

Research Papers/Extended Abstracts

Regular Course Evaluations to Internalize Best Practices into the Learning Environment

Alwis, G.^{*}, Kalansuriya, P., Diyoni, R. & De Silva, T.

Internal Quality Assurance Cell, Faculty of Medicine, University of Ruhuna

***Corresponding author:** *alwisgayani@yahoo.com*

Abstract

Regular course evaluation, based on the feedback obtained from students, is an important evidence-based approach to improve quality in the higher education system, which is important for curricular changes or modifications. The aim of the course evaluation surveys is to identify strengths and weaknesses of different courses in the MBBS degree program and to assess the possibility of internalizing good practices to improve the courses. Three Google Form based course evaluations were conducted centrally through the Internal Quality Assurance Cell (IQAC), Faculty of Medicine (FoM), University of Ruhuna (UoR). The Heads of three departments and students of three batches from pre-clinical, para clinical and clinical phases were separately invited for course evaluations immediately after their main examinations conducted from May 2023 to March 2024 in the FoM, UoR. The Faculty Board approved a self-administered questionnaire, which was used for data collection, consisting of curriculum content, assessments, learning environment and facilities. The pre-clinical department, having the highest response rate at 52.4%, was followed by the clinical department at 40.6%, and the para-clinical department at 28.5%. Most of the students across all departments felt that the areas covered in the curriculum were adequate, with pre-clinical (97.9%), para-clinical (81.1%), and clinical (97.2%) departments receiving positive feedback. The number of lectures delivered to cover the curriculum was also well-received, with over 90% of students in each department finding it adequate. The course evaluation highlights different needs and feedback across pre-clinical, para-clinical, and clinical phases. In the pre-clinical phase, students find the curriculum is generally adequate. In the para-clinical curriculum, students find excessive content and insufficient practical focus. In the clinical phase, the course evaluation received good responses; however, students recommended integrating more topics and clinical exposure. The areas identified through students' feedback were directed to the departments for necessary measures to improve the courses.

Keywords: *Course Evaluation, Student Feedback, Curriculum Improvement, MBBS Degree Programme, Internal Quality Assurance*

Introduction

Regular course evaluation is an important evidence-based approach to quality improvement in higher education by evaluating curricular, teaching-learning activities, assessments, learning environment and facilities (Abrahams, & Friedman, 1996). It has been recognized as one of the accreditation requirements in the University system as a best practice to be internalized for a better understanding of the learning environment for course improvement based on student concerns (Schiekirka et al., 2015). Effective course evaluations are linked with curricular changes or modifications. However, the lack of acceptable response rates by students is considered one of the challenges in the course evaluation process (Goodman, Anson, & Belcheir, 2014; Fleming et al., 2015).

The MBBS degree programme in the Faculty of Medicine (FoM), University of Ruhuna (UoR) consists of 15 different courses involving 15 departments, which are categorized under three phases; phase 1 (pre-clinical), phase II (para clinical) and phase III (clinical) running for 5-year MBBS degree programme. The course evaluations are implemented centrally through the Internal Quality Assurance Cell (IQAC). One-course evaluations from each phase are conducted annually and the summary reports of the findings are sent to the Head of the respective department through the Dean, FoM for necessary measures to further improve the teaching-learning activities.

The aim of the course evaluation survey is to identify strengths and weaknesses of the learning environment of different courses and to assess the possibility of internalizing good practices to improve the courses based on the feedback obtained from students.

Methodology

The Heads of the three departments were invited for course evaluations including one from each phase immediately after their main examinations conducted from May 2023 to March 2024 in the FoM, UoR. Of the six batches currently studied in the FoM, three batches were separately invited for the survey. The students of the pre-clinical batch (n=143) after their 2nd MBBS examination, the students of the para-clinical batch (n=74) after their 3rd MBBS Part 1 examination, and the students of the clinical batch (n=71) after the final MBBS examinations were recruited separately for the Google Form-based course evaluation survey.

The self-administered questionnaire used in course evaluations was developed by the Medical Education and Staff Development unit and approved by the Faculty Board, FoM. The questionnaire was modified depending on the requirements of the selected department. The questionnaire consisted

of three main sections; areas of the curriculum covered by the department, assessments carried out by the respective department and coordination and facilities provided by the department.

