St George's, University of London

Quality Assurance and Enhancement Committee

Minutes of the meeting held on 16th May 2018

Present:

Dr Rachel Allen	Jennifer Laws
Derek Baldwinson	Dr Elizabeth Ann Miles
Professor Deborah Bowman (Chair)	Dr Janette Myers
Dr Frances Gibson	Miss Philippa Tostevin
Dr Vanessa Ho	Professor Iain MacPhee (from 3 p.m.)
Dr Marcus Jackson	Dr Aileen O'Brien
Dr John Hammond	

In attendance: Eduardo Ramos (clerk), Soosan Atkins (for item 4)

Apologies for absence

1.1. Apologies for absence were received from Bethany Agnew, Prof Iain Beith, Prof Judith Cartwright, Denise Cooper, Prof Andy Kent, Prof Roberto Di Napoli, Sam Khavandi, Prof Jane Lindsay, Prof Jane Saffell and Dr Judith Ibison.

2. **Minutes of the meeting of 11 April 2018**

    2.1. The minutes of the meeting held on 11 April 2018 were received and approved as accurate subject to modifications in minute 4.2 a) (title of Dr Frances Gibson i.e. Director Centre for Biomedical Education and title of Miss Philippa Tostevin i.e MBBS Course Leader) and minutes 4.2 b) and 11.2 (title of Dr Janette Myers i.e. Associate Dean for Student Development).

    Paper QAEC/17-18/5/A

3. **Matters arising from the minutes of the meetings of 11 April 2018**

    To consider matters arising from the minutes of the meeting of 11 April 2018 not covered elsewhere on the agenda

    Paper QAEC/17-18/5/B

    3.1. **Review admissions processes: update** (from minute 3.2): Several actions are under consideration including: anticipating Multiple Mini Interviews for MBBS5 candidates before Christmas break (not applicable to MBBS4 due to GAMSAT results publication dates) and earlier interviews for FHSCE candidates following the January 15 deadline; better co-ordination between recruitment and admissions with the appointment of an admissions manager and an assistant director for student recruitment; replacement of RAPG and MADG by a dedicated ESSC sub-group that would cascade

decisions through the Associate Dean for Admissions and the Head of School of Allied Health, Midwifery and Social Care; and a dedicated Clearing group planned for early summer.

3.2. Spring 2019 was proposed as a suitable date to present a paper to QAEC showing initial results of changes under way in admissions processes.

3.3. Some questions regarding the new governance arrangements and processes for admissions were raised by QAEC members who sought clarity on how the functions of MADG and RAPG are represented on the new ESSC sub-group. **Action:** Head of Registry to discuss key issues with QAEC members and liaise with Chair of new ESSC sub-group on admissions.

3.4. **Suggest academic lead to steer the assessment Internal Quality Audit** (from minute 3.4): proposal of academic leadership is linked to a wider, CIDE-led project to reflect on assessment practices. Consultation with CIDE on potential appointments for the role of IQA assessment lead would be welcomed. **Action:** Deborah Bowman to consult with CIDE leadership on academic steer of IQA on assessment.

3.5. **Cross-referencing of the Lecture Capture Policy to the student 'behavioural contract'** (from minute 3.8): a decision on the referencing of the Lecture Capture Policy in the agreement that students sign on entering SGUL's programmes is pending. This item is particularly important in view of the modified audio recording policy being implemented at SGUL. **Action:** Jane Saffell to update QAEC on current status.

3.6. **Pending annual monitoring reports** (from minute 8.4): PGDip Diabetes (with IHEED) and MRes Biomedical Science have been received. MSc Sports Cardiology is still pending. **Action:** Rachel Allen to request outstanding annual monitoring reports from course leads.

3.7. **Careers Activity and Development Report response to queries** (from minutes 11.3, 11.4 and 11.5): careers consultants have been updated on QAEC feedback and will address them in the next Activity and Development report.

4. **SGUL International MBBS – Programme Closure Action Plan follow up**
   The updated international MBBS programme closure action plan was received for discussion.

   Paper QAEC/17-18/5/C

   Noted:

4.1. The updated action plan provided improved visibility of progress and student engagement with the process, including narrative descriptions of actions, dates and colour coding.

