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Providing Feedback in Workplace-Based Assessment for Forensic Medicine Learning: Usefulness, Disadvantages, Challenges, Implementation Process, and Models

Parmar P[1]* and Rathod G[2]

[1]Department of Forensic Medicine and Toxicology, All India Institute of Medical Sciences (AIIMS), India

[2]Department of Pathology and Lab Medicine, AIIMS, India

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***Corresponding author:** Pragnesh Parmar, Department of Forensic Medicine and Toxicology, Additional Professor and HOD, All India Institute of Medical Sciences (AIIMS), Bibinagar, Hyderabad, Telangana, India, Email: drprag@gmail.com

Abstract

Feedback is a critical component of workplace-based assessment (WBA) in forensic medicine learning, offering valuable insights for student improvement and professional growth. This article examines the usefulness, disadvantages, challenges, implementation process, and various models for providing feedback in forensic medicine education. Practical examples illustrate the application of feedback models, highlighting their impact on enhancing assessment practices and preparing students for forensic practice. Current Indian Medical Education System is lacking critical aspects of feedback and particularly WBA. This article creates awareness about concept of WBA.

Keywords: Challenges; Feedback; Forensic; Learning; Usefulness; Workplace-Based Assessment; WBA

Abbreviations

WBA: Workplace-Based Assessment; ALOBA: Agenda-Led Outcome-Based Analysis.

Introduction

Workplace-based assessment (WBA) is essential in forensic medicine education, enabling students to develop and refine their skills in real-world settings. Effective feedback is a cornerstone of WBA, guiding learners in their professional development. This article explores the usefulness, disadvantages, challenges, implementation process, and various models for providing feedback in forensic medicine learning, using practical examples to demonstrate their application and impact [1].

Usefulness of Feedback in Forensic Medicine Learning

Enhances Learning and Development: Feedback provides students with specific insights into their performance, helping them identify strengths and areas for improvement.
Example: During a forensic autopsy, an instructor provides detailed feedback on a student's dissection technique, guiding them to enhance precision and accuracy.

Promotes Reflective Practice: Effective feedback encourages students to reflect on their performance, fostering continuous self-improvement and professional growth.

Example: After receiving feedback on evidence collection at a simulated crime scene, a student reflects on their approach and identifies ways to improve efficiency and thoroughness.

Facilitates Competency Development: Targeted feedback helps students develop core competencies required for forensic practice, ensuring they meet professional standards [2].

Example: In a forensic toxicology lab, feedback on analytical methods helps students refine their techniques, ensuring accurate and reliable results.

Disadvantages of Feedback in Forensic Medicine Learning

Potential for Negative Impact: If not delivered constructively, feedback can negatively impact a student's confidence and motivation.

Example: Harsh or overly critical feedback on a student's presentation of forensic findings may discourage them from actively participating in future assessments.

Inconsistent Quality: The effectiveness of feedback can vary depending on the evaluator's experience and communication skills, potentially leading to inconsistent learning outcomes.

Example: Inconsistent feedback from different instructors in a forensic anthropology course may confuse students about performance expectations.

Time-Consuming: Providing detailed and constructive feedback requires significant time and effort from evaluators, which can be challenging in busy forensic education settings [3].

Example: An instructor in a forensic pathology course may struggle to provide comprehensive feedback to each student due to time constraints.

Challenges in Implementing Feedback in Forensic Medicine Learning

Training Evaluators: Ensuring that evaluators are skilled in providing effective feedback is a significant challenge, requiring comprehensive training programs.

Example: Faculty members need workshops on effective feedback techniques, focusing on delivering constructive and actionable feedback in forensic settings.

Maintaining Objectivity: Minimizing personal biases and ensuring consistent feedback across different evaluators is essential for fair and objective assessment.

Example: Developing standardized feedback rubrics and conducting calibration sessions among evaluators can help maintain objectivity in assessing forensic document examination skills.

Integrating Feedback into Curriculum: Incorporating regular feedback sessions into the existing curriculum without disrupting other educational activities requires careful planning and coordination [4].

Example: A forensic entomology course must integrate feedback sessions into its schedule without reducing time allocated for essential practical exercises and theoretical instruction.

Implementation Process for Providing Feedback in Forensic Medicine Learning

Planning and Preparation

- Identify key competencies and skills to be assessed and develop standardized feedback forms and guidelines.
- Train faculty and evaluators on effective feedback techniques, focusing on clarity, specificity, and constructiveness.

Example: In a forensic chemistry program, key competencies such as analytical skills, teamwork, and communication are identified. Standardized feedback forms are created, and training workshops are conducted for faculty and evaluators.

Conducting Assessments

- Schedule regular feedback sessions as part of coursework or practical activities, ensuring that feedback is timely and relevant.
- Use standardized criteria to ensure consistency in feedback across different evaluators.

Example: During a forensic pathology course, feedback sessions are scheduled at regular intervals, where students receive feedback on their autopsy procedures based on standardized criteria.

Delivering Feedback

- Provide immediate, specific, and constructive feedback, focusing on both strengths and areas for improvement.
- Encourage reflective practice by discussing actionable steps for development and improvement.

Example: After a feedback session in forensic ballistics, the evaluator provides detailed feedback on the student's ability to match bullet casings with firearms, suggesting ways to improve accuracy and efficiency.

Reviewing and Refining the Process

- Collect feedback from students and evaluators to identify strengths and areas for improvement in the feedback process.
- Continuously refine feedback forms, training programs, and implementation strategies based on feedback and observed outcomes [5].

Example: Following a series of feedback sessions in forensic toxicology, feedback from students and faculty is used to adjust the feedback criteria and improve the clarity and constructiveness of feedback provided.

Models for Providing Feedback in Forensic Medicine Learning

Pendleton's Model: This model focuses on structured feedback delivery, ensuring a balanced approach by discussing what went well before addressing areas for improvement.

Example: During a forensic anthropology assessment, the instructor first highlights the student's strengths in skeletal analysis before suggesting improvements in identifying trauma indicators [6-8].

The Reflective Feedback Conversation: This model encourages dialogue between the evaluator and the student, promoting self-assessment and reflective practice.

Example: In a forensic odontology course, the evaluator engages the student in a reflective conversation, asking them to assess their performance in dental evidence analysis before providing additional insights [9-12].

The Sandwich Model: This model structures feedback by sandwiching constructive criticism between positive comments, ensuring that feedback is balanced and encouraging.

Example: After observing a forensic entomology procedure, the evaluator begins with positive feedback on the student's identification skills, then suggests improvements in documenting findings, and ends with encouraging remarks on their overall progress [13-18].

The Agenda-Led Outcome-Based Analysis (ALOBA): This model focuses on aligning feedback with the student's learning objectives, ensuring that feedback is relevant and targeted.

Example: During a forensic toxicology assessment, the evaluator aligns feedback with the student's goal of mastering toxicological analysis, providing specific suggestions to achieve this objective [19-22].

Conclusion

Effective feedback is crucial for workplace-based assessment in forensic medicine learning, offering valuable insights for student improvement and professional growth. However, its implementation presents challenges, including potential negative impacts, inconsistent quality, and time demands. Careful planning, standardized feedback criteria, and thorough training of evaluators are essential for successful integration of feedback into forensic education. By addressing these challenges and adopting appropriate feedback models, forensic programs can enhance their assessment practices and better prepare students for professional practice.

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