Internal Periodic Review
Clinical Education
Postgraduate Taught Provision within Edinburgh Medical School

31 March – 01 April 2021

Section A - Introduction

Scope of the review

Range of provision considered by the review:

Programme	Programme Code	Type
Clinical Education (Online Learning) (MSc)	PTMSCCLIED1F	PG
Clinical Education (Online Learning) (ICL) (MSc) - 2-6 Years	PTMSCCLIED1U	PG
Clinical Education (Online Learning) (MSc) (Part-time)	PTMSCCLINE1P	PG
Clinical Education (Online Learning) (ICL) (PG ProfDev) - 2 Years	PTPDVCLIED1U	PG
Clinical Education (Online Learning) (PgCert) (Part-time)	PTPGCCLIED1P	PG
Clinical Education (Online Learning) (ICL) (PgCert)	PTPGCCLIED1U	PG
Clinical Education (Online Learning) (ICL) (PgDip)	PTPGDCLIED1U	PG
Clinical Education (Online Learning) (PgDip) (Part-time)	PTPGDCLINE2P	PG
Clinical Educator Programme	N/A	PG

The Internal Periodic Review of Clinical Education consisted of:

The University's remit for internal review (listed in Appendix 1)

The subject specific remit for the review, consisting of the following items**:**
- **Teaching Support Systems:** Systems within which postgraduate programmes operate; quality of online teaching and student engagement; top-down decisions regarding technology and regulations; technology through the lens of pedagogy and student experience; identifying possible actions in relation to the current provision of technology; the strategic purpose of wholly online provision in comparison to hybrid and their approaches; ensuring the voices and experiences of online educators within Clinical Education (ClinEd) can be heard and inform developments in this area; the ability of the University's technological systems to accommodate large numbers of learners while supporting educators; the limitations of centrally-supported systems and the subsequent impact on collaborative approaches and community building; availability of learning technology support.
- **Managing Growth:** Staff resilience; additional workloads in supporting colleagues in the move to online teaching; academic staffing on the Clinical Educator Programme (CEP); the tension between teaching quality and resources for staffing, while maintaining and developing provision; managing further growth while protecting workloads and well-being existing staff; the risk to educational quality due to growth; the CEP's growth potential and the offer of micro-credentials via online provision.

The Reflective Report and additional material provided in advance of the review.

The visit by the review team including consideration of further material (*listed in Appendix 2).*

The final report produced by the review team.

Action by the School and others to whom recommendations were remitted following the review.

Membership of review team

Convener	Professor Fiona Mackay School of Social and Political Science
External member	Mrs Alison Pettigrew Queen Mary University of London
Internal member	Professor Scott Pirie The Royal (Dick) School of Veterinary Studies
Student member	Caitlin Hogg Moray House School of Education and Sport
Review team administrator	Patrick Jack College of Arts, Humanities and Social Sciences

Situate Subject Area/School within its College

Postgraduate clinical teaching in the College of Medicine and Veterinary Medicine (CMVM) sits within the Medical Education Unit, alongside the undergraduate medical programme (MBChB).

The Clinical Educator Programme (CEP) is a faculty development programme that is open to anyone involved in teaching undergraduate (UG) medical students at the University of Edinburgh.

Physical location and summary of facilities

The ClinEd programme is delivered wholly online. The Medical Education Unit is of the opinion that there is a general lack of physical space on campus for running online tutorials/meetings.

Prior to the COVID-19 lockdown, the Postgraduate Medical Education Group ran a wide range of in-person CEP workshops available year-round on many dates and in many locations. CEP tutors travelled around South East Scotland to facilitate workshops in various health board locations. Teaching observations were carried out in the participants' own workplaces and at a time to suit them. Following the COVID-19 lockdown, academic staff on the CEP could not meet participants in person nor travel, therefore the programme been fundamentally restructured for online delivery and this period of redevelopment remains ongoing.

Date of previous review

Clinical Education was incorporated within a wider PPR, which covered four online programmes, in 2014/15.

Reflective Report:

The Reflective Report was primarily prepared by:
Gill Aitken, Director for Postgraduate Education
Debbie Spence, eProgramme Support Officer for the MSc Clinical Education

Additional input was provided by:
Tim Fawns, Senior Academic Co-ordinator & Deputy Clinical Education (ClinEd) Programme Director
Derek Jones, Senior Academic Co-ordinator & PhD ClinEd Programme Director
Jane Hislop, Academic Co-ordinator ClinEd
Ian Lee, CEP Tutor
Maia Forrester, CEP Tutor
Fiona Willox, CEP Administrator

The Reflective Report was shared with all academic and professional service staff associated with the ClinEd and CEP programmes, as well as students and graduates of both programmes. The Report was also shared with other interested parties, specifically the MSc Steering Group, CEP faculty members and the senior management team of the wider College.

Sections 2.1 - 2.4 of the Reflective Report were posted on the MSc Learn site in a space accessible by all those currently matriculated on the ClinEd programme. These sections were also shared with a number of CEP participants and faculty. Due to current workload pressures, the consultation period was less than one week.

Section B - Main Report

1 Strategic Overview

ClinEd is delivered wholly online and has broadened its focus to clinical education to encompass all healthcare professions. It is currently the largest online postgraduate programme within CMVM. CEP is a faculty development programme that is open to anyone involved in teaching undergraduate medical students at the University of Edinburgh. It can be accessed by NHS and university staff throughout South East Scotland. From 2020, the programme has been fundamentally restructured for online delivery. CEP is also used by NHS doctors involved in postgraduate supervision of trainee doctors and forms an important part of General Medical Council Recognition of Trainer (RoT) for both undergraduate and postgraduate roles.

