

Discipline/Course/Subject Area:

Biology, Institute of Biomedical & Life Sciences

Institution:

University of Glasgow

Start date:

Easter 2003

Impact:

The practice was introduced:

- within a course unit/module

No. of students affected:

c. 650 per year

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Others involved:

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Title of Practice – *Level One Biology Pertussis Assignment: Feedback in Problem Based Learning (PBL) Sessions***Abstract**

Students are involved in a group presentation within a Problem Based Learning (PBL) session and subsequently submit an individual piece of assessed work. During the presentation there is opportunity for staff and peer feedback. Feedback on the assessed work is given using a standardised marking sheet to ensure consistency and clarity amongst students and staff.

Description of Implementation**In what context does the feedback practice happen?****What was the rationale for introducing the practice?**

Suggestion for feedback from ETL (Enhancing Learning & Teaching) research group, Edinburgh University.

How was the practice implemented?

Students take part in a 3-hour Problem Based Learning (PBL) session called 'The Pertussis Enigma'. They work in groups of ~16 students, divided into four subgroups, and are given various pieces of information regarding the controversy surrounding the whooping cough vaccine in the 1970's. Each subgroup presents its data and the groups formulate recommendations for the use of the vaccine, which they present to the rest of the class (~48 students). Here reflection and discussion help to elaborate the final presentation. Tutors listen and comment on student findings.

The students are then individually required to write a letter to GPs, based on the recommendations of the lab session, from the point of view of an advisory body in 1981.

The assignments are sent out to ~16 markers along with the introductory information given to students, and the Pertussis Enigma marking sheet (see appendix).

Markers are encouraged to write comments. Students receive the mark sheet when the assignment is returned to them.

What resources were needed?

Technical help if the form is automated. Willing staff.

Perceived Benefits

For students...

- Standardised feedback and marking.
- Opportunity for comments from tutors.
- Students can see where marks have been gained and lost.

For teaching/support staff...

- The sheet makes it simpler to assign marks to each category.
- Ease of marking.

Issues/Challenges

For students...

- Some staff are reluctant to write comments.
- Students would like more comments from markers.

For teaching/support staff...

- The form is not automatically marked.
- Adding comments.

Possible Improvements/Enhancements (suggested by the case study provider)

- Automating the marking sheet would make the administration of marks much easier for staff.
- During the marking process it sometimes becomes apparent that there are not enough marks in some of the categories – evolution of the mark sheet is essential. For example, there was no 'zero' for any of the categories.

External Commentary (related to the feedback principles)

This case study demonstrates effective student-student and student-lecturer feedback. It provides the opportunity for students to:

- develop peer-assessment skills;
- engage in teacher and peer dialogue around learning (P2)
- clarify what good performance is (goals, criteria and expected standards) (P3) and
- close the gap (between current and desired learning outcomes) (P4).

Possible improvements may include introducing appropriate coaching or training in devising criteria and in the practice of peer-assessment and in giving feedback. This could include suggestions as to how disagreements between students/ peer assessors can be resolved (if any arise).

Further Reading

Relevant publications by those doing case-study:

N/A

Relevant/influential/related publications in the research literature suggested by the case study provider:

N/A

**Biology 1Y Pertussis Enigma
Assignment Marking and Comment Sheet**

Criteria	<i>Comments (where appropriate)</i>	<i>Marks (circle mark allocated for each section)</i>
a. RECOMMENDATION offering a clear recommendation to GPs		1 2 3
b. SOURCES OF RECOMMENDATION clarifying origins of recommendation in the conclusions of several working parties		1 2
c. SUPPORTING EVIDENCE making reference to data/statistics from the available studies		1 2 3
d. CONTRAINDICATIONS drawing attention to known contraindications		1 2 3 4
e. CONSEQUENCES alerting GPs to consequences of low or nil vaccination rate		1 2 3 4
f. LAYOUT AND LANGUAGE letter format, English (incl. whether single-sided, spell-checked, double-spaced, indented paragraphs)		1 2 3 4
total mark		