Then the approved questionnaire was converted into a Google Form and the links were shared among the students of each batch separately through the WhatsApp groups. The questionnaires were circulated by the IQAC immediately after their respective examinations, but before releasing the results to minimize any bias. A two-week period was given to respond to the questionnaire, and a reminder was circulated through the student representatives of IQAC and the batch representatives of each batch requesting to fill the Google Form. The purpose and importance of the survey was informed to the students before sharing the Google Forms. The participation of the students for the survey was voluntary. All data were collected anonymously. A detailed report was sent to the Heads of the respective departments through the Dean, FoM for necessary measures for concerns raised by the students.

The self-administered questionnaire consisted of curriculum content, assessments, learning environment and facilities. Under the section of curriculum content and teaching/learning; the overall content of the curriculum, methods and effectiveness of the different teaching- learning activities like self-directed learning, collaborative learning, creative and critical thinking, team work, and lifelong learning, conducted by the department were evaluated. The difficulty level and effectiveness of the assessments were evaluated under assessments. Satisfaction regarding the communications with the departments and the lecturers, and facilities available in the departments were evaluated. Because of the differences in the three different questionnaires based on the individual courses, only the questions that are similar to all three-course evaluations were included in the analysis of this study. Student feedback was analyzed by consolidating responses, with 'strongly agree' and 'agree' categorized as 'agree' and 'strongly disagree' and 'disagree' categorized as 'disagree,' and 'yes' as 'agree' and 'no' as 'disagree' providing a clearer picture of overall satisfaction and areas for improvement. Responses from the three student batches were analyzed separately as quantitative and qualitative data using Microsoft Excel. Data were presented as frequencies and percentages. Percentages given in the results were calculated from the total number of responders by the IQAC, FoM, UoR.

Results

The detailed response rate for each question across all phases of the current study is mentioned in Table 1. The quantitative data analysis revealed varying response rates across departments, with the pre-clinical department having the highest response rate at 52.4%, followed by the clinical department at 40.6%, and the para-clinical department at 28.5% (Table 1). Most of the students across all

departments felt that the areas covered in the curriculum were adequate, with pre-clinical (97.9%), para-clinical (81.1%), and clinical (97.2%) departments receiving positive feedback. The number of lectures delivered to cover the curriculum was also well-received, with over 90% of students in each department finding it adequate. Similarly, students rated the overall quality of tutorial and ward classes highly, with the para-clinical department receiving the highest positive feedback (98.6%) for quality. Assessments were generally viewed as easy across all departments, with over 87% of students agreeing (Table 1).

Additionally, coordination and facilities, including lecture and practical class completion, were rated positively, with over 94% agreement in all categories. In terms of employing a mix of diverse delivery methods, the majority of students in all stages reported a positive experience, with over 94% in each group confirming the use of these methods. Regarding feedback received during formative assessments, there is a significant improvement from the preclinical to the clinical stage. The clinical students reported receiving feedback at a perfect rate of 100%, compared to 77.9% in pre-clinical and 76.9% in para-clinical stages. Similarly, the usefulness of the feedback increased, with 82.6% of pre-clinical students finding it helpful, rising to 94.7% and then 100% in para-clinical and clinical stages, respectively. Additionally, the provision of course specifications and learning objectives before the course commencement was consistently high across all stages, with the clinical representing a perfect 100% rate.

Table 01: Frequency distribution of course evaluations of three courses from the students of three batches of the three phases (pre-clinical, para clinical and clinical) of the MBBS degree programme.

	Pre-clinical (%)			Para clinical (%)			Clinical (%)		
Number of Students	273			260			175		
Number of Responses	143			74			71		
Response Rate (%)	52.4			28.5			40.6		
Areas covered by the curriculum of the department under evaluation									
Phase(Department)	Pre-clinical (%)			Para clinical (%)			Clinical (%)		
Questions	Not Adequate	Adequate	Too Much	Not Adequate	Adequate	Too Much	Not Adequate	Adequate	Too Much
Overall areas covered by the curriculum of the department under evaluation.	0.7	97.9	1.4	0	81.1	18.9	1.4	97.2	1.4
Number of lectures delivered to cover the curriculum.	3.5	95.8	0.7	9.3	90.7	0	1.4	95.8	2.8
Number of (Tutorial/Ward) classes conducted.	2.8	88.1	9.1	0	98.6	1.35	7.1	88.6	4.3
	Agree	Neutral	Disagree	Agree	Neutral	Disagree	Agree	Neutral	Disagree
Overall quality of classes conducted helped students' learning.	90.2	9.8	0	98.6	0	1.4	94.4	5.6	0

