St George's, University of London

Senate

Quality Assurance and Enhancement Committee

Minutes of the meeting held on 10th November 2016

Present:

Dr Anne-Marie Reid (Chair)	Sue David
Dr Rachel Allen	Professor Jane Lindsay
Tanisha Amin	Professor Iain MacPhee
Professor Annie Bartlett	Dr Elizabeth Miles
Dr Iain Beith	Dr Janette Myers
Professor Deborah Bowman	Professor Jane Saffell
Corey Briffa	Dean Surtees
Denise Cooper	
Dr Judith Ibison	

In attendance:

Derek Baldwinson (secretary)
Dr Julie Leeming (for item 6)

Apologies for absence have been received from Professor Judith Cartwright, Sue David, Dr Aileen O'Brien, Professor Michael Ussher and Dr Ahmed Younis.

1. **Minutes of the meeting of 6th October 2016**
   The minutes of the meeting held on 6th October 2016 were received and approved.

   Paper QAEC/16-17/2/A

2. **Matters arising from the minutes of the meeting of 19th May 2016 (and previous meetings) not covered elsewhere**
   2.1. An *Action Points* list providing an update on actions taken since the October 2016 meeting and previous meetings was received for discussion.

   Paper QAEC/16-17/2/B

   2.2. **External examining (arising from 2.3)** - Polly Goodfellow was leading on the development of new report forms. Draft report forms had now been circulated to course directors for comment.

   2.3. **Student Experience Internal Audit by Deloitte (arising from 2.4)** – Professor Bowman would work with colleagues to meet the Deloitte requirements (action: DFB).

   2.4. **Quality assurance and governance of CPPD and short course provision (arising from 2.8)** – Dr Allen would bring a paper to the January 2017 meeting of QAEC on the quality assurance and academic governance arrangements for CPPD and short courses. A parallel paper on financial and management oversight would be presented to SPARC (Action: RA).

   2.5. **Appointment of a learning technologist (arising from 2.13)** - an application to establish a learning technologist project post to support Turnitin/EMA had been be submitted to

SRC in October 2016. It was unclear whether the application had been approved (action: DB to check).

2.6. **QAA review of transnational education in Cyprus (arising from 2.11)** - it was expected that the MBBS course committee would respond to the QAA recommendation by presenting the MBBS as a level 7 qualification (i.e. equivalent in terms of level to a master's degree). The MBBS would not be credit-rated.

2.7. **Membership, terms of reference and schedule of business (arising from 4.**2) – Dr Ahmed Younis had been added to the membership of QAEC.

2.8. **Learning, Teaching and Assessment Strategy (arising from 5) - the** development of the Learning, Teaching and Assessment Strategy was on hold pending the approval of the Education Strategy. Professor Saffell hoped to present a draft Education Strategy to QAEC for discussion in the spring term (Action: JS).

3. **QAA Report on Plagiarism in Higher Education: Custom essay writing services**

   3.1. It was reported that the Computing Services Manager had advised that SGUL did not at present filter or block access to sites and searches on university computer network. The Committee had suggested that searches of this kind might trigger pop up warnings directing students to the support available to them. SGUL was however considering the use of web filtering to support the Prevent agenda. A Web Filtering Policy will be discussed at the Information Strategy Committee in late November and will be discussed at other committees, such as the Equality and Diversity Committee in the coming weeks. A final decision for whether the use of web filtering should be extended will be made by March 2017.

   3.2. It was further reported all courses had been invited to report on their plagiarism awareness/good academic conduct teaching and whether teaching included specific warning about essay mills. Responses were being collated and would be brought back to the Committee in spring 2017 (DB to collate).

   3.3. Dr Myers was working with the SGSU to raise awareness of dangers of this method of cheating. An item had been included in the student newsletter and Dr Myers was developing a poster on the topic.

4. **Report to Council on the Continuous improvement of the Student Academic Experience and Student Outcomes (15/16)**

   4.1. A background paper on the requirement to present a report on quality and standards was received and noted. The draft report was not available in time for the Committee.

