



Making medical student course evaluations meaningful: Evaluating and responding to student satisfaction ratings

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Background The literature emphasizes the value of student evaluations of curriculum in medical education, but there is little information available on how this information is used or how schools monitor the impact of any changes emerging from the evaluations.

Objectives To describe the intensive course review protocol for undergraduate medical courses at Memorial University implemented by the Program Evaluation Sub-Committee (PESC) in 2005 and to examine its impact on improving course ratings from 2006 to 2011. **Methods** PESC is the evaluation oversight committee for the undergraduate medical program at Memorial University. The minimum acceptable standard for the overall course rating is a mean score greater than or equal to 3.5/5.0. Those courses not meeting established standards are expected to undergo an intensive review which requires the course chair to present an action plan in person to PESC detailing steps taken to resolve identified problems. Courses requiring an intensive review are flagged for reassessment to track the impact of any implemented changes. Changes in course ratings and the percentage of courses either above or below the 3.5 benchmark were calculated from 2006-2011. **Results** In the 2006/2007 academic year, 8 courses (61%) did not meet the minimum benchmark of 3.5/5.0. The ratings of all 8 courses increased in the 2008/2009 academic year and by 2010/2011, only 1 course out of the 8 was still below the minimum benchmark. The average course ratings of all 23 courses examined were significantly higher from 2008-2011 compared to the 2006/2007 academic year ($P < 0.05$). **Conclusions** The evaluation strategy implemented by PESC which includes continuous curricular quality improvement and a transparent process for course review can help improve course ratings, particular for courses that receive poor course ratings.

Although further research is necessary, the current study provides initial validation for the value of our approach to course evaluations in an undergraduate medical education program.