



RESEARCH ARTICLE

A retrospective feedback analysis of objective structured clinical examination performance of undergraduate medical students

[version 1; peer review: 2 approved, 1 approved with reservations, 1 not approved]

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v1 First published: 24 Oct 2024, 14:251
<https://doi.org/10.12688/mep.20456.1>
Latest published: 24 Oct 2024, 14:251
<https://doi.org/10.12688/mep.20456.1>

Abstract

Introduction

Feedback is an essential component of medical education, enhancing the quality of students' knowledge and skills. However, providing effective feedback, particularly in clinical skills assessments like Objective Structured Clinical Examinations [OSCEs], often poses challenges. This study aimed to evaluate the content of OSCE feedback given to undergraduate medical students over five years.

Methods





A retrospective analysis of 1034 anonymised medical students' OSCE performance was conducted, focusing on written feedback. The written feedback data were randomly selected from OSCE sessions, collected from university assessment records and anonymised for ethical considerations. R software was used to identify the most frequently repeated words in the examiners' feedback text, and word cloud charts were created to visualise the responses.

Results

Word clouds generated from the top 200 most frequently used terms provided visual insights into common descriptive words in feedback comments. The most frequently repeated word over five years was "good," indicative of potentially non-specific feedback.

Open Peer Review

Approval Status 

	1	2	3	4
version 1				
24 Oct 2024	view	view	view	view

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Any reports and responses or comments on the article can be found at the end of the article.

Discussion

The high frequency of non-specific terms like "good" suggests a need for more specific, constructive feedback. However, such generic terms can offer some positive reinforcement, more than they may be needed to foster significant improvement. As previously proposed in the literature, adopting structured feedback forms may facilitate the delivery of more specific, actionable feedback.

Conclusion

This study emphasises the importance of providing specific, actionable feedback in medical education to facilitate meaningful student development. As medical education continues to evolve, refining feedback processes is crucial for effectively guiding students' growth and skill enhancement. Using structured feedback forms can be a beneficial strategy for improving feedback quality.

Keywords

OSCE, medical education, feedback quality, written feedback, assessment



This article is included in the [Current Challenges and Developments in Health Professions Education](#) collection.

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Author roles: **Alsahafi A:** Formal Analysis, Methodology, Writing – Original Draft Preparation; **Newell M:** Supervision, Writing – Review & Editing; **Kropmans T:** Supervision, Writing – Review & Editing

Competing interests: No competing interests were disclosed.

Grant information: The author(s) declared that no grants were involved in supporting this work.

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How to cite this article: Alsahafi A, Newell M and Kropmans T. **A retrospective feedback analysis of objective structured clinical examination performance of undergraduate medical students [version 1; peer review: 2 approved, 1 approved with reservations, 1 not approved]** MedEdPublish 2024, **14**:251 <https://doi.org/10.12688/mep.20456.1>

First published: 24 Oct 2024, **14**:251 <https://doi.org/10.12688/mep.20456.1>

Practical points

- The study highlights the importance of structured and specific feedback in improving the quality of OSCE assessments, thereby enhancing medical education.
- Text mining revealed "good" as the most frequent term descriptor in OSCE feedback, indicating a lack of specificity and actionability.
- Word clouds showed common term descriptors in feedback, highlighting focus areas and gaps in current practices.

Introduction

Providing feedback is an important part of learning and teaching in medical education (Bing-You *et al.*, 2017; Ende, 1983; Hattie & Timperley, 2007; Shrivastava & Shrivastava, 2020a). Feedback helps learners bridge their existing gaps and move forward towards the competencies and skills expected of them (Gupta *et al.*, 2021). It provides essential information that plays a critical role in eliminating uncertainties related to course content and desired competencies, thereby guiding learners on their educational journey (Shrivastava & Shrivastava, 2020b). Effective feedback in medical education is crucial for promoting learning among students (Shrivastava & Shrivastava, 2020b). It encourages reflection on practice, helping students to understand their strengths and areas for improvement (Bakke *et al.*, 2020). Additionally, structured and actionable feedback can significantly enhance students' clinical skills and patient care practices (Lai *et al.*, 2020).

