Moodlefying assessments in medical education and the problems of scale

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- 31,000 students
- 7,800 employees
- 11 faculties around the city
- Moodle users since 2007 (1.6)
Learning environment

- A mixed set of learning tools in use, multiple overlapping VLEs and learning cultures
- In recent years, mostly two Moodle installations: moodle.helsinki.fi & mooc.helsinki.fi
- A history of individual teachers experimentating with pedagogical technology, no top-down policies regarding e-learning
“Digitalizing” assessments

- Government funding for “digital leaps”
- Faculty of medicine applied for moving summative assessments into a digital platform
- Tested different platforms in 2017–8: Inspera, Abitti, Uniwise & Moodle + SEB
- No significant advantages discovered in using Inspera or Uniwise in comparison to Moodle’s Quiz
The pilot phase – autumn 2018

- Nine exams, ranging from 200 students to 10 students
- Bring your own device (BYOD) policy
- Mostly positive feedback from students (average feedback 4/5)
- The weak links of the solution became visible
Challenges

- The fragility of wifi
- Student panic
- Esoteric virus scanners behaving badly
- SEB & iOS updates
- Teacher co-operation and capability building
Routinization

- This semester, there’s been around twenty Moodle+SEB exams with little problems.
- New administrative infrastructure in place (“exams office”), whose staff makes sure the lecture room wifi is up to par, there’s spare iPads, and that the quiz settings are correct.
- By the end of 2020, most courses in the Faculty of Medicine will assess with a Moodle quiz.
Does it scale? (1/2)

- A lot of interest from other faculties
- Also, different needs: more heterogeneous device base, different SEB configuration needs, lack of proper lecture halls (AC sockets & wifi)
- Moodle server needs to be capable of handling sudden spikes in users
Does it scale? (2/2)

- Most importantly, requires investing in teacher training
- IT staff who can solve technical problems with SEB and a variety of OSes during exams
- Faculty of Medicine’s history of committing to management-driven strategy and benchmarking international pedagogical developments in medicine was essential
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