**ST GEORGE'S, UNIVERSITY OF LONDON**

**Periodic review – 19th April 2018**

**PgCert Healthcare and Biomedical Education**

**Panel**

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| Professor Andy Kent (Chair) | Executive Dean & Pro Vice-Chancellor, Faculty of Health, Social Care and Education, Kingston University & St George's, University of London |
| Alice Arnett | MBBS P year student, St George's, University of London |
| Professor Annette Boaz | Professor in Health Care Research, Centre for Health and Social Care Research , Kingston University & St George's, University of London |
| Dr Richelle Duffy | Programme Lead (MSc Health & Social Care Leadership, BSc Health & Social Care Leadership, BA Social Care), Department of Nursing, Midwifery & Health, University of Northumbria |
| Jo Horsburgh | Principal Teaching Fellow in Medical Education, Lead for Medical Education Research, Educational Development Unit, Imperial College London |

**In attendance**

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| Derek Baldwinson | Director, Quality and Partnerships, SGUL |
| Eduardo Ramos (Secretary) | Quality and Partnerships Officer, SGUL |

**Introduction and context**

1. SGUL has offered a postgraduate programme that aimed to equip participants with the knowledge, skills and attributes to become effective teachers and reflective practitioners in higher education since 2003. In the period since the programme was first offered, the number of participants enrolled on the PgCert had increased significantly and included participants from a wider range of disciplinary backgrounds. These changes had been reflected in a change of award title (from Healthcare Education to Healthcare and Biomedical Education) adopted in November 2014 when the programme was last revalidated.

2. Under SGUL's quality assurance framework, programmes are usually reviewed on a quinquennial basis. In view of the fact that the PgCert had been revalidated in November 2014, the programme had been due to be reviewed in academic year 2018-19. The PgCert was also accredited by the Higher Education Academy (HEA) at Descriptor Level 2 (Fellowship).  The 30 credit *Principles of Teaching and Learning* module has also been mapped to Descriptor Level 1(Associate Fellowship). The period of HEA accreditation was coming to an end and reaccreditation would be sought in May 2018 along with SGUL's professional development pathway, St. George's Health in Education

(SHINE). The periodic review had been brought forward to align with the timescales for the HEA reaccreditation process.

3. The structure of the PgCert Healthcare and Biomedical Education is such that it can be offered to staff employed by SGUL's collaborative partners. Notably, staff at the University of Nicosia involved in the delivery of SGUL's MBBS programme under a franchise arrangement have been able to complete the PgCert.

**Conduct of the review**

4. To support the review the panel received the following documents in advance of the meeting:
   The self-evaluation document (SED) and appendices to the SED:
   SED points and responses
   Research, Scholarship & Professional Activities of Team
   Course Handbook for current PgCert HBE
   Minutes of Validation Panel (November 2014)
   Annual Programme Monitoring Reports 2015-2017
   Current PgCert HBE Programme Specification
   External Examiner Reports 2015-2017
   Proposed Revised PgCert HBE for the 2018 and subsequent intakes
   Draft module descriptors for the 2018 and subsequent intakes

5. The panel held a private meeting at which it confirmed the issues that it would discuss with the PgCert HBE course team. The panel then met with two PgCert HBE participants. Participants, rather than students, is used to refer to the staff and others who undertake the PgCert. Students is used to refer to the groups who are taught, supported and assessed by the participants). (Issues raised with participants are briefly summarised at the end of this report (paragraph 29).

6. After the participant meeting, the panel then met the PgCert course team. The members of the course team who attended the review meeting are listed in Appendix A, p10.

7. After the participant and course team meetings, the panel held a second private meeting at which it agreed the decision and action points recorded in paragraph 10 and subsequent paragraphs.

**Revalidation**

8. The Panel understood that under SGUL's quality assurance framework, programmes are revalidated rather than reviewed if the course team was intending to introduce major changes to a programme. Although periodic review panels have the authority to approve modest changes to a programme, the periodic review process is intended to focus primarily on the extent to which a programme is meeting the needs of its students and on the standards achieved by those students. It is not conceived as a process for approving major changes. The team had opted for a periodic review (rather than revalidation) because the planned changes did not, in the team's view, warrant revalidation. This had been discussed and agreed with SGUL's Quality and Partnerships Directorate.