In the context of Objective Structured Clinical Examinations (OSCEs), feedback from examiners is particularly valuable as it provides detailed insights into students' clinical competencies and areas for improvement (John *et al.*, 2021). OSCEs are structured assessments where students demonstrate their clinical skills through various stations, and examiners document their observations and provide feedback (John *et al.*, 2021). Analysing this feedback can discover patterns and trends that inform teaching practices and student learning strategies (Gilkes *et al.*, 2022). Text analysis, which involves extracting meaningful information from textual data, has become an increasingly popular approach for examining written feedback (Khanbhai *et al.*, 2021). By leveraging tools like R and R Studio, educators can systematically analyse large volumes of feedback, identifying common themes and specific areas where students frequently struggle (Hynninen *et al.*, 2020). This process enhances the understanding of student performance and guides the development of targeted educational interventions (Sharma & Jain, 2021).

Text analysis in educational research has shown promising results in enhancing feedback mechanisms (Ferreira-Mello *et al.*, 2019). Text analysis allows for systematically examining qualitative data, providing insights that might not be immediately apparent through manual review (Castleberry & Nolen, 2018). In medical education, particularly in OSCEs, this technique can evaluate the quality and content of examiners'

feedback (Maimone *et al.*, 2023). Researchers can perform sophisticated analyses, such as sentiment analysis, frequency analysis, and topic modelling, using R and R Studio to understand feedback patterns better (Welbers *et al.*, 2017). These analyses can reveal how feedback is distributed across different competencies, identify recurrent student issues, and highlight areas where feedback might lack specificity or constructiveness (Chary *et al.*, 2019). Moreover, the results from text analysis can inform the training of examiners, ensuring that feedback is comprehensive and delivered in a manner that maximises student learning and development (Chary *et al.*, 2019).

This study aims to use text analysis techniques in R and R Studio to systematically evaluate and improve the quality of written feedback provided by examiners in OSCEs. By identifying the key descriptors and visualising the most repeated words in feedback, this study seeks to enhance the feedback process, ultimately supporting better learning outcomes for medical students.

Methods

Study design

In this retrospective study, records of 1,034 different undergraduate medical students' OSCE performance across five separate cohorts were analysed. The clinical skill assessments of OSCE covered a range of anonymised stations of OSCEs, including medical history, physical examinations, or clinical procedures, such as CNS, respiratory, abdominal, and OBGYN exams. As our study is retrospective and based on the examiners' feedback stored in the university's records, the waiver of consent was granted as part of the ethical approval by the University Ethics Committee of the University of Galway, which oversees all studies involving human participants. All extended data, including the feedback text, and data processing codes, have been uploaded to our repository on Zenodo alongside the underlying data.

OSCE, scores, written feedback

The OSCE is a valid and reliable assessment tool for clinical skills assessment in medical and health sciences education. During the OSCE, examiners assess student performance and input the students' observed marks on score sheets. They can also provide their professional opinion on students' performance using the following categories of the Global Rating Scale (GRS) (Fail, Borderline Fail, Borderline Pass, Good, or Excellent). In addition, there is a general comments section for examiners to give written feedback.

Data collection and analysis

This project utilised OSCE performance data extracted from the Objective Structured Clinical Examination (OSCE) digital assessment platform (Qpercom Observe; <https://www.qpercom.com>). The data was collected by the University of Galway. According to university procedures, the examiners' feedback is collected during the exams. The data extraction date (access to the university records) was April 5, 2021. Data collection consisted of OSCE scores,

Global Rating Scale results, and examiner feedback from a random selection of OSCE examinations from a single institution over a five year period. All data was anonymised.

