Quality Assurance & Enhancement Committee

Tuesday 10th December 2019



Minutes

Present: Prof Deborah Bowman (Chair); Dr Fran Gibson; Ms Pippa Tostevin; Prof Jane Lindsay; Dr

Carwyn Hooper; Derek Baldwinson; Prof Jane Saffell; Verity Allison; Dr John Hammond; Dr Mark Bodman-Smith; Jenny Laws; Dr Marcus Jackson; Prof Roberto Di Napoli; Dr Saranne

Weller; Dr Vanessa Ho; Verity Allison;

In attendance: Dr Judith Ibison; Glen Delahaye (clerk)

1. Apologies for absence

Reported

1.1 Apologies for absence were received from: Syed Islam; Dr Aileen O'Brien; Beth Ward; Dr Rachel Allen:

2. Minutes

To receive and consider: the minutes of the meeting held on the 13th November 2019.

Paper QAEC/19-20/3/A

Noted

2.1 Dr Rachel Allen was thanked for chairing the meeting held on the 13th November 2019.

Agreed

2.2 The minutes were agreed as an accurate record of the meeting.

3. Action points and matters arising not covered elsewhere

To receive and consider: the action points arising from the minutes not covered elsewhere.

Paper QAEC/19-20/3/B

Reported

3.1 8th October 2019 minute ref 6.7: Prof lain Beith was leading on the action plan arising from his degree classification investigation. This action was being completed for FQC, but would also be reported back to QAEC. A timeline would be agreed with Prof Beith. Action: QPD

4. International MBBS teach-out – review plan

<u>To receive and consider:</u> an update on the actions to ensure that the interests of remaining registered students are protected while the programme is taught-out

Paper QAEC/19-20/3/C

Noted

4.1 The significant amount of work that had been completed by the programme team to address the actions was acknowledged.

Reported

- 4.2 Student satisfaction had improved, but it did not yet meet all the KPIs. The team would continue to seek to improve it.
- 4.3 In line with the Quality Assurance plan, Quality Assurance visits to TJU would normally take place three times per year. The programme team proposed that no formal QA visit take place, as there were no signals of concern and a visit appeared disproportionate to the number of students affected. Student satisfaction was being monitored through placement feedback, the

- International survey, contact with students during academic staff visits, face to face meetings of academic staff at exam time, and with TJU staff via Skype.
- 4.4 The GMC had formally been asked whether further QA visits were necessary. They had agreed with the proposal to discontinue visits, but there had not yet been any formal confirmation from them. Additionally, the teach-out plan had been discussed at UMBEC, where the proposal had also been supported.
- 4.5 For the local MBBS programme, the policy on QA visits would be changing over the next year. A more light-touch process would be implemented, with each site completing a form on an annual basis to confirm that they continued to meet the standards. A similar approach could be adopted for the international programme.

Agreed

- 4.6 Subject to GMC confirmation, QAEC agreed that further QA visits were not necessary.
- 4.7 There was no longer a need for QAEC to review the International MBBS teach-out plan. It was already being scrutinized by UMBEC on a regular basis and if concerns were raised there then it could be brought back to QAEC.
- 5. QAEC Annual Programme Monitoring Action Plan (18-19)

To receive and consider: an update on the QAEC action plan

Paper QAEC/19-20/3/D

Reported

- 5.1 Two Task and Finish Groups had been set up to focus on a review of the Attendance and Engagement Policy and to develop standards and guidance for supervision. This work was ongoing and would be reported to QAEC.
- 5.2 The Committee last received and updated the Action Plan in October 2019. At that time, it agreed to close off, in terms of QAEC reporting, the majority of issues beyond QAEC's terms of reference whilst keeping others under review. With this as context, the Committee was asked to consider the following items:
 - The requirement for continued reporting of the resource issues related to MSc Physician Associate Studies (item 3)
- 5.3 Dr Rachel Allen and Dr Carwyn Hooper had recently met the outgoing course director of MSc Physician Associate Studies and were considering how to move forward following her departure. This action would be completed through the Graduate School.
 - User satisfaction with the current admissions cycle (item 10).
- 5.4 RAG would monitor this action, but Jenny Laws would report on it to QAEC twice per year to ensure a wider stakeholder consultation.
 - Reporting of those issues that relate to the learning environment (items 8, 12, 16, 17) and the Committee's role in relation to the student online teaching feedback scheme (SOLTS) (item 15).
- 5.5 Actions arising from APMRs were monitored by SEAG and also fed into the QAEC Annual Programme Monitoring Action Plan through annual monitoring committee reports.
- 5.6 There was a need to ensure that the programme action plans monitored at SEAG were cross referenced with the QAEC Action Plan and that the Associate Dean (Student Experience) was kept informed of actions that he was responsible for.
- 6. Internal Quality Audit feedback

To receive and consider: an update on the feedback Audit

Paper QAEC/19-20/3/E

Reported

- 6.1 QAEC commissioned an IQA of assessment in October 2018 and QAEC received a progress report from the IQA lead in November 2019. It was thought that it would be useful to return to the IQA of feedback to consider the relevance of the findings, to review progress and consider the interface with the current IQA.
- 6.2 Thorough work had been completed by Prof Roberto Di Napoli and Dr Rachel Allen.
- 6.3 Enhancement work had been underway in relation to feedback, as well as work on a revised Policy. The enhancement work would help to inform the Policy.

