

Leading the Redesign of an Undergraduate Anatomy Course (weak example)

As coordinator of an undergraduate anatomy course, I undertook a major redesign of the curriculum. The course had been running for several years and I wanted to modernise the learning experience and improve student engagement. To do this, I redesigned course materials, developed new resources, delivered workshops, reorganised the LMS, and introduced new assessments.

The redesign began with a review of existing course content. I updated lectures, revised practical activities, and created additional learning materials. I also restructured the LMS so that students could find resources more easily. The course site was organised into weekly modules and assessment information was made more accessible.

As part of the redesign, I delivered workshops to students throughout the semester. These workshops focused on key anatomical concepts and provided opportunities for additional explanation of complex topics. I also introduced new assessments that were aligned with learning outcomes and designed to give students more opportunities to demonstrate their understanding.

The redesigned course was implemented successfully. Students accessed the materials regularly and attended workshops. I monitored engagement throughout the semester and was satisfied with the level of student participation. Students commented positively on the organisation of the course and reported that the new resources were useful.

The redesign process also involved working with colleagues. I shared resources and discussed aspects of the course with other teaching staff. Team members were informed about the changes and supported the implementation of the redesigned curriculum. Staff members used the new resources during teaching activities and contributed to course delivery.

The outcomes of the redesign were positive. Students responded well to the new course structure and the learning materials were well received. The workshops appeared to support learning and the new assessments operated effectively. Overall, I believe the redesign improved the quality of the student experience and strengthened the delivery of anatomy education.

I learned a great deal through this project. Developing new resources and implementing changes helped me build my skills in curriculum design and assessment development. It also gave me experience in managing a large course and working with colleagues. In the future I plan to continue refining the course and introducing further improvements where appropriate.

Overall, this experience demonstrates my contribution to teaching and learning. By redesigning the course, introducing new resources, and delivering workshops, I enhanced the learning experience for students and contributed to the ongoing development of anatomy education within the program.

Leading Curriculum Renewal and Building Teaching Capability Through an Undergraduate Anatomy Course Redesign (strong example)

As coordinator of a large first-year anatomy course, I recognised persistent challenges extending beyond my individual teaching practice. Student feedback indicated difficulties navigating course resources and integrating anatomical concepts, while teaching staff reported inconsistencies in how learning activities and assessment expectations were communicated across multiple tutorial and laboratory groups. These issues raised concerns about both the student experience and the coherence of teaching practices across the teaching team.

My initial intention was simply to revise the curriculum; however, through discussions with colleagues I recognised that sustainable improvement would require a broader approach focused on building shared teaching practices and capability within the team. Consequently, I reframed the project from a course redesign initiative into a collaborative curriculum renewal process.

I led a review involving tutors, laboratory demonstrators, and course contributors. Together, we analysed student feedback, assessment outcomes, and recurring challenges identified by teaching staff. Through this process, I facilitated discussions regarding curriculum alignment, assessment design, and effective approaches to supporting first-year learners. Rather than prescribing solutions, I sought to create opportunities for colleagues to contribute their expertise and co-design improvements.

The redesign resulted in a suite of shared resources, including learning guides, assessment support materials, and workshop activities that could be used consistently across teaching groups. I also developed a structured LMS framework that colleagues could adapt in other courses. To support implementation, I facilitated professional discussions with teaching staff before and during the semester, focusing on common student misconceptions, approaches to formative feedback, and strategies for improving learner engagement.

One important indicator of impact was the way colleagues began modifying their own teaching practices. Several tutors reported adopting the workshop activities and feedback approaches in courses beyond anatomy. Team discussions increasingly shifted from operational concerns to pedagogical conversations about learning design and student engagement. This represented a significant change from previous years, where teaching meetings were primarily focused on logistics.

Student outcomes also suggested positive effects. Student feedback highlighted improved clarity, navigation, and support for learning. Staff members similarly reported greater confidence in explaining assessment expectations and supporting students consistently across teaching settings.

The most valuable aspect of this experience was what it taught me about educational leadership. Early in the project, I focused heavily on producing high-quality resources. However, I realised that resources alone were insufficient to generate meaningful change. The greatest impact occurred when colleagues felt ownership of the curriculum and had opportunities to contribute to its development. This challenged my assumptions about leadership and reinforced the importance of collaborative approaches to educational enhancement.

Reflecting on the project, I recognise that sustaining influence requires systematic evaluation of both student outcomes and changes in colleagues' practice. As a result, I have begun collecting evidence of resource adoption and teaching innovations arising from the project. My future goal is to establish a broader community of practice for anatomy and health sciences educators to support ongoing curriculum enhancement across multiple courses.

This experience demonstrates not only my leadership of a significant curriculum initiative but also my sustained influence on the practices of colleagues, contributing to a culture of evidence-informed enhancement of teaching and learning.