4.2. Colour coding will be expanded from red/amber/green to include codes for pending and addressed actions. The document was developed for QAEC and GMC audiences although students will also have access to it.

4.3. It was noted that improving USMLE success rates, decreased contact time with tutors and positive feedback from students can be considered proxy indicators of improvement in advance of the SES results being analysed.

4.4. The GMC generated a report in April 2018 from their June 2017 visit. The report contained several factual inaccuracies that were addressed and all conditions have now been revised to be categorised as 'met' or 'partially met' by the GMC. A visit is expected this calendar year (to be determined).

Agreed:

4.5. QAEC agreed that the reviewed action plan provided an accurate framework for capturing progress.

4.6. QAEC agreed on termly presentation of updates, with email updates at each QAEC meeting on RED coded items. **Action:** Iain MacPhee.

5. **PgCert Healthcare and Biomedical Education**

The report of the periodic review of the PgCert Healthcare and Biomedical Education was received for discussion.

Paper QAEC/17-18/5/D

Noted:

5.1. The Review Panel recommended to Senate an extension in the approval period for two years subject to five conditions being met (plus one advisable recommendation and one desirable point being suggested).

5.2. Effective systems for monitoring progression and completion rates are difficult to put in place due to the flexibility given to participants to complete the programme at their own pace. It was noted that metrics reflect to an extent (a) the flexibility of the programme in providing opportunities to participants to study whilst working at particular stages of a career and (b) that current records management systems are not necessarily aligned with the nature of the PGCert and its particular student profile.

5.3. Members pointed out difficulties in drawing a line between periodic review and re-validation based on the extent to which changes have an impact on the curriculum. As a general rule, the possibility of enrolled students to continue in the programme without having to transfer to the new course may be a suitable indicator. It was suggested that it should not be for the individual course lead or team to determine whether they considered it was a revalidation or periodic review that was required. Rather that decision should be led by an independent sub-group of QAEC members using defined criteria both for consistency and to avoid potential conflicts of interest.

5.4. It was noted that the fact that the PGCert will be a component of the Med, currently in development, may have precluded further conversations on resourcing. This needs to be clearly fed back to the MEd development team so that PGCert resourcing is taken into consideration.

Agreed:

5.5. Members agreed to review a proposal on QAEC's role in the follow up of programme review conditions and recommendations. **Action:** Derek Baldwinson to present a proposal.

6. BSc Clinical Pharmacology

Noted:

6.1. The course team is aiming for a validation event in the autumn of 2018 in anticipation of a 2019 start. An initial proposal form is in preparation and will be submitted for QAEC consideration in due course.

7. Data Improvement Group - Update
The initial notes from the Data Improvement Group were received for discussion.

Paper QAEC/17-18/5/F

Noted:

7.1. Formation of the group was prompted by challenges in preparing the TEF pilot submission and by the feedback on data from annual monitoring reporting cycle.

7.2. The initial recommendation was to prepare pre-populated data tables managed by QPD with contributions from Planning and Registry.

7.3. It was noted that given its growing importance, diversity and inclusion data could be included as part of annual monitoring processes.

7.4. Members noted that a QAEC sub group to support teaching activities more generally could be useful. Dr Rachel Allen, Dr Frances Gibson, Dr Vanessa Ho, Dr Janette Myers and Miss Philippa Tostevin volunteered to make part of the initial membership. Information services could be approached to propose representatives.

Agreed:

7.5. A draft membership, ToR, reporting and governance arrangements of the teaching support sub-group to be presented by QPD. **Action:** Derek Baldwinson.

7.6. Feedback on the feasibility of providing diversity and inclusion data for annual monitoring reports: **Action:** Jenny Laws.

8. External Examiners and their reports
A paper on possible changes to the roles of external examiners and the arrangements for the circulation of reports was received for discussion

Paper QAEC/17-18/5/G

Noted:

8.1. Most respondents welcomed the initiative to encourage meetings between external examiners and students. Logistically it may be best to organise the meetings in alternate years and timetable them with induction.

