



The University of Sydney

Faculty of Medicine

Student experience of Learning and Teaching

Trends and key issues: Undergraduate (Bachelor degree)
students 2001-2007

Date June 2008

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Glossary

The following terms and phrases are used throughout the report

SCEQ	Student Course Experience Questionnaire Administered to current students
CEQ	Course Experience Questionnaire Administered to graduates of previous year
Faculty scores Percentage agreement	The percentage of students who either agreed or disagreed with survey items
Qualitative data Comments	Students written observations received in response to open ended questions in the surveys. Relate to aspects of best practice in degree experience and aspects in need of improvement
Graduates	Students who completed the CEQ for 2007 i.e. graduated in 2006
Current students	Students who were studying at the University during 2007; from all years of the course

Notes

Note re percentage of respondents providing written comments in SCEQ

The percentage of students providing written observations in their answers to the SCEQ declined significantly in 2007. In 2005, 80% of respondents supplied written comments in answer to the open questions; in 2007 less than half (49%) of respondents supplied written observations. This may in part, be due to the curriculum review that took part in the Faculty during 2007, and the consequent 'survey burn out' of students, or the perception that they had already provided enough information on the course during the year.

Note re qualitative data for CEQ 2007

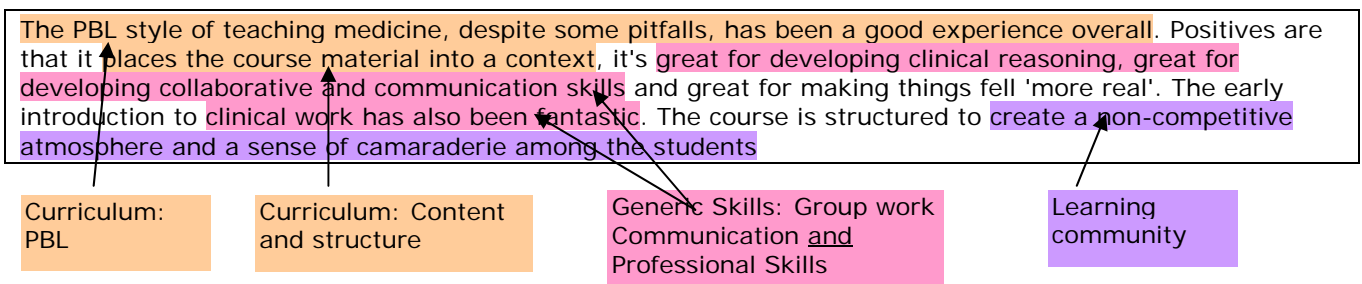
11/14 international graduates provided written observations in their response to the CEQ. Since the minimum sample size recommended for statistical analysis of SCEQ and CEQ data is 20, the analysis of the qualitative data should be viewed with caution.

Note re illustrative sample comments

Comments are recorded as they appear in the original documents. However, minor spelling, grammatical and transcription errors have been corrected. [sic] indicates that the word appears exactly as provided by the student, and that it is not possible to ascertain an exact interpretation of the original meaning.

Note re analysis and counting of comments

Each comment is analysed according to the *Taxonomy for analysing qualitative data from the SCEQ/ CEQ*¹, which is based on the University KPIs for Learning and Teaching, with those comments including more than one aspect being counted once for each aspect mentioned. The number of times an aspect is mentioned is presented as a percentage of the total number of comments received. For example, the following comment is counted as ONE COMMENT RECEIVED; but as it is mentioned in Curriculum; Generic Skills; and Learning Community, the comment is counted ONCE in each of the relevant categories.



¹ Available from Quality Assurance Officer (Learning and Teaching)

Executive summary

Data about the student degree experience in the Faculty of Medicine is collected through the Course Experience Questionnaire (CEQ) (previous year's graduates) and the Student Course Experience Questionnaire (SCEQ) (current students).

Analysis of this data provides a comprehensive picture of trends in the student experience, and the performance of the Faculty in relation to Learning and Teaching Performance Fund Key Performance Indicators (Generic Skills; Good Teaching; Overall Satisfaction), and other related areas (Learning Community, Curriculum, Assessment and Workload, Clear Goals and Standards).

Written observations from students about their experience provide evidence to support the percentage agreement scores, and provide detailed information about key issues in the areas of best practice or areas of concern.

Key results

- There has been a substantial increase in the CEQ percentage agreement Faculty scores for **Generic Skills** since 2005 (2007 CEQ: 78%; 2006 CEQ: 69%). In comparison, the SCEQ declined from 76% in 2005 to 72% in 2007. The University average for Generic skills in 2007 was 69% for graduates and 66% for current students. Whilst the percentage of current students in 2007 who either agreed or strongly agreed with survey items on the development of generic skills was evenly divided between domestic (72%) and international students (71%), there was a 5% difference for graduates (domestic: 71%; international: 76%). Evidence from the analysis of the qualitative data indicates that the majority of comments concerning the development of generic skills, focused on the acquisition of professional skills and experience rather than the full range of University Graduate Attributes. (Section 1; KPI 7)
- Faculty scores for **Good Teaching** peaked at 54% for current students in 2003, and 57% for graduates in 2005. Since then, they have averaged at 44.5% for current students and 49.5% for graduates. In 2007, current domestic students appeared to be more satisfied than international students with teaching within the Faculty (45% domestic; 40% international), while for graduates the reverse is true (50% domestic; 54% international). These results are marginally higher than the University average in both surveys (SCEQ: 44%; CEQ: 48%). Since 2001, the percentage of comments received which mention various aspects of good teaching as being an area in need of improvement has exceeded those suggesting it as an area of best practice. Lack of constructive, timely or useful feedback on work formed the majority of negative comments (17%). (Section 2; KPI 8)
- **Overall Satisfaction** Overall satisfaction with the degree course currently rates at 84% for graduates and 82% for current students. Of interest is the difference in the experiences of domestic and international current students and domestic and international graduates. In the 2007 SCEQ 86% of domestic students and 59% of international students either agreed or strongly agreed with the statement *"Overall I am satisfied with the quality of this degree course"*; whilst in the CEQ, 76% of domestic graduates and 86% of international graduates agreed or strongly agreed. The University average for graduates is 71% and for current students is 73%. The percentage of comments received from current students, and which mention the above areas, is evenly divided between those expressing satisfaction and those expressing the dissatisfaction (7% each); whilst for graduates there were substantially more positive comments (6%) than negative (3%). (Section 3; KPI 9)
- In 2007, sixty-nine percent of students either agreed or strongly agreed with SCEQ survey items on the **Learning Community**. This is the highest score in the University, indicating that students are very satisfied with the Learning environment and community engendered within the Faculty. International students (2003: 64%; 2005: 49%; 2007: 60%) continue to rate this area of their experience lower than domestic students (2003: 76%; 2005: 73%; 2007: 70%). Analysis of the comments received in the 2007 SCEQ and CEQ indicate that students appreciate the community feel of the Faculty, the diversity of the student base, and small group and class sizes. However, they would welcome more integration and contact with the wider University. (Section 4)
- In 2007 36% of comments received from graduates and 47% from current students commented favourably on various aspects of the **Curriculum**; whilst 45% of comments in the SCEQ and 50% in the CEQ considered this to be an area in need of improvement. The lack of training in anatomy continues to be an area of concern (29% of comments received in the 2005 SCEQ, and 37% in 2007). (Section 5)
- The percentage agreement scores for **Appropriate Assessment** (59%) in the 2007 SCEQ is higher than the University average of 55%, and places it as the highest of the Health cluster of faculties. Since 2003, domestic students have rated assessment practices within the Faculty higher than international students. In relation to comments received which mention assessment, the trend across the University

is for there to be more comments expressing dissatisfaction than satisfaction. The Faculty of Medicine is no exception. On the whole students appear to be satisfied with assessment practices within the Faculty; however the lack of summative assessment prior to the barrier exam) and the pass/fail grading system continue to be areas of concern with both current students and graduates. (Section 6)

