



**Learning and Teaching Strategy for  
Institute for Women's Health  
2011-15**

**Stage 1: the 'narrative' or vision**

**What does the department stand for? What does it want to achieve? What is it going to do meet its objectives?**

UCL Elizabeth Garrett Anderson Institute for Women's Health is a joint venture between UCL and University College London Hospital (UCLH) that was set up in 2004. The Institute brings together individuals with expertise across the whole spectrum of Women's Health. The objective is to make a major contribution to the health of women, both in the UK and internationally, by pioneering research, education programmes and clinical initiatives. For the first time Women's Health can be addressed in its broadest sense through a life course approach, taking into account the social, psychological, economic, ethical and legal dimensions of health care that move beyond the traditional.

The Institute strives to provide excellence in undergraduate and postgraduate teaching and research in all aspects of Women's Health. Two distinctive features and strengths of the Institute is the close link between clinical activities and scientific research administered at UCL and UCLH, and the range of interdisciplinary staff. The mission is to provide solutions to clinical problems by sound scientific research and to develop and evaluate new strategies for prevention, diagnosis, treatment and management of Women's Health issues. Each student is provided with clinical and scientific skills based on appropriate teaching, and is encouraged to develop critical thinking.

The Institute runs three MSc programmes. Prenatal Genetics and Fetal Medicine was the first taught programme to be developed, established in 1996 by Joyce Harper, Joy Delhanty and Charles Rodeck. Due to its great success and international reputation, and to encompass the wider themes of the Institute as constituted in 2004, a second MSc was established by Joyce Harper in 2009; Reproductive Science and Women's Health. Both programmes include eight taught modules plus a research project. A diploma can be taken which consists of just the eight taught modules. All programmes can be taken full or flexible time. These MSc programmes are limited to ten full time students each to ensure adequate supervision of the research projects and a focused student group. The programmes are oversubscribed each year, which ensures that we can take the academic elite. Students from both scientific and clinical backgrounds apply and the programmes give students the opportunity to learn transferable skills in a unique environment. The development of individual MSc modules as CPD short courses for specialists not registered for the MSc is being explored.

Rekha Bajoria and Ratna Chatterjee established the third MSc in Haemoglobinopathies in 2009. This programme is delivered virtually. It was one of the first UCL distance learning programmes aimed at health care professionals which uses state of the art multimedia based technology to allow them to study without having to leave their jobs and families. The programme has been running for the past three years with excellent student and tutor (national and international) feedbacks.

The Institute has the overall aim of contributing to all phases of the UCL medical curriculum and providing a broad education beyond the remit of the Phase 2 module in Women's Health. Currently, on average 400 students per year are taught in Year 4, with a further teaching input for 400 students within the Reproduction, Development and Genetics module in Year 2. For the clinical attachment during Women's Health, 17 students are allocated to UCLH, 17 to the Whittington and 12 to the Royal Free Hospital Trust at any one time. Our vision is to continue to innovate in teaching the undergraduate curriculum in Women's Health. Previous innovations such as the involvement of Allied Health Professionals in the education of medical students and the introduction of a logbook for all students have been recognized by UCL Medical School and adopted within other modules. In addition to the provision described above, the Institute offers several 3<sup>rd</sup> and 5<sup>th</sup> year student selected component modules in diverse areas across Women's Health, in order to provide opportunity for students to undertake an in depth project within a specific areas of Women's Health. The Institute also provides opportunity for medical students to undertake elective placements in Women's Health, and receives applications from across the UK and from abroad in this regard.

There are approximately 50 PhD/MD(Res) students within the Institute. The major challenge is to ensure that students who are based at different sites identify themselves as part of the multidisciplinary group that forms the core of research within the Institute. To this end in 2008 a Graduate Research Student Day was initiated as a forum for students to meet, present and discuss their research. This event is organized by the research students and enables MSc students to find out about the various research groups within the Institute before they select their own research projects. The link between graduate research students and MSc students is encouraged through Institute seminars and graduate research students are invited to attend any of the lectures of the taught MSc modules. We aim to develop a graduate student club to facilitate student networking. In 2011 the Institute established an outreach programme bringing together 'A' level, MSc and PhD students to explore a range of topics across the Institute through presentations and practicals.