The ClinEd and CEP teams were amalgamated at the end of 2020 into one Postgraduate Medical Education Group. Both ClinEd and CEP are complementary in their offering and form part of a continuum. For example, CEP Level 3 can be used as Recognition of Prior Learning for the MSc ClinEd programme. The Group is exploring how it can further integrate its programmes and to further facilitate seamless progression for their students. This incorporates not only the CEP and ClinEd programmes, but also undergraduate and professional doctorate provision across the wider Medical Education Unit. The review team **commend** the Director for Postgraduate Education, Dr Gill Aitken, and the Director of the Edinburgh Medical School, Professor David Kluth, for their strategic and integrated vision of how they want to see Clinical Education moving forward. The review team recognises that a clear vision has been developed around an integrated journey, as well as the strategic imperative of the merger of the CEP and ClinEd programmes.

Both components of the team have developed in different directions in the past, however it has been identified that a clear direction of travel for both teams would be advantageous in building a coherent identity and a more closely aligned structure. The Group highlights that the amalgamation needs to be reoriented in order to ensure that students are signposted to the level of provision that would best suit them and the reasons why, as part of a clear pathway. The review team **commends** the leadership of the Director for Postgraduate Education, Dr Gill Aitken, and her excellent team-building achievements in very challenging circumstances around a strategic vision and strong underpinning values.

Staff in ClinEd and CEP are involved in discussions to help shape the articulation of this vision and the resources required to help achieve this. The review panel **recommends** that the Group further integrates the administrative teams of ClinEd and CEP, and that an exchange of best practice is ensured, while remaining cognisant of their distinctiveness. Moving forward, efforts should be made to ensure that CEP is incorporated into quality planning processes.

The review team further **recommends** that the Group delivers an administrative structure which incorporates a team who are clear on the roles and responsibilities within the Group and across the wider College. In order to support this, a business case should be created for a sustainable staffing model.

As part of the ClinEd team's commitment to staff development, a distributed leadership model has been adopted on the ClinEd programme where all team members lead aspects of the programme and all are involved in decision-making and policy-making. Although the Director for Postgraduate Education has ultimate responsibility for the ClinEd programme, in reality the hierarchy is flat, and both academic and professional services members of the team feel that their contributions are heard and equally valued. Such an approach ensures a degree of resilience in a small team. Plans are being developed to extend the model across the wider Group. Dr Gill Aitken's distributed leadership model is to be **commended.**

ClinEd has its own devolved business plan that funds all staffing and other associated costs. This has aided the development of sustainable strategies for growth while maintaining quality. CEP is primarily funded through the Additional Cost of Teaching (ACT) monies. ACT is part of the mechanism by which the Scottish Government (SG) funds the training of medical students in the NHS. ACT funding is transferred from SG to NHS Education Scotland (NES) and from there to the NHS Boards. The University has no direct control of this income stream and it was reported that ACT funding only covers some staff costs for CEP. Additional funding is coming under external pressures, particularly from the Scottish Government who are exploring where financial savings can be made, while existing funding is prioritised for undergraduate teaching. Funding is opaque which makes long-term planning for the CEP difficult. The high mobility of clinicians results in difficulty in quantifying funding in the long term.

The College of Medicine and Veterinary Medicine (CMVM) has been operating within severe budgetary constraint over the past three years, particularly during the last six months. Senior management within CMVM are highly supportive of the Group's strategic direction of travel, however College financial resources have recently been directed at undergraduate provision. The College understands that further efforts are required in order to achieve a unified financial structure across the Group, and that financial modelling will be required in order to ensure that the amalgamation progresses effectively. However, due to the current financial climate, levels of College-level investment in the immediate term are challenging.

Taking into account the recent merger and the evident issues of sustainability on both programmes in terms of meeting both urgent and projected demand, the review panel **recommends** that College revisits its business planning models and works proactively with the Group around short and medium-term investment, with clearer information around funding streams and resourcing models. This recommendation underlines the importance of producing a Workload Allocation Model for workload and resource planning, and to underpin a business case for a sustainable staffing model. Discussions between the Group and College should be held to underpin this and to gain further clarity on funding streams, maximum capacity and the resourcing model.

The Group is concerned about stated institutional ambition regarding the growth of the online student population. For instance, the University's 2030 Strategy[1] highlights that online learning platforms will be key in delivering growth. However, the Group is already in a position where growth is a challenge to manage. The quality and marketability of the ClinEd programme relies on being able to offer a personalised approach to Masters-level study, which uncontrolled growth may undermine. This in turn could impact on the reputation of the programme and the recruitment and retention of students. It was highlighted to the review team that there is a disconnect between the finances being allocated to the Edinburgh Futures Institute and the Distance Learning at Scale project, in comparison to similar existing provision within Clinical Education.

The ClinEd programme is widely recognised to be world leading within the growing proliferation of such programmes worldwide. The programme team are increasingly recognised for their scholarship in the under-explored area of online postgraduate education. The ClinEd programme should be **commended** on delivering quality provision with high levels of student satisfaction and international external recognition. The CEP programme should be **commended** on delivering quality provision with high levels of student satisfaction and external recognition.

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[1] https://www.ed.ac.uk/about/strategy-2030

2.1   The Approach to Enhancing Learning and Teaching

2.1.1 *Curriculum design and development*

All courses on the ClinEd programme are designed and reviewed by the named course organiser in collaboration with the wider team and with further consultation with the programme steering group. The course design process includes consultation with student representatives around the perceived attractiveness of the course. Existing courses are reviewed and developed every academic year. Alongside this, the programme team holds frequent discussions about all aspects of practice, including curriculum design at course and programme level. The process of programme development within CEP has been organic and incremental, in response to a range of drivers from within the University, territorial health boards and the General Medical Council.