9.  The team was intending to make a number of changes to the PgCert including revisions to its structure, the sequencing of modules, the use of online learning, student support and the overall approach to assessment. In the view of the panel, these proposed changes were substantial and would have benefited from the greater level of scrutiny afforded by the revalidation process. Also, the deadline for HEA accreditation was imminent and, in the view of the panel, completing reaccreditation documents in the time available would present a challenge. Preparing full documents for a revalidation event would perhaps have been advantageous in terms of preparation for the HEA reaccreditation processes.

**Decision**

10. The panel recommended to Senate that the approval period of the PgCert Healthcare and Biomedical Education should be extended for two years (with biannual intakes) commencing with the September 2018 intake. The PgCert will therefore next be reviewed in academic year 2019-20 to enable further intakes to enrol on the programme in academic year 2020-21.

11. In reaching its decision, the panel noted that the Centre for Innovation & Development in Education (CIDE) would be developing a master's programme (MA or MEd) in higher education for 2019 entry. The PgCert would comprise the first 60 credits of the Master's programme. The PgCert and its constituent modules would therefore be considered (as a freestanding award) as part of the validation process for the new Master's programme in academic year 2018-19. The proximity of the validation of the Master's programme was a factor in the panel's decision to approve the programme. If a master's degree in higher education is approved for 2019 entry as planned, the approval period of the PgCert will be extended to be coterminous with that of the master's degree.

12. CIDE, established under its current leadership in 2017, was the locus of delivery for the PgCert. For the Panel, the positioning of the PgCert within CIDE was a positive development because it addressed the sense, articulated by the External Examiner in his 2015-16 report and shared by the panel, "that the success of the programme relies on input and goodwill from non-core staff at George's and partner hospitals".

**Action points**

13. The panel's recommendation to Senate to extend the approval period of the PgCert Healthcare and Biomedical Education is subject to a satisfactory response to the following action points. Some of these action points are a re-articulation of the conditions of approval set by the 2014 revalidation panel. The deadline for responding to the action points was [six weeks] 6th June 2018.

**Essential action points**

| 1 | The course team is asked to appoint module leaders before the PgCert is next offered. |
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14. The appointment of module leaders had been a condition of approval in 2014 that had yet to be met. Subsequent annual monitoring reports indicated that the delay was the result of internal restructuring, unresolved debates about the module leader's role and ongoing administrative matters. In discussion with the panel, the team explained that

the appointment of module leaders had in fact not been feasible because of the diffuse structure and delivery pattern for the PgCert. However, with the new PgCert structure, modules were more tightly defined with discrete content, teaching and learning strategies and assessment requirements. The appointment of module leaders with responsibility for the development, delivery and assessment of the modules they have been designated to lead was now achievable.

| 2 | The course team is asked to put in place effective systems for monitoring progression and completion rates. |
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15. The development of processes for identifying the reasons why students exited the PgCert had been a condition of approval set by the validation panel in 2014. The team had also been asked by the validation panel to present data on non-completion rates on a cohort by cohort basis in each Annual Monitoring Report. In the 2015-16 Annual Monitoring Report the team had indicated that it had met this condition although cohort by cohort analyses of the reasons why students exited the PgCert was not apparent in subsequent Annual Monitoring Reports. The predominant driver for non-completion was a change of role for those participants who were also NHS clinicians.

16. It was apparent from the SED that the high dropout rate remained a concern for the team. The team was intending to limit recruitment to participants who were less likely to relocate from St George's or its local NHS partners and lose touch with the course (although the programme remained open to external participants). Notwithstanding this innovation, the team was asked to ensure that its systems for monitoring progression and completion rates and sufficient to identify and support participants who are disengaging or otherwise finding it difficult to complete the PgCert in a reasonable timescale. Work in this area should continue to be reported on a cohort by cohort basis in each Annual Monitoring Report.

