<table>
<thead>
<tr>
<th>Time</th>
<th>Presenter(s)</th>
<th>Title</th>
<th>Authors</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:00</td>
<td></td>
<td>Prompt</td>
<td></td>
</tr>
</tbody>
</table>
### Sessions after Morning Coffee

#### Session 3: Enhancing student assessment

<table>
<thead>
<tr>
<th>Time</th>
<th>Title</th>
<th>Presenter</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>11:40</td>
<td>Student expert panel model to identify sources of misconceptions during the learning process</td>
<td>Ingvars Birznieks. Physiology Dept., School of Medical Sciences and NeuRA.</td>
<td></td>
</tr>
<tr>
<td>11:50</td>
<td>Update on the Clinical Workplace Assessment App (CWAapp)</td>
<td>Silas Taylor. Office of Medical Education.</td>
<td></td>
</tr>
</tbody>
</table>

#### Session 4: Enhancing teaching evaluation

<table>
<thead>
<tr>
<th>Time</th>
<th>Title</th>
<th>Presenter</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>12:10</td>
<td>Ophthalmology teaching in Australian medical schools</td>
<td>Helen H. Zhang(^1), Jenny L. Hepschke(^2) and Ashish Agar(^2).</td>
<td>UNSW medical student; (^2) Prince of Wales Hospital.</td>
</tr>
<tr>
<td>12:20</td>
<td>Improving student responses to myExperience surveys in Exercise Physiology: A new approach</td>
<td>Meg Letton, Jeanette Thom and Rachel Ward.</td>
<td>Dept. of Exercise Physiology, School of Medical Sciences.</td>
</tr>
</tbody>
</table>

### 13:00 – 13:30

**UNSW Dean’s Awards** &

**Faculty Learning & Teaching Awards 2017**

Presented by Acting Dean of UNSW Medicine, Professor Anthony Kelleher

Following the awards a buffet lunch will be served – all welcome

Please RSVP to the forum and/or lunch at:

[https://staff.med.unsw.edu.au/alt-forum](https://staff.med.unsw.edu.au/alt-forum)
ABSTRACTS

Presentation 1 @ 9:05 am

Teaching how millennials learn – Re-vamping medical ethics

Author: Adi Torda
Affiliation: Prince of Wales Clinical School

Abstract:
The demands of medical workforce are constantly changing and curriculum re-development as an ongoing project is required to keep up to date. The educational facilities available to us and the way students now learn has also undergone a revolution in recent years. Millennials now make up the majority of our university students. The characteristics of these students have strongly influenced both content and delivery of teaching matter and format as we continually go through curriculum re-design. This generation of learners has also been moulded by a unique set of cultural influences that are essential for medical educators to consider in all aspects of their teaching. Millennials are typically thought to have a deep understanding of, and appreciation for, technology and social connectedness. They expect aesthetically pleasing learning tools which are fun and provide immediate satisfaction. They also like collaborative learning and accept diversity. With these characteristics in mind, I have developed a number of new teaching and learning innovations to match them, such as the Ethics Toolbox and the podcast SLLIM pickings. Feedback on these innovations has been overwhelmingly positive and as we move forward, assessment of impact of learning also needs also to be investigated.
Presentation 2 @ 9:15 am

Digital Uplift: Pharmaceutical Medicine Program

Author: Orin Chisholm
Affiliation: Pharmacology Department, School of Medical Sciences

Abstract:
This presentation will address the transformation of the Pharmaceutical Medicine postgraduate coursework program from a didactic old-style distance format relying on intensive sessions of face-to-face attendance at campus, interspersed with telephone tutorials, individual assignments, folders of course notes and exams to a fully online program to connect students together and enrich their learning experiences by providing real-world experiences so they can develop skills necessary for their future careers. The transformation process followed a set of steps that are applicable to the transformation of other programs. These steps included review, benchmarking, stakeholder survey, gap analysis, course development, approval and implementation. These steps can be cycled through again and again to maintain the appropriateness of the program in the face of continual changes in the external stimuli. The different steps taken will be discussed with respect to the transformation of the pharmaceutical Medicine program as examples of how to utilise these ideas in program or course transformation.
eMentoring to Support and Enable Research Integrated Learning Using Authentic Assessment in a Third-Year Undergraduate Science Course in Pathology