A number of specialists within the IfWH offer short, internationally attended courses at UCL and it is aimed that this will develop further.

Overall our vision is to develop further and expand our teaching and learning from undergraduate to postgraduate level.

## **Stage 2: the department in context**

### **1 Strategic Environment**

#### **a) What external factors influence the design and delivery of the department's teaching programmes?**

##### ***Faculty of Population Health Sciences***

The most significant recent change for the IfWH has been the change in SLMS faculty structures. SLMS has moved from a two to a four faculty structure. IfWH is now one of four Institutes in the new Faculty of Population Health Sciences (FPHS), the others being the Institute of Child Health (ICH), Institute of Epidemiology and Health Care (IEHC), and Institute of Cardiovascular Sciences (ICS). Since the inception of the new faculty in August 2011, a strategic plan that encompasses education has been developed. This will allow the development of a coherent education strategy cross the four Institutes.

Thus, the mission statement for the faculty education strategy is key in the design and delivery of the IfWH's teaching programmes and can be summarised:

'The FPHS is committed to complementing its world class research enterprise with world class educational enterprise across the continuum of biomedical education. FPHS is fortunate to hold the expertise, commitment and resource to deliver on this agenda. Individual Institutes have already rationalised and modularised existing PGT provision, introduced innovative new programmes and modules, designed to deliver flexible provision with multiple end points and through alternate mediums. Infrastructure has been reviewed and built to support increased PGR numbers'.

A consultative process has already begun, led by the Vice Dean (Education), which will develop an integrated strategy to deliver transparent and appropriate mechanisms, with measurable and deliverable outcomes, to address the following points:

- Engage, support, and train academic, research and support staff to deliver teaching that reflects the depth and breadth of expertise possessed by the faculty;
- Foster a culture of excellence in teaching, rewarding involvement, innovation and professionalism through local resource/support, personal development, appraisal and promotions;
- Review market provision and position and marketing strategies and practices, developing a continuum of education and develop new, or build on existing programmes where there is a clear rationale and market (e.g. professional doctorates, public health, global health);
- Deliver more flexible, responsive teaching with multiple exit points;
- Deliver clearly defined, professional, service-driven teaching support across the faculty, evaluate training needs and equip staff with the expertise and support necessary to deliver an enhanced student experience, supported by robust governance structures;
- Evaluate how staff recruitment processes can recognise and link to teaching requirements;
- Improve staff and student support mechanisms (mentoring, buddying) as part of a commitment to demonstrably enhancing the student experience;
- Ensure faculty policy and practice aligns and builds on broader institutional objectives and actions and is developed through open consultation with users and providers;
- Align administrative support to the new MBBS curriculum, delivering co-ordinated and consistent support;
- Deliver an iterative process to maintain communication and consultation.

In addition to these faculty objectives, **SLMS** has identified a number of **further priorities** aimed at improving the student experience at UCL:

- The establishment of 'educational hubs'
- The accreditation of teaching through CPD
- Developing e-learning and distance learning
- The development of research-embedded education

**More wide-reaching objectives** include:

- Widening participation and fair access
- Innovation in teaching, learning and assessment
- Global citizenship and employability
- Internationalisation of the curriculum.

### ***International Market***

At the IfWH, our MSc programmes are already shaped by and respond to an international market. All three of our MSc programmes have a high number of overseas students, both from clinical and scientific backgrounds. The blend of international scientists, nurse specialists and clinicians on the MSc programmes taught on site at UCL provides an excellent forum for interaction, knowledge and skill transfer. Students have the opportunity for immediate application of acquired skill and also develop lifelong global networks.

The distance learning MSc course is especially attractive to overseas students who are unable to leave their country, including senior doctors and health care professionals. Health ministry and industry sponsored scholarships awarded for the programme indicate international recognition of it. The UK Thalassaemia Society is currently exploring the possibility of awarding two scholarships annually for doctors to pursue this programme.