8.2. It was noted that meetings may need to be facilitated remotely for University of Nicosia MBBS4 students.

8.3. Members welcomed the idea put forward by Matt Zasada (BSc Physiotherapy) in the paper that staff-student liaison groups have a view of External Examiners reports as a way of disseminating the reports to a wider student group and as a catalyst for discussion.

Agreed

8.4. QAEC endorsed providing wider accessibility to the External Examiner reports (e.g. through their publication in CANVAS).

8.5. QAEC agreed exploring options for including External Examiner reports in staff-student liaison groups.

Action: Derek Baldwinson.

9. **Internal Quality Audit - Feedback**
   The notes from the Internal Quality Audit final meeting on Feedback were received for information.
   Paper QAEC/17-18/5/H

   Noted:

9.1. It was noted that a review of the feedback policy had been supported in the Audit.

9.2. It was noted that a report on the Audit will be drawn as a first step. It is expected that the embeddedness of its recommendations and expectations in the organisation will be part of a larger piece of work.

   Agreed:

9.3. To draft a report on the Internal Quality Audit of feedback with recommendations and expectations for the committee to review. **Action:** Deborah Bowman.

10. **Programmes under development**
    The updated programmes under development tracker was received for information.
    Paper QAEC/17-18/5/I

    Noted:

10.1. It was noted that the Master of Surgery business case was pending approval after being referred back by ESSC. Validation is planned for the 21st of May and would take place before a business case approval which may have serious consequences as the proposed programme is complex and quality relates directly to matters contained in a business case e.g. resourcing,

contracts, strategic priorities, student overcrowding on placements etc. QAEC members recommended that the validation event be deferred until these matters are resolved.

10.2. The Master in Public Health/MBBS development with Jefferson is currently undergoing detailed work around finances.

10.3. The Heart Failure MSc academic leads have not agreed on a timeline for academic approval of the course. There are discussions on postponing the first intake to spring 2019.

10.4. The Translational Medicine MRes business case was approved at ESSC and the Validation Event has been organised for the 11th of June with all Panel members confirmed.

10.5. A draft Summer School timetable is being populated. A medical student to lead the social programme has been identified. The course offers a 15-level credit module for those students who choose to take the formal assessment. The course is particularly tailored for the international market and has set a minimum IELTS score of 6.5 overall with 6.5 in writing.

10.6. Members noted that an Intercalated BSc/Masters in Health and Humanities is under development.

Agreed:

10.7. To recommend that the Master of Surgery Validation Event is postponed until the business case has been approved, even if this means deferring the start of the course. **Action:** Deborah Bowman to discuss with Jane Saffell.

10.8. To liaise with the Heart Failure MSc academic team to bring clarity to the tentative start date of the programme. **Action:** Rachel Allen.

11. Any other business

Proposed amendment to plagiarism policy

Noted:

11.1. A lack of consistency in the way in which different courses set up and use Turnitin has been detected which creates inconsistency and risks problems in the way plagiarism is detected and addressed. A proposal to agree and disseminate consistent Turnitin settings for us on all programmes was discussed. It was noted that it might be possible to implement this setting centrally. A message needs to be convened to the different courses on its implementation.

11.2. Members noted that occasionally problems are detected that do not fit strictly with plagiarism descriptors (such as quoting long sentences). A clear line needs to be drawn between poor quoting practice and plagiarism.

Agreed:

11.3.   QAEC to ask UMBEC/TPCC/FQC about consistency in plagiarism and poor practice. **Action:** Philippa Tostevin, Rachel Allen, Jane Lindsay.

Modifications to the programme approval process.

Noted:

11.4.   It was noted that the modifications to the programme approval process have been implemented and it would be a good time to review current practice and the impact of change.

11.5.   A review based on the flipped meeting principle, where the informational presentation is shared beforehand and the actual meeting is focused on specific decisions and getting work done during the meeting, was agreed.

Agreed:

11.6.   QAEC advice on the review process: flipped meeting to be convened for this purpose. **Action:** Janette Myers.

12. **Dates of future meetings**
    Tuesday 9 October 2018
    Thursday 8 November 2018
    Tuesday 11 December 2018 (H5.21)
    Wednesday 9 January 2019
    Wednesday 13 March 2019
    Wednesday 10 April 2019
    Tuesday 14 May 2019

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

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