During the Covid-19 pandemic, academic staff within the ClinEd programme oversaw the design and creation of three new 20-credit courses, which together formulate a new PG Cert in Online Professional Education. Twenty students enrolled on first iteration and the programme has been well evaluated. The design and operation of this programme was achieved entirely by colleagues within the Group and provides a strong example of the outstanding practice and collegiality that informs the ClinEd team's programme design. The review team **commend** the collegiality of staff within Clinical Education and their expert contribution the University's ongoing pivot to online learning. This contribution has gone above and beyond within a context where staff are very hard-pressed.

The CEP programme team works closely with NHS Boards in South East Scotland and the Medical Education Directorate of NHS Lothian. The NHS influences the design of CEP content via their focus on clinical supervisors obtaining RoT and obtaining CPD qualifications that align to their needs. Moving forward, the Group plans to introduce a formalised and transparent process for regularly reviewing the CEP programme and associated planning of sustainable development. Existing elemental course feedback needs to be collated and synthesised on an annual basis, and a system of whole programme feedback needs to be introduced.

It was highlighted to the review team that an advantage of the amalgamation is that the expertise around the process and systems used by the ClinEd team will help support these ongoing developments, particularly around pedagogical research into online medical education, which is an area of focus that the NHS is keen to develop. The Group hopes this will result in making negotiations with external stakeholders more straightforward and that NHS colleagues will become much more involved in how CEP is shaped in the future. In order to create further benefits in the context of curriculum development, the review panel **recommends** that the Group clarify what the shared vision is for the programmes; their commonalities, their distinctive elements and how these fit within the amalgamation of the ClinEd and CEP programmes. It is important that a parity of esteem is developed between ClinEd and CEP.

2.1.2 *Consistency of programme design and learning outcomes with Subject Benchmark Statements (relevant for UG and PGT programmes) and Scottish Credit and Qualifications Frameworks (SCQF)*

The ClinEd team consists of experienced postgraduate educators with expertise in designing appropriate learning outcomes, standard setting and curriculum design. Senior academic staff have been involved in successful course and programme approvals. Academic staff on the ClinEd programme are familiar with frameworks such as the SCQF and they cross check any new designs of courses, assessments and learning outcomes with the guidance for those frameworks. The PG Cert in Clinical Education is accredited for Fellowship of the Higher Education Academy and is part of the Edinburgh Teaching Award Framework.

The CEP programme was originally designed at SCQF Level 11. As new elements of the programme have been developed, the CEP team have ensured that they are consistent with these same frameworks and benchmarks. Prior to the programme changes in 2020, the CEP submitted all course descriptors to the Royal Colleges for their approval and accreditation. The same course of action has not been followed for CEP's new courses developed since 2020 due to the Royal College of Physicians' new charging system for accreditation, which is unaffordable.

2.1.3 *National and international good practice e.g. how does provision compare with similar practice outside the UK*

The review panel heard that staff within Clinical Education are well situated within the wider academic community, both within the UK and increasingly internationally. The Association for the Study of Medical Education (ASME) has requested that the Director for Postgraduate Education establish a special interest group for postgraduate healthcare education. This group will be open to all relevant staff associated with the medical education field. The Group is seeking funding for a longitudinal study around the impact of these online programmes. The Programme Director, Deputy Programme Director and PhD Programme Director on the ClinEd programme are External Examiners for similar programmes elsewhere in the UK, which enables them to informally benchmark standards within the wider sector and take part in regular discussions of practice.

The Group is currently undertaking a research project examining faculty development in medical schools across Scotland, which will help the Group's understanding around how CEP provision compares with similar practice in other parts of the country. The recent restructure has enabled the Group to apply the emphasis on educational scholarship, modelled by the ClinEd team, to faculty development more generally and the Group supports the development of CEP academic staff in this area.

The Covid-19 pandemic has helped accelerate the Group's connections internationally. As a result, academic staff within Clinical Education are of the opinion that they receive a higher degree of recognition for their work from outside of the University as opposed to internally. The external profile of academic staff on the ClinEd programme and how deeply connected and embedded they are within online clinical and medical education communities is to be **commended**.

2.2 Assessment and Feedback

2.2.1 *Assessment methods*

The ClinEd programme has recently introduced new forms of assessment to broaden the forms of knowledge that students can demonstrate through their coursework and to allow more diversity and creativity in the application of concepts to the students' working contexts. Alongside written assignments, the ClinEd team has introduced recorded presentations and various forms of peer assessment. The review panel received positive feedback from students in relation to assessment on the ClinEd programme. Students particularly appreciated how helpful the formative assessments proved to be and how all forms of assessments are well aligned to learning approaches.

Assessment on the third year of the ClinEd programme consists of a 60-credit dissertation. Long-term discussions have taken place within the Group and beyond around the challenges of the dissertation, particularly in relation to managing academic supervision and double marking. Many students on the programme are well advanced in their career and are not looking to pursue independent educational research or doctoral studies. The Group therefore wants to be able to provide a flexible choice of assessment in Year 3 to enable students to select a form of assessment that it is most suited to them and their career

aspirations. The Group has pursued alternative forms of assessment and, while Senate Education Committee has approved this, further University-level approval is required at the Academic Policy and Regulations Committee (APRC).

In terms of alternatives to the 60-credit dissertation, the Group has suggested a form of quality improvement piece of work such as an audit. A 40+20 credit model consisting of a work based project and planning element was previously rejected by APRC. However, there are existing programmes within CMVM where the final 60 credits are composed of taught courses. Student feedback has also indicated that some junior doctors find it challenging to undertake an extensive 60-credit research study as they change NHS Trusts every three months and as a result are contemplating deferring their third year. Obtaining ethical approval for empirical research studies within the dissertation timescale is a common issue experienced by students on the MSc ClinEd programme. Student feedback further highlighted that three 20-credit courses or a 40+20 credit model would be attractive alternative options for some students in that position.