Text mining methods highlighted the most frequently used keywords in a paragraph of text. A series of word clouds, called text clouds or tag clouds, were created to represent text data visually. The text mining package and the word cloud generator package in R software were used to create the word clouds. The OSCE results data was saved as a text file, and the following R codes were generated (Figure 1):

Text mining overview

Text mining, also known as text analytics, derives meaningful information from natural language text. It involves various techniques such as text preprocessing, tokenisation, and feature extraction to analyse and interpret textual data. In this study, we utilised text mining to analyse examiners' feedback in the OSCE context. This approach allows for the systematic identification of patterns, themes, and sentiments within the feedback, providing insights that can enhance the quality of feedback provided to medical students (Kumar, 2015; Zong *et al.*, 2021)

Tools and software

The text mining analysis used R, a programming language and software environment for statistical computing and graphics (Li *et al.*, 2017). R Studio, an integrated development environment (IDE) for R, facilitated coding and data visualisation (Li *et al.*, 2017). These tools were selected for

their robust text mining packages, extensive community support, and capabilities for data manipulation and visualisation.

Text preprocessing

The initial step involved loading the feedback data into R using the `Corpus()` function from the `tm` package (Figure 1). After loading the text data, it was inspected using the `inspect()` function to ensure accuracy and completeness (Figure 2). Text transformation was then performed using the `tm_map()` function to replace special characters, such as “/”, “@”, and “|”, with spaces (Figure 3). Finally, text cleaning was conducted by removing unnecessary whitespace, converting the text to lowercase, removing common stop words, and eliminating numbers and punctuation using the `tm_map()` function (Figure 4).

Term-document matrix

A term-document matrix (TDM) was created to quantify the frequency of words in the feedback data. The TDM represents the occurrence of terms in the documents, which is essential for further analysis and visualisation (Figure 5).

Word cloud generation

A word cloud was generated to visualise the most frequent terms in the feedback data. The word cloud package was utilised for this purpose. The word cloud provides a visual representation where the size of each word indicates its frequency in the text. The following steps were taken to generate the word cloud (Figure 6):

```

2 # Install
3 install.packages("tm") # for text mining
4 install.packages("SnowballC") # for text stemming
5 install.packages("wordcloud") # word-cloud generator
6 install.packages("RColorBrewer") # color palettes
7 # Load
8 library("tm")
9 library("SnowballC")
10 library("RColorBrewer")
11 library("wordcloud")

```

Figure 1. R Code implementation: Initial Data Loading Step.

```

13 text <- readLines(file.choose())
14
15 # Load the data as a corpus
16 docs <- Corpus(VectorSource(text))
17
18 inspect(docs)

```

Figure 2. R code implementation: Document import and inspection step.

1. **Term frequency calculation:** The frequency of each term was calculated from the TDM.
2. **Word cloud creation:** The word cloud function was used to create the word cloud, with customisation options for colour and layout provided by the R Colour Brewer package.

Ethical considerations

As our study is retrospective and based on the examiners' feedback stored in the university's records, the waiver of consent was granted as part of the ethical approval by the University Ethics Committee of the University of Galway, which oversees all studies involving human participants. All extended data, including the feedback text, and data processing

```

20 toSpace <- content_transformer(function(x, pattern) gsub(pattern, " ", x))
21 docs <- tm_map(docs, toSpace, "/")
22 docs <- tm_map(docs, toSpace, "@")
23 docs <- tm_map(docs, toSpace, "\\|")

```

Figure 3. R code implementation: Text transformation and special characters removal step.

```

25 # Convert the text to lower case
26 docs <- tm_map(docs, content_transformer(tolower))
27 # Remove numbers
28 docs <- tm_map(docs, removeNumbers)
29 # Remove english common stopwords
30 docs <- tm_map(docs, removeWords, stopwords("english"))
31 # Remove your own stop word
32 # specify your stopwords as a character vector
33 docs <- tm_map(docs, removeWords, c("blabla1", "blabla2"))
34 # Remove punctuations
35 docs <- tm_map(docs, removePunctuation)
36 # Eliminate extra white spaces
37 docs <- tm_map(docs, stripWhitespace)
38 # Text stemming
39 docs <- tm_map(docs, stemDocument)