| 3 | The course team is asked put in place a clear system for gathering feedback from participants at each stage of the PgCert and for explaining to participants how their feedback has been used to enhance the programme. |
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17. The requirement to develop feedback systems had been a condition of approval in 2014. The team had implemented an end-of-course questionnaire but acknowledged that an in-course questionnaire was needed to gather timely and relevant feedback from participants. The SED contained within it a commitment to review the participant evaluation strategy and the panel asked the team to complete the review and implement an updated feedback system in time for the launch of the 2018 course. The revised system should explain how the team intends to communicate actions taken in response to participant feedback to the participants themselves. In this context, the team might consider asking participants to provide verbal feedback in ways that can be relayed to the Course Team.

| 4 | The course team is asked to publish the participant handbook, programme specification, programme regulations and Scheme of Assessment for the 2018 iteration of the PgCert. |
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| 5 | If the course team is intending to offer current participants the opportunity to transfer to the new iteration of the PgCert in autumn 2018, the way in which the transition arrangements will be managed should be set out clearly. |
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18. When the PgCert was revalidated in 2014, existing participants were transferred to the new programme on the advice of the HEA. The extent of the changes now proposed were such that the panel assumed that it would be impractical to transfer participants to the new programme. In any case, all current participants had not been included in the consultation process and it would not be possible to transfer participants without a formal consultation process. However if course team is intending to offer current participants the opportunity to transfer, the way in which the transition arrangements will be managed should be set out clearly and in detail.

**19. Advisable action points**

| 6 | **The team is asked to provide a timeline for the development of online resources.** |
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20. The SED and the annex to the SED outlining the proposed revisions to the PgCert set out clearly the team's intentions to use E-learning and e-tools as both as pedagogical models and to support flexible learning. The team would be working closely with the e-Learning Unit and the Learning Technology Services team to develop, implement and evaluate these resources before the revised PgCert was launched in autumn 2018. The team was asked to provide a timeline for the development of these tools and models.

**Desirable action points**

| 7 | **The team is asked to consider the benefits of requiring participants to complete assessment tasks that they might themselves set for students.** |
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21. The assessment requirements for the PgCert required participants to prepare a series of reflective accounts that required participants to outline the nature of their engagement with the PgCert and its impact on their values, academic and professional identity and practice. The emphasis on narrative assessment tasks was aligned with the educational philosophy of the PgCert and enabled participants to demonstrate that they had met the intended learning outcomes for the modules. Participants might find it beneficial if they were also required to complete assessment tasks that they might themselves set for their own students

**Proposed changes**

22. Annex 8 to the SED explained that the revised version of the PgCert retained much of the experiential philosophy, content and assessment of the current programme. The programme was however to be organised in a more sequential fashion:
   - to embed individual practice and reflections more firmly into specific disciplinary and interdisciplinary settings and communities of practice;
   - to make the programme more responsive to institutional needs for quality enhancement;
   - to align the programme, progressively, with e-tools and systems that can assist with enhancing the student experience;
   - to create a more solid and durable community spirit and collaboration amongst participants;

- to streamline administrative processes so that these fit better within institutional systems.

23. The panel was supportive of the rationale for revision of PgCert and the specific proposals outlined above which seemed to be well thought through and beneficial to the participants and their learning. In some instances, the team's plans for implementing its proposals and the underpinning administrative processes appeared to be at an early stage of development and the panel's recommendations were in part intended to support the team in advancing its plans.

**Good Practice**

24. In addition to the action points, the panel highlighted wide-ranging areas of good practice. The programme had, since it was launched in 2003, developed in response to considerable stakeholder engagement. The informal and formal mechanisms by which the programme team actively engaged with external stakeholders and educational supervisors were a particular strength.

25. This practical orientation of the PgCert was also a significant strength. The PgCert was also clearly grounded in educational principles with modules building upon prior learning to make a coherent learning experience for participants.

26. The flexible approach to supporting the needs of professionals and the use of a diverse range of teaching methods were further areas of good practice. The content of programme and assignment briefs were well aligned to provide a framework with which participants could demonstrate achievement of the intended learning outcomes.

27. In addition the panel identified the following specific areas of good practice:
    a. The submission of an open and reflective Self-Evaluation Document as a useful starting point for the review.
    b. The use of a bank of trained staff available to observe and review participants' practice.
    c. The publication of a thorough student handbook was comprehensive resource for participants.
    d. As noted by the external examiner, the high quality of verbal feedback provided to participants following observed teaching sessions.