Author: Blake J Cochran¹, Gwyn Jones² and Patsie Polly¹.
Affiliations: ¹Pathology Department, School of Medical Sciences; ²The Learning Centre

Abstract:
Development of research thinking skills and capabilities is challenging for undergraduate science students. Research scientists often learn in a laboratory-based community of practice and from peer mentoring. The Research Impact Symposium assessment task was developed in parallel with an eMentoring system to address the issue of developing research practice for undergraduate science students within community. Students worked in research teams to address a topical research challenge. Mentors were ECRs who demonstrated an interest in developing their roles and skills in supporting undergraduate science students. Mentors were introduced to students via short videos with a brief biographical sketch posted to Moodle. As mentors were not co-located in the same laboratory work environments, we decided to use Slack (https://slack.com/), a cloud based team collaboration tool. Teams had access to a private channel to organise meetings, share research and assignment materials and liaise with the mentor. Mentors also had access to a dedicated private channel to allow guidance from leads. This research community of practice which integrates eMentoring not only supports research integrated learning of research practice for students but also allows students to work together to develop their professional skills in teamwork, communication and critical thinking.
UNSW Knowledge Maps – A new tool for online learning and assessment

Authors: Veronica Ho and Gary Velan
Affiliation: Pathology Department, School of Medical Sciences

Abstract:
Concept and knowledge maps have been used to promote meaningful learning, critical thinking and problem-solving skills. These maps were traditionally constructed with pen and paper and can be manually graded. But this adds to the heavy workload of time-poor educators. Existing computer-based software for mapping cannot provide reliable feedback in a user-friendly environment. We developed UNSW Knowledge Maps, an online knowledge mapping system that can be used to create, edit and share maps, as well as automate graphical feedback for students in real-time. UNSW Knowledge Maps has two options for educators: (1) Activity mode- has more freedom in the task design; (2) Assessment mode can provide individualised feedback based on each student's submission. Studies of the educational impact of this tool have been performed with students enrolled in SoMS courses. Junior medical students showed significantly improved perceptions of understanding after using the maps. Students in a Medical Science course demonstrated significantly improved learning outcomes in a pre-test post-test study. Our data suggests that UNSW Knowledge Maps is a readily accepted and useful educational tool that provides benefits for learning by students. This tool could be potentially used for both formative and summative assessment.
Improving the knowledge and receptiveness of medical students towards hand hygiene: Exploring new approaches

Authors: Rajneesh Kaur, Husna Razee, and Holly Seale
Affiliation: School of Public Health and Community Medicine

Abstract:
There have been few studies that have focused on hand hygiene (HH) education of medical students. This project developed and evaluated a HH teaching module for undergraduate medical students using mixed methods research through four different studies. In the first study, an Australian wide survey of Deans of Medical Education was undertaken to explore the different HH teaching approaches currently being utilised. The second study involved in-depth interviews of medical students and academics and explored the barriers and facilitators around teaching HH to medical students. Based on the recommendations of these studies and a review of the literature and other available resources, a new teaching module was developed. Feedback on the developed module was sought in the third study using group interviews of medical students. The module was revised as per their feedback and the final study was conducted to evaluate the impact of this module on students’ knowledge and attitudes as well as the retention over time. The results showed an overall and sustained improvement in HH knowledge of medical students and their attitudes towards HH. These studies provide new knowledge around the factors that are currently impacting on the delivery of education around HH to undergraduate medical students.
Improving the ability of UNSW Medical students to provide culturally safe health care to Aboriginal and Torres Strait Islander people

Authors: Rob Menzies¹, Telphia Joseph¹, Ryan Pieters², Ben Jones², Russell Thomson², Peter Harris³, Genevieve Mackay¹, John Hall², Adrienne Withall², Anthony O’Sullivan⁴, Raina MacIntyre¹, Husna Razee¹, Anita Heywood¹ and Gary Velan³