### ***Independent reports on provision of medical education in the UK***

Within the undergraduate curriculum and teaching programme, incorporation of recommendations of independent reports into the provision of medical education within the UK, such as the Tooke Report, GMC requirements such as Tomorrow's Doctors, as well as Royal College recommendations towards a National Undergraduate Curriculum for Obstetrics and Gynaecology, all form the basis of developing and ensuring that the teaching and learning environment for our undergraduate students is fit for purpose, and striving for excellence.

### ***Cross-disciplinary research***

In the current fiscal environment and job market, increasing our PhD student numbers and expanding the remit of their research through development of more cross-disciplinary programmes (e.g. cardiovascular medicine, genetics, tissue engineering) is key, as is motivating students and supervisors to meet the increased expectations of funding bodies regarding prescribed timeframes for submission.

In relation to external factors, success in delivery of teaching programmes will only be limited by institutional commitment to deliver on associated infrastructure (space and funding for PhD numbers, the delivery of student hubs, additional teaching space, and appropriate platforms for a truly modular PGT curriculum and CPD provision).

While the bulk of the FPHS educational provision will continue to be at postgraduate level, the faculty and the IfWH will continue to contribute to undergraduate teaching, particularly through offering iBSc courses and SSCs and, for IfWH, running the Phase 2 module in Women's Health. These will continue to be overseen by the Medical School.

## **b) What will the key external challenges be for teaching, learning and assessment for the department over the next four years?**

It is anticipated that changes in UK educational funding should not severely affect the three MSc courses due to the healthy number of overseas students. UK student numbers may drop but historically these do not tend to make up the majority of applications. There is however no room for complacency and we must strive to keep attracting UK/EU and overseas students and to sustain student numbers.

One of the challenges of UCL's strategy in learning and teaching is employability, entrepreneurship and leadership. Data from the past three years feedback from 40 global students (Middle East, Canada, India, Pakistan, Singapore, Germany) on the MSc Haemoglobinopathy suggest that the students can apply their knowledge immediately without having to wait for the award. Indeed after acquisition of the Master's degree many students will take the role of tutors and leaders clinically and academically and fulfil UCL's strategy.

For **undergraduate education**, the availability of SIFT funding for Women's Health, and the support for continued incorporation of teaching and learning within the job plans of clinicians, will be of direct relevance to the quality and quantity of educational resources for undergraduate medical students.

For **research students**, there is a higher student expectation, with more students applying but it is increasingly challenging to secure funding. The challenge is to build on our research expertise and reputation and to offer innovative cross-disciplinary research opportunities to continue to attract the best funded students.

It will also be important to review market provision in order to develop the right flexible, responsive teaching offer (e.g. new CPD short courses or professional doctorates, further promotion of our specialist workshops and PG Diploma courses).

**c) How will this context shape the department's teaching, learning and assessment strategy over the next four years?**

No major changes required for the MSc courses taught on site at UCL, but diversification into more flexible, responsive training will be explored.

For undergraduate teaching, learning and assessment, ensuring clear funding pathways to support medical education, plus rigorous job planning and appraisal, including peer assessment of teaching, will influence strategy.

## 2 Aims and Objectives for 2010-15

### a) What are the department's key aims for teaching, learning and assessment for 2011-15?

#### ***Engaging academic staff and promoting IfWH Expertise***

The Institute is relatively new and is still developing. There is a strong clinical and research element but not all academic staff are involved with teaching and learning. We aim to encourage more academic staff to participate in a range of teaching activities, from running MSc modules and supervising MSc projects to being a personal tutor, to ensure that our teaching reflects the depth and breadth of expertise possessed by the Institute. Increased involvement of academic staff, particularly with MSc project supervision, would also allow an increase in the number of students admitted to the taught MSc programmes. In line with the faculty's emerging strategy, it will be important that these staff are trained and equipped with the expertise and support necessary to deliver an enhanced student experience.

#### ***Fostering a culture of excellence in teaching***

Key staff who have previously sought promotion through teaching have found this a very difficult process. We aim to address this and anticipate that commitment in the faculty's evolving strategy to fostering a culture of excellence in teaching and to rewarding involvement will support the Institute in this aim.