(Tutorial/Ward, etc.)									
Self-directed learning	92.8	0	7.2	78.1	20.5	1.4	98.5	0	1.5
Collaborative learning	96.3	0	3.7	69.4	34.7	1.4	92.9	0	7.1
Creative and critical thinking	89.6	0	10.4	59.7	34.7	5.6	91.3	0	8.7
Assessments carried out by the respective department									
	Difficult	Easy	Too Easy	Difficult	Easy	Too Easy	Difficult	Easy	Too Easy
Continuous assessments and Exams	12.6	87.4	0	11	89	0	8.5	91.5	0
	Agree	Neutral	Disagree	Agree	Neutral	Disagree	Agree	Neutral	Disagree
Guidance received during your lectures/tutorials /other teaching sessions was adequate to face the relevant MBBS exam.	80.4	18.9	0.7	97.3	0	2.7	85.5	10.1	4.3
Coordination and Facilities									
	Agree	Neutral	Disagree	Agree	Neutral	Disagree	Agree	Neutral	Disagree
Scheduled lectures were completed.	98.6	1.4	0	97.3	2.7	0	94.4	4.2	1.4
Scheduled (Practical/ Ward) classes were completed.	97.9	2.1	0	97.3	2.7	0	94.3	5.7	0
The teachers in the department were helpful and facilitated learning.	97.1	2.1	0.7	100	0	0	98.6	1.4	0
Adequate prior notice was given regarding lectures, tutorials, practical classes and assessments.	93	7	0	91.8	6.8	1.4	85.9	17.2	1.4
	Yes	No		Yes	No		Yes	No	
Does the department use a mixture of diverse delivery methods (blended learning) to maximize student engagement with the course?	97.1	2.9		94.5	5.5		97.2	2.8	
Did you receive feedback on your performance, during formative assessment?	77.9	22.1		76.9	23.1		100	0	
Was the feedback useful to improve your performance?	82.6	17.4		94.7	5.3		100	0	
Did you receive Course specifications/learning objectives before the commencement of the course?	93.4	6.6		98.6	1.4		100	0	

Discussion

The course evaluation highlights different needs and feedback across pre-clinical, para-clinical, and clinical phases. In the pre-clinical phase, students find the curriculum is generally adequate, though they suggest incorporating explanations that are more detailed and improving practical demonstrations. The para-clinical curriculum received certain criticism for excessive content and insufficient practical focus, with requests for more concise lectures and enhanced clinical relevance. In the clinical phase, the course evaluation received good responses; however, students recommended integrating more topics and improving equipment and clinical exposure.

The study identified several best practices that enhance the learning experience. Most of the students across all phases found the curriculum coverage to be adequate, and the completion of scheduled lectures and practical/ward classes were consistently high, ensuring smooth course progression. The use of blended learning methods was effective in engaging students, with over 94% reporting positive feedback. Formative assessments showed marked improvement, with feedback being increasingly useful, particularly in the clinical phase. Teacher support was another key strength, with students across all phases appreciating the guidance and facilitation provided. Additionally, students felt well-informed, receiving adequate prior notice for classes and assessments, contributing to better academic preparedness.

To internalize these best practices, consistent implementation across all phases of the MBBS program is essential. Regular communication and collaboration with department heads will ensure the standardization of effective blended learning methods, timely feedback, and thorough guidance from teachers (University Grants Commission Sri Lanka, 2019). Routine formative assessments, accompanied by actionable feedback, will enhance student performance (Ozan and Kınal, 2018). Additionally, maintaining clear and advanced notice of classes and assessments will promote an organized learning environment. Continuous monitoring and student feedback will be utilized to refine these practices for sustained improvement (Al-Bashir, Kabir and Rahman, 2016). However, low response rates by students are considered one of the limitations in the interpretation of the course evaluation process (Chapman and Joines, 2017).

Conclusion

In general, course evaluations across pre-clinical, para-clinical, and clinical phases underscore the need for better interactive sessions, more practical demonstrations, and improved assessments to align with exam conditions and support student learning effectively. The areas identified through students' feedback were directed to the departments for necessary measures to improve the courses.

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