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STANDARD SETTING

FOCUS



#2 PROCESS

Elaboration on the process of different standard setting methods

Gaining new insights on appropriate method to set standard for different examination formats

#3 PRACTICE

Hands-on experience on performing standard setting methods

FOCUS



#2 PROCESS

Elaboration on the process of different standard setting methods

The Assessment Goals

(Epstein, N Engl J Med, 2007)

Publics

Training

Standard Setting

Standard setting methods are part of the assessment process (Pearson et al., 2009)

Further Training

To provide a basis for choosing applicants for advanced training

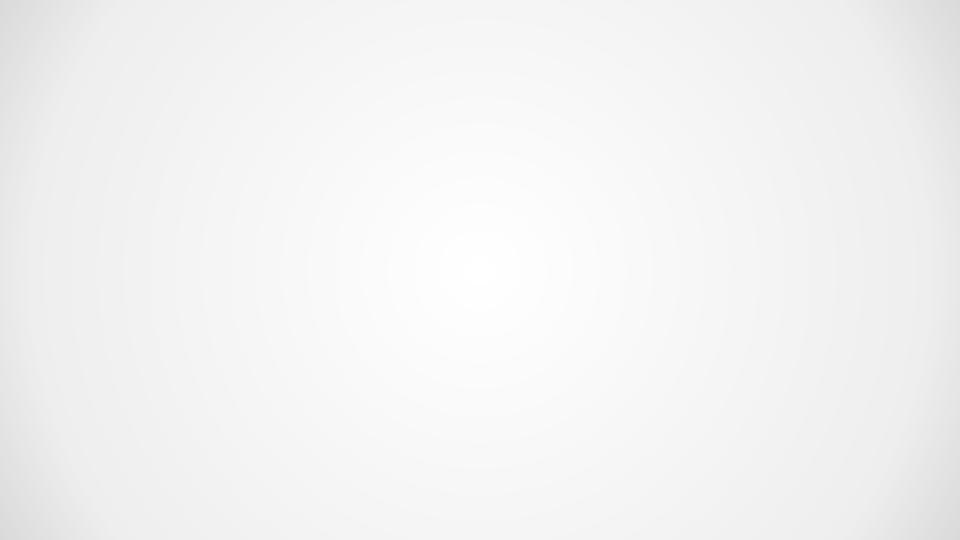
Protect Publics

To protect the public by identifying incompetent graduates

Capability

Optimize capabilities

To optimize the capabilities of all learners by providing motivation and direction for future learning



STANDARD SETTING: Overview

100

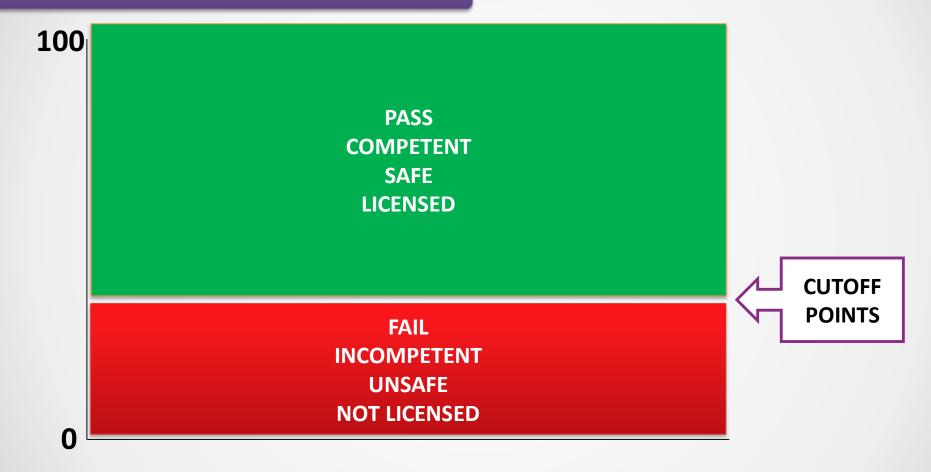
PASS
COMPETENT
SAFE
LICENSED

50:50 chance of passing or failing: Borderline students

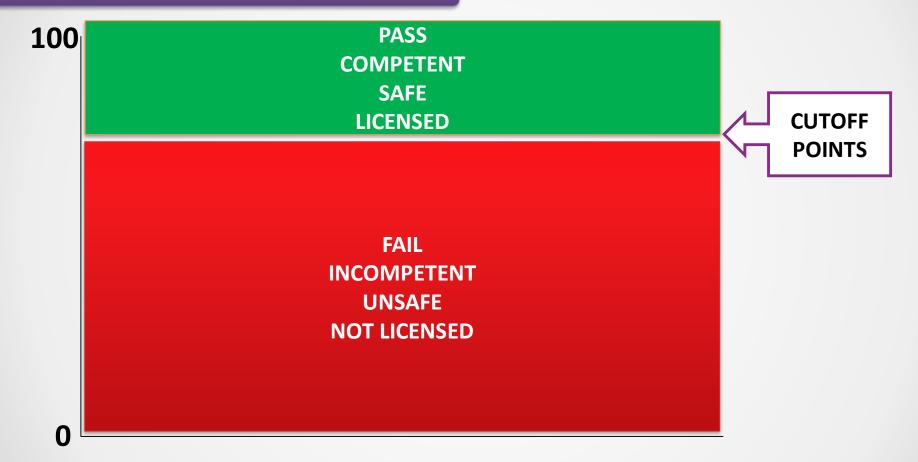
FAIL
INCOMPETENT
UNSAFE
NOT LICENSED



STANDARD SETTING: Difficult assessment?



STANDARD SETTING: Easy assessment?



STANDARD SETTING: Definition

"The proper following of a prescribed, rational system of rules or procedures resulting in the assignment of a number to differentiate between two or more states or degrees of performance"

(Cizek, 1993)

(Kane, 1994; Norcini, 1994)

STANDARD SETTING: An Accountability

≡ SECTIONS

THERECORDER

California Bar Committee Endorses Lowering Exam Pass-Score

Cheryl Miller, The Recorder

August 31, 2017 | 🗩 8 Comments

"The question of what the appropriate cut score should be has come into sharp focus, and intense debate, over the last year as the exam's pass rate has tumbled" News and headphones. Better together.



Daily Telegraph



NSW

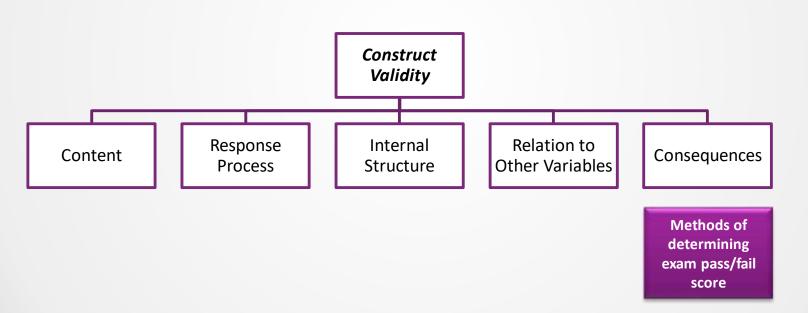
THOUSANDS OF UNIVERSITY
APPLICANTS SCORE UNDER 50 BUT
RECEIVE OFFERS FOR COURSES
ANYWAY

STANDARD SETTING: As validity evidence

Current Concepts in Validity and Reliability for Psychometric Instruments: Theory and Application

David A. Cook, MD, MHPE, Thomas J. Beckman, MD, FACP

Division of General Internal Medicine, Mayo Clinic College of Medicine, Rochester, Minn. The American Journal of Medicine, 2006



STANDARD SETTING: Standards

Statement about whether the examination performance fit for a particular purpose.

Based on judgement on candidate performances against education constructs.