The review panel **recommends** that urgent attention be given by the University's Academic Policy and Regulations Committee (APRC) to enable greater flexibility in the 3rd year of the MSc Clinical Education programme in relation to considering the approval of alternatives to the final 60-credit project. Consideration of this should be in line with relevant Learning Outcomes and relevant benchmarking, as well as precedents in other programmes across the institution.

Level 3 of the CEP includes a reflective portfolio, which is a written assignment where participants reflect on their development as educators in light of their learning from the programme. CEP tutors encourage those undertaking the portfolio to attend support sessions at least 6 months in advance to develop their understanding of reflective writing and to discuss their ideas with peers and with the CEP tutors. The CEP team would like to consider alternative forms of formative assessment to complement or replace the existing formative assessments within the portfolio. They are particularly interested in shorter, more incremental assessments, which could give the opportunity for feedforward, such as short reflective blogs.

The review panel received feedback highlighting that some students are deterred from progressing onto Level 3 of the CEP as they are overwhelmed at the prospect of undertaking the reflective essay. There is a feeling amongst some students that the developmental value of this exercise is not as high as the assessments on Levels 1 and 2 and there is a possible danger that the reflective essay is regarded as a tick-box exercise in order for students to obtain the Level 3 qualification. It was suggested that reflective blogs could be of more developmental value than a reflective essay in the context of Level 3 summative assessment. The review panel therefore **recommends** that the Group offers an alternative form of assessment to the Year 3 CEP reflective essay, for example reflective blogs.

2.2.2 *Approach to, effectiveness and timeliness of providing feedback to students to include a commentary on feedback turnaround times (Feedback on formative and summative in-course assessed work will be provided within 15 working days of submission, or in a time to be of use in subsequent assessment, within the course, whichever is sooner, Regulation 16 Taught Assessment Regulations 2016-17)*

Staff on the ClinEd programme have consistently provided comments within 15 working days of all formative and summative assessments, despite rapidly growing numbers and considerable pressure on staff. The ClinEd team have shared approaches to feedback within the institution more widely and the use of audio feedback in particular has been recognised as good practice in previous quality reports. Considerable written feedback is provided via the discussion board on an ongoing basis. This has been augmented, with podcasts providing students with insight into marking, feedback and assessment design processes. Current on-programme students highlighted to the review panel that the feedback they received from tutors has been key to their effective learning. Academic staff

who met with the review team highlighted that, in the context of continued growth within Clinical Education, the approach to quality and timely assessment feedback is not easily scalable without further investment and additional staffing resources. Expectations need to be managed in terms of the impact on assessment feedback in response to growing student numbers, particularly on year 1 of the ClinEd programme.

As a faculty development programme, most feedback on the CEP is formative in nature and is often informal and verbal, through the discussions at workshops, online sessions, and during teaching observations. Formal, written feedback is provided after teaching observations, which summarises the verbal discussion. While it is the most time and labour-intensive element of the CEP, the review panel heard that there was a consensus amongst students that the teaching observation is the most beneficial form of assessment and that the subsequent feedback session is particularly useful.

2.3 Supporting students in their learning – all aspects of support relevant to students' learning including:

2.3.1 *Academic and student support structures and mechanisms*

ClinEd follows the Personal Tutor (PT) scheme as set by University. Students on the ClinEd programme are allocated a PT at the commencement of their studies and the PT continues in this role throughout the student's period of study. PTs are allocated randomly within the ClinEd team, with approximately 300 students being split between five PTs. This ratio of approximately 60 students per PT is unsustainable, particularly in the context of increasing student numbers.

ClinEd's eProgramme Support Officer, Debbie Spence, is the programme's first full-time administrator and she has substantially developed the role of Student Support Officer. Debbie is a member of the University Student Support Forum, which facilitates peer support, and Debbie is able to discuss difficult cases with the wider ClinEd team. Pre-Covid, there was a range of examples from across the globe related to student support needs, for example students experiencing bereavement due to losing colleagues to fever in Africa and students in military zones with poor internet connection. In response to these challenges, all course content is now downloadable and possesses subtitles, demonstrating that the ClinEd team has successfully taken steps to mitigate these difficulties.

Prior to the COVID-19 lockdown, the CEP tutors and administrators regularly engaged personally with all participants on the programme at workshops and teaching observations. The sudden move into the online space because of the pandemic has been challenging for the CEP team, as face-to-face interactions have ceased. However, this has developed into a positive experience, as the CEP team have become well acquainted with online learning, which, in turn, has afforded many opportunities for meaningful peer support. Looking to the future, the CEP team are keen to learn about how best to support individuals and communities in the online space.

2.3.2 *Support for key stages and transitions in the student journey: e.g. pre-arrival, induction, ongoing transition support, transition to and from study abroad.*

The ClinEd programme's eProgramme Support Officer seeks to communicate rapidly with students in the event of any issues raised and to support them as best she can. Debbie Spence and the ClinEd team are flexible around how best to support students. Working within the parameters of University's regulations, advice is provided around interruptions, withdrawals and students returning to the programme. A system is in place whereby a generic inbox is used and Debbie's planned annual leave is included in her email signature, ensuring that students are signposted to relevant colleagues in her absence. Standard email templates are also shared with PTs so that they are in a position to respond to student correspondence when required.

In terms of good practice throughout the student journey, the ClinEd team engage with students from the point of enquiry right through to graduation and beyond. The team offer a discussion session with prospective students and tutors, as well as the offer of a peer mentor before the student commences their studies. Applicants are also provided with assistance in navigating the admissions process. The ClinEd team manage assignment submissions proactively, for instance colleagues can identify when a student has not submitted and will contact the student to check whether any support can be provided. Alumni are contacted via newsletters in order to ensure that communication from the ClinEd team continues beyond graduation.