Agreed

- 6.4 A review of the actions that arose from the feedback audit would be completed as part of ongoing learning and teaching work and reported back to QAEC in April 2020. **Action: JS and RM**
- 7. UK Quality Code for Higher Education advice and guidance on external expertise

 <u>To receive and consider: on the UK Quality Code advice and guidance on external expertise</u>

 Paper QAEC/19-20/3/F

Reported

- 7.1 As a condition of registration with the OfS, providers in England must confirm that they meet the Expectations of the UKQC, have adopted the core practices and considered the common practices. The OfS randomly selects and visits 15% of providers each year. It was therefore likely that SGUL would be visited within the next six years.
- 7.2 QPD would work with QAEC members to map each of the <u>twelve Themes</u>. It would develop a timeline that would allow QAEC to focus on two or three Themes per meeting.
- 7.3 The first mapping had been for the External Expertise Theme. Two question arose from it, in relation to how SGUL supports and ensures the quality of guest lecturers and whether there was a policy for SGUL staff taking on roles as external experts at other providers.
- 7.4 QAEC members reported that there was confidence in guest lecturers as they were typically sourced from established institutions, well trained and had usually previously taught on SGUL programmes. Guest lecturers were provided with an overview of the module they were teaching on to ensure they understood the context that their lecture would sit in.
- 7.5 Internal opportunities existed to support staff who wished to take on external roles at other providers, including development through CIDE. Guidance existed, but there was not currently a policy.
- 7.6 The OfS would be able to see a variety of approaches to the above two points, when visiting different providers. SGUL would need to make a case for their approach.
- 8. Quality Manual 2019/20

To receive and consider: revised Section of the Quality Manual on validation

Paper QAEC/19-20/3/G

Reported

- 8.1 The validation documentation was being slimmed down to avoid duplication and to reduce the burden on panels. As part of this process, two new templates had been developed for QAEC's consideration: the Programme Specification Commentary and the Resource and Delivery Document.
- 8.2 At stage 5 and 6 of the validation process, the conventional definitive document would no longer be required. Instead, the programme specification would be the core validation document, accompanied by a commentary to explain the rationale for the key decisions taken by the team and articulated in the programme specification.

- 8.3 As a consequence of the removal of the requirement for a definitive document and emphasis on the programme specification, panels would not be able to comment on the resource base for the programme. In addition, panels would not have an insight into the way in which the delivery of the programme would be managed. To fill these gaps, teams would be asked to prepare a Resource and Delivery Document.
- 8.4 Some sections of the templates would apply to all programmes, while others would not always be applicable. Guidance notes were provided, which would function as prompts.
- 8.5 It was not yet clear whether the requirement to present a draft student handbook at validation could be eliminated entirely. The upcoming validation of MA Medical Ethics, Law and Humanities would be useful in putting the new templates to the test, as well as reviewing the requirement of producing a student handbook.

Agreed

- 8.6 Contact points could be highlighted on the form to encourage stakeholder engagement.
- 8.7 Additional questions could be added on assessment and feedback, to encourage programme teams to make a connection between the two.
- 8.8 Suggested word counts for each section of the templates would be helpful.
- 8.9 Both forms contained sections on student support. The audience and purpose of each of the sections could be further clarified to avoid repetition.

<u>To receive and consider:</u> revised Section of the Quality Manual on student engagement

Paper QAEC/19-20/3/H

Reported

- 8.10 The Quality Manual section on student engagement had been updated to reflect recent initiative in student engagement including the establishment of Staff Student Liaison Groups and the launch of the Student Online Teaching Survey (SOLT).
- 8.11 The introduction of Student Enhancement Leads and Unitu should be referenced. Unitu would be available across all programmes from 2020.
- 8.12 The section should be cross-referenced with validation, to ensure that teams developing new programmes would begin considering approaches to student engagement at an early stage.

Agreed

8.13 The section had always referred to satisfaction surveys run by professional support service directorates to aid understanding of student satisfaction with that service, but it was understood that these were resource intensive and therefore not currently fully embedded. The Committee agreed that they could be a helpful tool in obtaining more detailed information about concerns over support services.

9. Any other Business

Reported

9.1 There were no further items of business.

10. Dates of Meetings in 2019-20

 15 January 2020 (Harry Axton Room)
 21 April 2020

 12 February 2020
 20 May 2020

 10 March 2020
 23 June 2020

10.1 All meetings will start at 2pm and will be held in H2.5 (unless otherwise stated).

Matters for Report

11. *Validation and Periodic Review

<u>To receive and note:</u> MSc Advanced Clinical Practice and Degree Apprenticeship Advanced Clinical Practitioner Validation Report

Paper QAEC/19-20/3/I

GD/Dec 2019