We also aim to increase the annual peer observation of teaching to ensure that teachers benefit from each other's knowledge and experience, to focus on the student experience, and to promote excellence of teaching across the Institute.

#### ***Improving support mechanisms for students***

We aim to continue to develop our personal tutoring system and other support mechanisms for all our students.

#### ***Maintaining an International Reputation***

The three MSc courses have an international reputation. Our on-site **Taught MSc programmes** are always oversubscribed even though they are not advertised. These programmes have produced international scientists and clinicians in the fields of embryology, prenatal diagnosis, reproductive health, genetics and clinical science. They hold a key position in the international training and education of these disciplines.

We aim to maintain this international reputation, the high quality of MSc applicants, and the numbers of home/EU and overseas students.

#### ***Innovation in Teaching, Learning & Assessment***

**Taught MS programmes:** one of our previous aims was to modularize the taught on-site MSc courses and this was implemented in 2009. At that time we also introduced a number of novel teaching and learning methods, such as studying case reports, analysis of press reports of scientific papers, laboratory and clinical visits, etc. Assessment methods include exams, essays and a genetics problem booklet. Through essay writing, the students develop several key transferrable skills including analysis of published work and scientific writing. They are given a high level of feedback so that they can develop these skills. Plagiarism software is used for all course work.

We aim to continue to innovate our approaches to learning and teaching, and to review and update our MSc programmes continuously to fit with changes in scientific and clinical practice.

In 2011/2012 we aim to establish an award for the student with the highest overall grade for each on-site MSc programme.

**MBBS teaching:** in our MBBS teaching we aim:

- To redevelop the Obstetrics and Gynaecology component of Women's Health in line with Medical School Curricular changes (restructuring communicable diseases aspect, introducing breast health)

- To implement incorporation of Women's Health into final year undergraduate examinations (in keeping with Medical School proposals) during 2012.

- To develop a Women's Health IBSc programme which can be taken after Year 2 of the MBBS programme.

- To enhance the provision of Women's Health Student Selected Components to areas of Women's Health not currently included within the existing provision, and to expand the number of Year 3 SSCs in recognition of the impact of early exposure to a specialty during medical school with respect to subsequent decision-making regarding specialty career choice.

- To further develop inter-professional learning across all sites, both for Obstetrics and Gynaecology, and Neonatology.

**Graduate Research:** for our graduate research students we aim:

- To expand the remit of our PhDs through development of more cross-disciplinary research.

- To develop an Institute - wide research forum.

- To encourage research staff at all levels to attend PhD upgrade seminars and engage with research students' work across the Institute.

### ***Flexible, responsive teaching***

The Institute aims to respond to market demand in providing flexible, responsive teaching options. It is anticipated that this will include offering MSc modules as short courses of CPD type. Discussions are underway with the Royal College of Pathologists and other relevant bodies.

Where opportunities arise, we aim to contribute to development of innovative multi-disciplinary graduate programmes with other UCL Institutes/departments and NHS partners. Particular areas may include development of a nurse education commissioned programme, in conjunction with the Cancer Institute, and a clinical trainee education programme, both for UCLP Trusts.

## **b) How will the department's teaching and assessment activity reflect and support UCL's key priorities for teaching and learning in its provision over the period 2011-15?**

### ***Education for Global Citizenship:***

**Taught MSc programmes:** global issues are incorporated into all modules where appropriate. Having a high proportion of overseas students creates a colourful variety of discussions and debates. English is not the first language of many students and additional help is given to ensure the students learn to write scientifically. The course director dedicates time to offer support. The course includes a high level of teamwork that is well received by the students.

### ***Innovative and effective teaching and learning methodologies:***

**Taught MSc programmes:** further development of innovative teaching methods will be continuously explored. The majority of teaching materials are on Moodle and we will continue to develop further web and digital based teaching methods and aids. A range of student led research and teaching is already incorporated into the taught MSc curriculum and further development of these methods will be explored. For the taught MSc, peer-to-peer teaching is incorporated into each MSc module through peer lead tutorials and assignments. Distance learning has already been developed through the distance learning MSc course.

