



**LTC11D101**

**Title:** Faculty Associate Deans (Learning, Teaching and Quality)  
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**Issue**

To receive the notes of the Faculty of Medicine and Health Sciences Strategy Day held on 29 February 2012.

**Recommendation**

None.

**Resource Implications**

Not applicable.

**Equality and Diversity**

Not applicable.

**Timing of decisions**

Not applicable.

**Further Information**

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**Background**

Not applicable.

**Discussion**

Not applicable.

**Notes of the FOH LTQC Strategy Meeting held on 29 February 2012**

Present: Nicola Spalding (Chair), Malcolm Adams, Sandra Gibson, Gibson D'Cruz, Debbie Harrison, Rosie Doy, Megan Russell(STU), Ian Harvey, Steve Wilkinson, Julia Hubbard

Apologies: Simon Horton, Hannah Schutt (PG) Tash Ross (STU)

With: Robert Gray (Secretary), Garrick Fincham for Item A, Jeremy Schildt for Item B

**A. IMPROVING THE STUDENT EXPERIENCE:**

**Received: Report from Business Intelligence Unit demonstrating what is available from the newly set up data warehouse.**

**The aim of the data warehouse is to:**

- collect all student data from admissions stage to employment in one place. Enabling a suite of reports to be created mapping the student journey.
- The aim is to build reports which have as many automated monitoring outputs as possible. Around 70% of these have been built already.
- BIS have created a group of reports by looking at the targets within the draft corporate plan and mapping these to data warehouse reports.

**Potential focuses for the data include:**

- NSS survey. BIS has introduced 'stage' survey's, which students are asked to complete at the end of their first and second years. The intention is that this can give an early warning of problems before the students undertake the NSS in their final year. So far the response rate is around 25%. There are 4 versions of the survey and when closed results will go to LTC.
- PTES and PRES results can also be incorporated into the report, although response rates are typically much lower than for the NSS.
- Early analysis of the data shows a link between 'good honours' and entry standards. There is a correlation between a lower tariff score on entry and an average of less than 60% in the first year.
- The FMH data for this is based on overall average, rather than stage average. For other schools the stage average is used.
- This has the potential to be used as an early warning sign on course performance.
- Some work needs to be done on tariff banding, also it is not yet possible to pull in the A-level subject into the tariff information.
- This data also has the potential to be used in the understanding of student drop out.

**Reported in discussion:**

- that BIS are currently exploring the import of employability information into SITS in order for it to be reported upon via data warehouse reports.

- More work needs to be undertaken as to how the schools would like this data presented and to whom access should be given. Also how the data should be used.
- SHA data requirements are different from HESA. Currently, Schedule 4 reporting relies on data collection by individuals which can be inconsistent. However, within the data warehouse it is possible to switch of the HESA view and look at the live data.
- That the data warehouse reporting is currently set up for standard courses. CPD programmes are currently outside this. Though it was recognised that for the HEBYS return CPD was crucial. Perhaps a meeting outside of FLTQC was needed to consider these needs. By using multiple databases such as HEIDHI, HESA and SITS data can be extracted and cross-referenced across multiple data sets with Tableaux. This is a very powerful tool with great potential.
- The Management Information Group (MIG) is currently exploring what is required for strategic and tactical reporting within the institution. Part of this involves rationalising existing Discoverer reports and removing unused ones.

## **B. LEARNING ENHANCEMENT**

Jeremy Schildt from DOS led the session.

Received:

Report from the Learning Enhancement Team showing the level of engagement with their team and FMH students.

It was reported that:

- the report showed the view across the faculty and reports students who dropped in or attended appointments. The data does not cover workshop attendees.
- The data also does not include individual dyslexia appointments, last year there were 743 of these.
- Overall the Learning Enhancement Team (LET) have seen a 130% increase in referrals and has almost reached capacity. They may need to work closer with the schools in order to manage this.
- Table 2 compares the faculty against the UEA average. Massive growth in referrals from NSC students.
- If a student is diagnosed with an SLD then they will be referred to a dyslexia tutor, of these students 40% are from NSC.
- The data is based on appointments, rather than students. So multiple attendees are counted more than once.
- Given their proportion MED students are underrepresented within the appointments data.
- MED run workshops for those students with SLD.
- AHP referrals peaked in 2009/10 and have since fallen. This could be attributed to the workshops which were run in conjunction with the school.
- It was noted that the workshops in NSC encouraged students to make appointments with the team.
- The appointments by month data showed that March was by far the busiest month.

