

## Models/Concepts/Proposals

### **Centralized online course evaluations conducted by the Faculty of Medicine in the University of Ruhuna, Sri Lanka**

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#### **Background**

Course evaluation is an integral part in higher education system. A course evaluation is a paper or electronic questionnaire, which requires a written or response answer to a series of questions in order to evaluate a given course. It is recommended by the University Grants Commission as a best practice to be internalized, that facilitates a better understanding on how well teaching / learning needs are met by the students. The course evaluations allow a faculty to develop an action plan for course improvement as needed and to implement course changes and student concerns (Schiekirka, Feufel, Herrmann-Lingen & Raupach, 2015).

Ongoing course evaluation is a key component of quality improvement in higher education. The literature recommends a comprehensive approach in evaluating curricular, teaching / learning, assessments, learning environment and student support (Abrahams & Friedman, 1996). However, there remain a number of challenges in implementing the course evaluation process. The most critical fact is maintaining acceptable response rates. According to the literature acceptable response rate is 50% (Goodman, Anson & Belcheir, 2015).

The MBBS degree programme in the Faculty of Medicine, University of Ruhuna consist of 15 different subjects involving 15 departments, running for 5-year degree programme. The course evaluation in the faculty implemented centrally through Internal Quality Assurance Cell (IQAC) since 2020.

This paper aims to share how the Faculty of Medicine internalized course evaluation and improve the course based on the feedback received from the students.

#### **Methodology**

The tool for course evaluation had been developed by the Medical Education and Staff Development Unit. To address the diversities and the uniqueness of individual departments, the tool has been revised and individualized to each department and adopted according to their requirements. After each of the

main examinations, one department was selected to carry out the course evaluation. Different types of feedbacks are requested from the students in various stages that include teaching/learning evaluation, satisfaction survey, clinical training etc. Several departments are involved in one main examination. Therefore, it would be an exhausting exercise for students if we give course evaluation of each department that are contributing for an exam. Therefore, at a time, only one department was evaluated to minimize the student exhaustion and maintain the reliability and accuracy of the data.

The tool was converted to a Google form and distributed among the students who completed the particular examination, but before releasing the results to minimize the bias. The participation of the students was entirely voluntary. The communication was done through WhatsApp groups of students established with IQAC. Students were given one week to evaluate the course.

The questionnaire for course evaluation focused on curriculum content, teaching / learning, assessments, learning environment, coordination and facilities.

Under the section of curriculum content and teaching / learning; overall content of the curriculum, effectiveness of the teaching learning activities conducted by the department were evaluated. Difficulty level and effectiveness of the assessments were evaluated under assessments. Under coordination and facilities; satisfaction regarding the communication with the departments, support given by the lecturers, adequacy of prior noticing of assessments & teaching activities, and facilities available in the departments were also evaluated.

Information obtained in course evaluation is anonymous and participation is entirely voluntary in a non-threatening environment. After evaluation of each course, data were analyzed and a detailed report was sent to the Head of the Department requesting to table the report at the department meeting, and discuss the concerns raised by the students, and finally to inform the measures individual departments have taken to improve the course.

According to the recent interests of medical education; questionnaires have been modified including new questions. Few departments who have modified their questionnaires recently have included these trends like self-directed learning, collaborative learning, creative and critical thinking, team work, lifelong learning, and guidance given to the students.

## **Results**

Since 2020, nine departments have undergone evaluations of their courses including one out of three Pre-clinical courses, all six Para-clinical courses and two out of five Clinical courses. Percentages given in the results were calculated from the total number of responders. The average number of respondents is 44%. Highest response rate has been reported in Para-clinical subjects which was 48%.

The response rate of Pre-clinical and Clinical subjects was 39% and 14% respectively. 77% of Pre-clinical, 76% of Para-clinical and 95% of Clinical students have agreed that the curriculum is adequate.

Student satisfaction towards the recently added parameters are included in Table 1

**Table 1:** Recent Parameters Included to the Course Evaluation and the Rate of Student Satisfaction

| <b>Parameter</b>               | <b>Department A (%)</b> | <b>Department B (%)</b> |
|--------------------------------|-------------------------|-------------------------|
| Self-directed learning         | 68                      | 80                      |
| Collaborative learning         | 70                      | 73                      |
| Creative and critical thinking | 68                      | 70                      |
| Lifelong learning              | 70                      | 67                      |
| Teamwork                       | 72                      | 70                      |

Students rated the difficulty of the examinations as shown in Table 2.

**Table 2:** Difficulty Level of Examination Components

| <b>Component</b>     | <b>Pre-clinical (%)</b> |                |             | <b>Para-clinical (%)</b> |                |             | <b>Clinical (%)</b> |                |             |
|----------------------|-------------------------|----------------|-------------|--------------------------|----------------|-------------|---------------------|----------------|-------------|
|                      | <b>Difficult</b>        | <b>Average</b> | <b>Easy</b> | <b>Difficult</b>         | <b>Average</b> | <b>Easy</b> | <b>Difficult</b>    | <b>Average</b> | <b>Easy</b> |
| True/False           | 17                      | 83             | 0           | 20                       | 77             | 8           | 55                  | 43             | 3           |
| SBA                  | 13                      | 87             | 0           | 20                       | 78             | 10          | 58                  | 42             | 0           |
| OSPE                 | 13                      | 87             | 0           | 27                       | 78             | 10          | 3                   | 97             | 0           |
| SEQ/Essay            | -                       | -              | -           | 32                       | 61             | 10          | -                   | -              | -           |
| Long and Short Cases | -                       | -              | -           | -                        | -              | -           | 10                  | 87             | 3           |

Majority (96%) of the students agreed that the co-ordination and facilities of the respective departments were satisfactory. With regards to adequate prior noticing of assessments 80% agreed that the examinations were scheduled and informed well ahead. Further, 85% agreed that adequate prior noticing was given regarding teaching activities.

Updating the relevant lecture notes, increasing the number of skill demonstrations, giving model answers to structured essay questions, standardizing viva to ensure the uniformity in assessing the students, uploading the lectures and examination schedules to Learning Management System beforehand are among the steps taken by the departments in response to students' feedbacks given in the course evaluation.

## **Conclusion**

Acceptable response rate according to the literature is 50% and in Para-clinical departments 48% of students have responded. Although response rate of Pre-clinical and Clinical subjects was 39% and

14% respectively, there were some important suggestions. The areas which need improvements were identified through feedback from the students and departments implemented the measures to improve the courses.

## **References**

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