Programme Specification (Master’s Level)

Postgraduate Diploma and MEd in Surgical Education

This document provides a definitive record of the main features of the programme and the learning outcomes that a typical student may reasonably be expected to achieve and demonstrate if s/he takes full advantage of the learning opportunities provided. This programme specification is primarily intended as a reference point for academic and support staff involved in delivering the programme and enabling student development and achievement, for its assessment by internal and external examiners, and in subsequent monitoring and review.

<table>
<thead>
<tr>
<th>Programme Information</th>
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</table>
| Award                  | Master of Education (MEd)  
                        | Postgraduate Diploma      |
| Programme Title        | Surgical Education        |
| Programme code         | A3B2 F/T Med              |
|                        | A3B224 P/T MEd            |
|                        | A3B2D P/T PG Dip          |
| Awarding Institution   | Imperial College London   |
| Teaching Institution   | Imperial College London   |
| Faculty                | Faculty of Medicine       |
| Department             | Department of Surgery and Cancer |
| Mode and Period of Study | **MEd:**  
                        | Full-time: One calendar year (12 months)  
                        | Part-time: Normally two calendar years (24 months) of continuous enrolment  
                        | Part-time students register for the PG Diploma in the first instance.  
                        | **Postgraduate Diploma**  
                        | Part-time: Normally 12 months (minimum 10 and maximum 24 months of continuous enrolment)  
                        | Students who have already completed the PG Dip can register to complete the MEd in October of each year, provided that they |
complete the Master’s programme in no more than 5 years after initial registration for the Postgraduate Diploma. Within this maximum period allowed for registration, these students will have a minimum of 12 months and a maximum or 24 months to complete their research methods and educational research project.

All timings to be agreed with the Programme Director, especially those outside the normal pattern.

Cohort Entry Points
Annually in October

Relevant QAA Benchmark Statement(s) and/or other external reference points
Though no specific subject benchmarks are available for this multidisciplinary programme, relevant items from medicine and healthcare have been referenced.

Total Credits
<table>
<thead>
<tr>
<th>ECTS:</th>
<th>MEd: 90</th>
<th>PG Dip: 60</th>
</tr>
</thead>
<tbody>
<tr>
<td>CATS:</td>
<td>MEd: 180</td>
<td>PG Dip: 120</td>
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</tbody>
</table>

FHEQ Level
Level 7 - Master’s

EHEA Level
2nd cycle

External Accreditor(s)
None

Specification Details

Student cohorts covered by specification
2016/7 onward

Responsible Officer
Professor Roger Kneebone, Dr. Kirsten Dalrymple

Date of introduction of programme
09/2016

Date of programme specification/revision
10/2015 (revision)

Description of Programme Contents

The Imperial College Master's Degree in Surgical Education, offered through the Department of Surgery and Cancer, was established in 2005 as one of the first programmes of its kind worldwide.

There is increasing emphasis across surgical specialties on sound education, assessment and appraisal, and a growing recognition that education is a key to safe clinical practice and effective professional development. Surgery with its professional emphasis on craft, performance and
teamwork creates unique considerations for education and training. Successful completion of advanced programmes in Surgical Education will build the theoretical understanding and judgment that underpins educational development and innovation in this important and developing field. Such an understanding is necessary as surgical training across the world increasingly questions the appropriateness of its former apprenticeship model and looks for suitable alternatives for the future.

We offer a PG Diploma level qualification in Surgical Education, in addition to the MEd in Surgical Education, offering greater flexibility to students. Of interest to those involved with the education of students and trainees in interventional and surgical specialties, the PG Diploma in Surgical Education aims to provide its students with a thorough grounding in educational concepts and professional practices to complement their surgical and clinical expertise. Continuation onto the higher MEd qualification will additionally build students knowledge and practical experience with educational research methodology. Both the Diploma and MEd aim to complement students’ biomedical academic skill sets with educational ones that draw on social science and humanities paradigms.

