

St George's, University of London

Senate

Quality Assurance and Enhancement Committee

Minutes of the meeting held on 25th May 2017

Present:

Dr Anne-Marie Reid (Chair)
Dr Rachel Allen
Tanisha Amin
Corey Briffa
Dr John Hammond

Professor Iain MacPhee
Dr Elizabeth Miles
Dr Janette Myers

In attendance:

Derek Baldwinson (secretary)
Dr Julie Leeming
Rosalind Ogden

Apologies for absence have been received from Professor Annie Bartlett, Professor Iain Beith, Professor Deborah Bowman, Professor Judith Cartwright, Denise Cooper, Sue David, Dr Judith Ibison, Professor Jane Lindsay, Dr Aileen O'Brien, Professor Jane Saffell, Professor Michael Usher and Dr Ahmed Younis.

1. Minutes of the meeting of 4th April 2017

1.1. The minutes of the meeting held on 4th April 2017 were received and approved.

Paper QAEC/16-17/6/A

2. Matters arising from the minutes of the meeting of 4th April 2017 (and previous meetings) not covered elsewhere

2.1. An *Action Points* list providing an update on actions taken since the last meeting and previous meetings was received for discussion.

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2.2. **PgDip Diabetes** – Professor Saffell would be asked to confirm whether a lessons learned enquiry in relation to the approval of the PgDip Diabetes had been conducted.

2.3. **Academically led review of programme approval procedures** – work on the review was proceeding. Professor Bowman was leading in this area.

2.4. **IQA – quality of feedback** – it was expected that the IQA would report to the October meeting of QAEC.

2.5. **Data package for periodic review** – A range of standard SITS reports was being developed by Registry. Data requirements for periodic review are an extension of these reports. Responsibility for carrying this forward will transition to the new Academic Registrar (Jennifer Laws) and will be picked up when she is in post (24/5/17).

2.6. **External examiners** – a significant number of external examiners (primarily externals appointed to examine final year modules and projects on the Biomedical Science/iBSc programme) had not received responses to their reports. It was agreed that, at this late stage in the assessment cycle, there was little to be gained in issuing responses.

- 2.7. **Collaborative provisions procedures** – revised procedures would be circulated for comment shortly (Action DFB/DB).
- 2.8. **The summary report on Annual Programme Monitoring from TPCC (arising from 2.6)** – the MSc Physiotherapy annual monitoring report had been made available to Professor Bartlett.
- 2.9. **Student Conduct and Compliance - activity report** – the response to the Committee’s queries from the Head of Student Conduct and Compliance was received and noted.

3. Annual Programme Monitoring 2015-2016

- 3.1. The summary report to Senate on the outcome of annual programme monitoring (session 2015-2016) was received for discussion.

Paper QAEC/16-17/6/C

- 3.2. The report contained within it an action plan setting out the Committee’s priorities for the year ahead. The action plan was based on the content of the summary reports from FQC, TPCC and UMBEC and the discussions of those reports at QAEC.
- 3.3. Under HEFCE’s current quality assurance process, Council is expected to receive and be able to challenge an action plan relating to the student academic experience and student outcomes. The actions agreed as part of the annual programme monitoring process will feed into the report to Council.
- 3.4. It was envisaged that the Committee would track progress against the Action Plan at each QAEC meeting in 2017-18.
- 3.5. The report included a series of data tables. The tables had been prepared by the Planning Office on the basis of data collected by registry. The accuracy of the data was therefore dependent on the integrity of registry’s processes for collecting and verifying data.
- 3.6. From the discussion of the plan, the following points were noted:
 - a) The “report it sort it” initiative was supported. However the initiative would have less impact if it was launched in the summer and it might be advantageous to align the launch with the start of the next academic year.
 - b) Student timetables are available on CRAM for some programmes. With the transition to Canvas, it was unclear whether this would continue to be the case. There was also uncertainty about the use of the calendar function in Canvas. It was agreed that the Chair would raise these queries at the TEL Project Board.
 - c) Table 1 reported the average tariff score of entrants to undergraduate programmes in 2015-16. Students with qualifications above level 3 (e.g. a first degree) are excluded from the table.
 - d) The average tariff score included all tariffable qualifications not just those required for entry.
 - e) Table 3 reported on continuation rates for those students who were new entrants in 2014-15. Continuation rates are high in numeric and percentage terms for the most part. An exception was the FdSc Breast Imaging programme (50% continuation based on two students continuing from a cohort of four). The FdSc had now closed. The table related solely to UK domiciled students.

- f) Table 4 reported on the degree classifications awarded in 2015-16. The table indicated that only two BSc Healthcare Science students had been awarded honours degrees. The Committee assumed that there was an error in the table and asked for this to be clarified (Action JAL).
- g) Table 5 reported whether students who had graduated in 2014-15 were in employment or further study. For SGUL, 99.1 % of students (451 out of 455) were employed or in further study. SGUL had therefore outperformed its HESA benchmark of 98.8%.

