

**St George's, University of London**

**Senate**

**Quality Assurance and Enhancement Committee**

**Minutes of the meeting held on 11<sup>th</sup> July 2017**

**Present:**

Dr Anne-Marie Reid (Chair)

Dr Rachel Allen

Professor Iain Beith

Professor Deborah Bowman

Corey Briffa

Corey Briffa

Dr Elizabeth Miles

Professor Michael Ussher

Sue David

Professor Andy Kent

**In attendance:**

Derek Baldwinson (secretary)

Bethany Agnew

Sam Khavandi

Apologies for absence: Tanisha Amin, Professor Judith Cartwright, Denise Cooper, Dr John Hammond, Dr Judith Ibison, Jenny Laws, Dr Julie Leeming (JAL), Professor Jane Lindsay (JL), Professor Iain MacPhee, Dr Janette Myers, Dr Aileen O'Brien and Professor Jane Saffell.

**1. Minutes of the meeting of 25<sup>th</sup> May 2017**

1.1. The minutes of the meeting held on 25<sup>th</sup> May 2017 were received and approved.

**Paper QAEC/16-17/7/A**

**2. Matters arising from the minutes of the meeting of 25<sup>th</sup> May 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.

**Paper QAEC/16-17/7/B**

2.2. **PgDip Diabetes** (arising from 2.2) – It was reported that:

- a) Representatives from IHEED had attended the first meeting of the (proto) Education and Student Strategy Committee and reaffirmed their commitment to the continuing the partnership with SGUL.
- b) Professor Bowman had chaired the first meeting of the PgDip Diabetes Examination Board meeting. A number of issues had arisen at the Board that Professor Bowman had followed up with Dr Earle and Professor MacPhee. These issues would also feed into the review of collaborative procedures discussed under agenda item 4.5.
- c) It was unknown whether a lessons learned enquiry in relation to the approval of the PgDip Diabetes had been conducted by Professor Saffell.

2.3. **Academically led review of programme approval procedures** (arising from 2.3) – Professor Bowman reported that little progress had been made in the review of programme approval procedures due to competing priorities and pressure of work. This project would be picked up in 2017-18. Action: DFB.

2.4. **IQA – quality of feedback** (arising from 2.4) – it was reported that:

- a) The IQA team had met for the first time to agree its terms of reference and methodology.
  - b) Professor Margaret Price from the Business School at Oxford Brookes had agreed to join the team as its external expert.
  - c) The audit would complement Professor Saffell's work on the development of institution-wide assessment criteria, on the balance between student effort and the assessment burden and on the allocation of credit.
  - d) The audit would consider information that enables students to understand the strengths and limitations of their past performance (feedback) and information which enables them to recognise how future performance can be improved ('feedforward').
  - e) The IQA team would report to QAEC in December 2017. Action: DFB.
- 2.5. **Data package for periodic review** (arising from 2.5) – 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 had now transferred to the new Academic Registrar (Action: Jennifer Laws). However at this stage, it was likely that data to support periodic reviews scheduled to take place in 2017-18 would need to be compiled manually.
- 2.6. **Annual Programme Monitoring:** degree classifications awarded in 2015-16 (arising from 3.6f) – the data on degree classifications presented to QAEC indicated that only two BSc Healthcare Science students had been awarded honours degrees in 2015-16. The Committee assumed that there was an error in the table and had asked for clarification. It was reported that the Student Systems Team in Registry had explained that student records were not 'closed-off' until 2016-17 in error. This meant that their 1<sup>st</sup>/2.1 awards were not reported to HESA in 2015-16 and the students would not be selected to take part in DLHE 2015-16.

### 3. Teaching Excellence Framework Year Two: Dissemination of outcomes

- 3.1. The Committee received SGUL's TEF2 outcome and an analysis showing those HEIs whose final outcome exceeded their initial award.

#### Paper QAEC/16-17/7/C

- 3.2. It was noted that, in conferring a bronze award, the TEF panel had noted that SGUL was below its benchmark for progression to highly skilled employment or further study. SGUL was also below its benchmark for satisfaction with assessment and feedback, and academic support.
- 3.3. A number of institutions were able to overturn their initial rating and achieve a higher award on the basis of their narrative submissions. 18 institutions had moved from bronze to silver and 19 institutions had moved from silver to gold. One institution had also moved from bronze to gold.
- 3.4. Of the institutions that had moved from bronze to silver, SGUL's metrics were comparable to those for London South Bank University. However LSBU's metrics demonstrated year-on-year improvement in relation to both the NSS and to highly skilled employment.
- 3.5. SGUL's bronze award was valid for three years although SGUL was able to reapply in TEF4 for an improved award. The decision on whether to reapply would be taken by

the TEF steering group chaired by Professor Saffell. That decision would depend in part on whether SGUL's metrics were an improvement on those for previous years.

**4. Periodic review schedule for 2017-18**

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

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4.2. At this stage, the following reviews would take place in 2017-18:

International MBBS
MSc Rehabilitation/Exercise for Health
MRes Biomedical Science
PgCert Health and Biomedical Education

4.3. The MSc Family Medicine programme (a concurrent award with the University of Nicosia) had been due to be reviewed in academic year 2017-18. SGUL had however decided to end the partnership with UNic as it relates to the MSc. The MSc has therefore been removed from the periodic review schedule although a 2017-18 intake was planned by UNic.

4.4. The MSc Healthcare Practice was due to be reviewed in 2017-18 and the programme team had requested a one-year deferral. A number of modules and pathways are shared with the undergraduate Healthcare Practice (diploma/BSc) and the Dip/BSc is due for review in academic year 2018-19. A deferral would allow for a joint review of the undergraduate and postgraduate health care practice modules, pathways and awards. This request was to be considered by TPCC and FQC. Action: JL and AB.

