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Improving the quality of teaching and learning in a small group by using self and peer evaluation among students

by
Dr Nilukshi Abeyasinghe, Faculty of Medicine, University of Colombo

Class where the change was done: Undergraduate clinical appointment group in forensic medicine

Existing problems that prompted the need for change
During their two week clinical attachment in forensic medicine, students were required to visit the trauma ward at the hospital, examine victims of assault and record their findings in the Medico-legal report (MLR) form given to them. Report writing was a necessary practical skill the students needed to develop during the appointment.

1. Initially they were given an instruction class and a practical demonstration in the ward, on history taking, examining and documenting of the relevant findings. They were also given a handbook, explaining the procedure of filling the different components of the report. They were then required to compile the report on a victim of trauma in the ward and present these findings to the tutor during the teaching session.

2. Due to the increase in the size of student groups to approximately 16 students, and the limitations of staff, not every student had an opportunity to present a report at a single one-hour class. Those who were unable to discuss their case handed in their reports at the end of the class for correction by the tutor. These were later handed back to the students for re-correction based on the comments given by the staff. Some students did not have reports ready for the class, as they were aware that only a few were corrected in class

3. Students needed to be trained to evaluate their own report in order that there could be progressive improvement on the subsequent reports.

Why did I want to change/improve the present practice?
1. Due to time constraints and limited staff, students needed to learn early on in the appointment, what constituted a complete and detailed medico-legal report.

2. Students had insufficient understanding of what was deficient in their report writing.

3. This method did not sufficiently encourage independent learning for all students

What did I do as a change?

1.Provided a model format for evaluation of a medico-legal report. A marking scheme based on the essential criteria that should be present in the report was formulated during the class with the students.

2.Thereafter, students self-evaluated their own report, and gave marks to themselves based on the model format. They then gave their report to a peer, who marked it based on the same format. All reports and self/peer evaluations were then handed to me for my evaluation and comments which was done after the class.

3.Any problems students encountered during marking were clarified in the class. We discussed problems that any student had with the grading given to them by their peers, thereby clarifying what deficiencies were present in the report.

What happened as a result?

1.Each student had to bring a completed report to class, as both self and peer evaluation were being done. This did not happen earlier as only some students got the opportunity to present their case.

2.Students learnt to determine what constituted a good report. The model format served as a clear reference point to reflect on their own and their peer's reports. The very act of marking a report heightened students' focus of attention to detail.

3.Early on in the appointment, students learnt to evaluate the quality of their work – internalisation of criteria for quality took place. Thereafter, used this knowledge to improve on their subsequent reports. Errors were less as students now personally evaluated their own reports prior to handing it in.

4.Student ratings were fairly similar to those of staff, because every section of the report was given a certain percentage of marks, thereby enabling more meticulous evaluation of the report.

What did I learn from this experience? Reflections on introducing self and peer evaluation

Students when given appropriate learning activities, are able to apply their knowledge and analyse the quality of their own and other students' reports.

Conclusions: The value in self/peer assessment came from the act of marking: it created the appropriate learning activity.

What do I intend to do next?
Action: Use this model in undergraduates and postgraduates assignments so that students learn to evaluate and mark their own answers before getting them corrected by their teachers in a small group setting

Assessment using a 'rubric'
The learning tasks given to the students were those required by the course. Gibbs in referring to the principles of learning that are invoked by peer assessment says that 'The best way to learn how to tackle problems is to tackle lots of problems' (Gibbs 1998). Marking other students work is itself a rich learning experience. **Students see how others might do the task**, some using better approaches than they used, some using worse strategies and thus signalling to the assessors, errors to avoid. (Biggs, 1999: 205) The model **format provided them with a standard** to monitor their own future report writing. Students were also able to **receive feedback on their own work immediately**. In the former setting, it would have taken longer as the tutor was correcting all the reports. By then students were sometimes into other learning tasks.
A fundamental principle of any quality performance is to be able to discern whether it is of good quality or not. This requires **internalising appropriate standards of quality control.** Traditionally, students expect

teachers to tell them if their work is up to scratch; they often do not even check work they hand in (Gibbs 1998). However, not to play the role of assessor means that the very standard one needs in order to become an autonomous learner will not be internalised. **Hence, it is a vital part of learning to assess learning performances**. (Biggs, 1999:206). By learning what criteria should be present to constitute a good report, students learnt to evaluate other's work and improve their own.