Examples

- i. Ready for graduation
- ii. Competent to move to practical years

"The graduate of this medical program should demonstrate adequate knowledge for safe clinical decision and management, be able to work with supervision, equipped with standard clinical skills, and conduct themselves professionally."

STANDARD SETTING: Types of standard

Relative	Absolute	Compromise
Norm-referenced	Criterion-referenced	Combine both
"Top 60% will pass"	"Candidate who gets more than 60% pass"	
'Limited seats' - Admission	High stakes examination	

STANDARD SETTING: Strategies





STANDARD SETTING: Method Selection

	Absolute	Compromise
Test item based	Angoff families Ebel Nedelsky Bookmark	Cohen
Test examinees based	Borderline group/ Borderline regression Contrasting group	Hofstee

STANDARD SETTING: Guides to define Borderline



#1 Setting – e.g. graduate of the ophthalmology program

#3 Skills – e.g. be able to work with moderate supervision, equipped with acceptable technical ability

#5 Errors (considering the forgivable or unforgivable) – e.g. safe clinical judgment, decision making and management

(Mills, Melican & Ahluwalia, 1991)

"The borderline graduate of undergraduate medical program Setting should demonstrate adequate Knowledge fundamental knowledge for safe clinical judgment and decision making, be able to work under supervision, **Errors** competent in basic clinical skills, and Foraivable, non-foraivable conduct themselves professionally." Attitude (UNIMAS, 17 April 2018, Standard Setting Workshop) **PASS**

"The borderline graduate of the ophthalmology program should Knowledge Setting demonstrate adequate knowledge for safe clinical judgment, decision making and management, be able to work with moderate supervision, equipped with **Errors** acceptable technical ability, and conduct Forgivable, non-forgivable themselves professionally." Attitude (MUCCO, 20-22 Aug 2014, A Workshop on Examination Questions Preparation, Kuala Lumpur) **PASS**

Setting

Knowledge

Errors
Forgivable, non-forgivable

"The borderline graduate of the emergency medicine program should demonstrate adequate knowledge for safe clinical judgment, decision making and management, be able to work with moderate supervision, equipped with acceptable life saving skills and technical ability, and conduct Attitude themselves professionally."

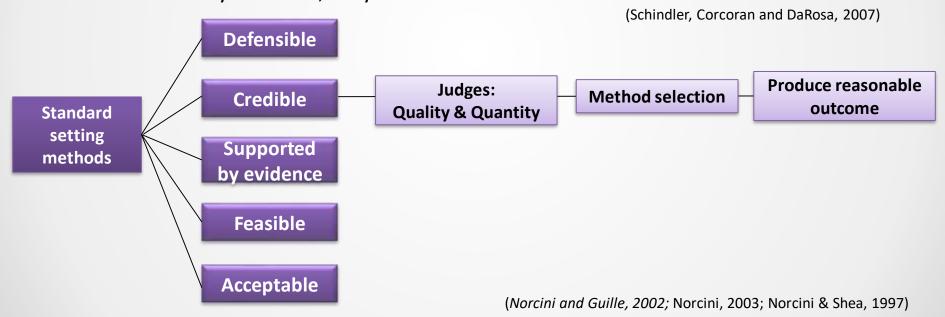
(SCCEM, 10 Nov 2018, A Workshop on Standard Setting A & E Workshop, UM, Kuala Lumpur)

FAIL

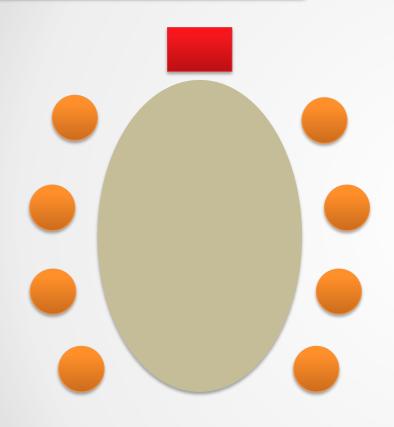
PASS

Standard is arbitrary.

"..... even the most rigorous standard-setting method, followed meticulously, will be somewhat arbitrary however, they should be **credible**."



STANDARD SETTING: Judges



Subject matter experts

Know target population

Understand task and assessment tool

Fair-minded

Willing to follow directions

Give full attention to the process

Demographically diverse to avoid bias

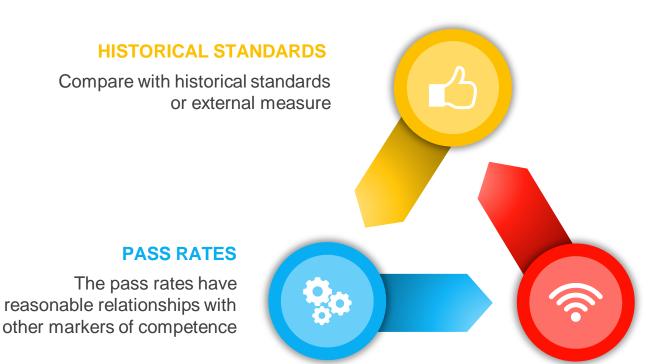
6 considered minimum

(Norcini and Guille, 2002)

STANDARD SETTING: Method Selection

	MCQs	Essays	Performance based	Portfolios
Angoff family				
Ebel				
Nedelsky				
Bookmark				
Borderline group/ regression				
Contrasting group				
Hofstee				

STANDARD SETTING: Post-Setting



STAKEHOLDERS

Consider stakeholder opinion and the results related to future performance

FOCUS



#2 PROCESS

Elaboration on the process of different standard setting methods

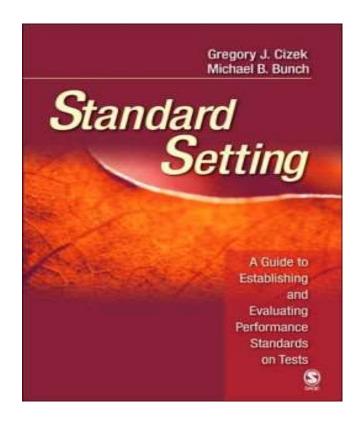
appropriate method to set standard for different examination formats

#3 PRACTICE

Hands-on experience on performing standard setting methods

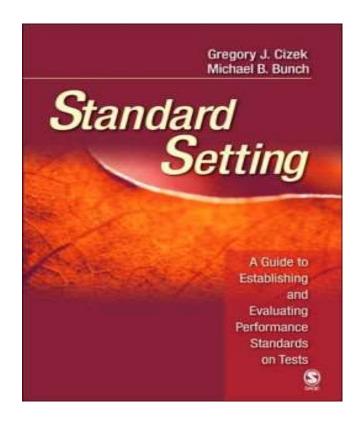
Methods for Setting Standard

- Absolute methods: Test-Items
 - Angoff (Angoff, 1971)
 - Ebel (Ebel, 1972)
 - Nedelsky (Nedelsky, 1954)
- Absolute methods: Test-Takers
 - Borderline (Livingston & Zieky, 1982)
 - Contrasting groups (Berk, 1976)
- Compromise methods
 - Hofstee (Hofstee, 1983)