28. In summary, the panel commended the team's commitment to the ongoing development of the programme and its firm focus on pedagogic quality.

**Meeting with the PgCert Healthcare & Biomedical Education science team – summary of key points**

**Resources for the Programme**

29. The main resource for the PgCert was its staff: academic staff needed for teaching, supervision and assessment and the support staff needed for course administration. It was apparent from the SED and supporting documentation that, despite the importance of the PgCert to improving the learning experience of students, the processes for assessing and meeting the resource needs of programme had been ad hoc. This was reflected in a number of areas where difficulties linked to staffing levels had been

identified. These included the delay in appointing module leaders, lengthy turnaround times for assessed work and the occasional difficulty in arranging teaching observations.

30. The positioning of the PgCert in CIDE and the identification of a core team to lead on the teaching and assessment of participants placed the PgCert on a firmer footing. Supplementary support from colleagues from outside CIDE would continue to be a requirement but there was sizeable pool of staff with a firm commitment to the PgCert to provide this support. The team also planned to simplify many aspects of course organisation and management, particularly in relation to modular structure and assessment, and this would in turn reduce the burden on key support staff.

31. The PgCert was not underpinned by a business case and lacked a detailed Course Budget in part as a consequence of the difficulties in accounting for the contributions of a large and distributed teaching team. This was likely to continue to create operational difficulties for the team. In this context, the team was urged to work with the institutional leadership to ensure that the resources needs of the PgCert are considered alongside SGUL programmes in the internal planning round, that staff from beyond CIDE and the Institute of Biomedical Education are incentivised to contribute to the PgCert and their contributions are recognised and that participants have protected time for study.

## Consultation process

32. The team had launched its plans to revise the structure of the PgCert at a course committee meeting in February 2018 and consultation documents had been circulated to colleagues who had been unable to attend the course committee. Initial feedback had been incorporated and revised proposals circulated for further comment. The consultation period had been relatively brief. In view of the extent of the proposed changes, the panel was surprised about the limited scope of the consultation process.

## MEETING WITH STUDENTS

33. The panel then met with two participants from the Biomedical Science teaching team. From the discussion with the participants, the following points are noted:
    a. The PgCert was a valuable opportunity to learn more about educational theory and to improve teaching. The practical nature of the course was appealing and a purely theoretical course would have been less attractive;
    b. Participants felt that their teaching skills had improved because they had been able to incorporate practical tips into their teaching practice;
    c. Induction could have been clearer and more guidance and structure would have helped. At the outset, the participants were unsure what was expected of them and inclined to drift. Once they began to engage, they were able to progress although this required them to be-disciplined;
    d. The participants selected the supervisor from an approved list. The support from the educational supervisors had been excellent.
    e. Reflective practice as a paradigm was unfamiliar to scientists;
    f. The participants did not feel part of a community or cohort. More opportunities to engage with other participants would have been welcomed;

g. Participants were expected to meet the course requirements alongside their other responsibilities. Although they did not have protected study time, they felt well supported;

h. The participants had not so far been asked to provide feedback about the PgCert.

DB/April 2018

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**Appendix A –PgCert Healthcare & Biomedical Education Course Team**

Dr Rachel Allen, Head of the Graduate School
Professor Roberto Di Napoli, Head of CIDE (Centre for Innovation and Development of Education)
Evan Dickerson, Learning Technology Services Manager
Dr Nicoletta Fossati, Honorary Reader in Clinical Education and consultant anaesthetist (St George's University Hospitals NHS Foundation Trust)
Dr Elizabeth Miles, Senior Lecturer in Teaching & Learning Staff Development (PgCert Course Director
Dr Janette Myers, Senior Lecturer in Student Learning and Support and Associate Dean, Learner Development

# St. George's, PGCert in Healthcare & Biomedical Education Periodic Review April 2018 Summary of Responses to Essential, Advisable and Desirable Action Points

The PGCert Healthcare & Biomedical Education Course team is very appreciative of the work undertaken by the Periodic Review Panel both for the Review event in April and for the advice and Action Points contained in Derek's very helpful event report.