4.5. As reported in minute 2.2b, the PgDip Diabetes programme (delivered by IHEED) was due to be reviewed in academic year 2017-18. SGUL's partnership with IHEED had discussed at the (Proto) Education and Student Strategy Committee (ESS) 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. Action: JS.

4.6. The chair reported that she had discussed the potential deferral of the MBBS until academic year 2017-18 in the light of the ongoing curriculum review. The curriculum sale to the University of Ulster would also add to the pressure on the MBBS team and divert resources from the periodic review. These discussions were continuing. Action: DB to follow up.

**5. Collaborative Provision**

5.1. Revisions to the SGUL's collaborative provision procedures were received for discussion.

Paper QAEC/16-17/7/E

5.2. It was reported that SGUL's existing collaborative procedures had been approved in 2015. These procedures had now been revised to incorporate the lessons learned from SGUL's more recent collaborative ventures. The revisions are also intended to provide clarity in relation to roles and responsibilities at different stages of the procedures. More specifically, the revisions are intended to:

- Include sufficient stages in the decision-making processes to ensure considered decisions are taken.
- Engage QAEC and Education and Student Strategy Committee in decision-making to ensure educational, strategic and quality assurance aspects are taken into account;
- Ensure decisions are criterion-referenced and evidence-based;
- Apply equally to home and international programmes;
- Require the appointment on an “academic lead” to lead on discussions with possible partners from an early stage;
- Allow for enhanced annual monitoring, periodic and partnership review processes;
- Position the Quality and Partnerships Unit as the locus of expertise in governance and QA matters.

5.3. From the discussion of the revised procedures, the following points are noted:

- a) Joint delivery of a programme should be added to the types of collaboration identified in the revised procedures. The MSc Genomic Medicine (jointly delivered with Kings College) is an example of this type of collaboration.
- b) The issue of access to SGUL resources including online journals and databases that are accessible through the library website would need to be discussed and agreed with potential partners. The points at which access to SGUL resources are discussed and agreed should be made clear in the procedures.
- c) Precise aspects of the governance arrangements are unresolved at this stage pending the finalisation of the terms of reference of the Education and Student Strategy Committee and the outcome of the committee review. The implications of the committee review had been acknowledged in the covering paper but this point could be made more prominent in the covering paper and the revised procedures.
- d) The procedures did not make reference to opportunities for students to intercalate externally. For the most part, the procedures would not apply to external intercalation. Even so, the procedures could usefully include a section on factors to take into account when requests from students to intercalate are received.
- e) The revised procedures require an Institutional Agreement to be prepared and signed before students are admitted to a collaborative programme. Institutional Agreements are legally binding agreements that set out the responsibilities of the parties to the agreement. The Committee was aware that other types of agreement have been used (including memoranda of agreement and memoranda of understanding) which are not legally-binding. The procedures could usefully define these types of agreement and offer guidance on when, if ever, it would be appropriate to use these types of agreement.
- f) The procedures left open a number of questions in relation to practice placements. For example, the procedures did not require placement agreements (or their equivalent) to be in place between SGUL and the placement provider and did not offer guidance on the form that a placement agreement should take. The procedures also did not require a register of placement agreements to be maintained as a vehicle for monitoring the currency and usefulness of agreements of this kind. These matters could usefully be resolved in the subsequent iteration of the procedures.

5.4. It was agreed that, subject to the amendments referred to in 5.3, the procedures would be circulated for further comment and consultation within SGUL by Derek Baldwinson. Consultation responses would be considered by QAEC when it meets in October 2017.

**6. Annual Programme Monitoring Process**

6.1. The notes of the first meeting of the task and finish group reviewing the annual programme monitoring process were received and noted. The Committee would receive a progress report from the group when it meets in October 2017. Action: DB.

Paper QAEC/16-17/7/F

**7. HEFCE Annual Provider Review**

7.1. An oral report from Professor Bowman on arrangements for the 2017 HEFCE annual provider review process (APR).

7.2. It was reported that as part of APR process, SGUL is expected to submit to Council an action plan setting out SGUL's plans for improving the student experience and enhancing academic outcomes in the year ahead. The purpose of the plan is to provide assurance to Council that SGUL's improvement plans are sufficiently challenging. Dr Reid had led on APR in 2016 and Professor Bowman would take on this role in 2017, working closely with Professor Saffell, and with support from Julie Leeming and Derek Baldwinson.

**8. Quality Manual – reissue for 2017**

It was reported that, at its July meeting, QAEC usually agrees substantive changes to the Quality Manual prior to its reissue in the subsequent academic year. In view of the fact that the section of the Quality Manual related to collaboration was undergoing extensive revision, it was agreed that the approval period of the 2016-17 Manual would be extended until December 2017 so that the revised collaborative procedures could be included in the 2017-18 manual. Action: DB.

**9. Internal Quality Audit**

It was agreed that course directors, staff with operational responsibilities for teaching and learning and the Students Union would be invited to suggest topics for an Internal Quality Audit to be carried out in 2017-18. IQA allows for the investigation of any quality-related issue that matters to students and to staff. When it meets in October 2017, QAEC would decide whether to initiate any IQ audits and identify an academic lead for the audit/audits. Action: DB.

**10. Education Day 2017**

Education Day would take place on 15 November 2017.

**11. Dr Anne-Marie Reid**

Dr Reid would shortly be leaving SGUL to take up a new role at University of Leeds. Dr Reid was thanked by QAEC for her contributions to St George's and to the work of Committee.

**12. Dates of future meetings**

Subject to confirmation:

Thursday 5 October 2017

Thursday 9 November 2017

Thursday 18 January 2018

Thursday 8 March 2018

Wednesday 16 May 2018

All meetings 2 to 4pm in H2.5

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