Although such an evaluation takes time and was done only for one medico-legal report, it saved time for staff, who would otherwise have been correcting reports with repetitive errors, which the students would not have made if they had a clear idea of what constituted a good report. It is unlikely that students would master good report writing from a single exercise. However, **learning the principles of laying down criteria, assessing and improving one's own work are skills that would enable them to be life-long learners.**

Assessment must generate enough (time on task) and appropriate (tackle lots of problems) learning activity. Appropriate assessment engages students in exactly the kind of learning activity you want to take place. When students not only tackle the problem, but also mark other students' attempts at the problem, they notice other ways to succeed with problems than those they worked out for themselves, notice solutions to problems they could not solve, notice errors just like the silly ones they made themselves, and other errors they have been alerted to avoid. The care and trouble other students take and the sloppiness of some other students is made visible and helps to calibrate the level of effort which is required and the standard which is expected.

Learners also require prompt feedback and discussion in order to learn. Students pay attention to feedback that has a social dimension. (Gibbs 1998 : 46-47)

The act of assessing is one of the deepest learning experiences. Applying criteria to someone else's work is one of the most productive ways of developing and deepening understanding of the subject matter involved in the process. **Measuring and judging are far more rigorous processes than simply reading, listening and watching**. They are the higher level of learning skills in Bloom's taxonomy of educational objectives. Peer assessment allows students to learn from each other's successes. When this is encouraged, students can benefit a great deal from the work of the most able in the group. Peer assessment allows students to learn from each other's weaknesses. Their awareness of what not to do increases, and they are much less likely to fall into traps in their future work. (Race 2001:95)

References

Biggs, J. (1999). Teaching for quality learning at university. Buckingham. Open University Press.

Gibbs, G. (1998) Using assessment strategically to change the way students learn, in S. Brown and A. Glasner (eds). Assessment matters in higher education: Choosing and using diverse approaches. Buckingham: Society for Research into Higher Education/Open University Press.

Race, P. (2001). The lecturer's toolkit: a practical guide to learning, teaching and assessment (2nd ed). London. Kogan Page

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Good Teaching Award
by
Dr Enoka Corea, Faculty of Medicine, University of Colombo

Awards for 'good' teaching or excellence in teaching awards are increasingly found in universities all over the world. The institution itself may award them, such as the ETA awards of the University of Western Australia or they may be national awards such as the Carrick Awards for Australian University Teaching.

When designing a Good Teaching award the first question we may pose is "why should we reward good teaching"? One very important reason would be to motivate teachers to put in time and effort so as to bring about effective learning in our students. Teaching rewards could stimulate more university teachers to improve their teaching skills which in turn would lead to high quality teaching and learning. Teachers holding Good Teaching awards could provide role models for new teachers.

Awards can assist to redress the imbalance between teaching and research in higher education.

One cannot have awards without first establishing criteria. The debate about criteria could help us understand more clearly what we mean by 'quality' in higher education. These criteria could be used in teacher education, selection and promotion procedures (McNaught & Anwyl 1992).
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So there seem to be good reasons to reward good teachers.

We need to think about whether we should be rewarding good teachers or good *teaching*? Shifting the focus away from the individual to the activity may be more beneficial to the aim of promotion of teaching excellence and prevents it from becoming purely a popularity contest.

Are teaching awards enough? Most teachers would say no. Continuing fellowships or salary increments may be more effective than special teaching awards (Menges 1996). Certainly changes to promotions, appointments and confirmation procedures to give more emphasis to good teaching would be a powerful impetus (Ramsden 1995). The consensus is that awards, in themselves, are not a sufficient incentive for improving the quality of teaching. Carusetta concludes that "Teaching awards are effective when they are representative of an institutional culture that values good teaching and when they are part of a program designed to encourage teaching effectiveness" (Carusetta 2001).

So a teaching award does not remove the onus from universities to establish expectation of good teaching from its teachers (such as expecting all newly appointed staff to become qualified as university teachers as a condition of confirmation or promotion), to continually assess and reward its teachers (for example by establishing minimum standards of competence in teaching at all levels of appointment and promotion), to provide support for good teaching (by introducing staff development and qualifications in university teaching at all levels and building an academic environment conducive to good teaching) and to show long term commitment (both in financial terms and in terms of leadership) to building up a profession of university teaching.

Excellence in teaching awards should only be one part of this integrated approach to fostering good teaching. However until universities take a more active role awards could help bridge the gap between the ideal and the reality.