One concern is that currently in Chenies Mews we have an almost dedicated teaching space with a kitchen attached that gives the students a sense of belonging to the department. The Institute will be relocating at some point in the future and there is concern that the new teaching space will not be as versatile as the current facilities.

**Graduate research:** a Moodle site has been established for graduate research students so that they can be identified as a unified group within the Institute. A facebook group exists for graduate students to arrange social events. The Outreach programme for 'A' level students will be used as a platform to develop core skills in communication and presentation for graduate research students.

***Improved support for students' learning (pastoral support; feedback and assessment):***

**Taught MSc programmes:** the Institute has developed a personal tutoring system, involving both clinical and scientific staff. Training courses and a written guide are available to personal tutors. Personal tutors are encouraged to help students develop their key skills. As well as discussions with their personal tutors, Joyce Harper (Postgraduate Tutor Taught) is available for support and advice (to both students and personal tutors). Students are given regular feedback on their progression throughout the MSc programme, both in formal assessments and in more informal contexts. The use of the Key Skills system as a tool for personal tutoring of MSc students will be explored.

**MSc in Haemoglobinopathy:** modular assessment is done according to validated UCL criteria using course work (essays) and "on line" student exams. Excellent feedback tools are used in live Webex tutorials, which are held twice per week. This is used for student and tutor feedbacks. Additionally all students have local/international tutors at their country of origin who liaise with local UCL tutors and the Course Directors regularly.

**Graduate research:** All new research students have an induction meeting with the Institute Graduate Tutor for Research Students (Sioban SenGupta). In addition to using the student log book (eLog), graduate research students meet with the Institute Graduate Tutor for Research Students annually to review the progress of their research work and core skills. Additional progress questionnaires are being devised for research students at four and 18 months as an effective method for the Graduate Tutor to gather student feedback, to identify any issues and to ensure appropriate support is provided. Supervisors are now also being asked to complete a brief feedback questionnaire at each point of engagement monitoring.

***Employability, entrepreneurship and leadership:***

**Taught MSc programmes:** UCL Careers Service give a seminar on career development and applying for a PhD. The Course Director and personal tutors also offer advice on career development, applying for posts, etc. Each year several students stay on at UCL/UCLH either for PhDs or employment. Some students return to their home countries and apply the expertise they have been able to develop at UCL.

The taught courses aim to develop students' scientific skills and encourage them to take part in extra curricula activities, to strengthen their employment prospects. Students are encouraged to be student representatives both at the Institute and Faculty level (as part of the Union StARs). MSc students are actively involved in a range of events, such as organisation of the annual research student day.

***Recognition of the importance of teaching and learning in maintaining UCL's international reputation:***

The key staff involved with organising the MSc programmes and individual modules have been trained in teaching. Training includes the Postgraduate Certificate in Learning and Teaching in Higher Education (PGCLTHE) and recognition by the Higher Education Academy. However, this needs to be extended across the academic staff. We are encouraging all staff to be involved with running MSc modules, and with teaching at postgraduate taught or undergraduate levels. Peer observation of teaching already occurs, but this has been an issue within the Institute. Not all HEFCE funded staff teach at postgraduate taught or undergraduate levels and, as a result, it is not possible to observe their teaching. It is an urgent priority to address this.

All research staff who are likely to supervise PhD projects are required to attend the Graduate School mandatory briefing session for research student supervisors at the earliest opportunity.

**c) What objectives and timelines has the department set with a view to achieving its aims for teaching and learning?**

In the academic year 2011-2012, it is aimed that all HEFCE staff are involved in teaching. All staff involved with teaching undergraduates and postgraduates will undergo peer observation of teaching.

**d) How will the department monitor progress against the objectives outlined in this strategy? What indicators will the department use to track and measure its performance?**

There are a number of key staff who are particularly involved in the setting of objectives and monitoring progress against these. Peter Brocklehurst, IfWH Director, takes an active role in overseeing learning and teaching in the Institute. Melissa Whitten leads the undergraduate teaching, Joyce Harper is Postgraduate Tutor (Taught) and Sioban SenGupta is Postgraduate Tutor (Research). Three administrative staff currently support learning and teaching at the Institute – an Undergraduate Administrator, a Senior Teaching Administrator, and an administrator who provides dedicated support to the MSc Haemoglobinopathy.