- The percentage agreement scores for **Appropriate Workload** (27%) is higher than the University average of 23%, and places it as the highest of the Health cluster of faculties. In contrast with other areas of the University, very few students in the Faculty of Medicine commented either favourably or unfavourably on their workload. (Section 7)
- SCEQ Faculty scores indicate that student perceptions of **Clear Goals and Standards** has consistently been below the University average since 2000. It should be noted that research indicates that clarity of goals is a problem for any PBL course. In 2007, the percentage of students who either agreed or strongly agreed with items in the SCEQ relating to Clear Goals and Standards was 26%, the second lowest in the University. In 2005 and 2007, international students' scores were higher than those for domestic students. In relation to comments received which mention aspects of clear goals and standards, 28% of current students and 5% of graduates related to perceived lack of direction in the course, and uncertainty regarding the amount of work/ knowledge required for each module. (Section 8)

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Conceptual framework

Student Evaluation of Teaching Surveys

The University Student Course Experience Questionnaire (SCEQ) and the DEEWR/ GCA Course Experience Questionnaire (CEQ) are designed to collect quantitative and qualitative data about students' perceptions of the quality of teaching and learning in their degree courses.

In both surveys students are asked to respond to statements using a five point Likert Scale to indicate the extent to which they agree or disagree with each statement. As part of the questionnaires, students are also asked to provide written comments on the best aspects of their degree experience and those that could be improved.

Quantitative and qualitative data from the CEQ and the SCEQ provide evidence of the success of University and Faculty initiatives to improve the overall student experience in general and the student experience of learning and teaching in particular.

Difference between SCEQ and CEQ

Both surveys are administered by the Institute for Teaching and Learning. The SCEQ is distributed to a stratified sample of current students (i.e. all years of study, all degrees). The CEQ is distributed to all graduates of the University in the year following graduation.

Focus of the Trend Analysis Report

Based on the answers to these surveys, this report seeks to provide an analysis of observable trends in the student experience of learning and teaching in the Faculty of Medicine between 2000 and 2007. The report also provides detailed information on the key issues highlighted in the analysis of the 2007 SCEQ and CEQ qualitative data. Reliable qualitative data for international students did not become available until the 2005 SCEQ.

Information is arranged by Key Performance Indicators (7: Generic skills; 8: Good teaching; and 9: Overall satisfaction) plus additional factors (Learning community; Curriculum; Assessment; Workload; and Clear Goals and Standards) which, taken together, comprise the student experience of learning and teaching in the Faculty.

When reading this report, it should be noted that the absence of favourable comments on a particular aspect of learning and teaching does not reflect that this is not an area of best practice. Rather, it could be interpreted that the students are happy with their experiences, and prefer to focus on commenting on areas in need of improvement. Also of note is that students are increasingly providing constructive comments in response to the open-response questions, and often mention more than one aspect of their experiences.

1 Generic skills (KPI 7)

Definition

Generic skills includes:

- Research and inquiry (analytical, problem solving, critical thinking, knowledge expansion etc)
- Information literacy (retrieval and use of information)
- Personal and intellectual autonomy (independent learning; planning own work; intellectually curious etc)
- Ethical, social, professional understanding (including group/ team skills; professional skills and experience)
- Communication (written and oral; communicating with others; communicating understanding)

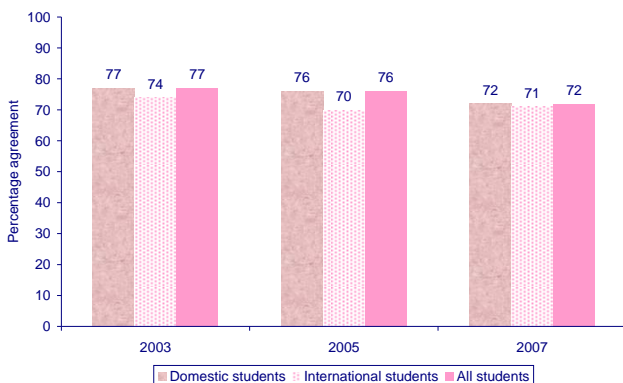
Trends

There has been a substantial increase in the CEQ percentage agreement Faculty scores for Generic Skills since 2005 (2007 CEQ: 78%; 2006 CEQ: 69%). In comparison, the SCEQ declined from 76% in 2005 to 72% in 2007. The University average for Generic skills in 2007 was 69% for graduates and 66% for current students. Whilst the percentage of current students in 2007 who either agreed or strongly agreed with survey items on the development of generic skills was evenly divided between domestic (72%) and international students (71%), there was a 5% difference for graduates (domestic: 71%; international: 76%).

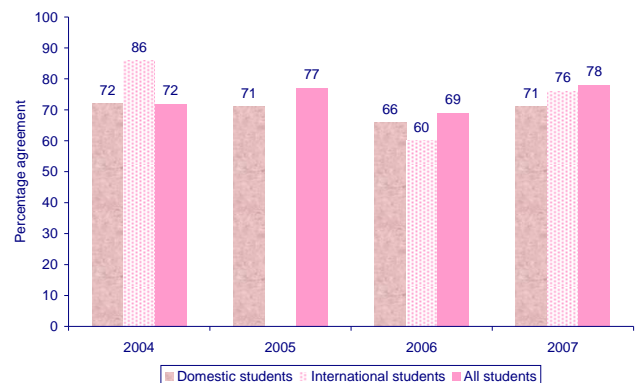
Evidence from the analysis of the qualitative data indicates that the majority of comments concerning the development of generic skills, focused on the acquisition of professional skills and experience rather than the full range of University Graduate Attributes.

1.1 Comparative results: Quantitative data 2001–2007

The following tables show the proportion of students who either strongly agreed or agreed with relevant survey items for Generic Skills in SCEQ and the CEQ.



1.1.1 Student Course Experience Questionnaire: 2003; 2005; 2007 (current students)



1.1.2 Course Experience Questionnaire 2004–2007 (graduates from previous year)

1.2 Comparative results: Qualitative data 2001–2007

The following table includes the percentage of qualitative comments received that can be classified as areas of best practice or areas for improvement. The trends provide an indication of the student satisfaction with the development of University graduate attributes / generic skills between 2001 and 2007.

		SCEQ 2001	SCEQ 2002	SCEQ 2003	SCEQ 2005	SCEQ 2007	CEQ 2006	CEQ 2007
Areas of best practice	Domestic	n/a	n/a	n/a	45%	59%	55%	71%
	International	n/a	n/a	n/a	56%	71%	71%	75%
	All	36%	39%	41%	46%	61%	56%	72%
Suggested improvements	Domestic	n/a	n/a	n/a	5%	7%	6%	11%
	International	n/a	n/a	n/a	3%	4%	17%	20%
	All	4%	4%	5%	5%	7%	7%	12%

1.3 Key issues for coursework students (SCEQ 2007; CEQ 2007)

1.3.1 Areas of best practice

Current students (SCEQ 2007)	Domestic (n=116)	International (n=21)	All (n=137)
Ethical, social, professional understanding			
- Ability to work in a group/ team working skills	50%	57%	51%
- Development of discipline/ professional skills			
- Presence of work placement/ industry experience in the course			
Personal and intellectual autonomy			
- Intellectually curious			
- Independent thinking and learning			
- New ways of thinking	3%	10%	4%
- Responsive to unfamiliar problems			
- Ability to meet new challenges			
- Personal vision and goals			
- Plan my own work			

Sample comments: domestic students

- *The ability to learn as a team, and use the skills we gain from this to enhance our own independent learning. The skills we gain at the clinic and how it integrates with the lectures*
- *The ability to do research projects gives me a good taste of possible future career paths, and allows me to apply knowledge*
- *Lots of practice[sic] clinical experience throughout and especially in third year is invaluable.*

Sample comments: international students

- *GMP1 PBL, it has improved my teamwork skills, also its helped me work out a systematic way to solve problems, plus it has helped directed my self directed learning. Clinical sessions, this has given me a chance to learn all the practical bits to medicine*
- *The PBL process encourages independence and group work at the same time and is a good way to learn medicine. The clinical days at the hospital are really useful and I learn A LOT of hands on and practical experience while I am there*
- *improvement in my communication skills and confidence in working with others.*

Graduates (CEQ 2007)	Domestic (n=66)	International (n=12)	All (n=78)
Research and inquiry			
- The capacity to make decisions and solve problems	5%	8%	5%
- Development of analytical skills			
- Ability to apply critical judgement and thinking			
- Recognition of knowledge boundaries			
Ethical, social, professional understanding			
- Ability to work in a group/ team working skills	64%	67%	64%
- Development of discipline/ professional skills			
- Presence of work placement/ industry experience in the course			

Sample comments: domestic students

- *The course developed my problem-solving skills, communication skills and organisational skills*
- *Early exposure to patients and clinical medicine. Well structured course (although lacking in adequate content in some areas.) Focus on team work, evidence based practice, analytical skills. Rural placements*
- *The ability to work as a team Practical aspects of the course*

Sample comments: international students

- *Clinical exposure was integrated early in the course, allowed confidence building from the beginning of the course and good experience of practical scenarios in clinical settings*
- *Problem based skills*
- *Practical skills and practical lectures*

1.3.2 Suggested improvements

Current students (SCEQ 2007)

Across the University, very few current students who provide written observations in their responses to the SCEQ express concern about the non-development of specific graduate attributes. The Faculty of Medicine is no exception. Only 7% of undergraduate students (9/137 comments received) mentioned that they felt that necessary skills and abilities were not being developed during the course of their studies. Most of the comments related to the development of professional skills, and/or the lack of professional experience.

Sample comments: domestic students

- *Need to bring back dissection, one cannot learn anatomy properly from text books and poor quality prosections*
- *I would have liked more practical experience*
- *There needs to be more time spent teaching anatomy[sic]. Many of the practical sessions in the first two years were just repeats from lecturers, especially pathology practicals*
- *The course provides us with the content. We can find the content and learn it off our own backs. But there are a few problems associated with this. The 'self-directed learning' objective of the course is sound philosophically, but we are not taught how to do this. We are given content, and told to manage it with no indication of how. No study strategies, no picking relevant information.*

Sample comments: international students

- *More practical skills would be good*

Graduates (CEQ 2007)

	Domestic (n=66)	International (n=10)	All (n=76)
--	--------------------	-------------------------	---------------

Ethical, social, professional understanding

- | | | | |
|---|----|-----|----|
| - Ability to work in a group/ team working skills | 9% | 10% | 9% |
| - Development of discipline/ professional skills | | | |
| - Presence of work placement/ industry experience in the course | | | |

Sample comments: domestic students

- *Lack of practical experience (practical skills).*
- *Clinical years too much variability in the experience you get*
- *Fundamental teaching of basic sciences, primarily anatomy. Clinical teaching in ENT, Ophthalmology, Dermatology*

Sample comments: international students

- *Needs more time teaching Anatomy and Physiology and basic Pharmacology. Less on communication skills*
- *Clinical attachments - students need to have more responsibility and be expected to do more on clinical attachments*

2 Good teaching (KPI 8)

Definition

Good teaching includes:

- Good teaching experiences (interesting, teaching methods, discussions encouraged etc)
- Motivating teaching (enthusiasm, passion of teachers)
- Concern and care for student learning
- Good explanations received (includes English language proficiency of teachers)
- Feedback on work (timely, constructive)

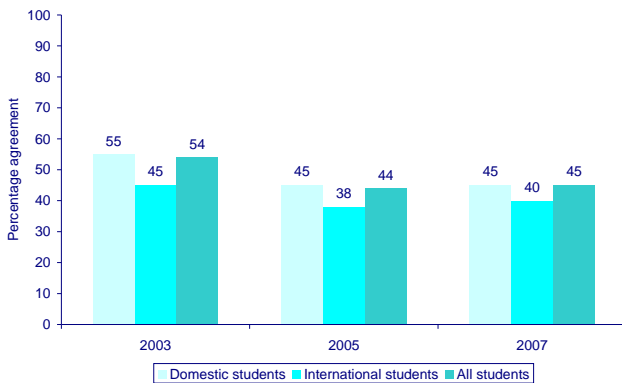
Trends

Faculty scores for Good Teaching peaked at 54% for current students in 2003, and 57% for graduates in 2005. Since then, they have averaged at 44.5% for current students and 49.5% for graduates. In 2007, current domestic students appeared to be more satisfied than international students with teaching within the Faculty (45% domestic; 40% international), while for graduates the reverse is true (50% domestic; 54% international). These results are marginally higher than the University average in both surveys (SCEQ: 44%; CEQ: 48%).

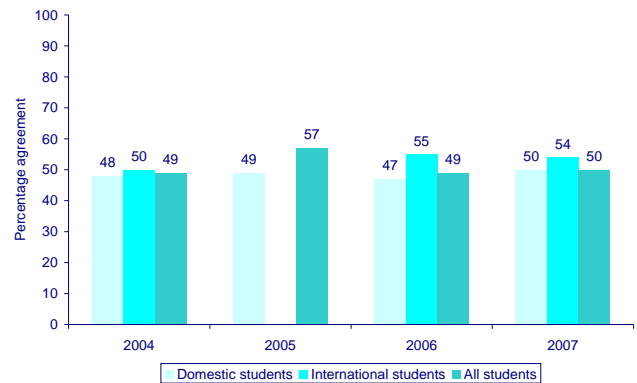
Since 2001, the percentage of comments received which mention various aspects of good teaching as being an area in need of improvement has exceeded those suggesting it as an area of best practice. Lack of constructive, timely or useful feedback on work formed the majority of negative comments (17%).

2.1 Comparative results: Quantitative data 2001–2007

The following tables show the proportion of students who either strongly agreed or agreed with relevant survey item statements for Good teaching in the SCEQ and the CEQ.



2.1.1 Student Course Experience Questionnaire: 2003; 2005; 2007 (current students)



2.1.2 Course Experience Questionnaire 2004–2007 (graduates from previous year)

2.2 Comparative results: Qualitative data 2001–2007

The following table includes the percentage of qualitative comments received which can be classified as areas of best practice or areas of improvement, providing an indication of trends in the student experience of good teaching between 2001 and 2007, as indicated in the responses to open questions in the SCEQ and the CEQ.

		SCEQ 2001	SCEQ 2002	SCEQ 2003	SCEQ 2005	SCEQ 2007	CEQ 2006	CEQ 2007
Areas of best practice	Domestic	n/a	n/a	n/a	23%	32%	20%	18%
	International	n/a	n/a	n/a	33%	48%	0%	0%
	All	20%	13%	12%	24%	34%	18%	15%
Suggested improvements	Domestic	n/a	n/a	n/a	29%	36%	29%	32%
	International	n/a	n/a	n/a	38%	13%	0%	0%
	All	35%	33%	28%	30%	44%	27%	28%

2.3 Key issues for coursework students (SCEQ 2007; CEQ 2007)

2.3.1 Areas of best practice

Current students (SCEQ 2007)	Domestic (n=116)	International (n=21)	All (n=137)
------------------------------	---------------------	-------------------------	----------------

Good teaching experiences

- | | | | |
|---|-----|-----|-----|
| - Use of innovative and up to date teaching methods and techniques | | | |
| - Ability to keep students interested in the subject | 17% | 29% | 19% |
| - Encouragement to participate in discussions during lectures and tutorials | | | |
| - Learning resources are up to date, and relevant to curriculum | | | |

Motivating students

- | | | | |
|---|----|-----|----|
| - Teachers display enthusiasm for teaching/ subject | 8% | 10% | 8% |
| - Teachers are perceived to be passionate and inspiring | | | |
| - Students are motivated by lecturers/ tutors etc | | | |

Sample comments: domestic students

- *There are many very dedicated staff/lecturers/specialists who put a lot of effort into their teaching*
- *Some truly excellent teaching of complex concepts. Staff are concerned and interested*
- *Most of the teaching staff are passionate about teaching and are very good at simplifying difficult concepts*

Sample comments: international students

- *Teaching staff on the whole enthusiastic in teaching students*
- *Lectures stimulate further thinking and understanding rather than just presenting facts and memory work*
- *Dedication of the teachers, not all, but the majority of the professors are very dedicated in trying to make difficult material understandable with limited amounts of time to teach*

Graduates (CEQ 2007)	Domestic (n=66)	International (n=12)	All (n=78)
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Concern and care for student learning

- | | | | |
|--|----|----|----|
| - Students felt supported in their learning; help and advice readily available | 8% | 0% | 6% |
| - Lecturers understood problems and difficulties of students (academic and personal) | | | |

Sample comments: domestic students

- *Approachability and supportiveness of staff members and faculty*
- *Teachers made me motivated, integration, good support*
- *The motivation of the staff to teach well and create a positive learning environment*
- *Extremely supportive staff and lecturers*

2.3.2 Suggested improvements

Current students (SCEQ 2007)	Domestic (n=113)	International (n=24)	All (n=137)
Good teaching experiences			
- Teaching methods used are outdated; Lectures were boring	5%	8%	6%
- Discussions of issues raised during lectures and tutorials are not encouraged			
- Learning resources are out of date, and not relevant to curriculum			
Concern and care for student learning			
- Staff do not provide support and help for students, including one-on-one consultations	10%	0%	8%
- Staff do not seem to understand student difficulties and problems			
- Staff are perceived to be more interested in their research than in teaching			
Feedback on work (from staff to students)			
- Comments on work are not constructive; do not explain where mistakes occur that can be rectified.	20%	0%	17%
- Marks only supplied, no comments			
- Feedback is untimely and not helpful			
- Perceived lack of staff effort in provision of feedback on assessment			
Sample comments: domestic students			
- <i>Staff also clearly don't care about the current students, we were given almost no warning before we were kicked out of our Mackie building where we all held our frequent and vital study group meetings. We were moved to insufficient and hard to access rooms, which were then frequently made unavailable. All of this just before we were to sit our major Barrier exam. Needless to say most second year meds feel we are simply here to pay our fees rather than valuable members of the university</i>			
- <i>More feedback to students regarding their performance. Currently the student needs to identify their weaknesses from the assessment. It will be beneficial if a faculty member can identify the area to improve for the student</i>			
- <i>Timeliness of online material + references - many are well outdated</i>			
Sample comments: international students			
- <i>Lectures vary widely in quality</i>			
- <i>more organized teaching, summarizing topics, important points of the curriculum identified by lecturers</i>			
Graduates (CEQ 2007)	Domestic (n=66)	International (n=10)	All (n=76)
Good teaching experiences			
- Teaching methods and techniques used are outdated/need improvement	12%	0%	11%
- Discussions of issues during class were not encouraged			
- Lecturers were boring; did not engage with students			
- Learning materials and resources were outdated			
Concern and care for student learning			
- Students did not feel supported in their learning;	8%	0%	7%
- help and advice was not readily available			
Feedback on work (from staff to students)			
- Comments on work are not constructive; do not explain where mistakes occur that can be rectified.	12%	0%	11%
- Feedback is untimely and not helpful			
Sample comments: domestic students			
- <i>Level of support for students and feedback were accurate</i>			
- <i>More individual feedback on how you are going and less 'generalised evaluation forms' summing you up.</i>			
- <i>Quality of hospital teaching - inconsistent</i>			
- <i>Feedback regarding progress/exam results</i>			

3 Overall satisfaction (KPI 9)

Definition

This single item asks graduates about their overall level of satisfaction with their degree course. Aspects include:

- Reputation of the University/ Faculty/ degree (including reputation in the professional arena)
- Value for money (cost of course; entry standard of students; level of course content)
- Qualifications (teaching/ subject), knowledge and relevant experience of academic staff

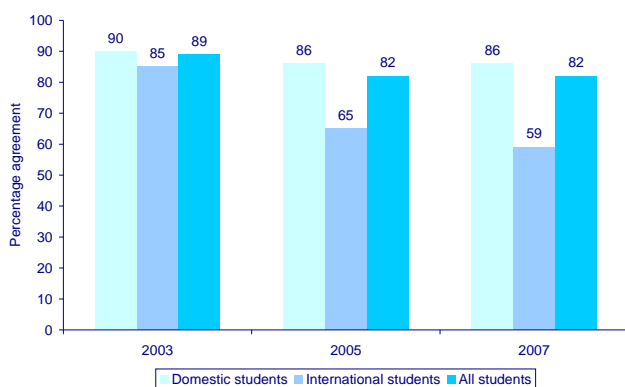
Trends

Overall satisfaction with the degree course currently rates at 84% for graduates and 82% for current students. Of interest is the difference in the experiences of domestic and international current students and domestic and international graduates. In the 2007 SCEQ 86% of domestic students and 59% of international students either agreed or strongly agreed with the statement *“Overall I am satisfied with the quality of this degree course”*; whilst in the CEQ, 76% of domestic graduates and 86% of international graduates agreed or strongly agreed. The University average for graduates is 71% and for current students is 73%.

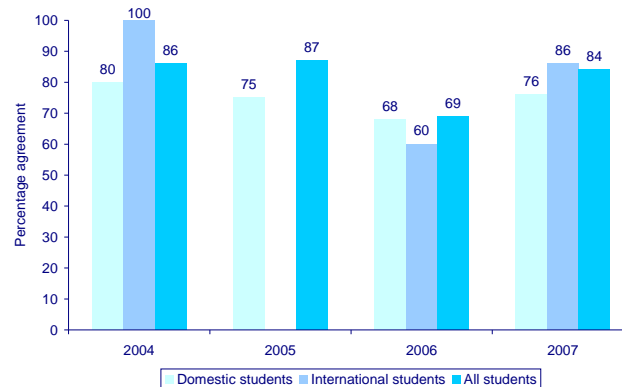
The percentage of comments received from current students, and which mention the above areas, is evenly divided between those expressing satisfaction and those expressing the dissatisfaction (7% each); whilst for graduates there were substantially more positive comments (6%) than negative (3%).

3.1 Comparative results: Quantitative data 2001–2007

The following tables show the proportion of students who either strongly agreed or agreed with the survey statement *‘Overall I am satisfied with the quality of this degree course’* in the SCEQ and the CEQ.



3.1.1 Student Course Experience Questionnaire: 2003; 2005; 2007 (current students)



3.1.2 Course Experience Questionnaire 2004–2007 (graduates from previous year)

3.2 Comparative results: Qualitative data 2001–2007

The following table includes the percentage of qualitative comments received which can be classified as areas of best practice or areas for improvement, providing an indication of trends in students' overall satisfaction between 2001 and 2007.

		SCEQ 2001	SCEQ 2002	SCEQ 2003	SCEQ 2005	SCEQ 2007	CEQ 2006	CEQ 2007
Areas of best practice	Domestic	n/a	n/a	n/a	4%	7%	3%	8%
	International	n/a	n/a	n/a	4%	5%	0%	0%
	All	18%	7%	19%	4%	7%	3%	6%
Suggested improvements	Domestic	n/a	n/a	n/a	2%	7%	6%	3%
	International	n/a	n/a	n/a	12%	11%	0%	0%
	All	6%	6%	3%	7%	7%	5%	3%

3.3 Key issues for coursework students (SCEQ 2007; CEQ 2007)

3.3.1 Areas of best practice

Current students (SCEQ 2007)

In 2007, very few current students who provided written observations in their responses to the SCEQ mentioned aspects relating to overall satisfaction i.e. reputation/ quality of degree/ University; qualifications, knowledge and experience of staff, including guest lecturers or clinicians; the entry standards or students; or the cost of the course. Only 7% of undergraduate students (8/137 comments received) mentioned the aforementioned aspects as being areas of best practice. There were four general comments, and four relating to staffing matters.

Sample comments: domestic students

- *the people - the selection process for the USydMP was obviously a good one as the cohort this year is made up of an amazing group of people!*
- *I am aware of the privilege that I am afforded in studying medicine.*
- *clinical teaching, overall experience, quality of the staff involved*

Graduates (CEQ 2007)	Domestic (n=66)	International (n=12)	All (n=78)
Staffing issues			
- Qualifications of staff in subject matter and in teaching at tertiary level	6%	0%	6%
- Relevant experience of lecturers and tutors in subject area			
- Relevant and up to date knowledge of lecturers and tutors in subject area			

Sample comments: domestic students

- *Standard of teaching and qualifications of lecturers*
- *Dedication of teaching staff*
- *lecturers worked hard for the course*

3.3.2 Suggested improvements

Current students (SCEQ 2007)

In 2007, very few current students who provided written observations in their responses to the SCEQ mentioned aspects relating to dissatisfaction with the reputation/ quality of degree/ University; qualifications, knowledge and experience of staff, including guest lecturers or clinicians; the entry standards or students; or the cost of the course. Only 8% of undergraduate students (11/137 comments received) mentioned the aforementioned aspects as being areas in need of improvement. No comments were received on this aspect from international students.

Sample comments: domestic students

- *Admission process is shocking, the interviews are done by students who are very inappropriate, many of the interviewers tell people the questions so it becomes a shocking way of getting in. This is a huge problem as very few people fail out*
- *Cost, although not affecting me, the cost of the degree has increased by large amount every year in the past 4 years. This will surely bar some students from thinking about doing medicine and in the long run only disadvantage Australian students.*
- *The different departments should be more aware that the lecturers they choose need to be good at teaching and not just be the most successful researcher.*

Graduates (CEQ 2007)

Three percent of students (i.e. 2/76) expressed concern about the quality of their degree/ course experience. Due to the low number of comments, and to maintain student confidentiality, no sample comments are provided.

4 Learning community

Definition

Learning community includes the following:

- Learning environment (exploration of academic interests with staff and students; belonging to a community, social experiences; cultural diversity; equity issues)
- Location/ isolation (affiliated campuses, hospitals, institutes)
- Induction and orientation
- Responsiveness to student feedback

Trends

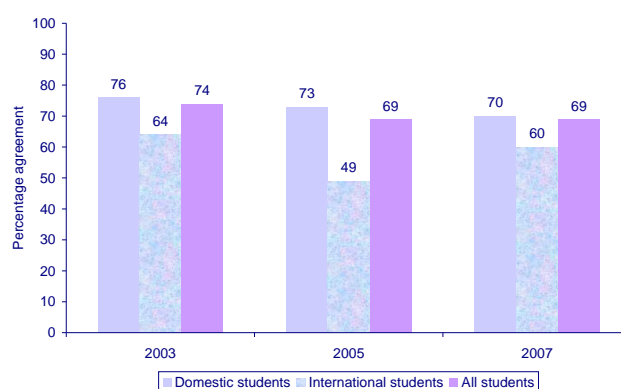
In 2007, sixty-nine percent of students either agreed or strongly agreed with SCEQ survey items on the Learning Community. This is the highest score in the University, indicating that students are very satisfied with the Learning environment and community engendered within the Faculty. International students (2003: 64%; 2005: 49%; 2007: 60%) continue to rate this area of their experience lower than domestic students (2003: 76%; 2005: 73%; 2007: 70%).

Analysis of the comments received in the 2007 SCEQ and CEQ indicate that students appreciate the community feel of the Faculty, the diversity of the student base, and small group and class sizes. However, they would welcome more integration and contact with the wider University.

4.1 Comparative results: Quantitative data SCEQ 2003–2007

The following table show the proportion of students who either strongly agreed or agreed with survey item statements on Learning Community in the Student Course Experience Questionnaire.

Note: The Learning Community Scale is not included in the Course Experience Questionnaire (CEQ).



4.1.1 Student Course Experience Questionnaire: 2003; 2005; 2007 (current students)

4.2 Comparative results: Qualitative data 2001–2007

The following table includes the percentage of qualitative comments received which can be classified as areas of best practice or areas for improvement, providing an indication of trends in the student experience of the learning community between 2001 and 2007.

		SCEQ 2001	SCEQ 2002	SCEQ 2003	SCEQ 2005	SCEQ 2007	CEQ 2006	CEQ 2007
Areas of best practice	Domestic	n/a	n/a	n/a	17%	15%	9%	8%
	International	n/a	n/a	n/a	7%	5%	0%	8%
	All	17%	21%	18%	16%	13%	8%	8%
Suggested improvements	Domestic	n/a	n/a	n/a	8%	7%	3%	6%
	International	n/a	n/a	n/a	7%	17%	0%	0%
	All	6%	5%	10%	8%	9%	3%	5%

4.3 Key issues for coursework students (SCEQ 2007; CEQ 2007)

4.3.1 Areas of best practice

Current students (SCEQ 2007)	Domestic (n=116)	International (n=21)	All (n=137)
Learning environment			
- Experienced social experience of being at university			
- Felt that they belonged to a community (degree/ faculty)	15%	5%	13%
- Academic interests were being explored with staff and students e.g. in tutorials			
- Enjoyed the cultural mix of students in the course			

Sample comments: domestic students

- *collegian atmosphere amongst students and approachability of staff and lecturers*
- *Good sense of community within the degree among students and lecturers*
- *The diversity of the students and their inspiration passions. So many of them are fantastically interesting people. Being surrounded by such a diverse group has certainly broadened my capacity to deal with people in both my professional and personal life. It has made me more open-minded and empathetic. No doubt. I think this is fairly unique to my degree course, it is such a valuable contributor to any program preparing people for professions with heavy interpersonal relations*

Sample comments: international students

- *Camaraderie of the students, with the amount of course material to be covered the students band together and help each other learn.*

Graduates (CEQ 2007)	Domestic (n=66)	International (n=12)	All (n=78)
Learning environment			
- Experienced social experience of being at university			
- Felt that they belonged to a community (degree/ faculty)	8%	8%	8%
- Academic interests were being explored with staff and students e.g. in tutorials			
- Enjoyed the cultural mix of students in the course			
- Happy with size of class			

Sample comments: domestic students

- *Developing a large number of friendships*
- *Well balanced, interesting and great class mates*
- *Clinical tutorials great and interesting, really brought the course to life*

Sample comments: international students

- *Access to computer based research, papers, tutorials. EBM*

4.3.2 Suggested improvements

Current students (SCEQ 2007)	Domestic (n=113)	International (n=24)	All (n=137)
Learning environment			
- Did not feel that they belonged to a community			
- Academic interests were not explored with staff and students e.g. in tutorials	6%	0%	5%
- Would like domestic and international students separated in classes			
- Lectures and tutorials had too many people in them; inhibited discussion			

Sample comments: domestic students

- *I think my degree course could be improved by more contact with the medical faculty, as well as the other combined medicine students. While I have taken part in some medical ethics subjects every four weeks this semester, I think if a more 'combined medical program' culture was fostered, it would allow for contact with the other students studying science medicine and arts medicine, as within all of the combined courses, the faculties are all different and hence all students are separated.*
- *Large class size. The PBL program was only really meant for tops of about 8 students. If the classes get too much bigger the whole premise on which this degree is founded i.e. effective PBL will flounder*
- *Have a mentoring program beyond just the early years so that issues and interests can be discussed and advise sought as necessary*
- *Greater integration with the University of Sydney--GMP students often feel like visitors to campus. This may be due to lack of central facilities for med students' use*

Graduates (CEQ 2007)

In 2007, 5% of graduates (4/76 comments received) who provided written observations in their responses to the CEQ considered that they did not feel part of the University community, that staff didn't respond to student feedback, and that they were unhappy with class sizes. No comments were received on this aspect from international students.

Sample comments: domestic students

- *Overcrowded tutorial classes*
- *Constantly asked for feedback in the form of evaluation forms, yet things did not really seem to change No community.*
- *Was too self directed. Needed to feel like someone cared*

5 Curriculum

Definition

Student perceptions of the curriculum used in their degree course include:

- Content and structure of degree(s) (intensive courses; relationship between Units of Study; content of Units of Study; relevance to work/ career/ industry)
- Mode of delivery (PBL; online)
- Flexibility of degree, including ability to take a range of Units of Study
- Availability/ cancellation of advertised courses
- Cultural aspects i.e. inclusion of international or indigenous themes

Trends

In 2007 36% of comments received from graduates and 47% from current students commented favourably on various aspects of the curriculum; whilst 45% of comments in the SCEQ and 50% in the CEQ considered this to be an area in need of improvement. The lack of training in anatomy continues to be an area of concern (29% of comments received in the 2005 SCEQ, and 37% in 2007)

Note: Specific items on Curriculum are not included in either the SCEQ or CEQ. Therefore no comparative quantitative data is available for this aspect of the student experience. Due to the high percentage of times that the above aspects of curriculum are mentioned in students' written observations, this important aspect of the student experience has been included as a separate item in reports since 2002.

5.1 Comparative results: Qualitative data 2001–2007

The following table includes the percentage of qualitative comments received that can be classified as areas of best practice or areas for improvement, providing an indication of trends in the student experience of curriculum between 2001 and 2007.

		SCEQ 2001	SCEQ 2002	SCEQ 2003	SCEQ 2005	SCEQ 2007	CEQ 2006	CEQ 2007
Areas of best practice	Domestic	n/a	n/a	n/a	59%	48%	45%	42%
	International	n/a	n/a	n/a	74%	43%	57%	0%
	All	46%	51%	52%	61%	47%	47%	36%
Suggested improvements	Domestic	n/a	n/a	n/a	44%	47%	56%	50%
	International	n/a	n/a	n/a	55%	33%	67%	50%
	All	25%	38%	38%	46%	45%	57%	50%

5.2 Key issues for coursework students (SCEQ 2007; CEQ 2007)

5.2.2 Areas of best practice

Current students (SCEQ 2007)	Domestic (n=116)	International (n=21)	All (n=137)
Content and structure			
- Content and structure of whole degree program/ individual units of study	25%	14%	23%
- Intensive courses			
- Subjects appear to be linked together			
- Subject content is relevant to work/ career and industry requirements			
Method of delivery			
- Performance Based Learning (PBL)	21%	29%	22%
- Online mode incl WebCT			

Sample comments: domestic students

- *Integration of clinical and academic/theoretical content, including clinical problems/scenarios and early patient/clinical exposure Delivery by experts in the field Really interesting things to learn*
- *Introducing clinical experience in the first year instead of leaving it up to 3rd and 4th years. Having a community-doctor theme where we can look at the broader community and the affect of disease on a population level Also having sessions of a panel involving a facilitator and health personnel from a variety of disciplines talking about integrating their roles for the patient These should happen more often. Having nearly all lectures recorded and posted online for access.*
- *The clinical focus in this medical degree is very useful. The use of clinical problems as a basis of learning is fundamentally a good idea. The encouragement of clinical experience in the hospitals is also a good thing. There is ample group/teamwork. Overall this has been very a well structured and taught course!*

Sample comments: international students

- *The problem-based learning model and the multi-factorial approach to addressing all facets of the study of medicine (personal and professional development, community-doctor interrelationships, basic and clinical sciences and patient-doctor interrelationships)*
- *The PBL process encourages independence and group work at the same time and is a good way to learn medicine*
- *The self-directed aspect means that as students we are allowed to explore issues more in depth & communicate & share information amongst each other. Furthermore, the way the course is laid out according to the 'block system' aids myself to focus to that particular system thoroughly*

Graduates (CEQ 2007)	Domestic (n=66)	International (n=12)	All (n=78)
Content and structure			
- Content and structure of whole degree program/ individual units of study	17%	0%	14%
- Subject content is relevant to work/ career and industry requirements			
Method of delivery			
- Performance Based Learning (PBL)	24%	0%	21%
- Online mode incl WebCT			

Sample comments: domestic students

- *The subject itself - studying medicine is fascinating and it is a privilege to be part of this honoured profession. 'Practical' nature of course; lots of hands-on experience*
- *Patient contact from first week. Integrated theoretical and practical learning. Problem based learning sessions (PBLs) in 4th year - run visually by specialists in their field*
- *Practical applications addressed early in course Research / evidence based approach Self directed learning*
- *Diversity in exposure to material relevant to course subjects - interesting and exciting activities and opportunities to travel and extend/develop experiences diverse and welcoming in a diverse complex career*

5.2.3 Suggested improvements

Current students (SCEQ 2007)	Domestic (n=113)	International (n=24)	All (n=137)
Content and structure			
- Unhappy with content and structure of whole degree program/ individual units of study	40%	25%	37%
- Subject content is not relevant to work/ career and industry requirements			
Method of delivery			
- Performance Based Learning (PBL)	7%	8%	7%
- Online mode incl WebCT			

Sample comments: domestic students

- *Basic sciences teaching. The problem based learning system is an excellent way to integrate application of basic sciences (biochemistry, physiology, pathology, anatomy, embryology, histology and pharmacology) into a clinical picture. Thus it is an excellent way to learn an integrated approach if you already have a decent understanding of the basic sciences behind the clinical integration. If you are coming to the course from a non-medical science background it is a nightmare to try and learn the basic science at the same time as the clinical integration and you knowledge always feels patchy and disjointed. This could be improved with a bridging year for those from a non- medical science background with an exam in basic sciences that needs to be passed to enter first year. In addition there is simply not enough teaching of basic sciences (especially anatomy) and the course could be improved by spending more time in basic science practical sessions*
- *I think interactive case study based questions online would help students to further their learning and understanding of the signs, symptoms, treatment, etc. of various diseases. And this process could help to include a wider variety of diseases that are similar (e.g.. ASD and VSD) but ultimately different and that there may not be time to cover separately in individual PBL scenarios.*
- *Total re haul of block 2 of the GMP: musculo-skeletal block. It was poorly run and 100% of the students I have spoken to were unhappy with the way that the med faculty structured this block. This was not the case for other GNP blocks. Block 2 of the GMP caters very poorly for students with little/no anatomy exposure*

Sample comments: international students

- *GMP1 Pathology and anatomy classes should have more focus put on them, particularly anatomy class. More time should be allocated to both the practical and theory part.*
- *I think that more anatomy sessions would be helpful, but I think that is being changed for next year. I hope that we will also have extra anatomy sessions next year to help us catch up.*
- *There could me more teaching in the basic sciences as this has been deficient in some areas like Anatomy and Pharmacology etc.*

Graduates (CEQ 2007)	Domestic (n=66)	International (n=10)	All (n=76)
Content and structure			
- Unhappy with content and structure of whole degree program/ individual units of study	35%	50%	37%
- Subject content is not relevant to work/ career and industry requirements			
- Do not like intensive courses			
Method of delivery			
- Performance Based Learning (PBL)	15%	0%	12%
- Online mode incl WebCT			

Sample comments: domestic students

- *A more rigorous anatomy teaching and assessment syllabus incorporate more surgical teaching at the course. Decrease amount of time spent on soft subjects e.g. Community doctor theme sessions*
- *Lack of synthesis of basic sciences to ensure everyone was at a similar level of understanding initially*
- *Problem based learning in 1st and 2nd year would be more helpful if working in specific field related to block. Anatomy needs to be taught over 2 years every week*

Sample comments: international students

- *Better definition of course objectives and more Surgical teaching (this was quite lacking in a Bachelor of Medicine, Bachelor of Surgery degree!)*
- *Anatomy and Pharmacology Teaching*
- *Needs more time teaching Anatomy and Physiology and basic Pharmacology. Less on communication skills*

6 Appropriate assessment

Definition

Appropriate assessment includes:

- extent to which assessment measures higher order thinking and understanding;
- types of assessment (incl. group work as assessment practice);
- marking of assessments (weighting; marks; by staff) (*explanation of marking criteria* is included in Clear Goals and Standards).

Trends

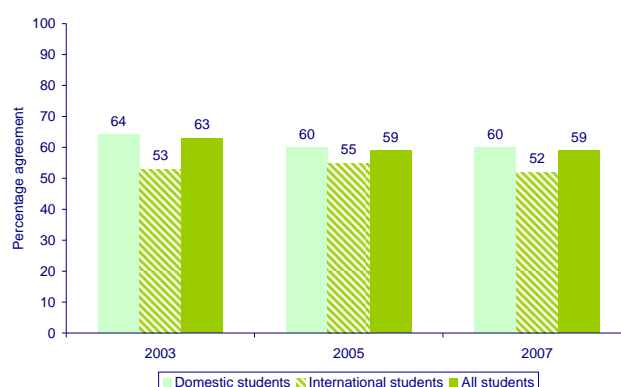
The percentage agreement scores for appropriate assessment (59%) in the 2007 SCEQ is higher than the University average of 55%, and places it as the highest of the Health cluster of faculties. Since 2003, domestic students have rated assessment practices within the Faculty higher than international students.

In relation to comments received which mention assessment, the trend across the University is for there to be more comments expressing dissatisfaction than satisfaction. The Faculty of Medicine is no exception. On the whole students appear to be satisfied with assessment practices within the Faculty; however the lack of summative assessment prior to the barrier exam) and the pass/fail grading system continue to be areas of concern with both current students and graduates.

6.1 Comparative results: Quantitative data SCEQ 2003-2007

The following tables show the proportion of students who either strongly agreed or agreed with survey item statements on appropriate assessment in the SCEQ.

NB: The Appropriate assessment Scale is not included in the Course Experience Questionnaire (CEQ).



6.1.1 Student Course Experience Questionnaire: 2003; 2005; 2007 (current students)

6.2 Comparative results: Qualitative data 2001–2007

The following table includes the percentage of qualitative comments can be classified as areas of best practice or areas for improvement, providing an indication of trends in the student experience of appropriate assessment between 2001 and 2007.

		SCEQ 2001	SCEQ 2002	SCEQ 2003	SCEQ 2005	SCEQ 2007	CEQ 2006	CEQ 2007
Areas of best practice	Domestic	n/a	n/a	n/a	4%	3%	6%	2%
	International	n/a	n/a	n/a	7%	0%	14%	0%
	All	4%	6%	6%	5%	3%	7%	1%
Suggested improvements	Domestic	n/a	n/a	n/a	34%	35%	19%	27%
	International	n/a	n/a	n/a	52%	38%	0%	20%
	All	22%	19%	28%	36%	36%	18%	26%

6.3 Key issues for coursework students (SCEQ 2007; CEQ 2007)

6.3.1 Areas of best practice

Current students (SCEQ 2007)

Three percent of students (i.e. 4/137) expressed satisfaction with the choice, aptness and design of assessments. Due to the low number of comments, and to maintain student confidentiality, no sample comments are provided.

Graduates (CEQ 2007)

One percent of students (i.e. 1/78) expressed satisfaction with the pass/fail system of marking, indicating that it encouraged information sharing and a non competitive atmosphere. Due to the low number of comments, and to maintain student confidentiality, no sample comments are provided.

6.3.2 Suggested improvements

Current students (SCEQ 2007)	Domestic (n=113)	International (n=24)	All (n=137)
Types of assessment			
- Unhappy with the forms of assessment used by the faculty	27%	25%	26%
- General comments on assessment			
Marking			
- Unhappy with pass/ fail system of marking	6%	8%	7%
- Would prefer to know grades			
- Perception that markers are not fair in their distribution of marks			
- Perception that similar work receives different marks			

Sample comments: domestic students

- *Assessment should be in written form and conducted frequently to reinforce understanding concepts and not memorization of facts in multiple choice examinations*
- *Grades aren't always reflective of how you're doing, especially in our course with individual ICA rotations, each supervisor has a different standard, so what one Dr will say was excellent, another could literally say was poor*
- *More regular formative examinations in first year. Even though I did feel prepared for the first barrier, I would have liked more simulated practice. It is difficult to change your way of learning (that is, self-directed), and conform to the unique method of examination required in just over one year*

Sample comments: international students

- *Probably introduction of a grading system other than the current satisfactory or unsatisfactory system e.g. using percentages (like other degrees). This will provide students with more determination to excel further*
- *More formal assessments are needed. Assessments are not graded and students are not ranked. It would be better if the assessments were graded and students are ranked to foster a more competitive nature in the course*
- *the assessments should be better defined and perhaps giving us marks and ranking instead of pass/fail*

Graduates (CEQ 2007)	Domestic (n=66)	International (n=10)	All (n=76)
Types of assessment	20%	20%	20%
- Unhappy with the forms of assessment used by the faculty			
- General comments on assessment			

Sample comments: domestic students

- *Early assessment and feedback. Too much pressure with one or two big barrier exams. It doesn't really assess your knowledge or competence - V-anxiety provoking*
- *Exams were too easy, plus no grades (pass/fail only) meant less motivation to work hard and learn more. Medicine needs a final exam as well. Just too easy to get through*
- *Increasing the number of assessments throughout the semester instead of just having mainly the final exam only*

Sample comments: international students

- *Community Doctor presentations/assignments. Personal and professional development presentations/assignments*
- *More surgical/Anatomy courses. More assessments to monitor progress*

7 Appropriate workload

Definition

Appropriate workload includes:

- Reasonable workload
- Even distribution of assignment deadlines
- Pressure of course; not having enough time to understand the topic
- Inability to comprehend subject matter due to sheer volume of work

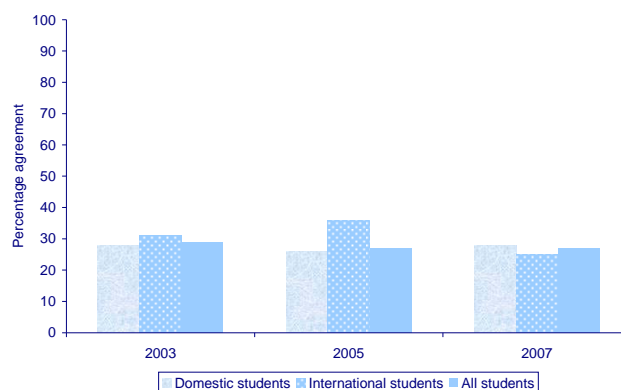
Trends

The percentage agreement scores for appropriate workload (27%) in the 2007 SCEQ is higher than the University average of 23%, and places it as the highest of the Health cluster of faculties. In contrast with other areas of the University, very few students in the Faculty commented either favourably or unfavourably on their workload.

7.1 Comparative results: Quantitative data 2003–2007

The following tables show the proportion of students who either strongly agreed or agreed with survey item statements on Appropriate Workload in the Student Course Experience Questionnaire (SCEQ).

NB: The Appropriate Workload Scale is not included in the Course Experience Questionnaire (CEQ).



6.1.1 Student Course Experience Questionnaire: 2003; 2005; 2007 (current students)

7.2 Comparative results: Qualitative data 2001–2007

The following table provides an indication of trends in the student experience of appropriate workload between 2001 and 2007, as indicated in the responses to open questions in the SCEQ and the CEQ.

		SCEQ 2001	SCEQ 2002	SCEQ 2003	SCEQ 2005	SCEQ 2007	CEQ 2006	CEQ 2007
Areas of best practice	Domestic	n/a	n/a	n/a	0%	0%	0%	0%
	International	n/a	n/a	n/a	0%	0%	14%	0%
	All	0%	0%	0%	0%	0%	1%	0%
Suggested improvements	Domestic	n/a	n/a	n/a	5%	0%	0%	2%
	International	n/a	n/a	n/a	7%	4%	0%	0%
	All	2%	4%	5%	5%	1%	0%	1%

7.3 Key issues for coursework students (SCEQ 2007; CEQ 2007)

The main issues raised by both current students and graduates related to the pressure relating to barrier exams, the inclusion of material beyond their scope, and the resulting confusion relating to what is essential to know, and an overwhelming workload.

Due to the low number of comments, and to maintain student confidentiality, no sample comments are provided.

8 Clear Goals and Standards

Definition

Clear Goals and Standards includes:

- Clear aims and objectives for a course;
- Clear expectations of the standard of work expected from students;
- Clear explanation of the marking criteria used (*marking of assessments* is included under assessment).

Trends

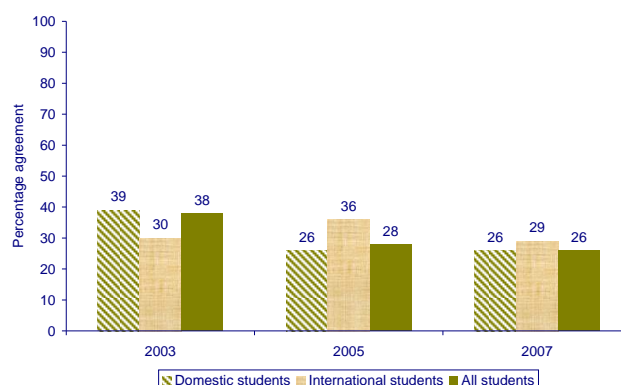
SCEQ Faculty scores indicate that student perceptions of Clear Goals and Standards has consistently been below the University average since 2000. It should be noted that research indicates that clarity of goals is a problem for any PBL course. In 2007, the percentage of students who either agreed or strongly agreed with items in the SCEQ relating to Clear Goals and Standards was 26%, the second lowest in the University. In 2005 and 2007, international students' scores were higher than those for domestic students.

In relation to comments received which mention aspects of clear goals and standards, 28% of current students and 5% of graduates related to perceived lack of direction in the course, and uncertainty regarding the amount of work/ knowledge required for each module.

8.1 Comparative results: Quantitative data SCEQ 2003-2007

The following tables show the proportion of students who either strongly agreed or agreed with survey item statements on clear goals and standards in the SCEQ.

NB: The Clear Goals and Standards Scale is not included in the Course Experience Questionnaire (CEQ).



6.1.1 Student Course Experience Questionnaire: 2003; 2005; 2007 (current students)

8.2 Comparative results: Qualitative data 2001–2007

The following table includes the percentage of qualitative comments can be classified as areas of best practice or areas for improvement, providing an indication of trends in the student experience of clear goals and standards between 2001 and 2007.

		SCEQ 2001	SCEQ 2002	SCEQ 2003	SCEQ 2005	SCEQ 2007	CEQ 2006	CEQ 2007
Areas of best practice	Domestic	n/a	n/a	n/a	0%	0%	0%	0%
	International	n/a	n/a	n/a	0%	0%	0%	0%
	All	0%	1%	0%	0%	0%	0%	0%
Suggested improvements	Domestic	n/a	n/a	n/a	35%	29%	6%	5%
	International	n/a	n/a	n/a	28%	25%	0%	10%
	All	21%	12%	9%	34%	28%	5%	5%

8.3 Key issues for coursework students (SCEQ 2007; CEQ 2007)

8.3.1 Areas of best practice

Current students (SCEQ 2007)

No students provided comments on Clear Goals and Standards as an area of best practice within the Faculty.

Graduates (CEQ 2007)

No graduates provided comments on Clear Goals and Standards as an area of best practice within the Faculty.

8.3.2 Suggested improvements

Current students (SCEQ 2007)	Domestic (n=113)	International (n=24)	All (n=137)
Clear aims and objectives <ul style="list-style-type: none"> - Students were not provided with a clear outline of the course - Expected outcomes were not explained clearly - Course perceived to lack direction 	14%	8%	13%
Clear expectations for standard of work <ul style="list-style-type: none"> - Students were not clear on the standard of work required for assessments - Students were unclear how much work was required for PBL modules/ tutorials 	13%	17%	14%
Sample comments: domestic students <ul style="list-style-type: none"> - <i>it felt like we were never sure as to the learning objectives. there never seemed to be a ceiling on what we should know and remember. maybe that is how self directed learning works??</i> - <i>Clearer curriculum objectives as what is expected and the depth we are expected to learn is often unclear.</i> - <i>Lectures are often repeated and there is often no clear direction on how much or how little you are meant to know on some topics</i> 			
Sample comments: international students <ul style="list-style-type: none"> - <i>A better description of minimal level of required knowledge for studying as the amount available is just sheer a lot, and that would may help in better studying</i> - <i>More guidelines as to what depth of knowledge is expected / curriculum details so we can guide our study otherwise there is a great variation from group to group, or clinical to clinical.</i> - <i>Clearer expectations of what is expected for us to know especially in the first 2 years of study as sometimes it is hard to determine how much detail is expected of us.</i> 			

Graduates (CEQ 2007)

5 percent of students (i.e. 4/76) expressed concern about the lack of clear aims and objectives for the course, and required a clearer explanation as to the standard of work required in assessment/ PBL modules. Due to the low number of comments, and to maintain student confidentiality, no sample comments are provided.