ASSESSMENT

HERGA CONFERENCE 2018
ADELAIDE 25 SEPTEMBER

HERGA

HIGHER EDUCATION RESEARCH
GROUP ADELAIDE

THE UNIVERSITY
of ADELAIDE

University of
South Australia

Flinders
UNIVERSITY

tafeSA
Government of
South Australia

ICHM
International College of Hotel Management
ADELAIDE – AUSTRALIA

ACKNOWLEDGEMENTS

HERGA
HIGHER EDUCATION RESEARCH GROUP ADELAIDE

The University wishes to acknowledge the Kaurna people, the original custodians of the Adelaide Plains and the land on which the University of Adelaide's campuses at North Terrace, Waite, Thebarton and Roseworthy are built.

HERGA EXECUTIVE

Edward Palmer
The University of Adelaide

Sarah List
The University of South Australia

Karen Burke da Silva
Flinders University

CONFERENCE CHAIR

Edward Palmer and Thomas Wanner
The University of Adelaide

ACKNOWLEDGEMENTS

Karl Larsen this big design

Rebecca Vivian – website assistance

And thank you to our volunteers on the day.

Reviewers
Michelle Coulson
Chad Habel
Sophia Karanicolas
Sarah List
Thomas Wanner
John Willison
Jeanne Young

Contents

Venue: Flinders University at Tonsely | Date: 25 September

START	DURATION	EVENT		
08.30	30 MINS	REGISTRATION (COFFEE ON ARRIVAL)		
09.00	10 MINS	**OPENING OF CONFERENCE** | G42 (THEATRE 1) **Professor Karen Burke da Silva** University of Adelaide		
9.10	70 MINS	**KEYNOTE ADDRESS** | G42 (THEATRE 1) Feedback for Learning: closing the assessment loop **Associate Professor Michael Henderson**		
		eAssessment | G32	ePortfolios | 1.04-1.05	Models | 1.08-1.09
10.30	30 MINS	Authentic supervised e-Exams: National project, SA experience Geer, White, Hillier and Fluck	Students' Partnership vs Privacy in Assessment: The use of ePortfolio in online Professional Development courses Sharp, Khan, Harvey and Parange	Know your business – a mental model to improve learning and assessment Mackay, Walton and Houston
11.00	30 MINS	MORNING TEA		
		Peer Assessment | G32	Self Assessment | 1.04-1.05	Formative Assessment and Feedback 1.08-1.09
11.30	30 MINS	EFL Students' Anxiety with Grading in Self and Peer- Assessment Nawas	Evaluation of Student-Tutor consensus marking model in 1st year Paramedic Undergraduate Degree: Developing skills in self-evaluation. Pope, Thompson, Couzner, Cayetano and Houston	On formative assessment approaches that improve learning Izu and Weerasinghe
12.00	30 MINS	Understanding Online MBA Student Behaviour: Examining the Intersection between Engagement and Academic Performance Wijeratne, Kerr, Wegner and Marchand	Making progress: Helping students to know where they are going and where they have been with the use of progress testing: Design & Implementation Thompson, Houston and Couzner	Feedback Approaches in Optional Academic Support Services (Panel Abstract Submission) Schedneck, Butler and Avard
12.30	30 MINS	Providing an equitable, engaging learning experience for off-campus students that improves opportunities for feedback and learning outcomes. List and Mayo	The use of self-assessment and recorded verbal feedback for learning in a purely online external environment: a case study. Osborne	

Making progress: Helping students to know where they are going and where they have been with the use of progress testing: Design & Implementation

James Thompson, Dr. Don Houston & Dr. Leah Couzner College of Medicine & Public Health, Paramedics, and, Centre for Innovation in Learning and Flinders University

Student assessments are recognised as key drivers of learning[1], although consequences linked to student performance, such as academic progress and GPA's,[1-3] raise a question of whether some assessment design provides more motivational 'stick' than 'carrot'. Written examinations have long been a standard of university teaching, despite ongoing debates about their efficacy with literature critical of the student experiences, test preparation tactics, retention of knowledge post the test, as well as stress and anxiety linked to the event[4]. Additionally poor test design can leave students questioning an assessment's value or relevance[5]. Furthermore the growing debate regarding the use of summative, formative or blended assessment practices, underscores much current assessment discussion[6].