   Paper QAEC/16-17/2/C

5. **Validation and Review**

   5.1. An overview report on validation and review activity (session 2015-16) was received for discussion.

   Paper QAEC/16-17/2/D

   5.2. From the discussion the following points are noted:

   a) Review panels meet with current students and recent graduates. Opportunities to meet with students depend on a number of factors and take-up can be variable. Other ways of engaging with students could usefully be explored. For example, the

internal panels members could, as part of their role, be asked to gather feedback from students in advance of the formal review meeting.

    b) At present, the way in which educational and pedagogic expertise within SGUL is deployed to support the curriculum development process is uneven. Within the joint faculty, the Associate Deans and the School Learning and Teaching leads fulfill this role. Outwith FHSCE, the curriculum development process would be more effective if inexperienced teams were directed to sources of advice and support at the start of the process. This might be achieved if, for example, QAEC commented on "initial proposal forms" prior to their consideration at SPARC.

    c) It was difficult to accurately assess the demand for a new programme. The Market Insight team in KU's Marketing & Communications Directorate had expertise in this area that SGUL might be able to learn from.

    d) At present, SGUL lacked a forum within which SGUL and Trust staff could be invited to put forward ideas for new courses.

5.3. The following was agreed:

    a) Validation events for programmes intended to start in the autumn will not be scheduled to take place after 30 May without the prior agreement of the Chair of QAEC. For other programmes, a validation event would normally be scheduled to take place six months before extended start date for the course.

    b) A brief "lessons learned" enquiry in relation to the approval of the PgDip Diabetes would be initiated. JS (with support from DFB) to lead.

    c) Collaborative provision procedures would be reviewed to determine whether they are clear in terms of purpose, the allocation of responsibilities and governance arrangements. As part of this review, the "academic lead" role would be redefined and a person specification developed (DB and Simon Fitch to lead).

    d) An academically-led review of the programme-approval process would be initiated (action: DFB).

6. Internal Quality Audit

6.1. A paper setting out possible topics for an internal quality audit was received for discussion.

Paper QAEC/16-17/2/E

6.2. The paper had previously been discussed by QAEC in October 2016. At that time, QAEC had agreed that an audit of admissions processes was essential because admission was a critical issue for SGUL. However, an end-to-end process review of admissions had been initiated by the Chief Operating Officer and so the Committee decided not to initiate an IQA because of possible conflict with the process review. However, the Committee agreed that, in its report to Senate, concerns about admissions would be noted.

6.3. In addition to the IQA topics referred to in paper E, the following were considered:

    a) **Personal tutoring** – it was reported that a review of personal tutoring had already been initiated by Dr O'Brien and Dr Suman Rice (with engagement with FHSCE) and so an IQA was not a priority.

    b) **Alumni relations** –it would useful to know more about the career pathways of graduates and so an audit of processes to gather intelligence in this area might be useful. Alumni relations was a priority area for Caroline Davis (the newly appointed

Director of External Relations Communications & Marketing) and so the Committee decided to delay an IQA in this area.

c) **Feedback on the quality of teaching** – an audit of programme-level approaches to gain immediate feedback from students on the quality of teaching was discussed as a possible audit. Professor Saffell in partnership with the Students Union was already exploring the implementation of new feedback processes and the Student Experience Action plan would be a suitable vehicle for assessing the impact of new approaches in this area.

d) **Teaching about academic integrity across courses** – this remained an important issue at both undergraduate and postgraduate level. However, it was agreed that a decision on an IQA would be delayed until course teams had had the opportunity to report back on teaching in this area (see minute 3).

6.4. It was agreed that the quality of feedback (in terms of timing and usefulness of comments for feedback and feed forward) would be the subject of the IQA. In reaching this decision, QAEC noted the levels of dissatisfaction reported by students in the NSS and the way in which NSS results determine TEF outcomes. DFB (with TA, JM and AY) would lead on the IQA.

6.5. Colleagues who had suggested IQA topics would be thanked for their suggestions.

7. **Teaching Excellence Framework (TEF)**

7.1. A paper on the risks and benefits of entering the Teaching Excellence Framework in year 2 was received for discussion.

Paper QAEC/16-17/2/F

7.2. The Committee was asked to make a recommendation to Senate on whether SGUL should enter TEF2 and, on balance, QAEC decided to recommend to Senate that SGUL should enter the TEF. In reaching this view, the Committee noted the following:

a) SGUL's metrics indicated that the institution would receive a bronze award. It was unlikely that SGUL's provider submission would alter the bronze award.

b) Even if SGUL decided not to enter TEF2, the development of robust improvement plans to bring about the cultural change needed to raise teaching quality and enhance the student experience remained.

c) In terms of TEF, improvement plans should be mindful of the need to tackle the metrics that currently have negative flags. For example in relation to Academic Support to move to a neutral flag from double negative in NSS2017 39 more students would need to indicate that satisfied they were satisfied with the support available to them compared with 2016. Projections of this kind were based on the assumption that performance across the sector remained static.

d) For improvement plans to be successful, TEF would need to be a strategic priority for SGUL and there would need to be buy in from staff at all levels in SGUL.

e) At this stage, it was unclear whether the metrics for institutions who chose not to enter TEF2 would be published. If all metrics were published, the negative reputational impact of a bronze award would not be avoided.