Progress is also be monitored through Institute committees. There are two separate IfWH Board of Examiners; one dealing with the taught MSc courses (IfWH Graduate Programmes – Chair, Joyce Harper) and one dealing with the distance learning MSc course (Chair, Ratna Chatterjee).

The Institute Teaching Committee is split into Undergraduate and Postgraduate. Postgraduate students also feedback via the Staff Student Consultative Committee. All committees meet termly. Student feedback is assessed at the end of each MSc module and fed back to the relevant committees. The Chair of the Board of Examiners reports, student progress and any other issues for the MSc courses are fed back to the relevant committees.

In line with UCL's quality management and enhancement processes, annual monitoring reports are completed each year. For the academic year 2010-2011, an augmented annual monitoring was performed. This process provides an important opportunity for self-evaluation and scrutiny of progress against objectives.

The IfWH anticipates that, in line with FPHS's evolving strategy, our success in delivery will be measured through clear, deliverable KPI's. As part of SLMS, the Institute is governed by KPIs with increasing emphasis being placed on teaching. Example KPIs include:

- the numbers of PGT and PGR students per academic staff
- the ratio of overseas students to total student numbers
- the extent of the interdisciplinarity of our teaching.

### 3 Approaches to Teaching, Learning and Assessment

#### a) What distinct principles underpin the department's approach to teaching, learning and assessment?

The Institute's philosophy of teaching is to engage students and interest them in the subject, to teach relevant clear information that explains subjects and sets problems and context. The students are encouraged to self-learn by applying critical thinking. Learning comprises both the accumulation and understanding of information but also the ultimate goal is to produce students who are critical independent thinkers.

**Taught MSc programmes:** Assessment is based on a combination of assessment methods, both "classical" (e.g. exams and essays) but also assessment of group work, individual work produced outside the classroom and practical skills assessment, independent work assessment (e.g. during the laboratory project). This encompasses all areas of performance and is assessed in different ways. Students present both individual and group work through seminars and reports. The substantial research component of the MSc programmes provides a valuable opportunity for students to explore the world of research under the guidance of trained and experienced supervisors including many individuals who are world leaders in their field.

**MSc in Haemoglobinopathy:** Interactive tools are used for student learning and engagement using media based technology (Webex tutorials, journal clubs and student led presentations). Assessment tools have been scrutinised and validated by UCL. These include modular exit exams (coursework and "on line" exams). The final exit exam is held at the local British Council centre of the country of origin of the students. The dissertation is jointly supervised with UCL and local international tutors. Regular fortnightly student meetings are held with the programme Directors and tutors and monthly meetings are held with international tutors. Assessment of dissertations is undertaken from the written thesis and "on line" viva. External and internal examiners nominated by UCL assess both written and viva exams.

**MBBS:** we seek to provide an environment where students can access learning opportunities in line with their immediate curricular needs, but also to generate interest and motivation in Women's Health both for future career choices but also academic work. Students are taught in a multiprofessional manner, with small group tutorials embedding direct clinical contact and bedside teaching, as well as large group lectures. Innovations in teaching include the development of a Moodle portal for Women's Health, with interactive online learning tools to support learning, development of interactive clinical skills sessions with multidisciplinary faculty and multiprofessional groups (student midwives being taught alongside student doctors); incorporation of Preparation for Practice areas within teaching – eg safe prescribing, risk assessment, handover. MBBS students are provided with a contact mentor during their attachments, together with an administrative, clinical and midwifery lead.

#### b) What are the department's strengths and weaknesses in teaching, learning and assessment? How might these be capitalised upon or addressed over the next four years?

The MSc programme directors have extensive teaching experience and are highly motivated to deliver first-rate teaching. The MSc programmes content is continuously reviewed and updated to fit with changes in scientific and clinical practice. New technologies are taught in both theory and practice. Past students have gone on to successful careers in both science and medicine.