For over 30 years, progress tests have been used in medical education as a tool to link formative and summative assessment and to address concerns about more traditional assessment methods[7]. Central to the approach is a single exam, comprised of comprehensive content reflecting expected graduate knowledge from a teaching program. Commonly, the test is administered at intervals throughout the entire study program, from start to finish[8], reminding students of the goals of the course, while also enabling incremental performance measurements[8-10].

Despite some of the disciplinary parallels, we were unable to find any literature relating to progress test use within paramedic education. Flinders University recently piloted progress test assessments within a final year capstone undergraduate paramedic subject. The presentation describes the process the authors employed to design and validate a progress test suitable for paramedic education. Extensive curriculum mapping and consultation with the academic staff, topic tutors, recent graduates, industry advisors and clinical practice guideline documents, contributed to identifying content which faithfully reflects the teaching syllabus, specific learning priorities and essential requirements for practice as a paramedic. The second stage of test development witnessed the integrating of elements from differing topic themes, applying current evidence and recommendations on effective exam design, before reviewing each question within a series of academic forums. Forum members filtered questions across multiple criteria, with a mandate to ensure that each discriminator was relevant, and that it was likely that only students with the appropriate knowledge would be able to answer correctly. Careful consideration was also given to the grading of the exam. Negative marking was applied to the test, with students rewarded with one mark for correct answer, zero marks for indicating they didn't know, and minus one mark if they were incorrect. The feature encouraging students to acknowledge when they are unsure while also discouraging them from guessing responses. This tenet directly reflects the risk adverse expectations of industry practice, where there are potentially catastrophic consequences of incorrect actions or decisions.

An additional stage of the process related to the integration of the test into the existing capstone subject. Students initially encounter the 100 multiple choice questions on the first day of the topic, with prompt feedback on their performance serving for diagnostic purposes: the intended learning outcomes are made explicit to students in feedback. These specific learning outcomes, underlying the MCQ exam, also underpin subsequent learning experiences through student constructed wikis, practical scenarios and problem based learning, where students are required to demonstrate necessary skills and reasoning. At the end of the teaching/learning modules, students re-attempt the exam and receive further feedback on remaining knowledge gaps. A culminating assessment item of the subject involves an oral viva exam, which samples 3 questions at random from the student's incorrect responses from their 2nd attempt at the progress test.

The introduction of progress testing marks the latest refinement to a course which is tasked with the primary goal of preparing graduates for industry readiness.

Keywords

Progress Test; Capstone Teaching; Individualised Learning

REFERENCES

[1] Brown, S., *Assessment for learning*. Learning and teaching in higher education, 2005(1): p. 81-89.

[2] Harlen, W., *The role of assessment in developing motivation for learning*. Assessment and learning, 2006: p. 61-80.

[3] Schuwirth, L.W. and C.P. Van der Vleuten, *Programmatic assessment: from assessment of learning to assessment for learning*. Medical teacher, 2011. 33(6): p. 478-485.

[4] Hashmat, S., et al., *Factors causing exam anxiety in medical students*. JOURNAL-PAKISTAN MEDICAL ASSOCIATION, 2008. 58(4): p. 167.

[5] Scouller, K.M. and M. Prosser, *Students' experiences in studying for multiple choice question examinations*. Studies in Higher Education, 1994. 19(3): p. 267-279.

[6] Lau, A.M.S., '*Formative good, summative bad?'–A review of the dichotomy in assessment literature*. Journal of Further and Higher Education, 2016. 40(4): p. 509-525.

[7] Vleuten, C.P.M.V.D., G.M. Verwijnen, and W.H.F.W. Wijnen, *Fifteen years of experience with progress testing in a problem-based learning curriculum*. Medical Teacher, 1996. 18(2): p. 103-109.

[8] Wrigley, W., et al., *A systemic framework for the progress test: Strengths, constraints and issues: AMEE Guide No. 71*. Medical Teacher, 2012. 34(9): p. 683-697.

[9] Schuwirth, L.W. and C.P. van der Vleuten, *The use of progress testing*. Perspectives on medical education, 2012. 1(1): p. 24-30.

[10] McHarg, J., et al., *Assessment of progress tests*. Medical education, 2005. 39(2): p. 221-227.