



Swansea School of Medicine moves its assessments from paper to Questionmark Perception

Introduction

Anybody who has used a paper-based assessment system will testify that it is time-consuming, cumbersome and difficult to extract truly meaningful results from the mass of paper produced. Swansea School of Medicine faced such a challenge until David Lewis joined the staff at the beginning of 2005 and directed the organisation to move to an online assessment platform based on the Questionmark Perception, an assessment management system that David had extensive experience with.

Using the New Systems

The Swansea School of Medicine runs a Fast Track 4 Year, Graduate Entry programme where high flyers with any degree are encouraged to enter the medical profession. Initially, the system was used for a formative assessment in the Alimentary Module. This assessment was performed to provide a diagnosis of how the various students' knowledge matched the new course content and therefore give students a benchmark against which to base their studies. The first scores on the negatively marked diagnostic test ranged from 20 to 80, and students were given as many chances to take the assessment as they wished, over an extended time period. Feedback from the assessment was directed towards giving them the right answer, without explicitly giving it, thus providing a rich learning experience for the students. Over time the scores improved, and on average each student had at least 2 attempts at the test, some particularly keen ones had 4 or 5.

Getting the right results

David comments, "The feedback from the students was incredibly positive and there were some very interesting results that came about. One student in particular proved an interesting example of how the system can work. Initially he took the test three times. On the first occasion he received a mark of around 35 per cent. The second try saw no change and he again received about 35 per cent. However, on the third attempt he took only a short time to perform the assessment, and got an almost perfect score! We made no restrictions on students printing, saving or transcribing the feedback they had received. However, when the same student performed the assessment some time later, having had many weeks of alimentary teaching, he achieved a score in the mid 80s, demonstrating that he had now used the knowledge learnt from the module and applied it to the assessment. This is a prime example of how the system should be used to increase knowledge within subjects and exploit the feedback provided after questions to direct students to the correct answers."

Onwards and Upwards

The first summative test was performed in March 2006 with over 70 students sitting the assessment. As the School of Medicine did not have the facilities for all students to take the course at one time they were split into two separate groups and proctored in a way that meant they were unable to speak to each other in the interlude. The feedback from the assessment was helpful in providing information to the students and staff how each individual was progressing in their course work and where they might want to concentrate their efforts moving forward very quickly. Also, staff members found the feedback from the students on the construction of exams -- such as comments about the layout and features of the electronic assessments -- to be very useful.

The software is also being used to deliver case studies in Neuroscience. A consultant neurologist in the local NHS trust and an academic in the School of Medicine are producing case studies using the Questionmark Word Authoring templates. The templates enable subject matter experts to use the familiar Microsoft Word environment to author items that can then be quickly loaded in to Perception and delivered to the students. There is currently a bank of around 20 case studies from which the students can work, giving examples of diagnostic scenarios they could encounter in Clinical situations. They are devised to enable students to move through the assessment only when they given the correct diagnosis or treatment. The feedback at each stage will give hints and advice to the student and they get targeted feedback on each incorrect choice, and reinforcement feedback only when they have answered correctly. These are getting extensive use and positive feedback from the students.

Conclusion

David concludes, "The new system has been well received by all parties, students and staff alike. The case study format is a great tool for teaching in the Medical School and we hope that it will be used more widely across the university over the months to come. The Questionmark Perception software is a powerful tool that will deliver great benefits to our teaching staff and to the students in terms of a more intuitive and interactive approach to learning and teaching."

More information

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