The PG Diploma programme provides a broad grounding in educational theory and approaches in the context of surgery, a grounding that is frequently underdeveloped in current surgical education practice. A further aim is to introduce students to the use and critique of low and high fidelity simulation in training and the distinctive pedagogical challenges this gives rise to. These aims will be complemented by relevant educational theory and appropriate research methodology. Exposure to Imperial’s Virtual Learning Environment (Blackboard) and hands on contact with simulators will allow participants to experience media and techniques which they will also be exploring from an academic, educational perspective. The PG Diploma culminates in a specialty stream and capstone project selected by the student.

The MEd programme adds to development of educational knowledge and skills by providing students with the opportunity to undertake supervised research in surgical education, in an area of professional educational interest, where they will expand their research abilities to include knowledge and experience in educational research methodologies and methods. This requires students from a biomedical background to engage with the ideas and approaches of education, a field heavily influenced by the social sciences and humanities.

Although we expect participants to bring relevant experience of medicine, surgery, and training in the workplace, we make few assumptions of prior knowledge in the field of education; learning needs will be negotiated within an overarching framework of educational objectives. This strategy is in harmony with current practice for clinical personnel seeking an educational qualification. Its philosophy fits well with Imperial’s framework for Master’s level study, which is designed to ensure understanding of essential concepts, principles and practices whilst integrating and critiquing these ideas alongside contemporary issues and debates in surgical education. Students on the programme typically have teaching and training experience, but little formal basis in educational theory. Their knowledge of simulation and technology in surgical training and education is likely to be at an introductory level. Limited familiarity with the field of education, its social science and humanities traditions and practices, is expected. A significant aim of the course is to enhance students’ academic knowledge and skills in this field.

Programme Structure:

The programme is modular and includes full- and part-time MEd options, normally delivered over one or two years respectively. The Postgraduate Diploma (PG Dip) is available only as a part-time programme, normally delivered over a ten-month period. Modules build upon one another and should be taken in the sequence indicated. Flexibility is in choice of assessment topics for individual modules, choice of specialty stream and research project.
Every participant must successfully complete attendance and study for 60 ECTS credit points at ‘M’ level for the PG Diploma and 90 ECTS credit points at ‘M’ Level for the MEd.

For the PG Diploma:

• Five taught compulsory modules (modules 1-5) each consisting of one week intensive contact teaching time (normally 28 hours) with further private study required to complete coursework and summative assessment. Some also have pre-module work.
  - Module 1 Policy and context of surgical education
  - Module 2 Introduction to learning and teaching
  - Module 3 Introduction to assessment and appraisal
  - Module 4 Introduction to simulation and technology enhanced learning
  - Module 5 Theory and practice of learning, teaching and assessment

• A specialty stream module (Module 6a/b- Surgical Education Specialty Stream and Design Project) consisting of several options (e.g. simulation, technology-enhanced learning, engagement). 6a consists of pre-module reading and activities, a 3-day face-to-face module and additional private study required to complete coursework and summative assessment (a supervised curriculum design and report project). The majority of Module 6 work falls at the end of the PG Diploma with the project serving as a capstone for the programme.

• Module 7, Reflection for Surgical Education Project, which spans the PG Diploma stage of the programme and draws on Modules 1-6 to produce a reflective portfolio on teaching and learning.

In addition to the above, the MEd includes:
Module 8, Research methods (8a) and educational research project (8b), which comprises a taught educational research methods element and production of a research plan (8a), and conducting an individually supervised research project, written up in a dissertation (8b). Module 8a includes a pre-module assignment. Module 8b also includes (1) a required research plan (including ethical considerations) and (2) a dissertation progress report that are treated as assessed coursework.

Year One of the programme for the different modes of study would include:
  - Part-time Diploma: Modules 1 – 7
  - Full-time MEd: Modules 1 – 8

Year Two Part-time MEd:
  - Module 8

Short Module Descriptions

**Module 1 Policy and context of surgical education**

This module starts with an orientation to Imperial, to the MEd, and the level of work expected and how this can be approached. Sessions by external speakers will provide an overarching framework for the programme, highlighting key issues within healthcare social and training policy which impact upon surgical education. The nature of the discipline/practice of education will also be introduced. The aim is to give participants an understanding of the wider background within which more detailed study will take place.

**Module 2 Introduction to learning and teaching**

This module introduces a range of fundamental educational ideas, theories, principles and teaching methods. It forms the educational underpinning for the whole programme but especially Module 5 -
Theory and practice of learning, teaching and assessment. Some basic teaching approaches will be modelled and practised, including reflective practice and peer assessment.

**Module 3 Introduction to assessment and appraisal**

This module provides an overview of the purposes and application of assessment within learning and specifically within surgical education, together with an understanding of the range of assessment techniques available and the rationale for selecting appropriate methods.

**Module 4 Introduction to simulation and technology enhanced learning**

This module addresses specific issues relating to the use of technology (both surgical and educational) and simulation, building on the foundations laid in modules 1-3 as well as introducing new areas and considerations, such as the importance of de-briefing sessions. It lays the groundwork for further study in some of the M6 Specialty Streams.

**Module 5 Theory and practice of learning, teaching and assessment**

This module builds on the material covered in Modules 1-4, consolidating and extending principles and theories and giving more consideration to their underpinning of practical teaching techniques within a range of clinical settings (with special reference to surgery). Concepts of expertise and performance will be critically examined, drawing on a range of domains outside surgery.

**Module 6 Surgical Education Specialty Stream and Design Project**

This module provides an opportunity for students to select an area of interest within surgical education (e.g. simulation, technology-enhanced learning, or engagement) for study at greater depth and analytic and scholarly rigour. Independent study, with supervision, culminates in the design of a curriculum intervention, justified by educational theory and research.

**Module 7 Reflection for Surgical Education Project**

Module 7 runs across the Diploma stage of the programme and takes the form of a reflective portfolio. Students compose individual short reflective writing pieces applying concepts learned during Modules 1-6 to their own teaching and learning experience. Reflective pieces are discussed in study groups (with an assigned tutor) and iteratively improved as the student's knowledge of reflective practice, practical experience in educational reading and writing, and the subject matter increases over time. It develops academic skills and syntheses learning across modules 1-6.

**Module 8 Research methods (8a) and educational research project (8b)**

Educational research methods are a taught element within the module and introduce the students to qualitative approaches they may not have encountered previously and reinforces understanding of the role and nature of research and evaluation in surgical education. Skills learned in this module will be consolidated by practical experience in designing, carrying out and presenting a research project by dissertation. Module 8b includes a required dissertation progress report that is treated as assessed coursework.

**Alignment with College Strategy**
The Department of Surgery and Cancer's Diploma-MEd in Surgical Education programme is aligned to various aspects of the College's 2015 strategy. These include attention to: a) Foundations, b) People, c) Partners, and d) Enablers.

a) Foundations

The programme is rooted in both surgery and education, a multidisciplinary enterprise aimed at enhancing students' academic knowledge and skills in a new field, one that complements their existing biomedical skill set. The programme is designed to provide students with a sound and integrated understanding about educational theories, practices and research. It brings together scholars from multiple disciplines, policymakers and healthcare professionals to provide students with a wide range of perspectives related to educational practice and exposure to research environments that explore emerging directions in surgical education, including public engagement, simulation and work at the boundaries between medicine, science and the humanities.

b) People

The MEd in Surgical Education places on emphasis on supporting its students and on maintaining and building relationships with its alumni. Many of our alumni have continued to develop their educational and educational research roles through:
- Participation on the programme as tutors and research supervisors
- Publishing educational research
- Exploring innovative educational practice and research ideas
- Involvement with Imperial College’s Centre for Engagement and Simulation Science (ICCESS) healthcare-related engagement events across the UK

c) Partners

Experts across disciplines, professions and academic institutions, policymakers (e.g. from the GMC, HEE, RCS, HEFCE, AHSC), and professional bodies regularly speak on the MEd. We work collaboratively with education experts at the RCS to develop research opportunities for our students. A number of clinical teaching fellows from Imperial’s AHSC have successfully completed a MEd in Surgical Education degree in conjunction with year-long fellowships.

The programme also benefits from a reciprocal relationship with ICCESS. ICCESS’s extensive and well-regarded engagement portfolio provides a means for the practice and scholarship of healthcare engagement to be explored by our clinician students and alumni and directly enables us to collaborate with a range of healthcare stakeholders (policymakers, professionals, the public, schools and local communities).

d) Enablers

The MEd in Surgical Education has consistently stretched itself to innovate its ways of teaching and exploring the domain of surgical education.

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Learning Outcomes

**PG Diploma Programme learning outcomes**

By the end of this Diploma-level programme in Surgical Education, students should be better able to:

1. Evaluate and critique contemporary surgical education with regard to: stakeholder interests, emerging policies, institutional structures and responsibilities, and educational frameworks and practices.
2. Critically reflect on, and articulate arguments about, ethical aspects of surgical education and its contribution to the well-being of patients, carers, learners, trainers and fellow professionals.

3. Demonstrate appropriate practical skills in learning, teaching, training and assessment, including the design and evaluation of training sessions, courses and curricula.

4. Critically appraise the use of a range of learning technologies and simulation approaches both within, and about, surgical education.

5. Reflect upon, critique and develop arguments about their own, and others', educational practice.


7. Design creative and innovative solutions to problems in contemporary surgical education.

8. Engage with, and contribute to, high-level oral and written discourse about surgical education.

9. Enrich surgical education both by drawing upon, and contributing to, other fields of education and domains of practice.

**MEd Programme learning outcomes**

As for the Diploma plus learning outcomes 10 and 11.

10. Apply a range of research methods and relevant approaches to investigating and analysing aspects of surgical education.

11. Plan, secure appropriate approvals, implement and write-up a surgical education research project.

Notes: ILOs for the PG Diploma are the same as those for the MEd but exclude numbers 10 & 11.

Generally speaking sequence and focus of the learning outcomes:

LOs 1-2: knowledge: context, ethics; skills: reflecting, evaluating, arguing and writing;

LOs 3-5: practice: own awareness, knowledge and skills;

LOs 6: embracing theory in reflective and critical practice;

LOs 7-9: future roles as educational innovators, brokers, ‘entrepreneurs’ and leaders;

LOs 10-11: research and practice (MEd only)

**Entry Requirements**

<table>
<thead>
<tr>
<th>Academic Requirement</th>
<th>Normally a 2:1 UK Bachelor’s honours Degree (or equivalent) in medicine or a science, engineering, computing, healthcare or education subject</th>
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</table>
### Additional Requirements

- Normally three years of relevant experience in a healthcare field (not necessarily surgery) and/or relevant teaching/education development and research experience.

- Practical experience of surgery, surgery-related practices and training in this domain are necessary to take advantage of this challenging programme.

Applicants who do not meet the academic requirements above but who have substantial relevant experience may be admitted following successful completion of a ‘Special Qualifying Exam’ (SQE)

Students enrolling on the full-time MEd are expected to dedicate a full-time effort to the programme. The full-time programme is not likely to be compatible with anything more than a small amount of clinical work/employment.

### English Requirement

- IELTS 7 with a minimum of 6.5 in each element (or equivalent)

### Learning & Teaching Strategy

#### Scheduled Learning & Teaching Methods

- A combination of small group teaching methods such as seminars, discussion groups, tutorials, coursework, simulation-based learning, workshops, peer assessment, mini-lectures, role-play, journal clubs, written and oral assignments, including reflective writing on practice.

#### E-learning & Blended Learning Methods

- Blackboard is used as an online platform to house lecture/seminar handouts, hold discussion boards related to modules, reading lists, handle assignment submissions through Turn-It-In, and carry out formative writing activities.

#### Project and Placement Learning Methods

- **Diploma students:**
  - (M6) Project
    - Supervised curriculum design project, initially drafted in small groups within the module and continued with an allocated tutor. (1) Presentation of draft plan at end of face to face module and (2) and a supervised project reading list and design outline are treated as marked, pass-fail coursework and source of formative feedback
    - ‘Field trips’ to observe and/or participate in events representative of the chosen specialty stream (e.g. a simulation course at a NHS Trust or the RCS, an engagement event at
the Wellcome Trust) and intended to broaden experience within the particular specialty stream.

(M7) Project:
Supervised reflective portfolio project drawing on and integrating knowledge across the course to student’s own professional practice. Provides students opportunity to develop a new mode of academic writing with support.

MEd students:
Formative development of a research proposal during the taught Module 8a. Followed by supervised development of a research project, leading to completion of a dissertation. As part of this process, students produce a research proposal (included in this is their ethics application) and progress report as interim pieces of marked, pass-fail coursework. Formative feedback is provided on both pieces of coursework.
Projects can take place in the student’s place of work or at Imperial if project based on area of research group investigation (e.g. with ICCESS- Imperial College Centre for Engagement and Simulation Science). Students may also pursue a collaboratively supervised project at the RCS

Assessment Strategy

- The programme features a range of extended writing formats (i.e. coursework assignments) as the primary mode of summative assessment and draws on the module and programme learning outcomes as appropriate. All methods are underpinned by, and focus on, demonstrating criticality, reflection, engagement with scholarly discourse, argumentation, and handling multiple perspectives. Given most students on the programme are mid-career professionals (in or having completed medical/surgical training), familiarity with scientific and biomedical enquiry and communication are assumed. We seek to complement what they can already do in the biomedical sciences and add a social science and humanities perspective to ways of doing things both in assessment and in teaching and learning methods. Feedback is aligned with this. Assessment emphasis is laid on developing complementary academic skills in the field of education, which is highly influenced by the humanities and social sciences
Coursework provides practical experience with presenting and development of educational resources or research tools (e.g. curricula design, assessment design, an ethics application)

Module Assessments:

M1 (Context and Policy of Surgical Education):
- draft essay for peer and tutor review and feedback (on Bb) (formatively assessed only)
- 2,000-word essay on an aspect of the policy and context of surgical training and education.

M2 (Introduction to Teaching and Learning in Surgical Education)
- In module coursework: Group development of a single teaching session, peer and tutor assessed presentation.
- 2,000-word reflective commentary on own teaching

M3 (Introduction to Assessment and Appraisal)
- In module coursework: Development of assessment task outline proposal, peer and tutor assessed presentation
- Detailed design and scholarly justification of a novel assessment for a specific purpose and group of trainees

M4 (Introduction to Simulation and Technology-enhanced Learning)
- In module coursework: Structured debate on simulation technology and technology enhanced learning
- 2,000-word informed critique and personal reflection on either technology enhanced learning OR simulation technology

M5 (Theory and Practice of Learning, Teaching and Assessment)
- In module coursework: linking theory to practice exercise
- 2,000-word traditional academic essay applying and critiquing theory relating to surgical education
M6 (Diploma project)- Surgical Education Specialty Stream and Design Project

- In module coursework: Development of draft project plan peer and tutor formatively assessed presentation

- Post-module coursework: Defence of a project plan and reading list to the design project supervisor.

- Design of an educational initiative within the chosen stream (e.g. either Public Engagement or Simulation Science or e-Learning). The design is documented, justified and defended in a 7,000- word project report. Capstone project, requiring application of skills and concepts from earlier modules.