3.7. The report was approved for presentation at Senate on 6th June 2017.

4. International MBBS

4.1. A report from the Dean for International Education on the international MBBS programmes was received for discussion.

Paper QAEC/16-17/6/D

- 4.2. It was reported that the partnership with INTO University Partners had been dissolved. Recruitment had now ceased and new students would not be joining programmes offered by the Joint Venture in 2017-18. The partnership with Thomas Jefferson University had been beneficial to both universities and SGUL was considering ways in which the TJU partnership could be retained and developed.
- 4.3. The GMC was aware of the decision to terminate the partnership with INTO. The GMC visit scheduled for 20 June 2017 was going ahead although the GMC had reduced the size of the visiting team and had not requested any advanced documentation.
- 4.4. Professor Bowman had helped to develop bespoke arrangements to gather feedback from students and to respond to student concerns. Her role in this area would now be picked up by Professor Saffell. Student satisfaction would remain a priority for SGUL and an area of continuing challenge.
- 4.5. The GMC had previously indicated that it might contact students directly. It was not known whether the GMC had in fact made direct contact with International MBBS students although the GMC would meet with students during its visit.
- 4.6. In terms of the USMLE, students had access to the Kaplan lecture programme and feedback suggested that they felt better supported in the preparation for the examination. 30 students were expected to take USMLE step 1 in June 2017.
- 4.7. From the discussion of the report, the following points are noted:
 - a) All foreign graduate medical schools must have an annual pass rate of at least 75% for each USMLE step. Students enrolled at schools that do not achieve the 75% pass rate may be ineligible for federal loans.
 - b) Students take a practice examination before entering USMLE step 1. Performance in the practice examination is used to determine whether additional support should be made available to students.
 - c) There was some concern that the current approach to providing USMLE support (based in part on offered individualized study plans) may be unsustainable. Although the termination of the joint venture with INTO will reduce the numbers entering the USMLE, the intention to continue to work with Thomas Jefferson in the delivery of transnational medical education might create additional pressures.
 - d) SGUL had been asked by the GMC to provide US family medicine learning outcomes mapped to the UK curriculum learning objectives for general practice. A paper providing an account of the detailed mapping exercise for delivery of the Final year

General Practice Assistantship at Marshall University had been provided to the GMC and an equivalent process has been initiated at Thomas Jefferson University.

4.8. Marshall University had decided not to take any further cohorts of students after August 2017. As a consequence of this decision, the availability of clinical places in the USA has become a more significant problem.

4.9. In 2018, 61 students would enter P year. TJU had agreed to accommodate 24 students and a provisional agreement to use Swedish Covenant Hospital was in place. Some students would also prefer to remain in the UK. However the placement sites in the US were likely to be oversubscribed and there would be disappointment amongst students. At this stage, individual meetings with students are being scheduled to find out more about student preferences and the extent of the problem. There were no obvious solutions to the problem. The option for students to carry out an intercalated MPH at Thomas Jefferson University between T and P years might be attractive to some students and this would alleviate the problem.

5. Annual Provider Review 2016-17: outcomes

5.1. The outcome of the Annual Provider Review process for SGUL was received.

Paper QAEC/16-17/6/E

5.2. It was reported that SGUL had met the HEFCE requirements for quality and standards. During SGUL's most recent HEFCE visit, the Funding Council had noted the downturn in SGUL's 2016 NSS results and asked about SGUL's plans for improving its NSS outcomes. It was apparent therefore that, as part of next year's APR process, HEFCE would assess whether SGUL's improvement plans had had an impact on the NSS 2017 results.

6. Complete University Guide 2018 results

6.1. The Complete University Guide 2018 results were received for discussion.

Paper QAEC/16-17/6/F

6.2. It was noted that SGUL had fallen nine places in the main table to 53rd. Modest rises in three subject tables (Anatomy & Physiology; Biological Sciences; and Medical Technology) had been achieved.

6.3. The change in the main table is the result of negative movement in terms of academic services spend and in student satisfaction.

6.4. The League Table Focus Group was the body responsible for analysing SGUL's performance in league tables and developing strategies to improve SGUL's ranking.