Once we are decided that excellence in teaching awards are part of our strategy to improve higher education effectiveness we need to become more specific. We need to specify the process of administering the awards. What are the eligibility criteria? For example do we restrict applications to members of SLAIHEE? Since ongoing engagement in professional development is a requirement of membership this could be the first criterion. We need to think of the classes or types of awards we would like to give. Should the awards be for individuals or should they be for a team such as a department? None of us deliver the entirety of a course and student learning may be more impacted by what we do as a team than by what we do as individuals. This would also deal with the criticism that teaching awards encourage competition over teamwork and collaboration. We need to discuss issues such as number and frequency and form of the awards.

The attributes and qualities of exemplary teachers or in other words the criteria we choose to judge good teaching is crucial. We could use criteria drawn up by other groups or draft some of our own, in sufficient detail to be clear and understood by all. If the criteria are seen to be too many to be practical we could use a limited selection each year.

The selection processes should be transparent and clear. For example, should the nomination come from the individual or team or from students? Would student nomination be biased towards 'teacher popularity' and focus exclusively on good presentation skills ignoring the many other facets of good teaching? The evidence of good teaching that should be provided should be comprehensive enough to make the process authentic but not give the impression that it requires too much effort for insufficient reward. And certainly, the selection panel should be competent and trained to fulfill their role

To summarise, the features of an exemplary teaching award scheme should include…

- The program is consistent with the community's mission and values, and it communicates those values to the community.
- The program is grounded in research-based teaching competencies rather than dependant on special interests, favouritism, or popularity.
- The program recognizes all significant facets of instructional activities that are conducted by staff.
- The program rewards collaborative as well as collective achievement.
- The program neither precludes nor displaces rewards for teaching that are part of the institutionalized reward scheme.
- The program calls on those who have been honored to continue to contribute to the development of others.
- The program contributes to collegial responsibility for promoting exemplary teaching.

- The program encourages self-reflection at all levels.
- The program is based on sound assessment practices, including multiple data sources, multiple measures and consistency over time.
- The program itself is open to scrutiny and change as conditions change. (Svinicki & Menges 1996)

References
Carusetta, E. (2001). Evaluating teaching through teaching awards. *New Directions for Teaching andLearning* (88), 31-40.

McNaught, C., & Anwyl, J. (1992). Awards for teaching excellence at Australian universities. *Higher Education Review, 25*(1), 31-44.

Menges, R. J. (1996). Awards to individuals. *New Directions for Teaching and Learning (65),* 3-9.

Ramsden, P., Margetson, D., Martin, E., & Clarke, S. (April 1995). *Recognising and Rewarding Good Teaching in Australian Higher Education: a Project Commissioned by the Committee for theAdvancement of University Teaching: Final Report.* Canberra: AGPS.

Svinicki, M. D., & Menges, R. J. (1996). Consistency within diversity: guidelines for programs to honor exemplary teaching. *New Directions for Teaching and Learning (65),* 109-114.

Peer-assisted learning – an approach of learning for undergraduates and postgraduates
by
Dr Nilukshi Abeyasinghe, Faculty of Medicine, University of Colombo

The annual AMEE (Association for Medical Education in Europe) conference held in Trondheim, Norway in August 2007, which had participants from over 75 countries, had as one of its focal events the role of peer assisted learning in medical education.

A very notable observation was the role students take in being part of the decision making bodies that develop different aspects of their curriculum. Student plenary presentations and workshops focused on students' ability to discern their learning

requirements. These were not only in the discipline they were studying, but also in generic skills and hands on training in the field. Most students were eager to practice skills they would require as junior doctors, and as a result many improved developments in simulated resources were being made available. Student bodies in addition, had their own international student conferences where they shared experiences and formulated methods to assist academic staff in curriculum development. Students were appreciative of the prominent role given to them in decision making bodies, which they say served to improve their confidence in generic skills such as critical thinking, leadership, presentation skills, evaluation etc. Students identified themselves as educators, even while they were learning and were utilized in certain undergraduate medical programmes to train junior students in a formal way. They were used to design curricula, to mentor junior students as well as teach in certain subject areas and help with demonstrations in laboratories and in e-learning resources. Both the students teaching and those being taught benefited from such teaching sessions.

Students today come into the university system with certain new skills such as computer skills which they seek to enhance in addition to their subject discipline. They are also aware of the additional generic skills they require to be competent once they qualify. They understand the necessity for rapid change in curricula in order to keep pace with the new developments in their field. To be able to accommodate such students who are aware of and who have wide and varied needs requires not only development and training of staff, who will then be equipped to train such students, but also development of students in both subject specific and generic skills within the curriculum. Teaching, learning and assessment methods should also be part of the students' curriculum. This would help them both in their learning as well as in their presentations to peers and in their roles of mentoring junior colleagues.