The personal tutoring system was introduced in 2010-2011. This needs to be developed further. Being a very research orientated Institute, there is a need to address the level of commitment to teaching by a number of academic and clinical staff. Staff attendance at the Teaching Committee and Staff/Student Consultative Committee, and at PhD upgrade/MD(Res) checkpoint seminars is poor. MSc project supervision is restricted to a small number of laboratories and so principal investigators need to be encouraged to take on MSc projects. All academic staff should be encouraged to dedicate at least 10% of their time to teaching.

These issues have recently been discussed with the theme leads and will be discussed with the Institute Director.

**c) How does the department structure and resource teaching and learning? Will this change over the next four years, and if so, how and why?**

**Taught MSc programmes:** Consists of eight taught modules, each taught over a three-week period. Four modules are shared between the two courses and four are unique. Research projects are organised to fit in with existing world class research. Students are taught to apply research methodology to their projects. The one-to-one research student to supervisor relationship increases the transferrable skills of the students. Great emphasis is placed on presentation of data in oral presentations both in the research components of courses and in taught modules. Students are allocated a personal tutor. It is hoped that more staff become involved in teaching over the next five years.

**MSc in Haemoglobinopathy:** The programme has seven modules. All programmes are in built and made interactive with Webex and “on line” tutorials and interactive Quizzes. The department is expected to facilitate integration and support to local students by providing facilities to undertake laboratory and clinical based projects.

**MBBS:** The programme structure will be resourced by clinicians and postgraduate trainees, as well as midwifery tutors. Each student has a personal firm lead and mentor during their module in Women’s Health. It is hoped that the faculty of teachers will expand in line with increasing numbers of postgraduate staff undergoing training in medical education.

**d) What mechanisms are in place for monitoring the effectiveness of the way in which the department is teaching and assessing? Do these need to be revised or reviewed in light of projected trends for the next four years?**

The Undergraduate and Postgraduate Teaching Committees and Staff-Student Consultative Committee meet termly. The SSCC meetings provide a forum for students to air issues and for staff to be informed of any problems.

All course questionnaires, feedbacks, Chair of the Board of Examiners reports and students’ final awards are discussed at the relevant Institute meetings including the Staff Student Consultative Committee meeting (not all the mentioned issues are discussed here) and the Teaching Committees. For postgraduate teaching, this is also achieved through the annual monitoring review.

Peer review of each academic’s teaching is regularly carried out where possible.

**Taught MSc programmes:** Students provide feedback after each module via Moodle and summaries are discussed at the SSCC and Teaching Committee meetings. All lecturers are given feedback on their individual marks and comments. These are analysed to highlight any problems with module teaching and a summary is submitted to the Faculty. External examiners reports are incorporated into the Chair’s report and the annual monitoring review. The Programme Director monitors module marks. The students’ final marks are monitored to ensure a high level of success.

**MSc in Haemoglobinopathy:** This programme has been running for three years. Student feedback is monitored at each Webex tutorial/student presentation held twice a week. Feedback of “on line” exams and course work are given to students and presented to the academic board and exam board meetings. Additionally data are presented to Teaching Committee meetings.

**MBBS:** Monitoring mechanisms include student survey, UCL rankings against other medical schools, and SIFT visits as part of IQR. Introduction of peer review will aid feedback. We also use the GMC appraisal tool for clinicians involved in teaching. Moodle feedback is gathered from each student cohort. Exam results – i.e. numbers of students passing the module – are also monitored.

**e) How does the department innovate in teaching, learning and assessment? How will the department seek to develop its teaching over the next four years?**

Research is key in our Institute and this forms an important aspect of our teaching. The new student award will be recognition of achievement. All other points are covered above.

**MSc in Haemoglobinopathy:** Distance learning and blended learning will be the key for enhancement of teaching and research.

**MBBS:** Introduction of Preparation for Practice within teaching during the module. Linking learning outcomes within the undergraduate curriculum with outcomes in postgraduate training (Foundation and Speciality curricula) to provide a clear link in terms of progress of learning. Use Moodle to support learning. Linking learning; multiprofessional learning.

**f) What is the student profile of the department? Will this change over the next four years? How will the department respond to the various needs of disparate student groups?**

**Taught MSc programmes:** to be eligible for the programme, we expect a 2/1 or 1st in a relevant biomedical sciences degree or a medical degree. In all cases we anticipate our students will be of a high calibre. This enables us to provide advanced and up to date teaching. We are always oversubscribed with applicants, even for the new MSc course, both from overseas and the EU and so we have no need to recruit. This allows us to select the academic elite. We do not envisage any change in the student profile in the next five years. Students are taught many transferable skills including how to write scientifically, critical evaluation of papers, various laboratory methods, etc. They have a variety of observation days in clinics to give them an idea of different working environments. They have seminars from UCL careers department. The personal tutors help with careers advice.

**MSc in Haemoglobinopathy:** Currently the mix of students is 3:1 (clinical and biomedical science). We aim to select more elite students from abroad in future with more clinicians who can subsequently act as local tutors in their country of origin after completion of the Masters programme.

**g) How does the department support staff to develop their teaching? How will the department ensure that staff can give due priority to teaching activity within their overall teaching load? How will the department recognise staff for excellence in teaching?**

The Institute ensures that adequate probationary procedures are in place for new academic staff, that teaching is reflected in the current job plans of all academic and clinical staff and that undergraduate and postgraduate teaching activities are separately identified but there are issues with motivating some research and clinical staff to teach. All academic staff are encouraged to become personal tutors. The Institute seeks to encourage and increase staff involvement in education leadership positions and to ensure that academic staff maintain their ongoing development as educators as well as researchers. All academic staff are encouraged to attend UCL Staff Development training courses in order to nurture key skills and develop new ones. All staff must have attended the supervisor training course (or similar) prior to undertaking student supervision on research projects. The use of appraisal, performance management and teaching feedback is used to enhance the quality of teaching. The Institute aims to support excellence in teaching by working with UCL to improve academic recognition of staff heavily involved in teaching and by supporting teachers for academic promotion. In 2008, the roles of postgraduate tutor were split to give a postgraduate tutor taught (Joyce Harper) and postgraduate tutor research (Ray Noble). Ray recently retired and in 2010 Sioban SenGupta was appointed to this role. Together the postgraduate tutors are improving and advancing the teaching and learning environment within the Institute. One of the main aims is to network students studying at postgraduate level. In 2011 a new senior postgraduate administrator was appointed (Angela Poulter) who is developing the role further. Ray Noble and Ratna Chatterjee have previously been successful in obtaining Provost teaching awards.

**MBBS:** Melissa Whitten has recently taken over the MBBS teaching. All staff are expected to be involved in the MBBS exams. To ensure the provision of written question writers, standard setters and OSCE examiners for all MBBS assessments; to identify colleagues with an interest in teaching to become tutors in the MBBS in areas such as support of the portfolio, clinical teaching in phase 1, personal tutoring and PDS; to provide and develop Student Selected Components for MBBS students in all phases of the course, involvement of junior doctors undertaking advanced specialty training (Years 6-7) in obstetrics and gynaecology and with a specific interest in medical education, and clinical academic trainees and lecturers, with respect to delivery of teaching and assessment, involvement of more junior doctors (Foundation trainees, Specialty Trainees year 1-5) in provision of bedside and clinical skills teaching.



## 4 Financial Context

a) What are the financial / resource implications of the department's strategic aims for 2011-15?

**Taught MSc programmes:** These programmes have low overheads as they are organised and taught by Institute staff but they generate significant funds for the Institute. Several key staff are HEFCE funded. The MSc courses have a high overseas to EU ratio. This will continue as it is for the next five years.

**MSc in Haemoglobinopathy:** The finances of this MSc course are currently under review at the Institute and Faculty level. Concerns have been raised about the financial viability of the MSc course as it is currently configured. Discussions within the Faculty will continue in spring 2012.

b) What central support or resources (if any) will be necessary to support the department in achieving its objectives in each of these areas?

**MSc in Haemoglobinopathy:** as above.