health							
CM11.1	Enumerate and describe the presenting features of patients with occupational illness including agriculture	KH						
CM11.2	Describe the role, benefits and functioning of the employees state insurance scheme	KH						
CM11.3	Enumerate and describe specific occupational health hazards, their risk factors and preventive measures	KH						
CM11.4	Describe the principles of ergonomics in health preservation	KH						
CM11.5	Describe occupational disorders of health professionals and their prevention & management	KH						
Topic: Geriatric services								
CM12.1	Define and describe the concept of Geriatric services	KH						
CM12.2	Describe health problems of aged population	KH						
CM12.3	Describe the prevention of health problems of aged population	KH						
CM12.4	Describe National program for elderly	KH						

Topic: Disaster Management								
CM13.1	Define and describe the concept of Disaster management	KH						
CM13.2	Describe disaster management cycle	KH						
CM13.3	Describe man made disasters in the world and in India	KH						
CM13.4	Describe the details of the National Disaster management Authority	KH						
Topic: Hospital waste management								
CM14.1	Define and classify hospital waste	KH						

CM14.2	Describe various methods of treatment of hospital waste	KH						
CM14.3	Describe laws related to hospital waste management	KH						
Topic: Mental Health								
CM15.1	Define and describe the concept of mental Health	KH						
CM15.2	Describe warning signals of mental health disorder	KH						
CM15.3	Describe National Mental Health program	KH						
Topic: Health planning and management								
CM16.1	Define and describe the concept of Health planning	KH						
CM16.2	Describe planning cycle	KH						
CM16.3	Describe Health management techniques	KH						
Topic: Health care of the community								
CM17.1	Define and describe the concept of health care to community	KH						
CM17.2	Describe community diagnosis	KH						
CM17.3	Describe primary health care, its components and principles	KH						
CM17.4	Describe National policies related to health and health planning and millennium development goals	KH						
CM17.5	Describe health care delivery in India	KH						
Topic: International Health								
CM18.1	Define and describe the concept of International health	KH						
CM18.2	Describe roles of various international health agencies	KH						
Topic: Essential Medicine								
CM19.1	Define and describe the concept of Essential Medicine List (EML)	KH						
CM19.2	Describe roles of essential medicine in primary health care	KH						
CM19.3	Describe counterfeit medicine and its prevention	KH						
Topic: Recent advances in Community Medicine								
CM20.1	List important public health events of last five years	KH						
CM20.2	Describe various issues during outbreaks and their prevention	KH						
CM 20.3	Describe any event important to Health of the Community	KH						
CM 20.4	Demonstrate awareness about laws pertaining to practice of medicine such as Clinical establishment Act and Human Organ Transplantation Act and its implications	KH						

6. Formative Assessment of Assignments

Note:

1. Formative Assessment involves various methods of which out of class assignments are important instruments.
2. The structure for the assignment should be clear mentioned at the start. The structure should include an introduction, main body of the assignment and a conclusion if it is an essay work. Illustrations, flow charts, tables and graphs should be part of the submission where ever necessary.
3. Plagiarism should be discouraged.
4. The grading of the assignment shall be done by the faculty team as follows

Faculty Decision	Grade
Poor content & presentation	1
Below Average content & presentation	2
Average content & presentation	3
Above Average content & presentation	4
Excellent content & presentation	5

No	Title of Assignment	1	2	3	4	5	Initial of Facilitator
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							

No	Title of Assignment	1	2	3	4	5	Initial of Facilitator
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							

7. Formative Assessment of Integrated Sessions

Note:

1. Formative Assessment of integrated teaching sessions involves assessment of student level of sessional learning.
2. The student shall be given a 15-20 MCQ test at the end of the session. This can be both in the offline and online modes,
3. The grading of the same shall be done by the faculty team as follows:

   Scale

   1 : End of Session Assessment <35%
   2 : End of Session Assessment 35-50%
   3 : End of Session Assessment 50-60%
   4 : End of Session Assessment 60-75%
   5 : End of Session Assessment >75%

No	Topic of Integrated Session	1	2	3	4	5	Initial of Facilitator
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

No	Topic of Integrated Session	1	2	3	4	5	Initial of Facilitator
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							
26							
27							
28							

8. Formative Assessment of Self-Directed Learning

Note:

1. Formative Assessment of SDL sessions involves assessment of student level of learning through assessment of the synopsis and biblliography
2. The student shall submit the same at the end of the session. This can be both in the offline and online modes.
3. The grading of the same shall be done by the faculty team as follows:

Scale

Faculty Decision	Grade
Poor content & presentation	1
Below Average content & presentation	2
Average content & presentation	3
Above Average content & presentation	4
Excellent content & presentation	5

No	Assigned SDL Topic	1	2	3	4	5	Initial of Facilitator
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							

No	Assigned SDL Topic	1	2	3	4	5	Initial of Facilitator
12							
13							
14							
15							
16							
17							
18							
19							
20							

9. Formative Assessment of AETCOM Learning

Note:

1. Formative Assessment of AETCOM sessions involves assessment of student level of learning through DOPS, OSPE sessions
2. The grading of the same shall be done by the faculty team as follows:

Scale

1 : End of Session Assessment <35%
2 : End of Session Assessment 35-50%
3 : End of Session Assessment 50-60%
4 : End of Session Assessment 60-75%
5 : End of Session Assessment >75%

No	Competency The student should be able to	Level (K/KH/SH)	1	2	3	4	5	Initial of Facilitator
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								

10. Formative Feedback Record

Note:

1. Feedback should be provided to learners throughout the course so that they are aware of their performance and remedial action can be initiated well in time.
2. The feedbacks need to be structured and the faculty and learners must be sensitized to giving and receiving feedback.
3. The results of IA should be displayed on notice board within 2 weeks of the test and an opportunity provided to the learners to discuss the results and get feedback on making their performance better.
4. Thelearner should sign with date whenever they are shown IA records in token of having seen and discussed the marks.
5. The learner Internal assessment marks will not be added to University examination marks and will reflect as a separate head of passing at the summative examination
6. Some suggestions for handling the Feedback process
    a. Start with the learner's agenda for the session
    b. Evaluate the performance of the learner in the previous sessions and outcomes the learner is trying to achieve
    c. Enquire about problems faced by the learner in the process of learning in the classroom, at home and during the assessments.
    d. Encourage the learner to think about goal setting
    e. Encourage self-assessment and self-solving problems
    f. Offer space for the learner to make suggestions, to generate solutions
    g. Be non-judgmental and specific, prevent vague generalisation, provide balanced feedback
    h. Offers suggestions and alternatives, make suggestions rather than prescriptive comments. Be valuing and supportive
    i. Structure and summarise the session to ensure that learner has some specifics to take home.

Formative Feedback Session	1
Date	

Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session	2
Date	

Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session		3	
Date			
Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session	4
Date	

Type of Assessment	
Topic of Assessment	

Feed Back received from Student
Feed Back given to the Student
Remedial Action Suggested

Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session			5
Date			
Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session	6
Date	

Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session	7
Date	

Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session	8
Date	

Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session			9
Date			
Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session			10
Date			
Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session	11
Date	

Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session			12
Date			
Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session	13
Date	

Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session			14
Date			
Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session	15
Date	

Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session	16
Date	

Type of Assessment	
Topic of Assessment	

Feed Back received from Student
Feed Back given to the Student
Remedial Action Suggested

Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session			17
Date			
Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session			18
Date			
Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session			19
Date			
Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session			20
Date			
Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session			21
Date			
Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session			22
Date			
Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session			23
Date			
Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session	24
Date	

Type of Assessment			
Topic of Assessment			
Feed Back received from Student			
Feed Back given to the Student			
Remedial Action Suggested			
Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

Formative Feedback Session	25
Date	

Type of Assessment	
Topic of Assessment	

Feed Back received from Student
Feed Back given to the Student
Remedial Action Suggested

Timeline of Remedial Action			
Signature of Mentor		Signature of Student	

11 A. Record of Internal Assessment Tests-Theory

No	Topic of Assessment	Type of Assessment	Max Mark	Mark Given	% Mark	Initals of FIC
Professional year -1						
1						
Professional year -2						
1						
2						

No	Topic of Assessment	Type of Assessment	Max Mark	Mark Given	% Mark	Initals of FIC
Professional year -3 (Part-1)						
1						
2						
3						
4						
5						

11B. Record of Internal Assessment Tests-Practical

No	Topic of Assessment	Type of Assessment	Max Mark	Mark Given	% Mark	Initals of FIC
Professional year -1						
1						
Professional year -2						
1						
2						

No	Topic of Assessment	Type of Assessment	Max Mark	Mark Given	% Mark	Initals of FIC
Professional year -3 (Part-1)						
1						
2						
3						
4						
5						

12. Record of University Examinations

No	Examination	Max Mark	Mark Given	% Mark	Initals of FIC