- Table 2 indicates that a lower proportion of male MED students age 17-21 engaged with DOS than from other schools.
- When mapped against outcomes the data shows that 65% of those who sought help gained a first or 2:1 degree.
- Across the faculty a greater proportion of PG students had sought help.
- The gender balance of those seeking appointments was correlated with the faculty student profile Apart from MED who have a higher proportion of female students.
- Table 3 shows the reason for the referral. Within AHP 82% related to academic writing. MED 40% were over examinations and time management, with 30% on academic writing. For NSC the highest proportion of referrals was in relation to numeracy and academic writing.

Reported in discussion:

- that the one to one tutorials lasted 50 minutes. LET had started to run small group tutorials which had proved popular, particularly those in mathematics and statistics. Some groups have approached DOS with a view to setting up their own groups.
- That the category of referral for appeals/complaints referred to students who enquired over this issue and were passed to the relevant team. LET did not advise them.
- LET would find it useful to have copies of assessment handbooks from the FMH schools in order to advise the students.
- That LET have specially trained advisors to deal with students whose first language is not English.
- The major challenges for LET in the coming year were how to engage MED students more and also how to manage the workload from NSC.
- For FMH the SHA require that students are screened for numeracy and literacy. Within NSC this is undertaken at admissions stage and identified students are offered the appropriate support package.
- LET are also keen to publicise that the service is not just for struggling students and could aid with the progression of borderline students.
- It was suggested that workshops could be run based on 1<sup>st</sup> year mark statements. However, LET would not have the capacity to look at this until next year.
- Induction programmes for year 1 AHP students have been run and there was a positive response from those involved.
- LET is currently exploring peer mentoring. However, some students still prefer the confidentiality of LET.
- DOS is currently redesigning their website to be more interactive. Though they would still like to encourage students to look at their online resources before visiting
- LET have a list of short links to the information on their web pages.

**ACTION: Teaching Directors to pass on the points raised in this item to their teams.**

### **C. STRATEGISING THE USE OF E-LEARNING IN OUR PROVISION**

Sandra Gibson outlined the variety of assessment/feedback used on the MB/BS programme, and reported that measures were in place to try and improve student feedback.

It was reported that;

- The MSc in Oncoplastic Breast Surgery is entirely delivered via distance learning.
- Online forums exist and the students engagement threshold is set at 80%.
- This is facilitated via discussion groups.
- Within the Trusts access is not always available to the appropriate online resources. Therefore, a lot of these resources are made available via the course website.
- The 1<sup>st</sup> year cohort have just completed (18 students), with 21 students now starting year 1.
- The course has received good feedback from the students and the facilitators with lively clinical debates within the forums.
- Experience has shown that the students on the course were getting to grips with not meeting other in the cohort.
- However, communication between faculty can be a problem as they only meet rarely.
- Each module has a module lead and 3-5 facilitators. Most of the Faculty are not UEA staff.
- This represents a large team of staff and it has proved difficult to keep them focused at times.
- An element of CPD is included within each faculty team meeting. However, due to time constraints this often does not happen.
- In the future the team needs to think about support for staff, planning and communication across the team.
- Moving forward MBBS is making more use of Blackboard. 10 minute podcasts are popular with the students. Reflective diaries have been introduced (which the tutor can see and comment upon). This is more popular with the Foundation course students.
- There are also plans to introduce more electronic formative assessment.
- Some work is being done with Moodle VLE, which is more flexible than Blackboard.
- MED is also developing an e-assessment strategy.
- MED is currently piloting Rogo online assessment software.
- Rogo is a bespoke system for Medical Students, though there is potential for it to be used in Nursing.
- It can be run from within Blackboard and when running, shuts down the browser and prohibits web searching.
- The system has shown to be very flexible and once parameters are set up each student can receive a slightly different paper. This makes it possible for multiple sittings of exams to take place.
- Rogo gives immediate feedback to students and can map answers to learning outcomes which can be linked to a 'traffic light' system.
- Rogo supports multiple assessment types. Multi choice, short answers and extended essay (where markers receive the scripts and a feedback sheet).
- During the next academic year all medical schools will be required to sit national exams online. Initially these will be formative. This raises challenges in terms of getting all of the students in a lab at the same time, recruiting invigilators etc.
- One issue is that currently Rogo only works on machines on campus.

**ACTION: any other FMH school interested in this should speak to SG.**

It was reported;

- that SG is attending the University IT Forum and her feedback to MED had resulted in lots of queries and suggestions.
- SG asked what the best mechanism was for disseminating information to the rest of FMH.