As well as taking on the responsibility of Student Support Officer on the ClinEd programme, the eProgramme Support Officer additionally manages the admissions process, the induction programme for new students and helps further build the student community. She additionally supports the academic team in managing the Learn courses, assessment and peer mentoring, and she is involved in shaping programme development and future planning. The work of the administrative staff on both the ClinEd and CEP programmes is to be **commended**. The review team particularly note the work of the eProgramme Support Officer, Debbie Spence, and recognise her centrality to the success of the ClinEd programme, both in terms of administration and student support. The review team further recognise her personal approach throughout the student journey, from point of enquiry to graduation and beyond.

2.3.3   *Engagement with the [Student Mental Health Strategy](#)*

The Group is particularly mindful of the mental and physical health of students and staff in the current context. Many of the Group's students are frontline healthcare workers who have been under immense pressure during the Covid-19 pandemic. Alongside this, the physical and social environments in which students learn are, in general, less conducive to study. It is noted that the move to a centralised system for approvals of extensions of study in the middle of a pandemic, and the considerable teething problems associated with this system, have added to the pressures experienced by staff and many students on the ClinEd programme. As a result, the ClinEd team have adopted an approach to be as flexible and reassuring as possible with their expectations of their students in the current context.

Prior to 2020, the CEP had developed workshops with a 'wellbeing' theme, partly in response to the personal needs of CEP participants. The new workshops included 'Compassion for Clinical Educators', 'Mindfulness for Clinical Educators' and 'Caring for Self'. The content was developed by drawing on the CEP's network of contacts and supports across the NHS and the University.

2.3.4   *Other student support provision relevant to context e.g. international students, widening participation students, visiting students*

The flexible nature of ClinEd's programme delivery through offering tutorials in the evenings and providing recordings of tutorials helps support students who are juggling caring and work responsibilities to participate fully on the programme. The CEP is free to all those who are eligible to register. Diversity and inclusivity are a current focus of the CEP team who are developing resources on those topics.

Students informed the review panel that they greatly value the cost-free workshops on the CEP, and that they are accessible in terms of timing and location. This flexibility against a busy clinical workload has been highly valued by students. Students on the ClinEd programme appreciate the ability to participate in programme activities while simultaneously working. The flexibility of the programme and the consequent ability for students to continue the programme online has been invaluable. Students further highlighted that the online format of the ClinEd programme enables international students to access the programme,

which in many cases would not be possible if the programme was campus-based, and that this is regarded amongst students as a strong characteristic of the ClinEd programme.

2.4   Listening to and responding to the Student Voice

2.4.1 *Engaging students in their learning, including building and supporting academic communities*

Students on the ClinEd programme informed the review team that a sense of an online community has been developed, within which students take great value from meeting students of other nationalities on a weekly basis and look forward to meeting their peers. However, ClinEd students also explained that it is initially difficult to build an online community, as there is a large number of students across different time zones. Student feedback also indicated that communicating via discussion boards can feel distant in the sense that they cannot put faces to names. A WhatsApp group was set up for the current cohort and this has proved useful for community building. Discussion within this group has varied from formal discussions around course materials to informal conversation. Students have the ability to dip in and out of this non-mediated peer discussion and it was useful for checking in on classmates during the Covid-19 pandemic. It was highlighted that an informal meeting at the beginning of the ClinEd programme would be a useful initiative that would have a positive impact on building a student community. This could take the form of an icebreaker session where a student could introduce their country or share something unrelated to the programme. The review panel suggests that the programme team should explore the creation of this informal icebreaker session.

In terms of CEP, students highlighted that they are impressed with the range of material and opportunities available on the programme. It is helpful that the programme enables students to be recognised as supervisors in their professional medical roles. CEP workshops are highly interactive and updated frequently. It is felt that the workshops are not simply a tick box exercise; rather, students gain a deeper insight into medical education and the CEP tutors have an extensive knowledge of educational theory. The volume of work is realistically achievable alongside working in a professional medical role across different health boards. Students highlighted that they benefit from the diversity of the cohort in terms of profession, career stage and geographical location. Students also highlighted that building student community on the CEP does have certain challenges. For instance, workshop attendees are often rushing and find it difficult to protect their time. While the workshops themselves provide a good place for networking and meeting colleagues, students find it difficult to follow up on these discussions if they are not on the same workshop the next time. Students noted that working groups within CEP cohorts could be encouraged in order to enhance a community of practice. The review panel suggests that academic staff on the CEP consider this approach.

Both the ClinEd and CEP programmes are to be **commended** for their success in creating and maintaining communities of online learning and practice. The review team additionally recognises the flexibility and student-centeredness of their approaches and the attention to the diverse needs of students across career stage, specialism and geographical location.

2.4.2 *Mechanisms for listening to and responding to the student* voice

On the ClinEd programme, there is student representation at the programme steering group and the programme team are in frequent communication with student representatives. Staff-student liaison committee (SSLC) meetings are held on a regular basis, which are useful in gaining feedback from students. However, the programme team's day-to-day practice of ongoing informal commination with students is more valuable in terms of listening to the student voice than more formal feedback structures. Students emphasised this point to the review team, where it was noted that some students do not engage in more formal feedback activity due to the continuous nature of more informal feedback opportunities on the ClinEd programme.

The CEP programme team respond to programme participants' feedback largely through dialogue with them. The CEP team also actively solicit and respond to feedback about the programme from their large pool of faculty, as they have a good awareness of the different educational needs of different departments and specialties across South East Scotland. They therefore play a key role in the development and delivery of the programme. Student perspectives are included during course development. The CEP team also familiarise themselves with the student feedback obtained from the National Student Survey (NSS) and discuss the most important trends with participants during workshops.

Students on the CEP reported to the review panel that they are unsure whether there is a formal process for students to raise issues. Rather, some students find that academic staff on the CEP are so approachable and responsive that many students will opt to raise any issues with them directly. Students who have subsequently become faculty members upon completion of the CEP have enhanced this approach. Formal feedback on each workshop is collected, reviewed and enhancement-led changes are made in response.