M7 Reflection for Surgical Education Project

- reflective writing pieces (compulsory 500-600 word assignments following M1-M6, feedback on early modules provided by assigned supervisor)

- reflective portfolio (4000-5000) words total, comprised of above pieces plus a synthesis piece of 1000-1500 words)

M8 Research methods (8a) and Educational Research Project (8b)

- In module, development and presentation of draft research design to mock ethics committee (feedback from peer and tutors)

- Full research proposal (to include an ethics proposal written for an appropriate REC & R&D), supervisor assessed with feedback

- Progress report, supervisor assessed with feedback

- 15,000-20,000 research dissertation

Academic Feedback Policy

Written feedback, benchmarked to a marking rubric, from first and second markers is provided in time for students to apply these prior to submission of subsequent assignments. Prior to submission of the first summative assignment, students’ draft essays receive substantial written feedback within the draft and with reference to the marking criteria from both a tutor and sub-group of peers.

For Module Coursework: Combined written feedback is provided to work groups by the tutors who assessed the coursework presentations.

For the M6 Design Project:
Feedback benchmarked to assessment criteria is provided at three stages of the design project.

1. By tutors and peers on the draft design project presentation (end of taught part of module)
2. By the assigned supervisor in response to the revised draft design and a proposed reading list
3. By the assigned supervisor in response to a complete draft of the curriculum design project

For the M7 Reflective Portfolio:

Feedback (benchmarked to criteria on reflection and reflexivity in academic practice) will be provided to students on their first two reflective pieces.

For the M8 research proposal and resulting dissertation: Students receive oral feedback on initial research proposal drafts from tutors and peers. Subsequent phases of the research process (protocol development, ethics applications, progress report, final draft) are supervised and regularly fed back upon. Students are invited to attend a research colloquium (in the year of their research project) in mid-July to present and receive oral feedback from tutors and peers on their progress to date.

Re-sit Policy

The programme utilizes two forms of coursework per module, smaller assignments that are deemed pass/fail and larger ones, typically extended writing, whose marks count toward the final award. A failed piece of pass/fail coursework can be resubmitted on one occasion, normally within 1-2 months after the original submission and agreed by the Programme Director. Larger pieces of summative work may be submitted on one further occasion once the marks have first been agreed at the Exam Board meeting. Re-submission dates need to be agreed by the Programme Director.

If the MEd research dissertation (Module 8) is failed, students may resubmit on one occasion the following academic year, with a deadline to be agreed with their dissertation supervisor and the Programme Director.

Re-submissions will be marked at a bare-pass unless mitigating circumstances have been established according to College policy and procedures, see below.

Mitigating Circumstances Policy

The College’s Policy on Mitigating Circumstances is available at: www.imperial.ac.uk/registry/exams

Programme Structure

<table>
<thead>
<tr>
<th>Full-time (MEd including PG Dip)</th>
<th>Pre-session</th>
<th>Term One</th>
<th>Term Two</th>
<th>Term Three</th>
<th>Term Four</th>
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<tbody>
<tr>
<td>Core Modules</td>
<td>0</td>
<td>2 (M1, M2)</td>
<td>2 (M3, M4)</td>
<td>1 (M5)</td>
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<tr>
<td>Projects</td>
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<td>2 (M7, M8)</td>
<td>3 (M6, M7, M8)</td>
<td>2 (M6, M8)</td>
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<tr>
<td>Part-time (MEd including PG Dip) (Year One)</td>
<td>Pre-sessional</td>
<td>Term One</td>
<td>Term Two</td>
<td>Term Three</td>
<td>Term Four</td>
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<tr>
<td>Core Modules</td>
<td>0</td>
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<td>2 (M3, M4)</td>
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<tr>
<td>Projects</td>
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<td>2 (M6, M7)</td>
<td>1 (M6)</td>
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<td>Part-time MEd (Year Two)</td>
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<td>Term Two</td>
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<td>Term Four</td>
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<tr>
<td>Projects</td>
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<td>1 (M8)</td>
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**Assessment Dates & Deadlines**

<table>
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<th>Written Examinations</th>
<th>Not utilised</th>
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<table>
<thead>
<tr>
<th>Coursework Assessments</th>
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<tbody>
<tr>
<td>All modules will include coursework assessments. Summative deadlines for modules 1-5 will usually be set for 4-5 weeks after the end of the face-to-face teaching week.</td>
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<table>
<thead>
<tr>
<th>M1 (2nd week Oct):</th>
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<tbody>
<tr>
<td>Formative essay feedback- 3rd week Nov</td>
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<table>
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<tr>
<th>M2 (4th week Nov):</th>
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<tbody>
<tr>
<td>Teaching design group presentation- last day of module</td>
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| Reflective commentary on teaching - 4th week January |
M3 (2nd week Jan):
Assessment tool draft proposal presentation- last day of module
Design and justification of novel assessment tool- 3rd week February

M4 (4th week Feb):
Debate - last day of module
Essay – critique and reflection on technology-enhanced or simulation based learning- 2nd week April

M5 (4th week March/1st week of April depending on Easter):
Linking theory to practice activity- last day of module
Essay- 1st week May

M6 (2nd week May):
Presentation of draft curriculum design- last day of module
Presentation of advanced curriculum design and reading list- 2nd week June
Curriculum Design Report – 4th week of July

M7 (spans Diploma, Sept-June):
Reflective pieces – due four weeks after modules 1-6
Reflective portfolio- end of June

M8 (1st week Nov, term 1 for f/t MEd, term 1, year-two for p/t MEd):
Draft research design presentation- last day of module
Research design, including ethics- 1st week of Feb
Progress Report due- Negotiated with supervisor but no later than end of May

<table>
<thead>
<tr>
<th>Project Deadlines</th>
<th>4th week of June (M7 reflective portfolio project)</th>
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<tbody>
<tr>
<td></td>
<td>4th week of July (M6 curriculum design project)</td>
</tr>
<tr>
<td></td>
<td>25th September (M8 educational research project) – MEd only</td>
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| Practical Assessments | N/A |

<p>| Assessment Structure |</p>
<table>
<thead>
<tr>
<th>Assessment Structure for the Postgraduate Diploma Programme Component</th>
<th>ECTS</th>
<th>% Weighting</th>
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</thead>
<tbody>
<tr>
<td>For the award of a PG Diploma students must complete one component that consists of:</td>
<td></td>
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<tr>
<td>- 5 taught modules: M1 – M5 (each 7.5 ECTS, equally weighted at 12.5% each)</td>
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<tr>
<td>- Diploma Specialty Stream &amp; Design Project [taught week (6a) with supervised project (6b)]. (15 ECTS, weighted at 25%)</td>
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<td></td>
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<tr>
<td>- M7 Reflective Portfolio Project- spanning Diploma (7.5 ECTS, weighted at 12.5%)</td>
<td>60</td>
<td>100%</td>
</tr>
<tr>
<td>Failure of an assessment (40-49%) within a module may be condoned provided that the aggregate mark for the module is at least 50%.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Normally only failure of one module between 40%-50% (modules 1-5 only) would be condoned for the Diploma award if the aggregate for the programme component was over 50%. Failure of Modules 6 &amp; 7 will not be condoned regardless of aggregate marks for the component.</td>
<td></td>
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<tr>
<td>Total</td>
<td>60</td>
<td>100%</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Assessment Structure for the MEd - Programme Components</th>
<th>ECTS</th>
<th>% Weighting</th>
</tr>
</thead>
<tbody>
<tr>
<td>For the award of the MEd, students must first successfully complete the Diploma component as above and then successfully complete the MEd component below:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MEd Core Component [taught week (8a) with supervised dissertation project (8b)] (100% dissertation)</td>
<td>30</td>
<td>33%</td>
</tr>
<tr>
<td>Total</td>
<td>90</td>
<td>100%</td>
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Rules of Progression

Full-time students should register for the MEd in the first instance.

Part-time students should register for the PG Diploma in the first instance and progress to the MEd award. PG Diploma students who wish to continue on the programme without a break can transfer their registration to the MEd after successful attendance and examination of the PG Diploma components.
Progression from the part-time PG Diploma to the MEd can be provisionally approved subject to good academic progress. Successful completion of the PG Diploma component is confirmed at the Exam Board meeting in September.

Credits gained on the PG Diploma can then be used toward registration onto the MEd, either the October immediately following the September PG Diploma Exam Board or students can return to the programme at a later date provided that they complete the Master’s programme in no more than 5 years after initial registration for the Postgraduate Diploma. Within this maximum period allowed for completing the award, these students will have a minimum of 12 months or a maximum of 24 months to complete their project. Returning PG Diploma students registering for the MEd may be asked to surrender the PG Diploma upon registration for the higher award.

Full-time MEd students will have a “provisional/virtual” PG Diploma confirmed if the requirements for the PG Diploma have been achieved. The pass mark for the PG Diploma will be carried forward and the credits will accumulate towards the MEd. Should these students subsequently fail to achieve the requirements for the MEd they will be awarded the PG Dip.

Full-time MEd programme completion requires attendance and passing of all modules. Full-time students who are clearly not progressing satisfactorily, (i.e. demonstrating a pattern of submitting module assessments late or who are not achieving a passing standard on module assessments) may be advised to transfer to the part-time mode of study.

Marking Scheme

The MEd and PG Diploma in Surgical Education make use of marking criteria organised into rubrics that are benchmarked to the subject area and Master’s level standards in order to enhance consistency amongst markers.

PG Diploma

The PG Diploma assessments comprise one programme component as shown in the overall table of assessments. Students must attend required teaching and supervision and pass the component to graduate. One agreed mark will be returned for the component.

The Postgraduate Diploma is not classified but the marks count toward a subsequent MEd.

MEd

The MEd assessments are grouped into two programme components (the PG Diploma component and the MEd component) as shown in the overall table of assessments. Students must attend required teaching and supervision and pass both components to graduate. One agreed mark will be returned for each component.

Provided a candidate has achieved at least 50% in each programme component, they will be awarded a result of pass. Condonement of individual modules within the PG Diploma programme component is acceptable, for one module (from M1 – M5) as long as no mark is below 40% and the aggregate for the programme component is at least 50%. Modules 6-8 must be passed (50%).
The Board of Examiners may award a result of merit where a candidate has achieved an aggregate mark of 60% or greater across the programme with no programme component under 50%.

The Board of Examiners may award a result of distinction where a candidate has achieved an aggregate mark of 70% or greater across the programme with no programme component under 60%.

**Borderlines**

Candidates will normally only be considered for promotion to pass, (or for merit or distinction for the MEd award) if their aggregate mark is within 2.5% of the relevant borderline. Candidates whom the Board of Examiners deems to have exceptional circumstances may be considered for promotion even if their aggregate mark is more than 2.5% from the borderline. In such cases the necessary extra marks will be credited to bring the candidate’s aggregate mark into the higher range. A viva may be called to examine students who are being considered for promotion to a higher degree classification.

The Board of Examiners will comprise the Chair of the Examination Board, the Programme Directors, all Module/Stream Leaders, and the External Examiner. An Exam Board meeting will be held at the beginning of September for the PG Diploma and in early December for the MEd.
## Module List

<table>
<thead>
<tr>
<th>Code</th>
<th>Title</th>
<th>Core/ Elective</th>
<th>Year</th>
<th>L&amp;T Hours</th>
<th>Ind. Study Hours</th>
<th>Placement or project Hours</th>
<th>Total Hours</th>
<th>% Written Exam</th>
<th>% Course-work</th>
<th>% Practical</th>
<th>FHE Q Level</th>
<th>ECTS</th>
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<td>Year</td>
<td>L&amp;T Hours</td>
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<td>Placement or project Hours</td>
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