**ACTION: SG to bring IT Forum summary to LTQC meetings.**

It was reported by RD that;

- there were currently 3 E-Learning Technologists in post and working for the faculty. These individuals are school based but are line managed within central services. Each has been given projects, therefore lessening their time for new initiatives.
- Blackboard Connect has now been purchased by the university with 100,000 texts over 3 years.
- It has yet to be confirmed how many of these are available for use in the pilot.
- There is currently an ongoing debate as to whether Blackboard or Moodle is the way forward.
- Moodle is open source. However, there will be a training issue if it is widely used.
- Consultants are currently in the university undertaking focus groups on e-learning provision, which RD attended.
- RD fed into the focus group that the university needs to consider issues of investment in staff/student development and hardware/software setup. One particular issue is in obtaining the correct access and getting permissions from ITCS.
- For CPD the landscape changes very quickly and therefore resources may need to be available at short notice. Currently, this is tricky.
- It is becoming increasingly difficult for staff to get time off to attend CPD. This will lead to increased pressure for more online and less face to face sessions.
- Within NSC the new Leadership and Dementia modules use podcasts, vidcasts and DVD resources. The school is currently looking into recycling these resources into other programmes.

Reported in discussion;

- by SG that of those surveyed 80% would only consider undertaking the MSc in Colo-proctol surgery if it were available online.
- That the Royal College of GP's and Royal Pharmaceutical Society both have a portfolio of online courses.
- The NSC e-Learning Technologist has built a bespoke Blackboard site for clinical skills which among other things has a section on moving and handling.
- NSC also makes use of Safe Medicate software. This can be used to test students in the area of drug calculations. In addition to testing the software includes visual aids to train with syringe usage and needle manipulation.
- That within the trusts, access to the various e-learning platforms is variable. This could cause a problem with CPD e-Learning.
- That there is a span of capability amongst FMH staff. It could be worth exploring a staff/student development plan for the whole faculty.

**ACTION: e-Learning to be a priority for next year.**

## D. SUCCESSES FOR LAST YEAR AND PRIORITIES FOR NEXT.

### Successes

- The faculty is ahead on the New Academic Model
- Successful AHP annual review with clinical partners
- Positive NSS results across the faculty
- Good partnership working in CQC activities
- Degree level Nursing validated ahead of schedule
- New service improvement initiatives
- New Teaching Fellowships within the faculty (though not as many this year)
- Mentor and practice educators website.
- Piloting e-assessments (MSc Oncoplastic Breast Surgery and MSc Stroke Recovery)
- Development of distance learning courses
- The HEA workshop (noted that the university is targeting 60% of staff to be members by 2016)
- We survived the year!
- New initiatives in dementia and leadership
- PQAF – With a special thanks to NS for all her work on this
- New professionalism charter in AHP
- ClinPsyD reapproval from the HPC (with 4 slight conditions)
- ClinPsyD BABCP accreditation

### Priorities

- Blackboard Connect. The faculty needs to have this implemented sooner rather than later.

**ACTION: RD to report who in ITCS is managing the project. Chair will then write to ITCS asking for clarification the timeframe for implementation.**

- Appeals review. This should be completed by the end of this academic year.
- Develop non-SHA funded programmes.

**ACTION: To be raised at Faculty Exec and school Teaching Committees.**

- Transition between levels (learning enhancement)
- Succession planning for a new MED Teaching Director for 2012/13.
- Improving student facilities.
- CPD for staff around learning and teaching
- Consider engagement with UEA London
- Feedback given to placement areas
- IT support for new approaches to learning and teaching
- Employability

**ACTION: School employability directors to report to FLTQC**

- Sharing good practice across FMH and UEA
- Placements (efficiency, effectiveness and sharing practice)
- E-learning – do we need to do more?

**ACTION: New Chair of Workforce Futures to the next FLTQC meeting.**

- IPL pre and post registration
- Good honours

**ACTION: Planning office data needs to come to FLTQC**

- Recruitment of more international students

**ACTION: NS to meet with MJP over admissions and will speak to the international officers.**

- Student feedback

**E. TOP PRIORITIES**

Reported in discussion that the priorities where;

- Professional transition (new Chair of Workforce futures to be invited to FLTQC)
- Peer review of teaching
- Being more proactive in CPD
- Placements
- International Officers
- Student feedback
- PQAF
- Employability
- E-learning
- Compassion in the professions (throughout the course, not only at admissions stage)  
/ perhaps a study day could be set up.