The ClinEd programme consistently receives outstanding Postgraduate Taught Experience Survey (PTES) scores, scoring 100% over the past two academic years. However, the programme team does not think that the survey provides particularly useful information in comparison to the Group's own evaluation process. The demonstrable and well-evidenced high levels of student satisfaction and student experience, and the loyalty engendered to both the ClinEd and CEP programmes, is to be **commended.**

2.4.3   *Closing the feedback loop on the actions taken in response to student feedback*

Student opinions are collected in a number of ways, including discussion boards, email, and student representatives collecting comments from SSLCs. The ClinEd and CEP programme teams subsequently discuss this at team meetings and communicate Group decisions to students via student representatives. Student feedback is useful in terms of demonstrating why decisions are evidence-based.

2.5   Accessibility, Inclusivity and Widening Participation

2.5.1   *Best practice in the Implementation of the [Accessible and Inclusive Learning Policy](#) including approaches to making the curriculum accessible for all students*

In terms of setting fee levels on the ClinEd programme, it was reported to the review team that tuition fees for this programme are higher than comparable programmes at other higher education institutions. Members of staff in the Group feel that further consideration needs given to the nature of the perceived added value of the ClinEd programme, aside from the University of Edinburgh's reputation. ClinEd staff members find it challenging to justify the tuition fee rates and this creates tension between ClinEd staff members and senior colleagues at the College and University level. The ClinEd team would like to observe more funds gained from tuition fees being recycled into scholarships throughout Clinical Education. Funds ought to be allocated appropriately and any potential detrimental impact on enhancing widening participation should be taken into account when setting tuition fee rates.

2.5.2   *Consideration of strategies for articulation and advanced standing, for the recognition of prior learning and through flexible pathways to awards including Continuing Professional Development (CPD) and work-based learning.*

Each year, the ClinEd programme accepts a number of recognition of prior learning (RPL) cases. Since 2018/19, the Group have offered a postgraduate professional development route that allows students to take individual courses for credit - an option that has been

taken by 12 students in 2020/21. The Group has also offered many CPD opportunities, including the CEP programme, a summer school, and two courses in online professional education to support the efforts of CMVM lecturers to design and teach online. The ClinEd programme team has postponed running these courses externally due to excessive staff workload.

2.6 Development of Employability and Graduate Attributes

2.6.1 *Employability embedded in the curriculum e.g. work based learning*

Participants on the ClinEd programme are already working in professional roles; however, the Group supports their career advancement by aligning the programme to professionally relevant bodies such as AdvanceHE and the Academy of Medical Educators. CEP participants are in a similar position to those on the ClinEd, as they are already in employment. Engagement with each component of the programme contributes to an individual's continuing professional development. This can be used as supporting evidence at annual appraisals and clinical job planning meetings in their professional roles.

2.7 Supporting and developing staff

2.7.1 *Approach to Continuing Professional Development (CPD) to enhance Learning and Teaching e.g. Higher Education Academy (HEA), Postgraduate Certificate in Academic Practice (PgCAP), The Edinburgh Teaching Award (EdTA).*

Academic staff within Clinical Education actively participate in the HEA and EdTA. Six members of staff from both CEP and ClinEd are Senior Fellows of the Higher Education Academy. All other academic staff are either working towards, or have recently achieved, their Senior Fellowship. Four members of academic staff within the Group have additionally undertaken mentorship roles in the EdTA, while the Director for Postgraduate Education and the Deputy ClinEd Programme Director are also members of the University's EdTA Adjudication Panel. However, staff morale is low in terms of the perceived lack of institutional recognition and reward of academic staff within the Group, particularly in relation to staff support of learning and teaching initiatives within the .institution. This incorporates both financial and career progression rewards, as well as more formal recognition for outstanding teaching. Similarly, the ClinEd team have been nominated for the Advance HE Collaborative Award for Teaching Excellence (CATE) by the institution, with little in the way of internal recognition for the team of this notable achievement. As mentioned in section 2.1.1, during the Covid-19 pandemic, the Group developed a new PG Cert in Online Professional Education. This was achieved entirely by colleagues within the ClinEd team. No input or support was received from College, nor has the programme team received any formal recognition of the considerable efforts involved in this or acknowledgement of their success in creating this PG Cert programme. Low staff morale resulting from a lack of wider institutional recognition was a contributing factor in the decision of one of the three staff who developed the PG Cert in Online Professional Education to leave the University.

The College's Dean of Clinical Medicine and the Director of the Edinburgh Medical School highlighted that a challenge exists within the wider culture of the Medical School in terms of recognising the excellent teaching work undertaken at both undergraduate and postgraduate levels. This is a sector-wide issue whereby tensions persist between research and teaching. Institutions must recognise the value of both and that they are reciprocal. The Head of College and the Dean of Clinical Medicine are committed to reflect this in the development of College plans and structures in the years ahead in terms of recognition, staff resourcing and progression planning. The review team **commends** the academic staff on both the ClinEd and CEP programme for their commitment, expertise and their collegiality.

2.7.2 Ongoing development and support throughout academic career

The review panel was informed that the College, including the Group, does not currently operate a workload allocation model (WAM) for postgraduate or online teaching. On a management level, difficulty was reported in terms of identifying what kind of workload model could be introduced to support staff workloads. Current financial constraints have resulted in uncertainty around staff workloads. Being able to record unsustainable workloads could be used to justify further staff recruitment. Only the Head of College can approve the advertising of new posts within the Group, even if they are included in the Group's business plan. The retrospective nature of planning within the College means that the Group cannot proactively plan ahead in terms of staff resourcing. While there have been successful proposals to recruit new academic staff based on projected programme growth, in reality staff numbers have failed to 'catch up' with growth. Therefore, the same understaffing issues have persevered. This was reported as being part of a wider challenge regarding the organisation of teaching in the Medical School, with the result that staff are being required to work an excessive number of hours. This could be a particular challenge in the future across the College if the University pursues its aspirations of developing online distance learning provision on a wider scale. The specific nature of working within online provision does not appear to be adequately reflected in the workload models currently in use within the University. Staff feel that the current model should consider this. Alternatively, a separate model for staff working on online programmes could be created. Excellent PTES scores do not reflect the impact on staff associated with the provision and maintenance of high quality educational material. Staff reported chronic overworking and this has been accentuated over the past year at both postgraduate and undergraduate levels within the Unit.