Affiliations: ¹School of Public Health and Community Medicine; ²UNSW Medical Students; ³Office of Medical Education; ⁴St. George Clinical School

Abstract:

Background: The availability of health services that are easily accessible to Aboriginal and Torres Strait Islander (henceforth “Indigenous”) people, and where they feel safe and welcome, is critical to closing the gap in life expectancy and other health indicators. A critical component of this is health care providers that are capable of providing these services. Methods: A UNSW Indigenous Medical Education working group was formed in April 2017 consisting of key staff in medical education and Indigenous health education in the faculty, as well as Indigenous staff, Indigenous medical students and staff of Nura Gilli Indigenous Education Unit. An audit was conducted of the Indigenous components of the UNSW Medicine program and its alignment with Australian Medical Council accreditation standards. Consultations were conducted with Aboriginal Land Councils and other Indigenous organisations. Results: UNSW medical program was found to be deficient in history, identity, languages, cultures and spirituality of Indigenous people, as well as opportunities to provide clinical care for, and skills communicating with, Indigenous people. A revised, enhanced, integrated curriculum that includes these components is in development. Conclusions: This exercise has implications for curricula across UNSW, as more Universities adopt University-wide Indigenous graduate attributes.
Mini-simulations for JMOs: results from a pilot session

Authors: Mominah Bhatti, Lauren Tang, and Annmarie Bosco
Affiliation: Prince of Wales Hospital

Abstract:

Objectives: Designing a simulation-based education program for junior medical officers (JMOs) to complete in a short time, and assess whether these ‘mini-simulation’ sessions are effective training tools. Materials and methods: JMOs at Prince of Wales Hospital (POWH) rotated through scenarios focused on a common theme of ‘hypotension’. There were 10 minutes to complete the simulation, and 5 minutes for feedback. Stations were facilitated by clinicians from medical and intensive care specialties. JMOs were surveyed to assess whether they felt more confident handling selected scenarios independently, whether their clinical skills had improved, and whether simulations were accurate representations of practice. Facilitators were interviewed to identify common knowledge gaps. Results: Of 22 eligible JMOs, 10 (45%) attended the session. 40% (n=4) of JMOs “strongly agreed” and 60% (n=6) “agreed” that they were more confident handling the selected clinical situations after completing stations. 40% (n=4) “strongly agreed” and 60% (n=6) “agreed” that they gained new skills/knowledge. 70% (n=7) “strongly agreed” and 30% (n=3) “agreed” that there should be more simulation-based training in the JMO education curriculum. Conclusion: ‘Mini-sims’ are effective means of incorporating simulation-based training into a JMO curriculum, are positively rated by participants and allow multiple JMOs to participate with a limited requirement for time and resources. They allow identification of common knowledge gaps in the cohort and can guide improvements to the JMO education curriculum.
Developing Clinical Skills in Undergraduate Exercise Physiology Students: A ‘Case Study Tutorial’ Teaching Method

Authors: John Booth¹, Jessica Bellamy¹, Ria Arnold² and Aidan Cashin³
Affiliations: ¹Dept. of Exercise Physiology, School of Medical Sciences; ²Dept. of Pharmacology, SoMS; ³Neura Australia

Abstract:
The case study tutorial (CST) teaching method has been used successfully in undergraduate medical teaching for many years¹ which has provided the impetus for its application to undergraduate Exercise Physiology. CSTs provide an opportunity for exercise physiology students to apply theoretical concepts in musculoskeletal rehabilitation to patient cases with presentations commonly encountered in daily clinical practice. Clinical decision making and critical thinking regarding evidence based best practice and patient care are key learning attributes that students are required to demonstrate. This contrasts teaching modalities such as clinical laboratories or VIVA assessment where the learning attributes are more black and white. CSTs are led by a practicing clinician with 20 active and passive students organised into four teams of five. Active participation is marked by two academics and the passive students. Passive students reflect on the CST discussion before completing assessment tasks involving patient specific exercise treatment and correspondence. Four CSTs account for 40% of total assessment (active participation 20%; CST assignments 20%). Feedback informally and through myExperience supports the CST as a relevant, engaging and enjoyable learning modality. Marking and delivering individualised feedback for active participants needs to be further refined. Formal assessment of the effectiveness of CSTs compared to more didactic styles of teaching for developing undergraduate exercise physiology clinical skills would be beneficial.

Presentation 9 @ 11:30 am

Student Peer Assessment: An efficient assessment method to enhance critical evaluation?

Authors: Richard M Vickery, Cindy S-Y Lin and Andrew J Moorhouse
Affiliation: Physiology Department, School of Medical Sciences

Abstract:
We convene a second-year course for 80-100 students, structured into self-contained fortnight blocks that include an online quiz to encourage students to maintain engagement with the material. Students appreciate this continuous feedback, but reported that they felt under-prepared for longer written exam questions. To address this issue, we designed a peer review practice exam that was marked by peers, in class, using provided marking criteria. The student markers also provided detailed comments to justify their mark and to indicate strengths and weaknesses. The papers were subsequently marked by the convenors without comments. The final student grade (5% of course mark) was based on their mark awarded by the convenor, and on the agreement between their awarded grade as a marker with that of the convenor, together with an assessment of the quantity and quality of comments. This rewarded the students who took the task seriously, and signalled that academic staff were engaged in the quality control process. Students reported improved understanding of the material covered by the questions and of the way to effectively approach these assessment tasks. We believe this represents a useful way to deepen learning and to potentially provide immediate feedback without overly increasing the academic assessment workload.
Student expert panel model to identify sources of misconceptions during the learning process

Author: Ingvars Birznieks
Affiliations: Physiology Department, School of Medical Sciences; NeuRA

Abstract:
Concepts of complex physiological mechanisms may be easily misunderstood by students depending on their prior knowledge. It is important to identify problem topics during the learning process and pinpoint the source of such misconceptions before formal assessment is due. We suggest a model suitable for large group tutorials to address this issue. First, each student has to submit at least one question they regard as most difficult. Then rather than lecturer attempting to answer the most frequently seen questions, a student expert panel is formed. Students may volunteer or may be selected by the lecturer based on merits. The student expert panel attempts collectively answer peer questions in front of the tutorial group. Students are encouraged engage in discussion. When appropriate, lecturer may also guide the discussion. The process has multidimensional benefits at several levels. It helps lecturers to identify difficult topics and understand most common misconceptions. It helps students to get answers to problem questions by engaging them in active discussions and logical thinking process. It helps to develop verbal skills to explain difficult concepts and to identify knowledge gaps. It encourages team work, social interaction between students and encourages seeking help from peers.
Update on the Clinical Workplace Assessment App (CWAapp)

Author: Silas Taylor
Affiliation: Office of Medical Education
Project group: Clayton Gilbert (UNSW IT); Dr Rachel Ward (Program Authority, Exercise Physiology); Jamie Patel (Medical Student); and Robert Morey (Ex Phys Student)

Abstract:
The CWAapp will capture data from a variety of work-based assessments (WBA) completed for and by students in the clinical workplace: replacing paper forms, improving security, capturing data reliably, and seamlessly creating the student record. CWAapp will improve efficiency of in-training WBA’s, provide a user-friendly, flexible system for students to record clinical experiences, and meet Faculty determined targets for certain experiences. Further, it will dramatically reduce administrative time in following-up on student completion of tasks. Introduction of the CWAapp is in alignment with 2025 Strategy. Redevelopment will recognise Students as Partners by involving them in development. The application facilitates an innovative ‘digital solution’ to the complexities of WBA’s. It also has an educational focus which personalises the student experience, by immediately presenting feedback from supervisors to students for subsequent reflection.
Abstract:

Purpose: To investigate the current state of ophthalmology teaching at Australian medical schools. Methods: A survey-based cross-sectional study was conducted of medical students (MSs) attending medical schools accredited by the Australian Medical Council and prevocational junior doctors (JMOs) working in New South Wales Prevocational Training Hospital Networks. Data on the characteristics of ophthalmology teaching during medical school and participant confidence in basic ophthalmological clinical skills and knowledge were collected and analysed. Results: 838 surveys were received. 406 (48.4%) were from MSs and 432 (51.6%) were from JMOs. The most common teaching method for ophthalmology encountered by both groups was lectures (65.5% MSs, 71.3% JMOs), while the most preferred method was hospital tutorials (61.6% MSs, 37.7% JMOs). Mean confidence in ophthalmology-specific skills and knowledge topics were not high for MSs (skills: 2.66/5.00, 95% CI = 2.55-2.76; knowledge: 2.88/5.00, 95% CI = 2.80-2.96), and did not improve for JMOs (skills: 2.52/5.00, 95% CI = 2.43-2.60; knowledge: 2.84/5.00, 95% CI = 2.77-2.91). Many participants voiced the need for more ophthalmology teaching during medical school, particularly clinically-oriented opportunities. Conclusions: MSs and JMOs do not show high levels of confidence in basic ophthalmological clinical skills and knowledge, and report a desire for more ophthalmology teaching at a tertiary level.
Improving student responses to myExperience surveys in Exercise Physiology: A new approach

Authors: Meg Letton, Jeanette Thom, and Rachel Ward

Affiliation: Exercise Physiology, School of Medical Sciences.

Abstract:

Introduction: In 2016, Exercise Physiology courses at UNSW experienced low student response rates to myExperience feedback surveys. The implications from lack of feedback can be detrimental to the quality of future course offerings. Adequate evaluation of both course and teaching quality is necessary for continual improvement in the learning and teaching experience at UNSW. Aim: Starting Semester 1 2017, Exercise Physiology courses aimed to improve response rates of students when completing the voluntary myExperience survey. Solution: We employed Exercise Physiology postgraduate students and tutors to attend laboratories and lectures for 5-10 minutes during the final weeks of semester. They encouraged students to complete the survey during class, through advising on where to find the survey, its confidential nature and the importance of the results in ensuring continued learning and teaching quality. Results: Through employing postgraduate students and tutors to present to the class, an increase in the response rates from students occurred, especially in laboratory classes, where students were already logged onto a computer with internet access. The greatest improvement was seen in HESC1501, with response rates increasing from 18% (2016) to 73% (2017). Conclusion: Early, proactive, face-to-face intervention using tutors to engage students in MyExperience increased response rates.
Formative peer-review of teaching (FPRT)

Authors: Chinthaka Balasooriya, Reema Harrison, Lois Meyer, Patrick Rawstorne, and Husna Razee

Affiliation: School of Public Health and Community Medicine

Abstract:
Formative peer review of teaching (FPRT) is a collegial and consultative process that aims to support academics to develop their skills in teaching. FPRT can greatly enhance educational quality when combined with summative peer-review. Within the current context, FPRT has the potential to better prepare academics for the summative peer-review of teaching process that has been introduced at UNSW. A team at the School of Public Health & Community Medicine have recently received a grant from the ‘Scientia Education Investment Fund’ to introduce FPRT across the faculty and evaluate its feasibility and impact. The aim is to develop the process at UNSW Medicine with a view to introducing it across the university. The grant team is supported by an advisory committee (Gary Velan, Tony O’Sullivan, Richard Vickery, Peter Harris and Nalini Pather). The FRPT process will mirror the UNSW summative process and will be based on the same quality criteria. There will be a few key points of difference related to the developmental nature of the process with an emphasis on reflection and a collegial feedback dialogue between reviewers and reviewees. The related research component will add to the evidence-base around FPRT and enable us to develop recommendations to refine the peer-review of teaching processes at UNSW. We will outline our progress up to now and seek feedback as we move to the next stage. We will discuss the process and explore its potential benefits for individual academics, the faculty and the university.
POSTERS

OSPIA: Innovative Online Simulation-Based Communication Skills Training For Healthcare Students.
Author: Silas Taylor
Affiliation: Office of Medical Education

Transforming the first year experience: a design uplift.
Authors: Nalini Pather¹, Erica Leonar², Amanda Yeung², Xanthe Lawson², and Irina Dedova¹
Affiliations: ¹School of Medical Sciences, ²PVC(E)