8. **Data package for periodic review**

8.1. A paper on the data requirements for the periodic review process was received for discussion.

Paper QAEC/16-17/2/G

8.2. When the Committee met in May 2016, it was agreed that options to improve the way in which data is used to support the periodic review process should be explored. The proposals contained in paper J were intended to:

a) Establish a standard "data package" to underpin the periodic review process
b) Shift the burden for capturing and presenting data from course teams
c) Use existing data sets to reduce burden on staff
d) Facilitate comparisons within SGUL and across the sector where meaningful comparative data exists

8.3. From the discussion, the following points are noted:

a) The proposed data sets were available within SGUL. However the practicalities for extracting and presenting data would need to be discussed with the systems team in registry.
b) It would be ideal to move to a position within which standard reports could be routinely generated to provide senior staff with reliable management information and to support annual monitoring and periodic review. Reports of this kind were not currently available and this was indicative of a relative lack of investment in the infrastructure need to generate standard reports.
c) The reference to "dashboard" style reporting was unhelpful. Dashboard" style reporting implied a level of functionality that require significant investment in business intelligence tools.
d) SGUL's capacity to prepare for TEF by using data to agree strategic teaching and learning priorities.

8.4. It was agreed that the paper and its implications would be discussed with the Registry Systems team (Action: DS).

8.5. It was agreed that the resource implications of developing routine reports would be raised at SPARC (Action: AMR).

9. **Strategic Risk Monitoring and Reporting Table**

9.1. The Strategic Risk Monitoring and Reporting Table was received for discussion.

Paper QAEC/16-17/2/H

9.2. It was noted that all corporate risks were owned by a senior manager within SGUL. Risk owners were asked to discuss actions taken to mitigating risk with key committees and report on the outcomes of those discussions to the Risk Management and Efficiency Committee. Risks related to teaching quality and student satisfaction were owned by members of QAEC and these risk owners had been asked to discuss periodically mitigating actions with QAEC.

9.3. The report was noted.

10. New course developments schedule 2016-17

10.1. The schedule of new courses in development was received.

<div align="right">Paper QAEC/16-17/2/I</div>

10.2. There was a possibility that the FdSc Offender Care could be developed as an apprenticeship or as a degree apprenticeship. It was agreed that a working group would be convened to develop a policy position on apprenticeships and degree apprenticeships (Action JS).

10.3. The Graduate Diploma in Science was unlikely to go ahead and would be removed from the schedule.

10.4. The timeframes related to the MSc Heart Failure had been pushed back because the cardiology teaching team was focused on establishing the MSc Sports Cardiology.

10.5. Professor Bartlett and Dr O'Brien would lead on the development of the MSc Global Mental Health.

10.6. The Faculty had been successful in being awarded test site status by Health Education England for the new Nursing Associate programme and will be expected to run the new programme in January 2017. HEE requirements are sufficiently flexible to enable the Nursing Associate to be added as an existing pathway within the FdSc Healthcare Practice. Some learning outcomes and competencies will be specific to the Nursing Associate programme/pathway. The new elements would be approved by FQC under delegated authority.

10.7. Modification to make the MRes Biomedical Science more attractive to potential students by replacing the Biomedical Science award title with three specialist award titles which are determined by the topic of the project and the specialist option module selected by the student. There will be three option modules – selected level 6 modules available within the BSc Biomedical Science/iBSc will be validated at level 7 for inclusion in the modified MRes. TPCC was authorized to approve the proposal to deliver level 6 modules at level 7. Strategic issues (including the offer of new award titles) would require SPARC discussion and approval (Action: RA).

11. Programme Specifications

2016 entry Programme Specifications have been requested. The Committee will receive a progress report on receipt and publication of Specifications when it meets in January 2017.

<div align="right">**Paper QAEC/16-17/2/J**</div>

12. Dates of future meetings

Thursday 19 January 2017
Thursday 9 March 2017
Thursday 18 May 2017

All meetings will start at 2pm (unless otherwise stated) and take place in H2.5 (unless otherwise stated).