From the perspective of CEP, quality is at risk due to minimal flexibility in academic staff workload. Academic staff on the CEP highlighted that their inability to accept work-related requests from colleagues in NHS Boards and Trusts could quickly jeopardise the reputation with these stakeholders. Specific requests from heads of clinical specialties results in the allocation of high workloads to CEP academic staff. These are usually undertaken by the CEP team, despite lacking the optimal capacity to do so, due to their competing day-to-day responsibilities. Recent restructuring within the Group has enabled colleagues to enact the emphasis on educational scholarship, modelled by the ClinEd team, to faculty development more generally and the Group supports the development of CEP academic staff in this area.

The review panel **recommends** that urgent action is taken to address the culture and practice of overworking within the Group through the development of a workload allocation model (WAM), which takes the specific nature of Online Distance Leaning into account. Fundamental discussions around what are reasonable expectations will be key and should also be built into financial modelling and recruitment planning. The panel notes that this will only improve the situation if the WAM has a realistic tariff for teaching related activities and is developed in consultation with those currently in active teaching roles. This recommendation follows on from recommendation 9 of the *2014/15 Postgraduate Programme Review Online Distance Learning Postgraduate Taught Programmes in the College of Medicine and Veterinary Medicine Postgraduate Programme Review Report [2],* regarding engaging with ODL provision; this does not appear to have been addressed.

The review team were led to understand that the increasing imbalance of the staff-student ratio is the biggest threat to the provision and maintenance of quality within Clinical

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[2]

https://www.wiki.ed.ac.uk/pages/viewpage.action?pageId=454894276&preview=/454894276/463749802/PPROLDLReport%26Response.pdf

Education. There are currently 6.4 FTE academic and professional services staff on the ClinEd programme, and 3.7 FTE staff on the CEP. Staff loyalty to the University can sometimes be taken for granted, however staff feel that coherence and cohesion of the ClinEd and CEP teams are key contributors to the continued provision of high quality education. There is a perceived danger in reducing staffing to metrics, such that individuals become at risk of being overlooked. Both the ClinEd and CEP programmes rely on colleagues who are committed to excellent provision. This is key in maintaining the quality and experience of the educational provision currently provided.

The Group is concerned about the potential risks arising from external pressures within the wider College and University relating to the income generating potential of the ClinEd programme compared to the genuine educational quality. However, the Group has been partially successful at pushing back on this in order to protect staff workloads. Progress is being made on encouraging recognition for the team, however the Group requires an enhanced mechanism in order to effectively manage student growth. For example, applications to the ClinEd programme have increased by 49% compared to last year. The ClinEd team believe that advertising for an additional academic member of staff should take place with immediate effect in order to accommodate this growth effectively rather than reactively further down the line. An advantage of the amalgamation of CEP and ClinEd in a unified business plan would result in the portrayal of a more realistic view in terms of staff expenditure across Clinical Education.

2.7.3   *Support and training for Professional Services and Support staff*

The review team were informed that professional services staff on the ClinEd programme feel well supported in their provision of support for students with mental health difficulties. The wider University has helpful support networks and training opportunities where staff can share ideas with other administrators in similar roles. Personal development opportunities are regularly disseminated from College. Senior colleagues within College also support and encourage professional services staff to utilise training and development opportunities. Additionally, personal development is raised in annual reviews, thus providing a formal platform in which to discuss training requirements. Staff feel comfortable in speaking to their line manager regarding training opportunities or academic / professional qualifications. As CEP professional services staff are employed on University of Edinburgh contracts, all training opportunities provided by the University are open to CEP staff. The University's staff scholarship fund is also open to CEP staff; however, as the professional services members of the CEP team are employed on smaller contracts, their ability to undertake training and development opportunities during their allocated working hours is challenging.

While the Group understands the rationale behind the University standardisation of the Extensions and Special Circumstances (ESC) system (namely, cost efficiency), there are concerns within the Group that this system does not work effectively for PGT students, especially online students combining study with professional practice. The review panel were informed of teething issues during the rollout of the new system, which have consequently created more work for programme administrators in mitigating the system's shortcomings. Professional services staff report that their work in relation to ESC requests has increased threefold since the introduction of the new system. Students reported confusion in relation to where specifically enquiries should be directed, resulting in additional stress at what can be an already unsettling time. There is an additional concern that the centralised ESC system, and the tone of the student-facing forms it uses, results in a compromised ability of support staff to provide a personal touch for students and jeopardises quick response times. Colleagues within the Group and College have escalated these concerns to the central University level; however, the centralised ESC system was

introduced, regardless of these voiced concerns. The CEP team do not currently interact with ESC systems as there are no matriculated students on the programme. As CEP students generally have five years to complete all levels, extension requests are very rare. However, should CEP introduce micro-credentialing, professional services staff within this team may need to interact with these centralised systems in the future.

The review panel **recommends** that urgent attention is directed towards addressing the needs of online and professional programmes, particularly the ClinEd programme, primarily in order to address the concerns regarding the extensions and special circumstances system. The University's Extensions and Special Circumstances team is encouraged to take a more collaborative approach, drawing on experiences and expertise of staff and students on this programme.