```

Figure 4. R code implementation: Text cleaning - removing unnecessary spaces, numbers, and converting to lowercase.

```

41 dtm <- TermDocumentMatrix(docs)
42 m <- as.matrix(dtm)
43 v <- sort(rowSums(m), decreasing=TRUE)
44 d <- data.frame(word = names(v), freq=v)
45 head(d, 10)

```

Figure 5. R code implementation: Term document matrix creation for word frequency analysis.

```

47 set.seed(1234)
48 wordcloud(words = d$word, freq = d$freq, min.freq = 1,
49           max.words=200, random.order=FALSE, rot.per=0.35,
50           colors=brewer.pal(8, "Dark2"))

```

Figure 6. R code implementation: Word cloud generation for visualisation of word frequencies.



Figure 8. Top 200 scoring words cloud in year 2.



Figure 9. Top 200 scoring words cloud in year 3.



Figure 10. Top 200 scoring words cloud in year 4.



Figure 11. Top 200 scoring words cloud in year 5.

(Han *et al.*, 2019). As feedback mechanisms evolve, (AI) may have a greater role in the examination process. By seamlessly integrating these capabilities within the existing OSCE feedback system, there's an opportunity for real-time, detailed, and objective feedback generation (Zhang *et al.*, 2023). Focusing on the meticulous evaluation of scoresheet items, scores, and GRS, AI can intelligently synthesise this data to produce comprehensive, consistent, and specific student feedback. The advantage extends beyond the precision; rapid response times ensure that students receive feedback immediately relevant to their performance (Han *et al.*, 2019; Zhang *et al.*, 2023). Such timely insights can guide students towards more focused learning, capitalising on the benefits of immediate reinforcement. Furthermore, with AI's adaptive learning capabilities, the system could continually refine itself, offering even more personalised and accurate feedback, modernising the feedback mechanism and ensuring students benefit from actionable insights.

This study's limitations are that it focused on a singular institution and a subset of undergraduate medical students. Therefore, the findings may only apply to some medical students or institutions (Cushing *et al.*, 2011). In addition, the text mining analysis provided only the frequency of certain words, which may not wholly capture the nuances of the provided feedback (Carr, 2006).

In conclusion, generic terms such as "good" may not give recipients the necessary information to comprehend their performance or influence their development. Adopting a more comprehensive approach to feedback, as described above, may enhance medical students' learning and development over time (Ende, 1983; Hattie & Timperley, 2007).

Conclusion

This study demonstrates the value of analysing written feedback during OSCE examination sessions. However, the

prevalence of vague and generic comments, such as "good," highlights the need for more actionable and constructive feedback that may enhance learning development among undergraduate medical students.

Using structured feedback forms, exams may provide more specific, pertinent, and actionable feedback addressing students' strengths and weaknesses. This method assists undergraduate medical students in comprehending their performance and provides direction for enhancing their skills and knowledge.

Ethics and consent

As our study is retrospective and based on the examiners' feedback, the waiver of consent was granted as part of the ethical approval by the University Ethics Committee of the University of Galway, which oversees all studies involving human participants. All extended data, including the feedback text, and data processing codes, have been uploaded to our repository on Zenodo alongside the underlying data. The University Ethics Committee granted ethical approval for the study on December 2nd, 2020, with the Ethical Committee Application Reference Number 2020.12.019. The study adheres to the principles outlined in the Declaration of Helsinki. The primary data was collected by the University of Galway during the OSCE exams, following the university's protocols and procedures.