Please find our responses to the Action Points below. The following documents accompany our responses:

A.  Participant-facing Handbook for September 2018 start
B.  Programme Specification
C.  Scheme of Assessment
D.  Programme Regulations
E.  Timeline for production of online resources

**Responses to Action Points:**

1.  **The course team is asked to appoint Module leaders before the PGCert HBE is next offered.**

    Module leaders have been appointed:
    Module One        Dr Thushari Welikala
    Module Two        Dr Elizabeth Miles
    Module Three      Dr Rosie MacLachlan

2.  **The course team is asked to put into place effective systems for monitoring progression and completion rates.**

    Action on this point is partly in the hands of the course team and partly dependant on institutional student record systems. At a meeting with the Registrar, it was agreed that the PGCert participant records for the revised programme could be managed on SITS (the Student Record System) to enable close tracking of participants both for ongoing monitoring and to determine completion rates.

    The sequential more synchronised nature of the modules in the revised programme will make monitoring participant progress much simpler. In addition, using Canvas for assessment management will enable us to identify problems with submissions early on in the process.

    Module leaders will work with the course administrator to ensure performance in assessments is promptly and accurately recorded and that identification and follow up of participants in difficulty takes place. Module leaders will work with the course administrator to produce assessment data for consideration at Board of Examiner meetings.

    Participants who withdraw from the course or who disengage and have their registration terminated will be asked to give reasons (this may not always be feasible).

    Data on progressions, completion, withdrawal and termination of registration will be considered in the reserved section of Course Committee meetings.

    A status audit has been undertaken with the current PGCert particiants to determine their situation and what support and resources (including workshops and assessment opportunities) are required to enable them to complete the programme as quickly as possible. Their assessment will also be managed via Canvas when possible, thereby improving efficiency and reliability of the current process.

3.  **The course team is asked to put into place a clear system for gathering feedback from participants at each stage of the PGCert and for explaining to participants how their feedback has been used to enhance the programme.**

St George's employs the online EvaSys student feedback system and this will be put in place for the revised programme (if it is approved). EvaSys enables individual staff to see and respond to student feedback but it also allows module leaders to view feedback data across the module.

This, combined with the sequential, synchronous nature of the revised programme will enable much more effective collection of feedback.

We will continue to encourage Course Reps to convey participant feedback to the course team, both informally and in their reports at Course committee meetings.

Participant feedback summaries and responses to them will be a standing item on the agenda of on Course Committee meetings. An overall summary of participant feedback and responses to it will be included in the Annual Programme Monitoring Report (submitted to TPCC). The APMR will be discussed by the Course Committee (unreserved section of meetings) and posted on the PGCert HBE Canvas area.

Once the new course is launched, discussions will be held with course reps to establish preferred methods of communication of information such as responses to participant feedback.

4. **The course team is asked to publish the participant handbook, programme specification, programme regulations and Scheme of Assessment for the 2018 iteration of the PGCert.**

We have produced a participant-facing handbook (enclosed). A small number of elements require further clarification, for example, detailed assessment criteria for assignments. These elements will be decided and the handbook updated by September. In practice, however, participants will not be given a handbook as such – the information, materials and resources will be presented in the programme and module Canvas areas.

The programme specification, Scheme of Assessment and programme regulations have also been produced and are enclosed. These documents have not yet been approved by TPCC (the relevant monitoring Committee) and will be updated as necessary for a September 2018 launch (if the revised PGCert is approved).

5. **If the course team is intending to offer current participants the opportunity to transfer to the new iteration of the PGCert in autumn 2018, the way in which the transition arrangements will be managed should be set out clearly.**

As organisational and structural differences between the existing and revised PGCert programmes make transfer between them difficult, the team has decided not to offer this option.

6. **(Advisable) The team is asked to provide a timeline for the development of online resources.**

Following meetings between the PGCert team, the Learning Technology Services team (who manage Canvas) and the e-Learning Unit, the enclosed timeline for the development of online resources has been produced. The PGCert HBE Canvas site has already been created and materials identified.

7. **(Desirable) The team is asked to consider the benefits of requiring participants to complete assessment tasks that they might themselves set for students.**

The team has amended the assessments for Module Two to include the production of a poster which will then be the focus of an oral presentation. Both poster and presentation will be assessed. The reflective pieces that form many of the course assessments cover a wide range of topics and do require additional activities such as analysing and presenting student feedback on teaching.