

**Medical Studies Committee**

**Minutes of Meeting held on 10 June 2015**

**Present:** Professor Sue Smith (Chair), Professor Paul Aylin, Dr Mike Barrett, Giskin Day, Susan English, Chris Harris, Dr Jo Harris, Dariush Hassanzadeh-Baboli, Professor Jenny Higham, Dr Chris John, Professor Des Johnston, Mr Martin Lupton, Professor Alison McGregor, Professor Mary Morrell, Dr Sarvesh Saini, Professor Denis Wright.

**In attendance:** Bojan Cvijan, Eleanor Sheppard

**Apologies:** Jeremy Fernando, Pascal Loose, Paul Ratcliffe, Dr Mike Schachter

<b>1. Welcome and apologies for absence</b>	
	The Chair thanked members for attending and noted the apologies for absence.
<b>2. Minutes</b>	
AGREED:	That the minutes of the meeting held on 11 February 2015 be confirmed.
<b>3. Matters arising</b>	
REPORTED:	3.1. That all actions from the previous meeting had been completed or were in progress.
<b>4. Chair's actions</b>	
CONSIDERED:	<b>MSC1415-30: Chair's actions</b>
NOTED:	4.1. That the Chair had approved the representation of the two final years of the Medicine programme with 70 ECTS credits for the purposes of the Key Information Set (KIS). 4.2. That credit is only used notionally for Medicine programmes, but is required for the representation of the KIS. Seventy credits more realistically represents the longer duration of the years in question.
<b>5. Reports from Committees</b>	
CONSIDERED:	<b>MSC1415-31: Education Committee (Early Years)</b>
NOTED:	5.1. That under existing arrangements, for the purposes of merits and distinctions, five assessment components (the four themes and PBL) contributed equally. 5.2. That, for Year 1, it was proposed to move to a weighted model in 2015-16 so that the five components contribute on the basis of the number of teaching hours. 5.3. That the Basic Life Support pilot had been successful and would continue as a pilot so that resourcing could be reviewed. 5.4. That RefWorks training had been reorganised and moved forward in order to better support the new BSc practical assessment. 5.5. That participation in Living Anatomy continued to be a challenge. The pilot with fifth-year students providing near-peer teaching had encouraged participation but the timing was difficult for the fifth-years involved. This would continue.
AGREED:	5.6. That the changes to the weightings of the assessment components be approved with effect from 2015-16.
CONSIDERED:	<b>MSC1415-32: Education Committee (BScs)</b>

NOTED:	<p>5.7. That the Education Committee had considered a proposal to combine the specialist courses in Medical Humanities, History of Medicine and Death, Autopsy and the Law into a new discrete BSc pathway.</p> <p>5.8. That we lose a number of students who wish to intercalate externally on medical humanities/philosophy programmes.</p> <p>5.9. That the specialist courses were very popular with students who took them, and concern was raised that it would not be possible for the specialist courses to run in parallel with the new full pathway.</p>
AGREED:	<p>5.10. That the Committee supported the principle of developing the new pathway, but that further work needed to be done to ensure it would be resilient and that student concerns about the future of the specialist courses should be taken into account.</p> <p style="text-align: right;"><b>ACTION: Ms Giskin Day</b></p>
NOTED:	<p>5.11. That the Education Committee had considered a proposal to replace the viva voce examination for borderline candidates in the honours year with an algorithm model for deciding when students' classifications should be uplifted.</p> <p>5.12. That this would reduce the risk around the consistent application of standards inherent to the viva voce examination.</p> <p>5.13. That the honours year is already heavily assessed, and the viva voce examination contributed an additional burden.</p> <p>5.14. That the algorithm made provisions for individuals whose work had been affected by mitigating circumstances.</p> <p>5.15. That the experience in the Department of Life Sciences of moving to an algorithm model had been very positive.</p> <p>5.16. That the Education Committee had also considered a proposal to remove the performance component from the project grade.</p> <p>5.17. The measure created a risk of inconsistency and had limited impact on students' results.</p>
AGREED:	<p>5.18. That the changes be recommended to the Senate for approval.</p> <p style="text-align: right;"><b>ACTION: Secretary</b></p>
CONSIDERED:	<b>MSC1415-33: Education Committee (Years 3, 5 and 6)</b>
NOTED:	<p>5.19. That the Education Committee had considered a proposal for a new Foundations for Care module in the Year 2 clinical attachment. The module will provide more training around patient care and the multidisciplinary team.</p> <p>5.20. The the Education Committee had also considered a proposal for a 1% in-course assessment contribution to the Doctor, Patient and Disease course in Year 3. There is evidence that in-course assessment increases student engagement.</p> <p>5.21. That the Education Committee had also approved introductory teaching for Year 5 specialties during the Pathology course,</p>
AGREED:	<p>5.22. That the proposed Foundations for Care module and the 1% in-course assessment contribution to the Doctor, Patient and Disease course be approved.</p> <p style="text-align: right;"><b>ACTION: Secretary</b></p>
CONSIDERED:	<b>MSC1415-34: Student Services Committee</b>
NOTED:	<p>5.23. That in the light of the College's consensus statement on A Level reform, it was necessary for the School to change its standard offer for Medicine and Biomedical Science since it would no longer be possible to require an AS Level qualification.</p> <p>5.24. The Committee agreed that the School of Medicine's function was to train outstanding doctors and that academic qualifications at entry were not the only indicator of the skills and qualities needed in the profession. The School also uses the BMAT admissions test and the interview to assess these</p>

	<p>competences.</p> <p>5.25. That there were concerns from the student representatives about the importance of a diverse population entering the medical workforce and the potential impact on applications from candidates from Widening Participation backgrounds, should the College adopt a higher standard offer.</p> <p>5.26. That there were reputational and operational risks associated with the School having a lower offer than its peers.</p> <p>5.27. That changes to the Graduate Medicine entry requirements to enable students with a higher degree but not an upper second class undergraduate degree may have a negative impact on the breadth of knowledge students arrive with and their ability to cope with the programme.</p>
AGREED:	<p>5.28. That the preference was for a published minimum entry requirement of AAA for undergraduate Medicine with effect from 2017-18 entry, but that in future it would make use of differential offers tailored to students' individual contexts. However, conversations should take place to capture the views of the College senior management.</p> <p>5.29. That a framework would be developed to support interview panel chairs with making differential offers.</p> <p>5.30. That the BSc in Biomedical Science/BSc in Biomedical Science with Management would also have a minimum entry requirement of AAA.</p> <p>5.31. That both changes would be evaluated.</p> <p>5.32. That further consideration should be given to proposed changes to the Graduate Medicine entry requirements, with some detailed options analysis.</p> <p style="text-align: right;"><b>ACTION: Director of Admissions, Equality and Diversity</b></p>
NOTED:	<p>5.33. That Health Education England were requiring the introduction of 'Values Based Recruitment'. This would necessitate changes to the interview process, and even greater consistency in the management of panels.</p> <p>5.34. That to support this, it was proposed to reduce the professionalise the role of panel chair, reducing the number of chairs and ensuring they had protected time to undertake the role.</p>
AGREED:	<p>5.35. That the change be supported. Evaluation should take place post-implementation.</p> <p style="text-align: right;"><b>ACTION: Director of Admissions, Equality and Diversity</b></p>
<b>6. Items for consideration</b>	
CONSIDERED:	<b>MSC1415-35: Terms of reference and membership</b>
NOTED:	6.1. That there had been a small number of staff changes.
AGREED:	6.2. That the changes be approved.
	<b>ACTION: Secretary</b>
CONSIDERED:	<b>MSC1415-36: Heads of Year report</b>
NOTED:	<p>6.3. That there had been considerable dynamism and development in the School of Medicine's programmes over the past year.</p> <p>6.4. That change in the NHS remains a key theme and the School is actively responding to the requirement for increasing education in primary care.</p> <p>6.5. That the iPad pilot had been extremely successful and would roll out further in the coming academic year.</p> <p>6.6. That substantial revisions were being planned to the Biomedical Science programme in the light of student feedback. Plans were at an early stage and the detail would be shared with the Committee in due course.</p> <p>6.7. That the problem of financial hardship had become particularly acute in the final two years in the Medicine programme, during which the financial support available to them is extremely limited.</p> <p>6.8. That one of the major factors is the rising cost of rent in the private sector. The School is working with a range of organisations to mitigate these problems,</p>

	which are causing considerable stress and anxiety for some students at a critical stage in their education.
AGREED:	6.9. That thanks be recorded to Drs Janice Main, Nina Salooja and Mark Sullivan, who had all stepped down from key educational leadership roles in the past year.
CONSIDERED:	<b>MSC1415-37: Update and papers for approval from the Lee Kong Chian School of Medicine</b>
AGREED:	<p>6.10. That the following items be approved:</p> <ul style="list-style-type: none"> <li>• Phase 2 curriculum development</li> <li>• Assessment Strategy and Framework (Year 3)</li> <li>• Medical Education Research policies affecting students at LKCMedicine.</li> <li>• External Examiners for Year 3.</li> </ul> <p>6.11. That the following items be recommended to the Senate for approval:</p> <ul style="list-style-type: none"> <li>• Regulations for the Award of the Five Year Joint NTU/Imperial MBBS Degree Programme: to reflect curriculum assessment changes for Phase 1 and Phase 2.</li> <li>• Admissions and Health Screening Policies and Equality and Non-Discrimination Policy Statement – to reflect changes in the guidance from the Singaporean Ministry of Health with respect to the admission of students who test positive for Blood Borne Diseases in Medical Schools in Singapore.</li> <li>• LKCMedicine MBBS Examinations Regulations – to include enhanced guidelines on the security and confidentiality of examination papers; elaboration on the method of marking for different types of examination questions; an update to the structure of the sub-boards of examiners.</li> </ul> <p style="text-align: right;"><b>ACTION: Secretary</b></p>
<b>7. Quality Assurance and Enhancement</b>	
CONSIDERED:	<b>MSC1415-38: SOLE</b>
NOTED:	<p>7.1. That the pilot of the replacement candidate had continued throughout the year and had been extremely successful.</p> <p>7.2. That there were some isolated areas where feedback had been less positive than expected. Action was being taken to bring about improvements.</p>
CONSIDERED:	<b>MSC1415-39: Distribution of honours degree classifications</b>
NOTED:	<p>7.3. That the Faculty of Medicine results were in the normal range.</p> <p>7.4. That there had been a year-on-year increase in the overall number of students who had received 'good' degrees. This was not felt to be a cause for concern, but the Committee would keep this trend under review.</p>
CONSIDERED:	<b>MSC1415-40: Student progression data: undergraduate failure rates 2013-14</b>
NOTED:	7.5. that the Faculty of Medicine results were in the normal range and were not cause for concern.
CONSIDERED:	<b>MSC1415-41: Updates to MBBS competence standards</b>
NOTED:	7.6. That changes were proposed to clarify that students must be willing to perform clinical procedures on male or female patients, as necessary/appropriate.
AGREED:	<p>7.7. That the changes to the competence standards for the Medicine programmes be approved.</p> <p style="text-align: right;"><b>ACTION: Secretary</b></p>

<b>8. External examiners</b>	
CONSIDERED:	<b>MSC1415-42: Summary of external examiner reports on undergraduate programmes in 2013-14</b>
NOTED:	8.1. That there were College-wide themes of inconsistency in marking, including the annotation of scripts and second marking.
AGREED:	8.2. That these issues would be flagged with the Chairs of the Exam Boards <b>ACTION: Director of Curriculum and Assessment and Director of Undergraduate Science</b>
RECEIVED:	<b>MSC1415-43: External examiners due to be replaced for the 2015-16 academic year</b>
RECEIVED:	<b>MSC1415-44: Arrangements for considering undergraduate external examiner reports</b>
<b>9. Any other business</b>	
RECEIVED:	<b>MSC1415-45: Foundation Programme recruitment (2015 entry)</b>
	<b>Outgoing student representatives</b>
NOTED:	9.1. That the Committee thanked Pascal Loose and Dariush Hassanzadeh-Baboli for their contributions to the Committee over the past year.
<b>10. Papers for information</b>	
RECEIVED:	10.1. MSC1415-46: Centre for Co-Curricular Studies annual monitoring report 10.2. MSC1415-47: Senate summary report
<b>11. Date of the next meeting</b>	
REPORTED:	To be announced.