

7 COURSE EVALUATION

7.1 Mechanisms for Course Evaluation

STANDARD 7.1.1

The medical school has course evaluation procedures that monitor the curriculum, quality of teaching and student progress, and identify and address concerns.

A Plan for an Evaluation Process

Many components of the current Medicine program undergo ongoing review. Some of these have been listed at section 6.2 (page 130) and various formal reports are available for review. However, as discussed in earlier sections, monitoring and evaluation of the teaching program has not historically been centrally organised, and largely occurs on a School by School basis. As part of the introduction of a new medicine program, the Faculty intends to develop an integrated Teaching Development Program that will have the following components:

1. Support for staff to continually improve the quality of teaching and learning in the Medicine program
2. Effective evaluation processes and information to:
 - 2.1. Facilitate continual improvement in teaching and learning
 - 2.2. Enhance reporting of educational outcomes
 - 2.3. Support career enhancement and professional development of staff
3. Mechanisms for motivating and explicitly recognizing achievement of high quality teaching

The Teaching Development Program will link these three components (staff development, evaluation mechanisms, and visible rewards), and will be centrally coordinated from the OME.

Linking Staff Development with Evaluation

An informal process of staff development has been occurring as part of involvement of teachers in curriculum planning, which has emphasised reflection of one's own teaching as a important part of the design process. In 2003, a formal staff development program will commence, focusing initially on improving teachers' small group facilitation skills. As an example of linkage of staff development with evaluation, a report on a trial of Scenario-Based Learning (SBL) conducted in 2002 will be used as a case study for facilitation training. As further SBL activities are designed, these will be used within training workshops, once again combining development with evaluation of designed activities.

Examples of Evaluations

Two pilots of learning activities planned for the new program were conducted in 2002, and a third is planned for February 2003. In July 2002, 44 first and second year medical students volunteered to participate in a one-week trial of four different SBL activities (one from each domain block). In October 2002, eight year 5 medical students volunteered to participate in a 4-week trial of a potential phase 3 module focusing on pregnancy and neonatology (Early Life). Both pilots were evaluated by external consultants using qualitative approaches. Their

reports are available for review by the AMC Team. In February 2003, 12-24 ingoing year 1 students will be invited to participate in a one-week pilot of the Foundations program. This will be evaluated, particularly for the operation of its innovative elements.

STANDARD 7.1.2

Course evaluation addresses the context of the educational process, the specific components of the curriculum, and outcomes in terms of postgraduate performance and career choice.

STANDARD 7.1.3

Measures of, and information about, attributes of the graduates are used as feedback to course development.

Basis of Evaluation

The graduate capabilities document (Appendix 2, Volume 2) which describes the 8 desired capabilities of the new program and the elements that contribute to achievement of each capability, forms the organising principles against which the educational activities and assessment tasks will be evaluated. This document represents a 'blueprint' for both design of the program, and design of evaluation instruments to measure its effectiveness.

Examples of Outcome-based Evaluation

The Faculty is currently evaluating recent UNSW graduates using a questionnaire as a prelude to designing a 'Preparation for Internship' module for the new program. As discussed in sections 1.4 and 2.10 (pages 46 and 74), the feedback has revealed a number of unexpected findings; these have been incorporated into design of the new module.

7.2 Staff and Student Feedback

STANDARD 7.2.1

Teacher and student feedback is systematically sought, analysed and used to improve the medical course.

STANDARD 7.2.2

Teachers and students are actively involved in program evaluation and in using its results for course development.

The evaluation processes currently in place to monitor the teaching program (see examples at Section 6.2 (page 130) will continue to operate in the new program, but will be centrally coordinated with the OME taking or delegating responsibility for the collection and analysis of data. Areas of the current program which have not been well-evaluated will be included. The modular nature of the new program should facilitate course evaluation.

Establishment of a Student Consultative Council, and appointment of the Student Affairs Coordinator (see Section 4.5, page 99) have provided additional mechanisms for a communication conduit between Faculty and students.

7.3 Student Performance

STANDARD 7.3.1

The performance of student cohorts is analysed in relation to the curriculum and the educational objectives of the medical course.

Since the program has yet to commence, no data is available on student performance.

STANDARD 7.3.2

Performance is analysed in relation to student background and entrance qualifications, and is used to provide feedback to the committees responsible for student selection, curriculum planning and student counselling.

New admission procedures for entry in the UNSW Medicine program commenced in 2002 for the 2003 entry cohort. An analysis of demographic data compared to the previous admission procedures will be available in early 2003.

7.4 Involvement of Stakeholders

STANDARD 7.4.1

Course evaluation involves the governance and administration of the medical school, the academic staff and the students.

STANDARD 7.4.2

The medical school provides access to evaluation results to a wide range of stakeholders, such as education and health care authorities, representatives of the community, professional organisations and postgraduate education bodies. It considers their views on the relevance and development of the curriculum.

As described in section 1.2, input from the Faculty's academic staff, its clinical teachers, the wider University, the secondary school sector, and the community was part of the consultation process that occurred at an early phase of the design process for the new Medicine program. It is intended that evaluation data will be widely available to these stakeholders, once the new program is operational.