7. Teaching Excellence Framework Year Two: Dissemination of outcomes

7.1. An update from HEFCE on the arrangements for disseminating TEF2 outcomes was received and noted.

Paper QAEC/16-17/6/G

8. Periodic review schedule for 2017-18

8.1. The draft periodic review schedule for academic year 2017-18 was received for discussion.

Paper QAEC/16-17/6/H

- 8.2. It was noted that monitoring committees can request a deferral of a periodic review. A request from TPCC/FQC to defer the review of the pre-registration programmes in Radiography and Physiotherapy had been received and this application was agreed by QAEC. The periodic review of these programmes would therefore take place in academic year 2018-19.
- 8.3. The international MBBS programmes were due to be reviewed in academic year 2017-18. It was agreed that the periodic review would go ahead even though the decision had been taken to cease recruitment to the programmes. The terms of reference for the review would however be adapted to reflect the closure of the programmes. The periodic review panel would be asked to consider the adequacy of the arrangements for supporting students during the “teach out” phase.
- 8.4. The MSc Family Medicine programme (a concurrent award with the University of Nicosia) was due to be reviewed in academic year 2017-18. SGUL’s partnership with UNic as it relates to the MSc was currently under discussion. The outcome of these discussions may have a bearing on the periodic review. If the MSc partnership is ended, this will obviate the need for a periodic review.
- 8.5. The PgDip Diabetes programme (delivered by IHEED) was due to be reviewed in academic year 2017-18. SGUL’s partnership with IHEED was to be discussed at the (Proto) Education and Student Strategy Committee in June 2017. The outcome of these and other discussions would have a bearing on the future of the partnership with IHEED and the requirement for a periodic review.
- 8.6. The HEA accreditation of the PgCert Health and Biomedical Education will come to an end in 2017-18. The periodic review of the PgCertHE will therefore be brought forward to align with the HEA accreditation process. Dr Roberto Di Napoli, the newly appointed Head of the Centre for Innovation and Development in Education will have a key role in preparing for the periodic review and in applying for HEA re-accreditation.

9. Technology enhanced learning

- 9.1. An oral report from the chair on current Technology enhanced learning projects.
- 9.2. From the report, the following points are noted:
 - a) Panopto had been discussed at the recent meeting of the Academic Forum and a number of practical issues had emerged. Dr Axel Nohturfft had agreed to convene a task and finish group to work through the practical issues and to develop an overarching policy framework for Panopto.
 - b) Mentimeter had been used to gather immediate feedback from Academic Forum attendees about Panopto. Mentimeter had worked well and there was interest in using the technology more widely.
 - c) Good progress had been made with Canvas. Pete Roberts, Learning Technology Services Manager, would be leaving shortly. Shamit Manilal, who has extensive experience of Canvas at Kingston University and elsewhere, had been recruited as a consultant to support Canvas implementation at SGUL. Shamit Manilal would be meeting with individual Course Directors shortly.

- d) At this stage, the following programmes were on track to be using Canvas for year 1 in academic year 2017-18: MBBS4; BSc Biomedical Science; BSc Physiotherapy; BSc Occupational Therapy; BSc Diagnostic Radiography; and BSc Therapeutic Radiography.

10. Academic integrity in assessment

10.1. A report on findings of students' projects on Academic Dishonesty was received for discussion.

Paper QAEC/16-17/6/I

10.2. From the discussion of the report, the following points are noted:

- a) Students are in general unclear about the activities that constitute academic misconduct. This suggests that teaching could be strengthened and signposting to relevant resources might be improved.
- b) A number of programmes did offer sessions on academic integrity. These sessions are not always well-attended and there was a case for making these sessions compulsory.
- c) A bid has been included in the current planning round to convert Dr Rosie MacLachlan's post as Lecturer in Learning Development to full-time.

10.3. In view of current sector-wide concerns about academic misconduct particularly in relation to commissioning course work from essay mills, the advice has been to know sufficiently well to be able to pick out anomalous work. As most students submit work anonymously this is not possible. Following discussions with Kevin Hayes, it has been determined that on balance anonymous marking solves more problems than it causes. QAEC noted these discussions and concurred with the intention not to move away from anonymous marking.

11. External Examiner report forms

11.1. A paper on issues emerging from the recent consultation on the redesign of external examiner report forms was received for discussion.

Paper QAEC/16-17/6/J

11.2. It was reported that the consultation had elicited a number of comments and suggestions that went beyond the design of the form and touched on the role of external examiners and broader procedural matters.

11.3. In its consideration of these issues, QAEC agreed:

- a) There had been a suggestion that SGUL should, in its regulations or elsewhere, stipulate the notice period for Board of Examiners. It was agreed not to do this. It was open externals to indicate if they were given insufficient notice for a Board meeting in their reports.
- b) At present, externals are not asked to review formative assessments. It was agreed that this would not change. Any additional requirement to comment on formative assessment would add to the overall burden on externals.
- c) The extent to which externals might be asked to comment on teaching and learning strategies and the wider student experience had been raised. At present, externals can identify possible gaps in the curriculum and teaching deficits if students have underperformed in the aspect of assessment. On the basis of the information

available to them, externals are not able to comment more widely on the effectiveness of teaching and learning strategies or the quality of the student experience.

12. Dates of future meetings

To be confirmed.

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