The literature provides evidence of medical students acting as tutors in lecture-based courses, (Caroll 1996) and as student facilitators in problem-based learning curricula. (Sobral 1994) Peers are viewed as being more approachable, and more readily incorporate new learning experiences into the curriculum. (Johnston 1996) Studies have shown a positive correlation with examination performance as well. (Schaffer, Wile & Griggs 1990), (Ebbert, Morgan and Harris 1999). Both trainers and trainees benefited from these learning sessions. (Anderson, Robins, Fitzgerald et al 1996), (Solomon, Crowe 2001). Postgraduate in-service training programmes are another useful area where peer-assisted learning could be well developed. Trainees are utilized in the Postgraduate training programme in Forensic Medicine to both educate peers by case presentations and journal club discussions. They are also utilized to teach in the undergraduate two week clinical attachment in Forensic Medicine. By these methods, they develop the ability to present in an analytical and logical way, the cases they come across in both a clinical and autopsy setting. Postgraduate students are required to write reports to court and have them corrected by the trainers. By engaging them in the correction of undergraduate reports, they are able to see how others might do their own task, some using better approaches than they used, some using worse strategies and thus signaling to the assessors, the errors to avoid. (Biggs, 1999:205). Being evaluated in practical work by postgraduate peers based on defined criteria is a method of developing deep learning experiences. Applying criteria to someone else's work is one of the most productive ways of developing and deepening understanding of the subject matter involved. Peer evaluation allows students to learn from each other's successes. When this is encouraged, students can benefit a great deal from the work of the most able in the group. Similarly it allows students to learn from each other's weaknesses. Their awareness of what not to do increases, and they are much less likely to fall into traps in their future work. (Race 2001:95). Studies done on clinical skills learning using peers shows that it is an effective way of incorporating extra training with which students can reinforce basic learning. (Field, Burke McAllister et al 2007). By formalizing such learning, it necessitates that students be trained and therefore provides new graduates with some teaching skills and experience.(Ross, Cumming 2005)

References

Anderson R, Robins I, Fitzgerald J, Zweifler J. Fourth year students as small group leaders of first year students. *Acad Med* 1996;**71**:793-4.

Biggs, J. (1999). Teaching for quality learning at university. Buckingham. Open University Press.

Caroll M. Can medical students teach biochemistry? *Biochem Educ* 1996;**24**:3-15.

Ebbert MR, Morgan PM, Harris IB. A comprehensive student peer-teaching programme. *Acad Med* 1999;**74**:583-4

Field M, Burke JM, McAllister D, Lloyd DM. Peer-assisted learning: a novel approach to clinical skills learning for medical students. *Med Educ* 2007;**41**:411-418.

Johnston C. Peer tutoring in economics at the University of Melbourne. In: Goodlad S, ed. *Students as Tutors and Mentors*. London: Kogan Page Ltd. 1996;32-51.

Race P. (2001) The lecturer's toolkit: a practical guide to learning teaching and assessment (2nd ed). London. Kogan Page.

Ross MT, Cumming AD (2005) Peer-assisted learning. In: Dent GA, Harden RM (eds) A practical guide for medical teachers (2nd ed) Philadelphia, Elsevier

Schagger JL, Wile MZ, Griggs RC. Students teaching students: a medical school peer tutorial programme. *Med Educ* 1990;**24**:336-43.

Sobral DT. Peer tutoring and student outcomes in a problem-based course. *Med Educ* 1994;**28**:284-9.

Solomon P, Crowe J. Perception of student peer tutors in a problem-based learning programme. *Med Teach* 2001;**23**:181-6.

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on the theme

"Using Teaching to Expand Range of Skills Development in Students and Staff"

to be held on
Monday 24th March 2008 - 9.30am to 4.30pm
at
Staff Development Centre (SDC), University of Colombo

DATES to remember:
Abstract submission (by email) **deadline**: by 6pm on February 11 (Monday) 2008
Abstract acceptance: notified to principal presenter – by March 10, (Monday) 2008
Registration Form, Fees and payment: up to March 14, 2008: Rs 500 *(Rs 600 thereafter)*
Conference on: march 24, Monday, 2008, 9.30am to 4.30pm at SDC

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