#3N (2995)
How prior curricular experiences and student goals influence medical students’ engagement with formative assessments

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Background: Despite educators’ desire to enable learning through formative assessments, it is currently unclear how students engage with these opportunities, and how these opportunities enable their learning. We conducted a study to understand how students engage in assessments that are intended to be formative and what factors influence that engagement.

Summary of work: Drawing on a constructivist grounded theory approach, we interviewed 21 first-year medical students from one Canadian medical school about their experiences of learning through participation in a formative OSCE (FOSCE) in which they received both immediate oral feedback, and delayed written feedback.

Summary of results: The FOSCE enabled student learning by facilitating achievement of students’ goals (e.g., becoming a successful medical student and a good physician). One way that students facilitated goal achievement was by using the FOSCE to address barriers from prior curricular experiences that limited goal attainment (e.g., limited feedback and skills practice).

Discussion: From a self-regulated learning perspective, the findings indicate that students engage in learning opportunities in ways that best enable them to achieve their own goals. One way is by using present learning opportunities to address limitations from previous learning experiences that students believe limit their ability to achieve their goals.

Conclusion: Students use formative assessments to facilitate the achievement of learning goals by addressing barriers from prior curricular experiences that limit the achievement of their goals.

Take-home message: When imagining the benefits that formative assessments might provide, educators should consider students’ learning goals and the barriers stemming from prior curricular experiences that students perceive limit their achievement of these goals as important sources of influence.

#3N2 (850)
Changing the assessment culture: the dominance of the summative assessment paradigm

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Background: Practical implementation of ‘assessment for learning’ strategies within assessment programmes is often problematical. Organisational culture change is hindered by beliefs which encourage adherence to the existing organisational paradigm. We aimed to explore how beliefs influenced proposals to redesign a summative assessment culture to improve feedback use following assessments.

Summary of work: Using the principles of participatory design, a mixed group comprising medical students, clinical teachers and senior faculty was challenged to develop radical solutions to improve the use of post-assessment feedback. Individual follow-up interviews explored personal beliefs about the proposed redesign. Data were analysed using a socio-cultural lens.

Summary of results: Proposals were dominated by a shared belief in the summative assessment paradigm, which prevented radical redesign solutions from being accepted. As participants had largely only experienced a summative assessment culture, they struggled to conceptualise radical change in the assessment culture. The strength of individual beliefs was apparent in follow-up interviews.

Discussion: Naïve epistemologies and prior personal experiences were influential in the assessment redesign but were usually not expressed explicitly in the group. Although all members participated, students were less successful at persuading the group to adopt their ideas. Faculty members and clinical teachers often used indirect techniques to close down discussions.

Conclusion: This study has shown that a variety of stakeholders hold common assumptions about the primacy of summative assessment. A lack of prior experience of alternative assessment cultures hinders the conceptualisation of radical change towards a culture that embraces assessment for learning.

Take-home message: In order to successfully implement a change in assessment culture, firmly-held implicitly-expressed intuitive beliefs about summative assessment will need to be clearly understood as a first step.
## Student response to feedback: a think aloud and screen capture study

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### Background:
Within health professional education, reflection is thought to be a key determinant of receptivity to feedback and subsequent self-regulation of learning. This study was designed to explore student reflection during the critical time they receive, interpret and (potentially) plan their response to feedback.

### Summary of work:
17 second-year medical student participants engaged in a think-aloud protocol with simultaneous screen capture recordings while viewing and interacting with their progress test feedback (personalised PDF reports). Thematic analysis of transcribed audio recordings (augmented by analysis of screen capture data) was used to interpret their responses to the feedback.

### Summary of results:
Most participants had low expectations due to the end-of-course standard of the test but scores below the median were generally viewed unfavourably. All participants reviewed all sections of the report with most time spent reviewing domain-level performance. Many students overlooked finer details and some misinterpreted key content elements.

### Discussion:
When reviewing their feedback reports, participants appeared to value domain and cohort comparisons above brief test item summaries. Some were reassured by their progress, others had made non-specific changes to their study schedule while very few students made directed plans to guide future learning.

### Conclusion:
Despite the inclusion of clear and detailed instructions, some students made errors in report interpretation. In addition, a general intention to increase study, rather than specific plans to address identified weaknesses, suggests that on their own these feedback reports are likely to have limited impact on students' future learning.

### Take-home message:
- Evidence of frequent mis- and under-interpretation suggests that providing students with computer-generated personalised feedback on assessment requires careful scaffolding. This could include more explicit orientation and guidance to the purpose of the assessment, greater emphasis on study behaviour and learning goals and a reduced focus on relative performance.

## Feedback to the future: What factors influence tutor provision of feedback? A video reflexive study of tutors in experiential consultation skills teaching

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### Background:
This research project uses video reflexive ethnography to explore the perceptions of tutors around feed forward feedback in experiential small group consultation skills training.

### Summary of work:
Participants were consultations skills tutors at the University of Dundee. Seven participants were recruited in total. The primary data source consisted of audiotaped video reflexivity sessions. Additionally, participants were asked to complete a questionnaire to explore their perceptions around the methodology of this research as a staff development tool.

### Summary of results:
The findings illustrate that feed forward within feedback is strongly influenced by context which influences how tutors provide feedback to students. The contextual factors which influence feedback and feed forward are presented within a new framework for feedback which conceptualises feed forward within the complexity of everyday teaching practice.

### Discussion:
When feedback is considered though the lens of every day teaching practice we can begin to demystify the process. As part of this we need to re-conceptualise feedback as an everyday pedagogy and consciously recouple teaching and feedback practice rather than viewing feedback as an isolated act within teaching.