Data availability

Underlying data

Zenodo: A Retrospective Feedback Analysis of Objective Structured Clinical Examination Performance of Undergraduate Medical Students. <https://doi.org/10.5281/zenodo.11096861> (Alsahafi *et al.*, 2024)

This project contains the following underlying data:

- Feedback Text (The raw text data was collected from participants and used to generate the word clouds. This includes all examiners' feedback and comments.)

Data are available under the terms of the Creative Commons Attribution 4.0 International license (CC-BY 4.0).

Extended data

Analysis code available from: https://github.com/Akram-09/OSCE_Cloud_Study_Codes.git

Archived analysis code at time of publication: <https://doi.org/10.5281/zenodo.12593752> (Akram-09, 2024)

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Open Peer Review

Current Peer Review Status: ? ✓ ✓ ✗

Version 1

Reviewer Report 05 December 2024

<https://doi.org/10.21956/mep.21892.r40107>

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Ali Al-dabbagh 

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The authors address an essential aspect of OSCE feedback. They discuss text analysis in detail in the introduction and methods, although some of it is unnecessary.

The study aims to evaluate and improve the quality of written feedback, but quite obviously, the only thing that was done was using text analysis to show the most frequently used word which was a "good" and this is somewhat expected! in a given cohort of students would expect a bell distribution of grades so a large number of students would receive a "good" in the feedback.

The authors had access to the whole data of the OSCEs including the grades and global ratings, it would be of benefit if they did a text analysis of those who did not perform well in the exams.

Based on the result obtained, I don't think the authors can neither conclude that text analysis is useful in this situation nor that implementing structured feedback will improve students learning.

Is the work clearly and accurately presented and does it cite the current literature?

Yes

Is the study design appropriate and is the work technically sound?

Partly

Are sufficient details of methods and analysis provided to allow replication by others?

Partly

If applicable, is the statistical analysis and its interpretation appropriate?

Not applicable

Have any limitations of the research been acknowledged?

Partly

Are all the source data underlying the results available to ensure full reproducibility?

Yes

Are the conclusions drawn adequately supported by the results?

Partly

Competing Interests: No competing interests were disclosed.

Reviewer Expertise: Medical Education, Bioethics, Surgery

I confirm that I have read this submission and believe that I have an appropriate level of expertise to state that I do not consider it to be of an acceptable scientific standard, for reasons outlined above.

Reviewer Report 03 December 2024

<https://doi.org/10.21956/mep.21892.r40118>

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Maimoona Nasreen

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A very important topic has been addressed by the authors. Feedback in OSCEs facilitates self-reflection and helps students become competent in clinical skills. One suggestion to strengthen the research is to identify the patterns that are specific to different stations over time. This will allow for an in-depth exploration of potential areas for improvement and effective feedback.

Is the work clearly and accurately presented and does it cite the current literature?

Yes

Is the study design appropriate and is the work technically sound?

Yes

Are sufficient details of methods and analysis provided to allow replication by others?

Yes

If applicable, is the statistical analysis and its interpretation appropriate?

Not applicable

Have any limitations of the research been acknowledged?

Yes

Are all the source data underlying the results available to ensure full reproducibility?

Yes

Are the conclusions drawn adequately supported by the results?

Yes

Competing Interests: No competing interests were disclosed.

We confirm that we have read this submission and believe that we have an appropriate level of expertise to confirm that it is of an acceptable scientific standard.

Reviewer Report 25 November 2024

<https://doi.org/10.21956/mep.21892.r40114>

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Lamia Yusuf

Medical education, consultant medical educationist, University of Health sciences Lahore, Lahore, Punjab, Pakistan

The study focuses on the importance of feedback in, (OSCEs) over five years. It was ethically approved by the University Ethics Committee of the University of Galway, and a waiver of consent was granted due to its retrospective nature. A retrospective analysis of 1034 Written feedback data was analyzed using R software to identify frequently repeated words, visualized through word clouds. The word clouds revealed that the most frequently repeated word in feedback over five years was "good. This suggested a structured feedback form. The study was ethically approved by the University Ethics Committee of the University of Galway, and a waiver of consent was granted due to its retrospective nature. This study addresses a significant aspect of learning: feedback and the need for a structured feedback form. Although limited to one study centre, such studies should involve more centres to increase generalizability. also, studies should involve more clinical years, so a longitudinal study can compare trends and improvements in feedback over some time. New techniques should be used for text-mining analysis.

