BEME Spotlight 42

The Failure to Fail Underperforming Trainees in Health Professions Education: A BEME Systematic Review : BEME Guide No. 42

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Review citation

Review website

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Keywords

Failure to Fail, Underperforming trainees, Trainee, Clinical Education

Headline conclusions

We identified 6 themes relating to the barriers assessors face when failing a poorly performing trainee: (1) assessor's professional considerations, (2) assessor's personal considerations, (3) trainee related considerations, (4) unsatisfactory assessor development and assessment tools, (5) institutional culture and (6) consideration of available remediation for the trainee. We also identified 3 themes relating to the factors enabling assessors to take on the challenge of failing underperforming students: (1) duty to patients, to society, and to the profession, (2) institutional support such as backing a failing evaluation, support from colleagues, assessor development, and strong assessment systems, and (3) opportunities for students after failing. These themes are universally reported across health professions and trainee levels, and have been consistently described over the past decade.

Background and context

Many clinical educators feel unprepared and/or unwilling to report unsatisfactory trainee performance. This systematic review consolidates knowledge from medical, nursing, and dental literature on the experiences and perceptions of assessors with this failure to fail phenomenon.

Review objectives

This review aims to systematically consolidate and analyze a decade of knowledge from medical, dental and nursing literature relating to assessor's ability and willingness to report poor clinical academic and professional performance, and thereby help advance effective interventions. We hope it assists health professions educators to develop effective solutions to this multifaceted and important issue.

Review methodology

Search Strategy: Search Strategy and Terms were applied to the English language literature in CINAHL, EMBASE, and MEDLINE via Ovid (In-Process & Other Non-Indexed Citations and MEDLINE 1946 to Present) from January 2005 to January 2015. The literature search included combinations of keywords and appropriate subject headings for each database to retrieve articles discussing the "failure to fail" medical students, dental and nursing students.

Inclusion and Exclusion Criteria:

Inclusion criteria: (1) From the medical, nursing, or dental professions. (2) Related to assessor experiences and/or perceptions of the failure to fail phenomenon. (3) Related to trainee education in a clinical setting before graduating to independent practice or to the next stage of training (e.g., from medical school to residency training).

Exclusion criteria: (1) Not target profession (not one of: medicine, nursing, dental). (2) Related to the development or vetting of an evaluation tool. (3) Related to the development or assessment (i) of curriculum content, (ii) of specific educational interventions or programs, (iii) of tools for assessing specific trainee skills, competencies or knowledge, and (iv) of peer mentoring interventions. (4) Not related to trainee education (clinical practice, clinical decision-making, practice management, other).

Data Extraction: The search strategy resulted in a library of 5,330 citations. Working in teams of 2-3 reviewers, application of inclusion and exclusion criteria, and careful review of relevant articles reduced the library to 28 articles for full data extraction. DistillerSR® Systematic Review Software was used to support analysis across all steps of the literature review process.

Data Synthesis: Data was abstracted and synthesized for demographics, study methodology, data analysis method, and theory used to inform the research. Study quality was assessed with the Critical Appraisal Skills Programme – UK tool checklist. For the qualitative, review, and survey questions in quantitative studies, the authors engaged in a thematic analysis and developed a descriptive, theme-based classification system through several cycles of analysis, discussion and reflection by the whole research team.

Implications for practice

The challenge our community now faces is determining how to best tackle the identified barriers and to harness the power of enablers to resolve the failure to fail problem.

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