### Conclusion:
We concluded that context matters in feedback and strongly influences the feedback that tutors provide particularly the longitudinal development aspects of feedback (feed forward). A new framework for feedback is proposed which helps conceptualise some of the contextual factors we need to consider as teachers.

### Take-home message:
2. Context influences the feedback that we provide particularly the longitudinal development aspects of feedback (feed forward).
3. Viewing feedback through the lens of every day teaching practice helps us understand this complex process.
4. Feedback should not be viewed as an isolated act.
#3N5 (2903)
Development of structured, feasible, valid and reliable tool for assessing Long case: SLICE (Structured Long Interview and Clinical Examination)

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Background: Management of patient is assessed using different assessment tools, however Long case provides the opportunity to do it holistically. No tool was found to assess the Long case holistically in our context where 100-300 students of one class have to be examined in 3-4 days.

Summary of Work: Available tools in literature to assess long case in undergraduate medical students in a limited time were not according to our local context. Delphi technique and cognitive interviews with the senior faculty were conducted. Content validity index (CVI) was calculated for each item of the tool to develop SLICE.

Summary of Results: It was found to be valid and reliable tool with CVI for relevance of 0.92 and Clarity of 0.90 and reliability of 0.88. The mean time of completion of assessment of a student was 12 minutes.

Discussion: SLICE is a structured tool to assess undergraduate medical students for long case in a context where 100-300 medical students are to be assessed in 3-4 days. It provides the examiner to assess all students uniformly in a short span time avoiding subjectivity and disparity in examination process.

Conclusion: Long case assessment can be used for the holistic assessment of students regarding clinical reasoning and management of the patients, however the tool used should be valid, reliable, acceptable, feasible and with good educational impact.

Take-home Message: SLICE is structured way of assessing long case in short space of time without compromising the principles of good assessment.

#3N6 (2973)
The significance of pedagogic relationships in encouraging take-up of feedback by students

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Background: Drawing on doctoral research "Managing To Care, The Emotional Dimensions Of Formative Assessment: Sustainability of teacher learner relationships in four case studies" explored the importance of relationship between learners and tutors on the alignment of staff and students expectations of and likelihood of learners using feedback to adapt and self-regulate.

Summary of work: 4 Case studies, utilising mixed methodologies observation, survey and interview generated broad descriptors of manifestations and expressions of reciprocal caring between teachers and learners in General Practice; Synchrons dance; Shaolin Kungfu and undergraduate medicine. Likert scales/thematic analysis identified the importance of relationships and shared expectations on effectiveness of formative assessment.

Summary of results: Findings suggested misalignment between tutor and undergraduate expectations in medicine. Comparison illuminated faculty-development strategies needed to enhance medical educators use of emotional intelligence and emotional labour to increase trust in individual teachers rather than the profession or school, which in-turn could increase take-up of feedback and promote more self-regulatory behaviours.

Discussion: There is potential for greater use of learning contracts, peer learning as a means to develop learner abilities to self-assess. Feedback only becomes formative assessment when students choose to act on it. It is the quality of the relationships we form that has the most significant impact on that choice.

Conclusion: Traditional models, separating cognitive and emotional dimensions of learning need to be reconsidered. Developing active use-of-self, a component of emotional intelligence, by faculty can role-model adding value to learner-centered teaching and relationship building within education processes which have much in common with developing effective patient centered capabilities in our students.

Take-home message: Effective pedagogic relationships are crucial to learners making best use of feedback. Historically we’ve paid limited attention to how we build trust and hold the space whilst learners develop capacities to self-assess / self-regulate. Faculty development curricula need to explicitly balance skills handling emotional, cognitive and social dimensions of learning.
#3N7 (1540)
Improving feedback literacy in the workplace: students’ experiences of the benefits of learning to be vulnerable

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Background: Feedback is a key mechanism in workplace learning and yet research indicates that it remains a problematic process. Students want meaningful feedback and clinical supervisors have reported challenges in delivering honest feedback with sensitivity. Educational interventions designed to improve feedback skills are typically aimed at educators rather than learners.

Summary of work: This study evaluated an educational intervention designed to improve students’ engagement in feedback in the workplace. In the hospital setting an interprofessional student group (n=105) engaged in an e-learning priming module, face-to-face workshop and ongoing reflective activities. Evaluation included learner surveys and interviews, with qualitative data interrogated using Framework Analysis.

Summary of results: Post intervention, students reported higher levels of engagement in feedback in the workplace. They expressed feeling more confident in soliciting feedback on specific aspects of their clinical practice. Despite initial feelings of discomfort, students described that they were more likely to disclose their self-evaluation of performance to supervisors.

Discussion: Students reported feeling vulnerable starting placements because they are novices. This view reflects the wider work-based learning literature. Receiving feedback from an expert typically added to this sense of vulnerability. Developing students’ feedback literacy increased their understanding of feedback processes and confidence in both soliciting feedback and self-evaluation.

Conclusion: Post educational intervention, students reported they were more likely to initiate discussions with supervisors on specific areas of practice requiring improvement-a ‘front foot’ identification of deficits. This strategy not only yielded more productive discussions but also helped to reduce the emotional reaction often experienced in verbal feedback encounters.

Take-home message: Developing learner feedback literacy is likely to be as important as developing educators’ feedback skills. Students reported that the training resulted in enhanced confidence to ask for feedback. Rather than feeling exposed by their self-evaluation of deficits, they experienced this conversational style of feedback as empowering.