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Response to comments on: Shining a spotlight on scoring in the OSCE: Checklists and item weighting

Dear Editor

As academics and researchers, we are delighted to see medical students engaging with our assessment work. We would like to emphasise three brief points in response to Dawson et al. (2020).

1. We completely agree that hybrid/key features checklists provide a more valid way of measuring OSCE performance compared to those consisting of only dichotomous items. This is, in essence, the key message of our work. We would also comment that more modern checklist conceptions should include dichotomous items where stations writers judge this the most appropriate way to score the sub-task.
2. We also agree that wording associated with item anchors is incredibly important, and changes to wording can have important impacts on the behaviour of assessment writers, assessors, candidates, and ultimately on pass/fail decisions.
3. We believe strongly that having a visibly numerical anchored scale is poor practice, which provides the unwanted opportunity for examiners to compensate across items when scoring in a station.

In summary, all aspects of assessment design are important, and all decisions need careful consideration when designing a new assessment instrument.

We thank the medical students from Exeter for contributing to this important discussion, and finally comment that medical education assessment research could benefit from involving medical students more.

Disclosure statement

The authors have no declarations of interest to report.

References

Dawson E, Hubble N, Musgrove J, Prosser B, Bird J. Response to: Shining a spotlight on scoring in the OSCE: Checklist and item weighting. 2020. Med Teach. In press.

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