Methods for Setting Standard

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Standard Setting in Action



ABSOLUTE METHODS – TEST-ITEM

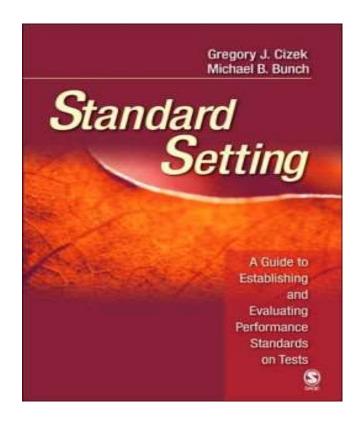




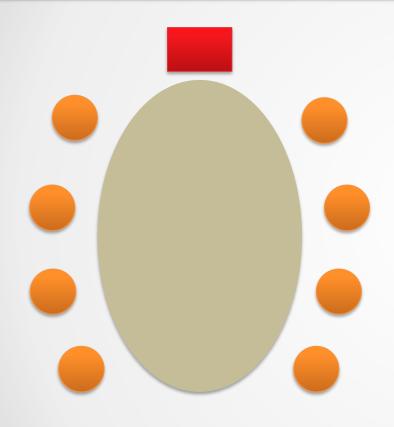


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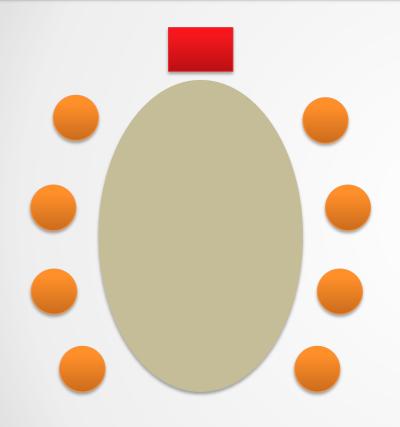
STANDARD SETTING: Angoff



- Angoff is the most common method used for setting standard.
- Types of Angoff:
 - Direct Angoff (Angoff, 1971)
 - Extended Angoff (Hambleton & Plake, 1995)
 - Modified Angoff (Cizek, 1996)
 - Three-level Angoff (Yudkowsky, Downing & Popescu, 2008).
- We treat them as Angoff's family

SCREEN

STANDARD SETTING: Angoff - PRE



Select the judges

Discuss

- a. Purpose of the assessment
 - b. Nature of examinees
- c. Components of adequate/inadequate knowledge

Select the methods – train judges

Define borderline standard

STANDARD SETTING: Define Borderline



#1 Setting – e.g. graduate of the ophthalmology program

#3 Skills – e.g. be able to work with moderate supervision, equipped with acceptable technical ability

#5 Errors (considering the forgivable or unforgivable) – e.g. safe clinical judgment, decision making and management

"The borderline graduate of undergraduate medical program Setting should demonstrate adequate Knowledge fundamental knowledge for safe clinical judgment and decision making, be able to work under supervision, **Errors** competent in basic clinical skills, and Foraivable, non-foraivable conduct themselves professionally." Attitude (UNIMAS, 17 April 2018, Standard Setting Workshop) **PASS**

"The borderline graduate of the ophthalmology program should Knowledge Setting demonstrate adequate knowledge for safe clinical judgment, decision making and management, be able to work with moderate supervision, equipped with **Errors** acceptable technical ability, and conduct Forgivable, non-forgivable themselves professionally." Attitude (MUCCO, 20-22 Aug 2014, A Workshop on Examination Questions Preparation, Kuala Lumpur) **PASS**

Setting

Knowledge

Errors
Forgivable, non-forgivable

"The borderline graduate of the emergency medicine program should demonstrate adequate knowledge for safe clinical judgment, decision making and management, be able to work with moderate supervision, equipped with acceptable life saving skills and technical ability, and conduct Attitude themselves professionally."

(SCCEM, 10 Nov 2018, A Workshop on Standard Setting A & E Workshop, UM, Kuala Lumpur)

FAIL

PASS

Setting

Knowledge

Errors
Forgivable, non-forgivable

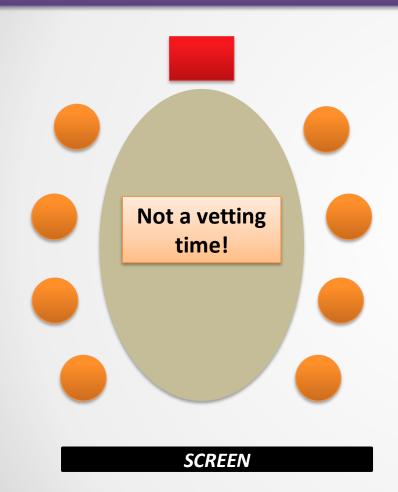
"The borderline graduate of the anaesthesiology program should demonstrate adequate knowledge for safe clinical judgment, decision making and management, be able to work with minimal supervision, equipped with acceptable life saving skills and technical ability, and conduct Attitude themselves professionally."

(8 Jan 2022, A Workshop on Standard Setting (Anaesthesiology) Workshop, UPM, Selangor)

FAIL

PASS

STANDARD SETTING: Angoff - DURING



Read through question 1

Judges: Individually, estimate proportion of borderline examinees will correctly answer question 1

Moderator: Record ratings

Moderator: Discuss ratings

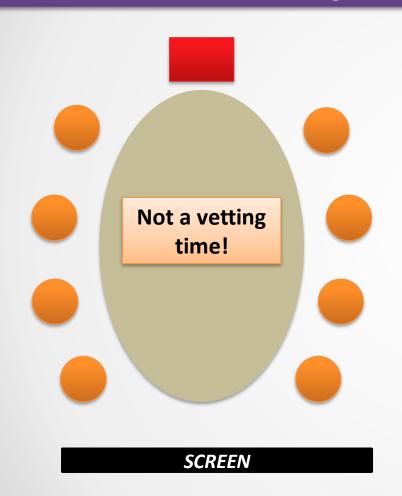
Moderator: Get 2nd ratings after discussion

Calculate mean

Repeat for next questions

(Cizek, 2006; Angoff, 1971)

STANDARD SETTING: Modified Angoff - DURING



Read through question 1

Judges: Individually, estimate the mark that can be obtained by borderline examinees for question 1

Moderator: Record ratings

Moderator: Discuss ratings

Moderator: Get 2nd ratings after discussion

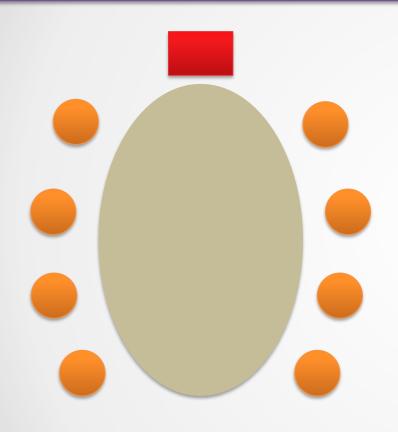
Calculate mean

Repeat for next questions

(Cizek, 2006; Angoff, 1971)

	Q1	Q2	Q3	Q4	Q5	Mean
JUDGE 1	60					
	60					
JUDGE 2	50					
	60					
JUDGE 3	90					
	60					
JUDGE 4	60					
	50					
JUDGE 5	60					
	60					
JUDGE 6	40					
	60					
Mean 1st	60					*
Mean 2 nd	58.3					•

STANDARD SETTING: Angoff - POST



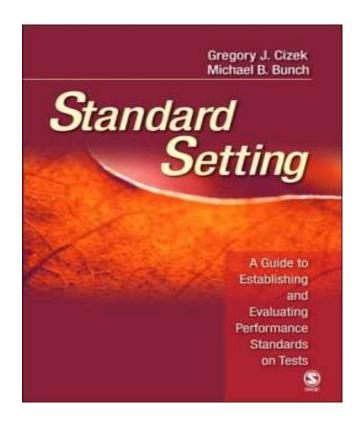
Evaluate the process

- Judges confidence in the process
 - Resulting cut off scores

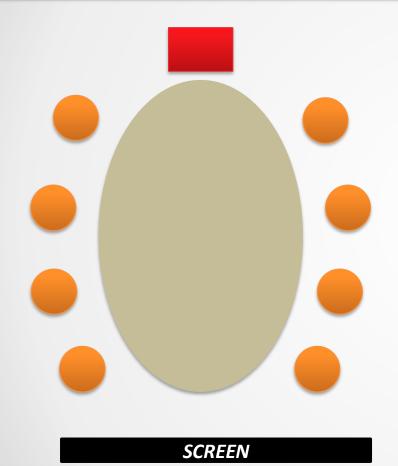
Documentation

Methods for Setting Standard

- Absolute methods: Test-Items
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- Compromise methods
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STANDARD SETTING: Ebel - PRE