2.8 Learning Environment (Physical and Virtual)

2.8.1 *Physical and virtual learning environment and examples of good practice – e.g. facilities for small group teaching and peer learning, opportunities to foster academic communities through use of social or blended social/academic space*

In the context of virtual learning environments (VLEs), the Group favours low-tech approaches in order to both reduce the risk of technological issues and to be more inclusive for students with limited devices, broadband or other elements of infrastructure. Academic members of staff on the ClinEd programme informed the review team that they do not use Collaborate, primarily due to the limitations of this platform with respect to the number of participants that can be viewed on screen at any one time, meaning not all students are visible. A workaround via MS Teams is being used to facilitate real-time conversations. The system previously used by ClinEd (Adobe Connect) was helpful in terms of holding breakout discussion rooms. This helped to ensure that discussions were not dominated by the strongest student voices. However, the new system used for tutorials (Blackboard Learn) is less effective in ensuring that particular students do not dominate discussions in comparison to Adobe Connect. The programme team would like to work with a system that enables the visibility of as many students as possible, however concern remains that central systems used by the University do not fully meet this need. Discussion boards are a key method of managing large student numbers, however ClinEd colleagues are experiencing increasing difficulty in doing so in the context of increasing student numbers. An additional issue of concern is the accessibility of University systems for students who work in the NHS who repeatedly report problems with accessing University systems. The Group therefore requires a system that is easily accessed by external students. This is particularly the case due to CEP adopting Blackboard Collaborate as part of its pivot to online delivery. The majority of students on the CEP programme have provided positive feedback on Blackboard Collaborate, with a number of students working within the NHS enquiring how they might adopt this system for their own teaching requirements.

The systems provided by the University for online programmes are largely teacher-centred rather than student-centred. For instance, the architecture of these systems is built around teachers broadcasting their material, rather than more collaborative modes of staff-student engagement. This conflicts with the teaching culture on the ClinEd programme. A challenge has arisen whereby creativity can be stifled as students can only work within the parameters of the available VLE. The Group additionally highlighted that there are challenges around student community building within large cohorts through the University's existing VLEs. Despite SSLCs providing a formal platform for students to raise concerns regarding VLEs, challenges remain in ensuring the student voice is heard at an institutional level. This aligns with the wider concern that it is challenging for staff and students within the Group to gain traction in ensuring their voice is heard during institutional decision-making regarding online learning technologies.

The Group highlighted to the review team that they have no influence over Information Services Group (ISG) discussions and the systems they use at a University level. The Group has engaged with the University's Head of eLearning Services on a number of occasions in order to discuss how technology can better support bespoke learning and teaching needs within the Group. However, staff within the Group do not believe that these discussions have been successful in terms of developing systems that meet their requirements. This has consequently led to staff feeling disenfranchised. There is a further concern within the Group that the systems introduced by the University favour undergraduate on-campus programmes. As a result, the ClinEd and CEP teams are required to reactively manage these systems, despite little initial input.

The review team heard that the Group can raise systems issues with the College Head of IT and the College Registrar, which in turn is reported upwards to the University's Information Services Group. There are additionally three College representatives on the University's Information Technology Committee. While there are structures for elevating issues to the University level, challenges remain in gaining traction in ensuring the Group's voice is heard with regard to online postgraduate needs. This is particularly the case around the online learning elements of the challenges, as many senior colleagues within the University have little expertise of online programmes. Top-down, University-wide solutions often do not meet the specific needs of the Group and this has resulted in growing tension.

From a University-level perspective, the Head of eLearning Services explained to the review panel that there are high costs involved in maintaining a range of bespoke VLE platforms across the institution. In terms of the Blackboard Learn system, there is a large number of existing PG programmes with over 70 students enrolled, which generally return high levels of student satisfaction. The University offers a number of programmes delivered by online platforms via Blackboard Learn and Moodle as well as MOOCs. A gap has been identified in these platforms in terms of online CPD course provision. There are issues associated with VLEs relating to the requirement for external colleagues to have University of Edinburgh accounts and the consequent overheads and licensing issues this creates. Similarly, it is recognised that student experience is jeopardised when students are asked to navigate various VLEs. The University is working on enhancing an organisational setup from a systems perspective regarding CPD provision. The Head of eLearning Services and the Director for Postgraduate Education are members of a working group which has been tasked with the VLE requirements for external students on standalone courses. The working group has not yet produced a finalised report that identifies a suggested platform for this. The review panel suggests that the Group should continue to contribute to this working group and that the Director of Postgraduate Education should share the finalised report with Group colleagues.

Taking this information into account, and while being mindful of the University-level reviews into the fitness of IS systems and the Curriculum Transformation Project, the review panel **recommends** that the University's Information Services Group holds urgent discussions with experts from the Group and more widely to ensure that the technological architecture is not at odds with the University's Teaching strategy or pedagogical principles. There are clear lessons that can be learned from experts within the Group who have found that existing VLEs prohibit them from co-production of content with students. In terms of VLE platforms, Information Services needs to find a way to invest in plug-ins and workarounds to address more specialist needs.

3. Assurance and Enhancement of provision

3.1 Setting and Maintaining Academic Standards

3.1.1 Since the previous PPR (2014/15) with which the Group was involved, quality assurance processes within the Group have been strengthened. A refreshed College Quality Committee has been instrumental in supporting academic standards at the College level. The ClinEd programme has developed robust processes for the above areas that are

generally well-integrated with centralised processes. CEP is not currently part of the formal quality assurance processes, however the Group is planning to take steps to ensure that the the quality of the educational offering within ClinEd will be rolled out on the CEP programme.

3.2   Key Themes and Actions Taken

3.2.1 There has been very little to address at programme level in response to External Examiner reports. Comments within these reports generally relate to more systemic issues such as workload and recognition. The Director for Postgraduate Education responds to the External Examiner reports.

Section C – