

Postgraduate Certificate (Academic Practice / University Teaching)

Reflective Portfolio Assignment Marking and Feedback



Course **Clinical Education and Academic Practice**

Candidate's Name 1

Please note that all recommendations are subject to approval by the Board of Examiners and moderation by the External Examiner.

Result Recommendation

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|-----------------------------------|-----|---|------|
| Marked by and date: | XXX | Result Recommendation (PASS/NOT YET PASS/FAIL) | PASS |
| Internally Moderated by and date: | XXX | <i>If 'not yet pass' student should arrange to see course organiser for further feedback and then resubmit by next programme deadline. 'FAIL' = fail after resubmission</i> | |

Feedback

General overview:

This is an excellent portfolio which gives a strong sense of your commitment to and enthusiasm for medical education, and your intent to keep developing in this role. You have clearly described the impact that the Clinical Educator Programme and Summer School have made on your teaching practices, and what you have done to try to improve the experience of your learners. I was particularly impressed by the depth of your reflection on your practice, which you demonstrated by being openly curious about why you think you might think, feel and act as you do, across clinical and educational settings. This is exactly what we are looking for. Well done on a really lovely portfolio.

Specific comments:

What the author does well:

- I thought your essay was really well conceived, structured and executed. You had an excellent introduction that set the scene and the whole portfolio then hung together nicely. It was a pleasure to read, as it had a logical and natural flow and a reader-friendly style.
- My sense was that you engaged whole-heartedly with this exercise in self-reflection, as all your learning cards and the self-reflective questions in your 'teaching observation' document were filled in thoughtfully.
- You made clear links between your learning from the CEP and ESSCE and development in your thinking and practice, as you made reference to the ways that you have applied what you

have learned: flipping the classroom using pre-reading; increasing structure; improved interactivity; breaking up the body of a session with a regular change of stimulus; focussing on how to make the learning environment feel 'safe'; and the application of Pendleton's Rules to giving feedback. You had clearly tried out the 'One Minute Preceptor' in your impromptu teaching as you noted that 'in reality it takes about 3 minutes'! I liked your experiment of using 'Poll Everywhere' to measure confidence about exams pre- and post- session.

- I felt you demonstrated a very good awareness of the key concepts underlying effective learning, such as the principle of 'student-led self-discovery'.
- I thought it was excellent that you made links between your development as a clinician and as an educator, eg applying Maslow's principles, and the 'why this person, why here, why now?' question to both your patients and your students.
- Your references provided very good evidence of an attitude of curiosity and a desire to explore educational theory and apply the best evidence to your educational practice. I particularly liked your references on the length of recall time (Brown and Manogue 2011), flipping the classroom (Prober and Health 2012) and the feedback 'grid' (Sanford 1966).
- You provided evidence of a capacity for 'critical' reflection, which was great to read, eg you sought out feedback from others using techniques learned from the CEP eg 'Classroom Assessment Techniques' and from multiple sources, (eg students, peers, and CEP tutors), you collated it and you had really thought about the feedback. It would have been easy to receive your 'top marks' and think nothing more about this, but instead you tried to understand why you got the positive feedback you did.
- You clearly acknowledged that there are a wide range of learning preferences and cognitive strengths / weaknesses within student groups, eg deep and surface learners, and applied this, (eg the 'must know, should know, could know' principle).
- I thought you demonstrated a really positive attitude in the final part of the essay (Part 2e), regarding the opportunities that clinical areas afford for teaching.

Suggestions for improvement:

- It is difficult to suggest very much that you could improve on, but a next step could be to deepen your reflections one step further. For example, you could explore the personal aspects of your 'self' that might underlie your conceptions or, and approach to, teaching and learning. You could also widen the scope of your reflections to guess at the perspectives of multiple 'others' (eg peers) on aspects of you as a teacher and learner. A text that I would recommend to support this is by Jennifer Moon: Moon, J. (2004) **A Handbook of Reflective and Experiential Learning: theory and Practice**. London: Routledge Falmer.
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Marking Guidelines:

| ELEMENT | LIKELY 'NOT YET PASS' | PASS |
|--|---|--|
| <p>Understanding of concepts and theories relating to the practice of clinical education.</p> | <p>Does not adequately demonstrate an understanding of the key concepts in clinical education. Does not make reference to learning from the CEP, (eg workshops, teaching observation), or similar learning experiences. Does not use examples to illustrate understanding.</p> | <p>Demonstrates, with specific examples, a clear understanding of the key concepts and theories in clinical education. Makes specific reference to learning from the CEP, or similar learning experiences. Makes light-touch reference to the literature, if appropriate.</p> |
| <p>Understanding of impact of teaching, learning and assessment practices on student and / or trainee learning.</p> | <p>Does not show an understanding of the importance of high quality educational experiences for effective student or trainee learning. Does not make reference to learning from the CEP, (eg workshops, teaching observation), or similar learning experiences. Does not use examples to illustrate understanding.</p> | <p>Demonstrates, with specific examples, a clear understanding of the importance of high quality educational experiences for effective student or trainee learning. Makes specific reference to learning from the CEP, or similar learning experiences. Makes light-touch reference to the literature, if appropriate.</p> |
| <p>Understanding of impact of the workplace (academic and / or clinical) on student and / or trainee learning.</p> | <p>Does not identify the challenges and opportunities for learning that the workplace environment, (academic and / or clinical), provides. Does not make reference to learning from the CEP, (eg workshops, teaching observation), or similar learning experiences. Does not use examples to illustrate examples.</p> | <p>Demonstrates, with specific examples, an awareness of the opportunities and challenges that the (academic and / or clinical) workplace presents for teaching and learning. Makes specific reference to learning from the CEP, or similar learning experiences.</p> |
| <p>Understanding of impact of multiple perspectives and diversity on student and / or trainee learning.</p> | <p>Does not evidence respect for a range of learning preferences, individual learners and diverse learning communities. Does not use examples to illustrate this understanding.</p> | <p>Demonstrates, with specific examples, an awareness of student and / or trainee diversity. Demonstrated, with specific examples, how these multiple perspectives impact on teaching and learning.</p> |
| <p>Ability to critically reflect on personal development as a clinical educator.</p> | <p>Does not reflect critically upon their own experiences and practice as an educator. Does not question own experiences in an open, honest, questioning manner which facilitates learning and development. Does not make reference to learning from the CEP, (eg workshops, teaching observation), or similar learning experiences. Does not demonstrate attention to any feedback that has been gained from learners or colleagues.</p> | <p>Demonstrates skill in reflecting upon, and critically analysing their practice and experiences. Shows that they have thought about their own, their learners' and / or colleagues' perspectives, in the light of learning from the CEP, or similar learning experiences. May integrate references to the literature, though not necessarily. May base reflections on a specific model (eg Gibbs or Moon), though not necessarily. Most important is that writing is personal, frank and honest, demonstrating a willingness to question own practice, illustrated with specific examples.</p> |
| <p>Ability to convey ideas clearly in writing.</p> | <p>Essay is not structured or written in a manner that can be clearly understood by the readers. May be due to lack of appropriate sub-headings, sentence structure that is difficult to follow, or errors in grammar or spelling. Inappropriate length eg word-count outside 4,000 – 5,000 range.</p> | <p>Writes in a manner which conveys ideas clearly. Essay is well structured, uses appropriate sub-headings and text flows well. Appendices are cross-referenced with text. Referenced appropriately using Harvard or Vancouver style. Text word count between 4,000 and 5,000.</p> |