Select the judges

Discuss

- a. Purpose of the assessment
 - b. Nature of examinees
- c. Components of adequate/inadequate knowledge

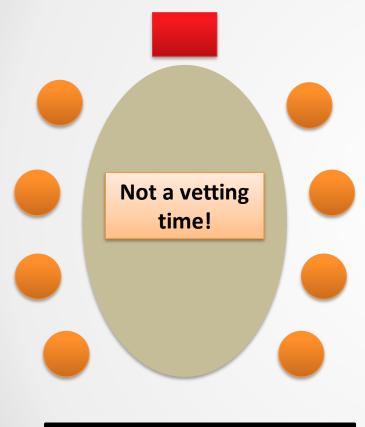
Select the methods – train judges

Define borderline standard

Build a classification table for item based on a category scheme (like difficulty and importance)

(Cizek, 2006; Ebel, 1972)

STANDARD SETTING: Ebel - DURING



Read through each question that was assigned to the respective categories in the classification table.

Judges make judgment about percentages of items in each category that borderline examinees answered correctly

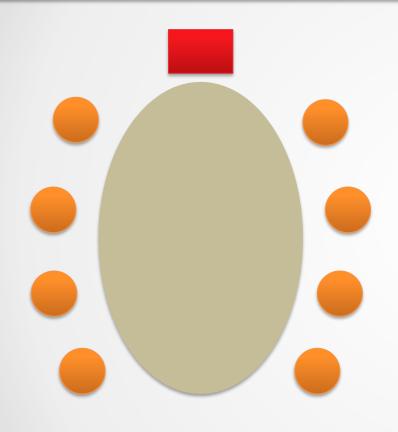
Moderator: Record ratings

Calculate mean

Repeat for next questions

Category	% Right	No. of Questions	Score
Essential			
Easy	95	3	2.85
Hard	80	2	1.60
Important			
Easy	90	3	2.70
Hard	75	4	3.00
Acceptable			
Easy	80	2	1.60
Hard	50	<u>3</u>	<u>1.50</u>
	Cut-off score	17	12.25

STANDARD SETTING: Ebel - POST



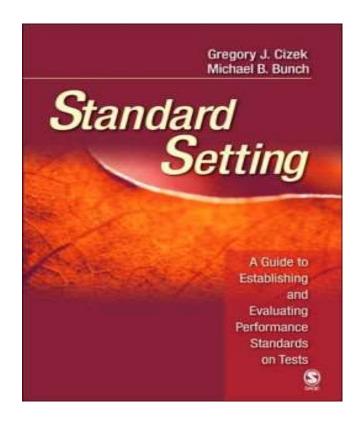
Evaluate the process

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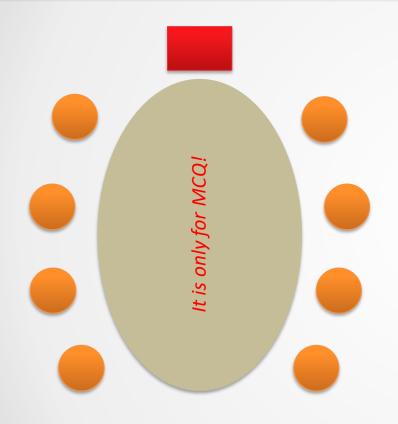
Documentation

Methods for Setting Standard

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STANDARD SETTING: Nedelsky - PRE



Select the judges

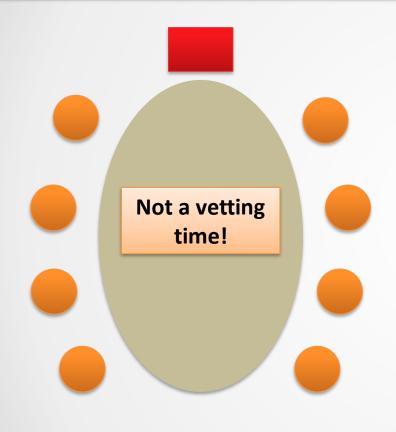
Discuss

- a. Purpose of the assessment
 - b. Nature of examinees
- c. Components of adequate/inadequate knowledge

Select the methods – train judges

Define borderline standard

STANDARD SETTING: Nedelsky - DURING



Read through each question

Judges: Working individually, judges mark the wrong answers the borderline students would be able to eliminate.

Moderator: Record ratings

Moderator: Discuss and change ratings

Repeat for next questions

Calculate passing score

Table 1. Example of calculations for Nedelsky's method applied to a test scored without correction for guessing

Question	Answers*	Number of answers not eliminated	Expected score
1	A (B) X X X	2	1/2= .50
2	XXXXE	1	1/1 = 1.00
3	XXCDX	2	1/2 = .50
4	A XX C D XX	3	1/3 = .33
5	AXXXX	1	1/1 = 1.00
6	A B C D E	5	1/5 = .20
7	а в с Ж (Е)	4	1/4= .25
8	(A) B XX D E	4	1/4 = .25
9	ABCDE	5	1/5 = .20
10	ABCDE	5	1/5 = .20
Cut-off scor	e	Lead	Sum = 4.43
Expected to	otal score = 4.43		

^{*}A circle indicates the correct answer: an X indicates an answer the borderline test-taker would eliminate.

- Three methods of calculating passing score:
 - Mean
 - Median
 - Trimmed mean

Table 2. Example of three ways to combine scores from individual judges

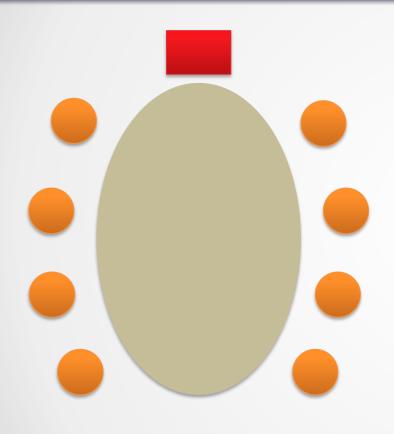
Judge 1 (highest)	92.50	
Judge 2	77.25	Judge 2 77.25
Judge 3	67.00	Judge 3 67.00
Judge 4	66.67	Judge 4 66.67
Judge 5 (lowest)	65.33	
	Sum = 368.75	Sum = 210.92

 $Mean = 368.75 \div 5 = 73.75$

Median = 3rd highest = 67.00

Trimmed Mean = 210.92 + 3 = 70.31

STANDARD SETTING: Nedelsky - POST



Evaluate the process

- Judges confidence in the process
 - Resulting cut off scores

Documentation

ABSOLUTE METHOD – TEST-ITEM: Advantages

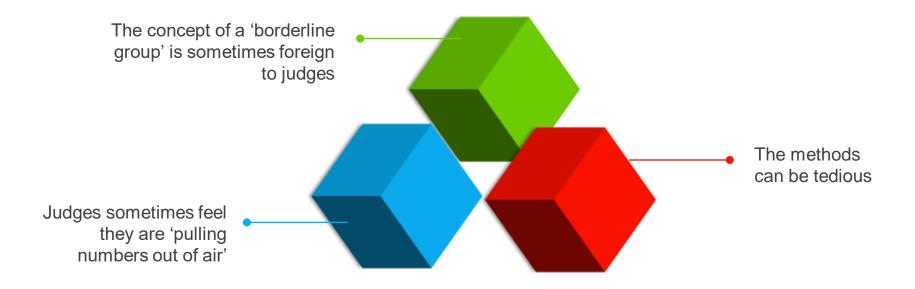
They are used frequently in high stakes examination

They are relatively easy to use

There is a considerable body of published work to support their use

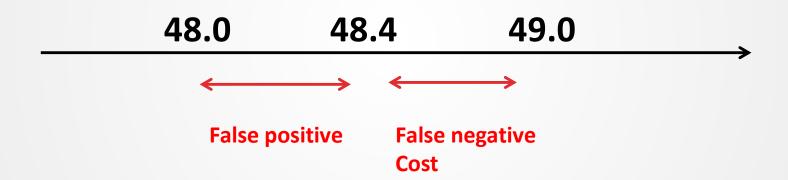
They focus on item content

ABSOLUTE METHOD – TEST-ITEM: Disadvantages



STANDARD SETTING: ISSUES

ROUNDING?



STANDARD SETTING: Negative Marking

Negative marking in MTF →

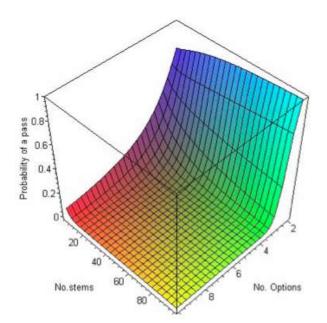


Figure 1 The probability of passing using a pure guessing strategy

(Holt, 2006)

Doesn't solve guessing problem.

(Bar-Hillel et al., 2005; Betts et al., 2009)

But add in more uncertainty - risk taking behaviour

(Budescu & Bar-Hillel, 1993; Choppin, 1988; Fowell & Jolly, 2000; Hammond et al., 1998; Kurz, 1999; Moss, 2001; Prihoda et al., 2006)

Scoring methods for multiple choice assessment in higher education Is it still a matter of number right scoring or negative marking?

Ellen Lesage*, Martin Valcke1, Elien Sabbe2

Suggestions:

- 1. To replace negative marking with standard setting.
- 2. Guessing effect can be reduced with good item construction.
- 3. To replace MTF with SBA
- 4. Increase sampling in assessment

STANDARD SETTING: ISSUES

ANGOFF

Sample proportionately based on blueprint

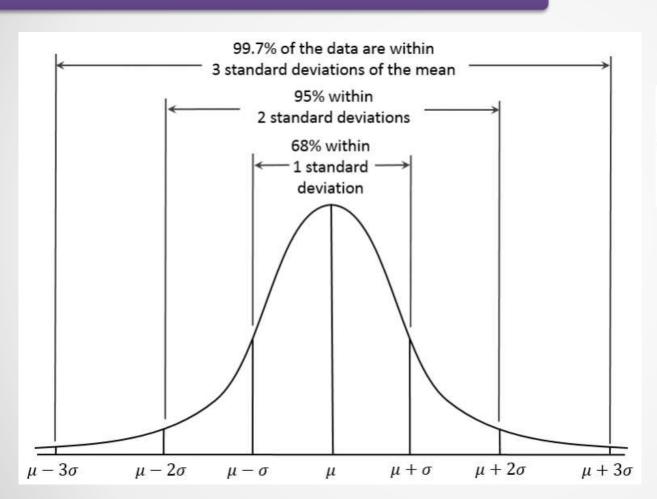
Must Know - _%
Should Know - _%
Nice to Know - _%

SAMPLING MIXTURE?

		Difficulty	
Relevance	Easy	Medium	Hard
Essential	4 questions 95% correct	3 questions 85% correct	1 question 80% correct
Important	3 questions 90% correct	3 questions 75% correct	2 questions 60% correct
Acceptable	1 question 80% correct	2 questions 55% correct	2 questions 35% correct
Questionable	1 question 50% correct	0 questions	2 questions 20% correct

EBEL METHOD – Based on item relevance and difficulty (but less used as compared to Angoff's)

STANDARD SETTING: CONVERSION TO '50%'



1st Step: Calculate Z Score

$$z = \frac{x - \mu}{\sigma}$$

where:

 μ is the mean of the population.

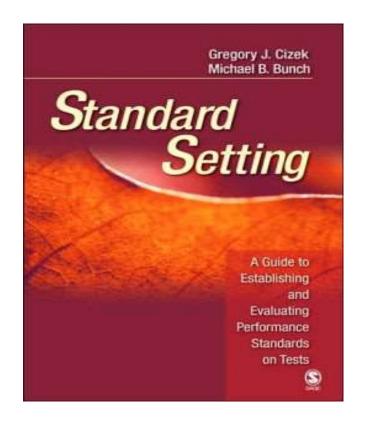
 σ is the standard deviation of the population

2nd Step: Calculate Standardized Score

- = (Z-score X Standard Deviation)
- + Desired Passing Score

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Standard Setting in Action



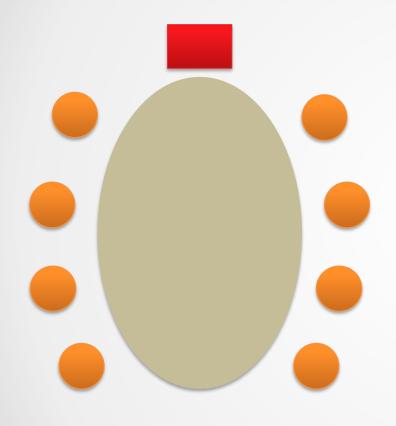
ABSOLUTE METHODS – TEST-TAKER







STANDARD SETTING: Borderline Method - PRE



Select the judges

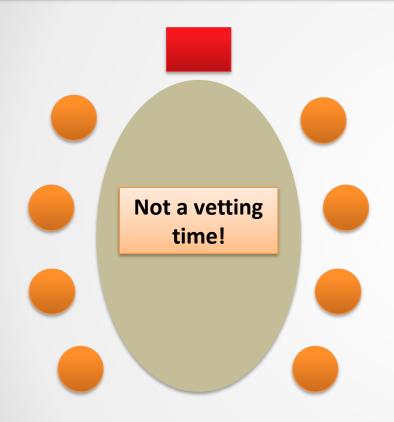
Discuss

- a. Purpose of the assessment
 - b. Nature of examinees
- c. Components of adequate/inadequate performance

Inform the borderline standard

Orientate the judges to the test, station or case to the checklist item scores

STANDARD SETTING: Borderline Method - DURING



Observe performance of candidate

Judges:

#1 provide a global rating of the overall performance each examinee on three-point scale: Fail, Borderline, Pass #2 The performance is also scored using a multiple-item checklist

Moderator: Record ratings

Repeat for next stations

STANDARD SETTING: Borderline Method - DURING

Paediatric Conjoint Clinical Examination

History	/2
Examination	/2
Synthesis	/2
Communication	/2
Management	/2
Attitudes	/2
TOTAL	/12

Pass	
Borderline	
Fail	

Collate the marks of candidates rated as borderline

Mean or median of the borderline cohort is taken as STATION PASSING SCORE

In Conjunctive Strategy – the candidates must exceed the STATION PASSING SCORE to pass

In Compensatory Strategy —the station passing score is summed up across station to form OVERALL PASSING SCORE

STANDARD SETTING: Borderline Method - DURING

STATION 1



Paediatric Conjoint Clinical Examination

History	/2
Examination	/2
Synthesis	/2
Communication	/2
Management	/2
Attitudes	/2
TOTAL	/12

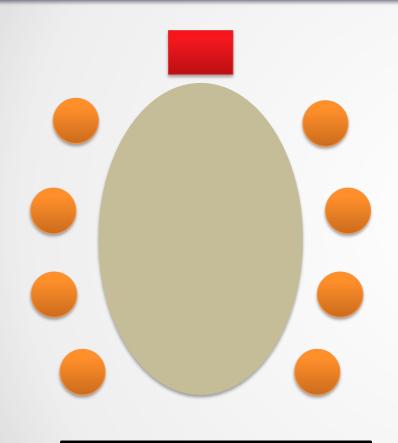
Pass	
Borderline	
Fail	

EXAMINER 1

	EXAMINIT	L T		
	Marks given	Pass	Borderline	Fail
Student 1	12	/		
Student 2	8		/	
Student 3	10		/	
Student 4	6			1
Student 5	10		/	
Student 6	10	/		
Student 7	8		/	
Student 8	8			1

Passing score for this station = (8 + 10 + 10 + 8)/4= 9

STANDARD SETTING: Borderline Method - POST



Evaluate the process

- Judges confidence in the process
 - Resulting cut off scores

Documentation

STANDARD SETTING: Borderline Method

- 1. Simple, save time
- 2. More acceptable passing scores than Angoff's (Klein et al, 2008)

Who will pass the dental OSCE?

Comparison of the Angoff and the Borderline Regression standard setting methods

TABLE 2. OSCE Checklist scores (mean and SD) and Global OSCE scores (mean and SD) per station of 119 dental students with pass/fail standards per station and per cluster (mean) of the Angoff I, the Angoff II, and the Borderline Regression (BR) method. And also the pass rates (% of students that passed) of these methods in 3 Compensatory models. Non Compensatory (NC). Partial Compensatory (PC) and Total Compensatory (TC)

Clusters and stations	Checklist Scores Mean	Global rating	Pass/fail standard		
	(SD) (%)	Mean (SD) (%)	Angoff I (%)	Angoff II (%)	BR (%)
Mean total OSCE (TC model)	70.4 (8)	60.0 (8)	64.0	64.2	55.1

- 3. May be influenced by the examinees "non-examination factors" (gender, university, etc)(Cizek, 2007)
- 4. Does not utilize all data. What if no one or too few in borderline? (Wood, Hunphrey-Murto, Norman, 2006)

STANDARD SETTING: Borderline Regression Method

- 1. All data (Fail, Borderline, Pass) from Station 1 are entered.
- 2. Run Linear Regression
- 3. The point where regression line intersects borderline = station passing score
- 4. Repeat for other stations
- 5. Sum all stations passing score = PASSING SCORE

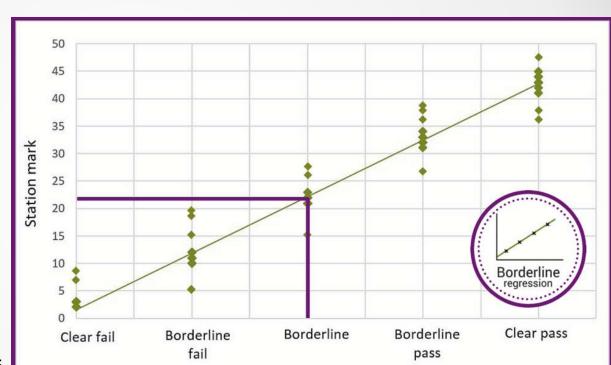


Table II. Number of examinees, cut score, pass rate and 95% confidence interval for each standard setting method

Station	Modified Borderline-group method			Regression method				
	N	Cut score	Pass rate (%)	Confidence interval	N	Cut	Pass rate (%)	Confidence interval
1	18	6.00	71	±0.58	57	6.10	64	±0.44
3	28	4.55	98	± 0.51	58	4.64	98	± 0.48
4	18	4.54	69	± 0.53	59	4.51	69	± 0.48
5	24	5.21	56	± 0.35	59	5 14	56	± 0.27
7	39	5.98	34	± 0.21	59	5.77	39	± 0.19
8	26	5.35	73	± 0.42	59	5.17	75	± 0.42
9	12	5.49	69	± 0.83	59	4.79	92	± 0.57
10	26	5.14	69	± 0.42	58	5.00	75	±0.29
overall		5.28	67	± 0.48		5.17	71	±0.39

However, if the mean of both method yield comparable passing score

If we look at station 9, where borderline candidate is not many, the passing score was significantly higher

Checklist scores range from 0 to 10. The number of examinees for the Modified Borderline-Group Method correspond to those examinees rated as borderline whereas the number of examinees for the Regression Method correspond to all examinees. (Wood, Hunphrey-Murto, Norman, 2006)

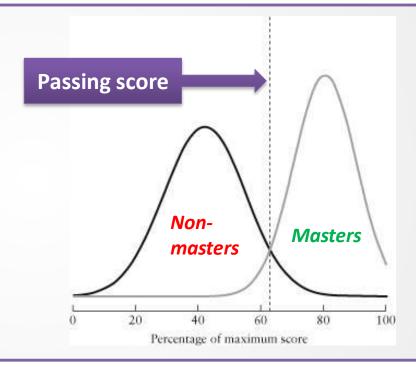
STANDARD SETTING: Contrasting Group Method

Paediatric Conjoint Clinical Examination

History	/2
Examination	/2
Synthesis	/2
Communication	/2
Management	/2
Attitudes	/2
TOTAL	/12

Masters	
Non-masters	

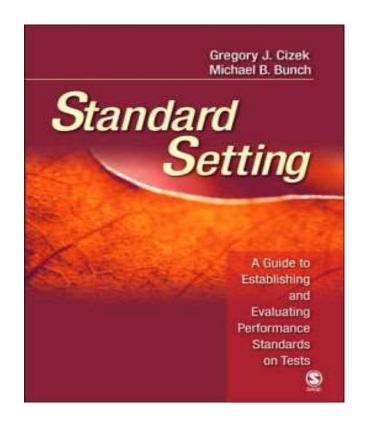
Judgment made on real and across candidates performances



But can we always categorize candidates into masters and non masters?

Methods for Setting Standard

- Absolute methods: Test-Items
 - Angoff (Angoff, 1971)
 - Ebel (Ebel, 1972)
 - Nedelsky (Nedelsky, 1954)
- Absolute methods: Test-Takers
 - Borderline (Livingston & Zieky, 1982)
 - Contrasting groups (Berk, 1976)
- Compromise methods
 - Hofstee (Hofstee, 1983)



Standard Setting in Action



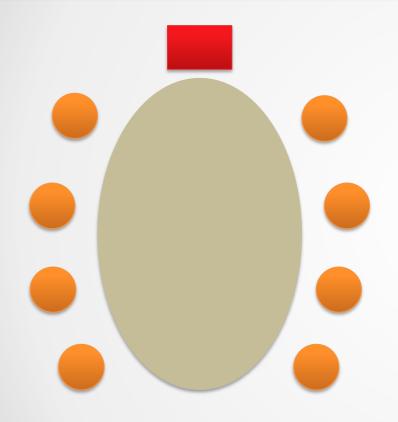
COMPROMISE METHOD







STANDARD SETTING: Hofstee - PRE



Select the judges

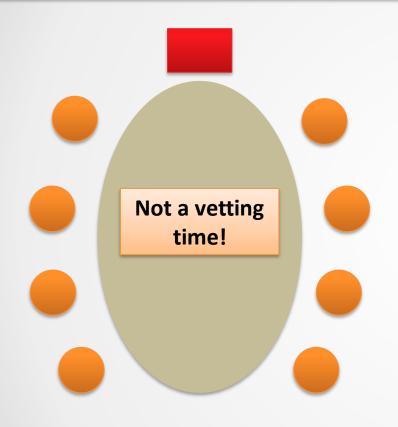
Discuss

- a. Purpose of the assessment
 - b. Nature of examinees
- c. Components of adequate/inadequate knowledge

Select the methods – train judges

Review the test in detail

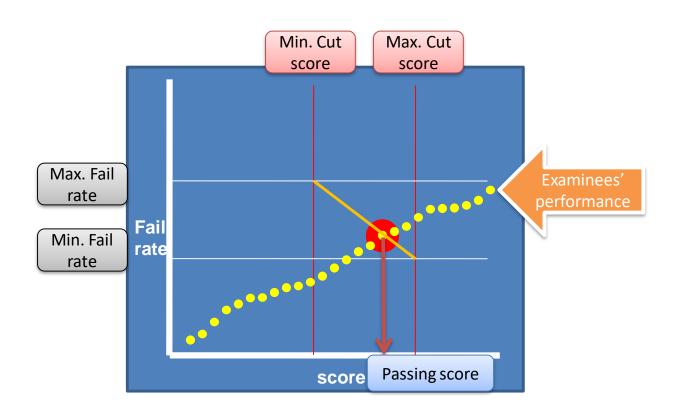
STANDARD SETTING: Hofstee - DURING



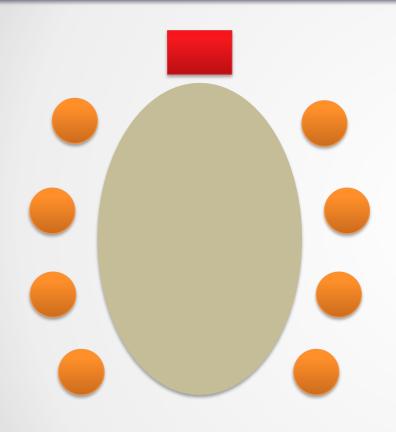
Ask the judges to answer 4 questions:

- ✓ What is the minimum acceptable cut score?
- ✓ What is the maximum acceptable cut score?
- ✓ What is the minimum acceptable fail rate?
- ✓ What is the maximum acceptable fail rate?

After the test is given, graph the distribution of scores and select the cut score.



STANDARD SETTING: Hofstee - POST



Evaluate the process

- Judges confidence in the process
 - Resulting cut off scores

Documentation

STANDARD SETTING: Hofstee - POST

Advantages

- Easy to implement
- Educators are comfortable with the decision



Disadvantages

- The cut score may not be in the area defined by the judges' estimates.
- The method is not the first choice in a high stakes testing situation.

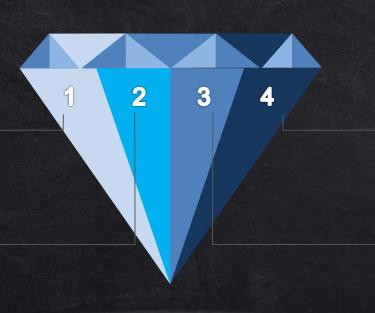
FINAL NOTES

Method Dependent

The resulting standards are method dependent (AMEE Guide 37, 2008; AMEE Guide 85, 2014)

Learning Process

No most accurate score or gold standard (AMEE Guide 37, 2008; AMEE Guide 85, 2014)



Credible Panel

Panels must be those familiar with students, assessment and content (Cizek, 2007; AMEE Guide 85, 2014)

Methodology

Choose method depending on purpose, evidence and resources (AMEE Guide 85, 2014)







Thank You

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Further reading

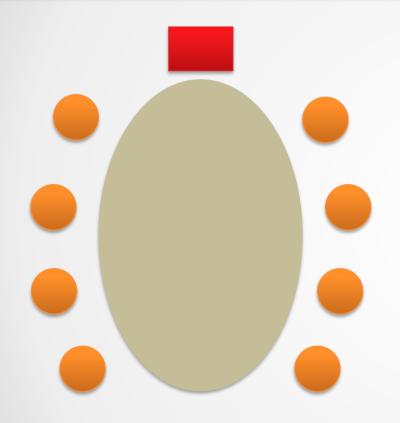
- Angoff, W.H. (1971). Scales, norms, and equivalent scores. In R.L. Thorndike (Ed.),
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- Ebel RL. Essentials of Educational Measurement. 2nd ed. Englewood Cliffs, NJ: Prentice-Hall, 1972.
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STANDARD SETTING

ANGOFF

STANDARD SETTING: Angoff - PRE



Select the judges

Discuss

- a. Purpose of the assessment
 - b. Nature of examinees
- c. Components of adequate/inadequate knowledge

Select the methods – train judges

Define borderline standard

STANDARD SETTING: Define Borderline



#1 Setting – e.g. graduate of the ophthalmology program

#3 Skills – e.g. be able to work with moderate supervision, equipped with acceptable technical ability

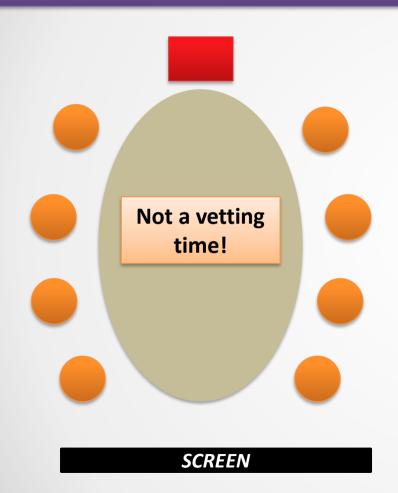
#5 Errors (considering the forgivable or unforgivable) – e.g. safe clinical judgment, decision making and management

(Mills, Melican & Ahluwalia, 1991)

STANDARD SETTING: Borderline Standards

"The borderline graduate of the ophthalmology program should Knowledge Settina demonstrate adequate knowledge for safe clinical judgment, decision making and management, be able to work with moderate supervision, equipped with **Errors** acceptable technical ability, and conduct Forgivable, non-forgivable themselves professionally." Attitude (MUCCO, 20-22 Aug 2014, A Workshop on Examination Questions Preparation, Kuala Lumpur) **PASS**

STANDARD SETTING: Angoff - DURING



Read through question 1

Judges: Individually, estimate proportion of borderline examinees will correctly answer question 1

Moderator: Record ratings

Moderator: Discuss ratings

Moderator: Get 2nd ratings after discussion

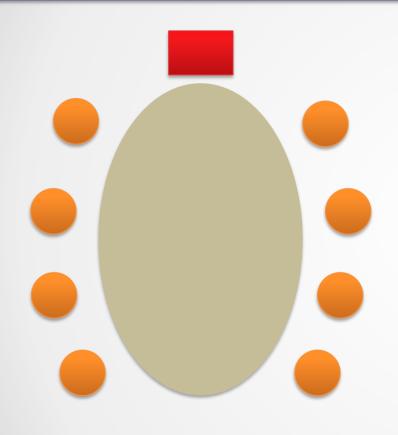
Calculate mean

Repeat for next questions

(Cizek, 2006; Angoff, 1971)

	Q1	Q2	Q3	Q4	Q5	Mean
JUDGE 1	60					
	60					
JUDGE 2	50					
	60					
JUDGE 3	90					
	60					
JUDGE 4	60					
	50					
JUDGE 5	60					
	60					
JUDGE 6	40					
	60					
Mean 1st	60					*
Mean 2 nd	58.3					•
						-

STANDARD SETTING: Angoff - POST



Evaluate the process

- Judges confidence in the process
 - Resulting cut off scores

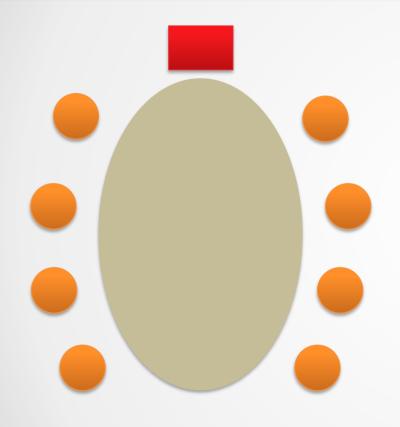
Documentation

SCREEN



STANDARD SETTING MODIFIED
ANGOFF

STANDARD SETTING: Modified Angoff - PRE



Select the judges

Discuss

- a. Purpose of the assessment
 - b. Nature of examinees
- c. Components of adequate/inadequate knowledge