Is the work clearly and accurately presented and does it cite the current literature?

Yes

Is the study design appropriate and is the work technically sound?

Yes

Are sufficient details of methods and analysis provided to allow replication by others?

Yes

If applicable, is the statistical analysis and its interpretation appropriate?

Yes

Have any limitations of the research been acknowledged?

Yes

Are all the source data underlying the results available to ensure full reproducibility?

Yes

Are the conclusions drawn adequately supported by the results?

Yes

Competing Interests: No competing interests were disclosed.

Reviewer Expertise: medical education, Work place based assessments, simulation-based learning, curriculum, quality assurance in clinical settings.

I confirm that I have read this submission and believe that I have an appropriate level of expertise to confirm that it is of an acceptable scientific standard.

Reviewer Report 21 November 2024

<https://doi.org/10.21956/mep.21892.r40109>

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Mohamed Hany Shehata

Arabian Gulf University, Manama, Capital Governorate, Bahrain

The study addresses an important topic in medical education – the quality of feedback provided during OSCEs. It used an innovative approach to analyze examiners' written feedback (text mining). The study clearly identifies the dominance of generic terms like "good" and emphasizes the need for more specific feedback. The authors propose practical solutions like structured feedback forms to improve feedback quality.

The study has several limitations including:

1. The limited generalizability, as it focuses on a single institution and a subset of students.
2. Data analysis depth as text mining only reveals word frequency, potentially missing the nuances of feedback content.
3. The discussion of AI integration is futuristic and lacks concrete details on its

implementation.

This is a well-written that provides valuable insights into the need for more specific feedback in OSCE assessments. However, the authors could strengthen the review by:

Expand the scope of the study:

- I am not sure what is the message that can be useful to readers other than the importance of structured feedback. The paper can be enriched by conducting deeper analysis.

That may consider:

1. Use topic modeling to identify underlying themes in the feedback to know more about the areas which were of concern to raters,
2. Conduct the analysis for some stations that were used over several years to identify station-specific patterns,
3. Compare feedback from different academic years to identify trends in feedback quality over time.
4. Employ more advanced text mining techniques, such as sentiment analysis, to identify positive and negative feedback.

The discussion part can also be strengthened by discussing the potential impact of generic feedback on student learning and performance, exploring the barriers to providing specific feedback and propose strategies to overcome these challenges, discussing the ethical implications of using AI in feedback provision, such as data privacy and bias.

References

1. Alsahafi A, Newell M, Kropmans T: A retrospective feedback analysis of objective structured clinical examination performance of undergraduate medical students. *MedEdPublish*. 2024; **14**. [Publisher Full Text](#)

Is the work clearly and accurately presented and does it cite the current literature?

Yes

Is the study design appropriate and is the work technically sound?

Partly

Are sufficient details of methods and analysis provided to allow replication by others?

Yes

If applicable, is the statistical analysis and its interpretation appropriate?

Not applicable

Have any limitations of the research been acknowledged?

Yes

Are all the source data underlying the results available to ensure full reproducibility?

Yes

Are the conclusions drawn adequately supported by the results?

Yes

Competing Interests: No competing interests were disclosed.

Reviewer Expertise: conduction of OSCE, assessment in medical education, online OSCE

I confirm that I have read this submission and believe that I have an appropriate level of expertise to confirm that it is of an acceptable scientific standard, however I have significant reservations, as outlined above.
