

Postgraduate Certificate (Academic Practice / University Teaching)



Reflective Portfolio Assignment Marking and Feedback

Course **Clinical Education and Academic Practice**

Candidate's Number **25081712**

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

Result Recommendation

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

Feedback

General Comments

This portfolio demonstrates that the Clinical Educator Programme (CEP) has prompted you to think about your teaching role and to make changes to your current practice. I liked how you openly engaged in self-questioning and I had sense that you were motivated to keep challenging yourself to develop further as a clinical educator. I felt that Part 1 needed a little more depth, that some sections of Part 2 needed fuller answers and that there was a little misunderstanding of some educational theory, so I have awarded this portfolio a 'not yet pass'. There are several things that you can do which will bring your work up to a 'pass', as described below, so I would really encourage you to do this and resubmit your work. A member of the team will be pleased to meet with you to discuss this and help you.

Areas which I liked

- I liked how you structured Part 1 of the portfolio. Your introduction set the scene nicely, I liked the messages you conveyed in the subheadings you gave each section.
- I thought you completed the learning cards and your teaching observation reflections with care and thought. You also demonstrated an open, honest approach to your engagement with the whole portfolio. This was great and it is exactly what we are looking for. For example, I liked that you reflected on how your school experiences, (eg your teacher's attitude to learning objectives), aspects of your personality, (eg your extraversion and 'please others' driver), and your learning preferences, (eg visual) might impact on the way you teach others. You conveyed a desire to increase your understanding of yourself and that you saw this as a prerequisite for learning to understand others, in order to teach well. I really liked the parallel you noticed between leadership and teaching.
- You demonstrated how you had applied your learning from the CEP to your practice, (eg using a 'set-body-closure' structure, increasing interactivity, appreciating the importance of evaluation of practice).
- I felt a sense of your development as a clinical educator over time: eg your move from prioritising the

content of your teaching towards placing more emphasis on its 'form'; and from feeling anxious about your knowledge level to realising the positives of role modelling uncertainty to your students.

Suggestions for improvement

- I felt that Part 1 was a little limited in its content and depth of analysis. For example, I would have liked to have read about more than your application of 'set-body-closure' structure and I wanted to read about how the 'snowballing' session ran. I was hoping for some referencing with the literature on experiential learning (eg Kolb).
- I felt that in Part 2, some of the sub-sections needed fuller answers. For example, in the 'constraints and affordances' section, you did address the challenges that the workplace presents for teaching and learning, but I would like to read what you think the opportunities are too. In the 'promoting participation' section, can you think of ways that you could encourage others to engage in learning opportunities, (eg non-medical staff, patients, others?). In the 'diversity' section, it was great that you showed how you picked up on the different needs of younger and mature students. Can you think of more examples of how you teach, or could teach, for other aspects of diversity? I really liked your opening paragraph to Part 2, so you could perhaps keep these questions in mind throughout.
- I think there were some misunderstandings about educational theory. For example, there is limited evidence for learning 'styles', rather people have different learning 'preferences'. The 'learning pyramid' is an intuitive model based on Edgar Dale's 'cone of experience', rather than being an evidence-based model with specific figures attached to it.
- You can deepen any of your reflections by guessing at others' perspectives on situations, thinking about how these compare with yours, and perhaps also cross-referencing this with what the literature might suggest about the aspect of teaching or learning under consideration.
- A small point: proof read to check that you keep the formal tone throughout, eg write words in full, eg 'can't' should be 'can not'.

Marking Guidelines:

ELEMENT	LIKELY 'NOT YET PASS'	PASS
<p>Understanding of concepts and theories relating to the practice of clinical education. (K1 & K2 minimum)</p>	<p>Does not adequately demonstrate an understanding of the key concepts in clinical education. Does not make reference to learning from the CEP, (eg workshops, teaching observation), or similar learning experiences. Does not use examples to illustrate understanding.</p>	<p>Demonstrates, with specific examples, a clear understanding of the key concepts and theories in clinical education. Makes specific reference to learning from the CEP, or similar learning experiences. Makes light-touch reference to the literature, if appropriate.</p>
<p>Understanding of impact of teaching, learning and assessment practices on student and / or trainee learning. (K1 & K2 minimum)</p>	<p>Does not show an understanding of the importance of high quality educational experiences for effective student or trainee learning. Does not make reference to learning from the CEP, (eg workshops, teaching observation), or similar learning experiences. Does not use examples to illustrate understanding.</p>	<p>Demonstrates, with specific examples, a clear understanding of the importance of high quality educational experiences for effective student or trainee learning. Makes specific reference to learning from the CEP, or similar learning experiences. Makes light-touch reference to the literature, if appropriate.</p>
<p>Understanding of impact of the workplace (academic and / or clinical) on student and / or trainee learning. (K1 & K2 minimum)</p>	<p>Does not identify the challenges and opportunities for learning that the workplace environment, (academic and / or clinical), provides. Does not make reference to learning from the CEP, (eg workshops, teaching observation), or similar learning experiences. Does not use examples to illustrate examples.</p>	<p>Demonstrates, with specific examples, an awareness of the opportunities and challenges that the (academic and / or clinical) workplace presents for teaching and learning. Makes specific reference to learning from the CEP, or similar learning experiences.</p>
<p>Understanding of impact of multiple perspectives and diversity on student and / or trainee learning. (V1 – V4)</p>	<p>Does not evidence respect for a range of learning preferences, individual learners and diverse learning communities. Does not use examples to illustrate this understanding.</p>	<p>Demonstrates, with specific examples, an awareness of student and / or trainee diversity. Demonstrated, with specific examples, how these multiple perspectives impact on teaching and learning.</p>
<p>Ability to critically reflect on personal development as a clinical educator.</p>	<p>Does not reflect critically upon their own experiences and practice as an educator. Does not question own experiences in an open, honest, questioning manner which facilitates learning and development. Does not make reference to learning from the CEP, (eg workshops, teaching observation), or similar learning experiences. Does not demonstrate attention to any feedback that has been gained from learners or colleagues.</p>	<p>Demonstrates skill in reflecting upon, and critically analysing their practice and experiences. Shows that they have thought about their own, their learners' and / or colleagues' perspectives, in the light of learning from the CEP, or similar learning experiences. May integrate references to the literature, though not necessarily. May base reflections on a specific model (eg Gibbs or Moon), though not necessarily. Most important is that writing is personal, frank and honest, demonstrating a willingness to question own practice, illustrated with specific examples.</p>
<p>Ability to convey ideas clearly in writing.</p>	<p>Essay is not structured or written in a manner that can be clearly understood by the readers. May be due to lack of appropriate sub-headings, sentence structure that is difficult to follow, or errors in grammar or spelling. Inappropriate length eg word-count outside 4,000 – 5,000 range.</p>	<p>Writes in a manner which conveys ideas clearly. Essay is well structured, uses appropriate sub-headings and text flows well. Appendices are cross-referenced with text. Referenced appropriately using Harvard or Vancouver style. Text word count between 4,000 and 5,000.</p>