Select the methods – train judges

Define borderline standard

STANDARD SETTING: Define Borderline



#1 Setting – e.g. graduate of the ophthalmology program

#3 Skills – e.g. be able to work with moderate supervision, equipped with acceptable technical ability

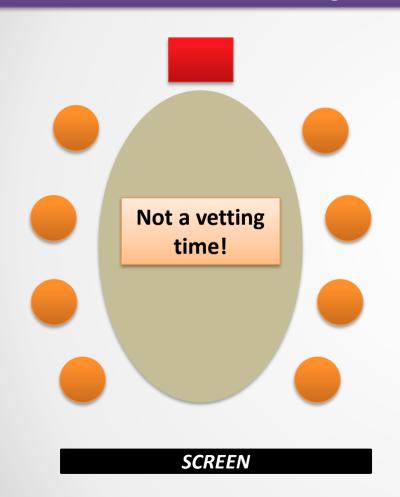
#5 Errors (considering the forgivable or unforgivable) – e.g. safe clinical judgment, decision making and management

(Mills, Melican & Ahluwalia, 1991)

STANDARD SETTING: Borderline Standards

"The borderline graduate of the ophthalmology program should Knowledge Settina demonstrate adequate knowledge for safe clinical judgment, decision making and management, be able to work with moderate supervision, equipped with **Errors** acceptable technical ability, and conduct Forgivable, non-forgivable themselves professionally." Attitude (MUCCO, 20-22 Aug 2014, A Workshop on Examination Questions Preparation, Kuala Lumpur) **PASS**

STANDARD SETTING: Modified Angoff - DURING



Read through question 1

Judges: Individually, estimate the mark that can be obtained by borderline examinees for question 1

Moderator: Record ratings

Moderator: Discuss ratings

Moderator: Get 2nd ratings after discussion

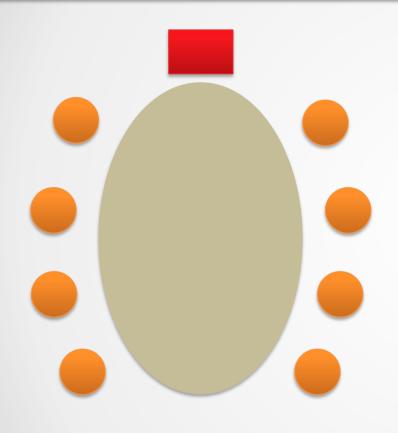
Calculate mean

Repeat for next questions

(Cizek, 2006; Angoff, 1971)

	Q1	Q2	Q3	Q4	Q5	Mean	
Total Mark	10						
JUDGE 1	6						
	6						
JUDGE 2	5						
	6						
JUDGE 3	9						
	6						
JUDGE 4	6						
	5						
JUDGE 5	6						
	6						
JUDGE 6	4						
	6						Cut-off score
Mean 1st	6					<	round
Mean 2 nd	5.83					•	Cut-off score
							round

STANDARD SETTING: Modified Angoff - POST



Evaluate the process

- Judges confidence in the process
 - Resulting cut off scores

Documentation

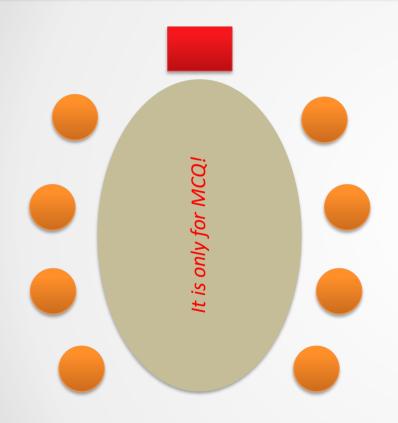
SCREEN



STANDARD SETTING

NEDELSKY

STANDARD SETTING: Nedelsky - PRE



Select the judges

Discuss

- a. Purpose of the assessment
 - b. Nature of examinees
- c. Components of adequate/inadequate knowledge

Select the methods – train judges

Define borderline standard

STANDARD SETTING: Define Borderline



#1 Setting – e.g. graduate of the ophthalmology program

#3 Skills – e.g. be able to work with moderate supervision, equipped with acceptable technical ability

#5 Errors (considering the forgivable or unforgivable) – e.g. safe clinical judgment, decision making and management

(Mills, Melican & Ahluwalia, 1991)

STANDARD SETTING: Borderline Standards

Setting

Knowledge

Errors

Forgivable, non-forgivable

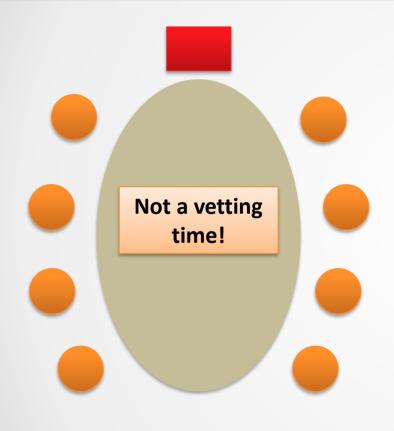
"The borderline graduate of the anaesthesiology program should demonstrate adequate knowledge for safe clinical judgment, decision making and management, be able to work with minimal supervision, equipped with acceptable life saving skills and technical ability, and conduct Attitude themselves professionally."

(8 Jan 2022, A Workshop on Standard Setting (Anaesthesiology) Workshop, UPM, Selangor)

FAIL

PASS

STANDARD SETTING: Nedelsky - DURING



Read through each question

Judges: Working individually, judges mark the wrong answers the borderline students would be able to eliminate.

Moderator: Record ratings

Moderator: Discuss and change ratings

Repeat for next questions

Calculate passing score

Table 1. Example of calculations for Nedelsky's method applied to a test scored without correction for guessing

Question	Answers*	Number of answers not eliminated	Expected score		
1	а (В) 🗶 🕱 🗶	2	1/2= .50		
2	XXXXE	1	1/1 = 1.00		
3	XXCDX	2	1/2 = .50		
4	А Ж . С D Ж	3	1/3 = .33		
5	AXXXX	1	1/1 = 1.00		
6	A B C D E	5	1/5 = .20		
7	а в с 🕱 🖲	4	1/4 = .25		
8	(A) B X D E	4	1/4= .25		
9	ABCDE	5	1/5 = .20		
10	ABCDE	5	1/5 = .20		
Cut-off scor	re		Sum = 4.43		
Expected total score = 4.45					

^{*}A circle indicates the correct answer: an X indicates an answer the borderline test-taker would eliminate.

- Three methods of calculating passing score:
 - Mean
 - Median
 - Trimmed mean

Table 2. Example of three ways to combine scores from individual judges

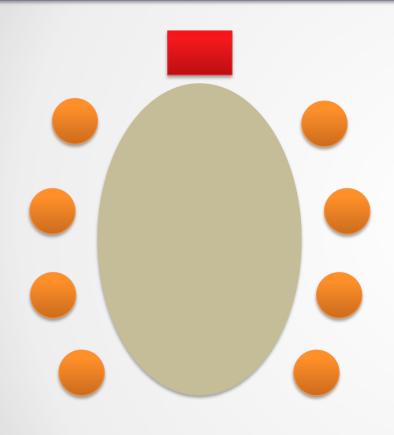
Judge 1 (highest)	92.50	
Judge 2	77.25	Judge 2 77.25
Judge 3	67.00	Judge 3 67.00
Judge 4	66.67	Judge 4 66.67
Judge 5 (lowest)	65.33	
	Sum = 368.75	Sum = 210.92

 $Mean = 368.75 \div 5 = 73.75$

Median = 3rd highest = 67.00

Trimmed Mean = 210.92 + 3 = 70.31

STANDARD SETTING: Nedelsky - POST



Evaluate the process

- Judges confidence in the process
 - Resulting cut off scores

Documentation

SCREEN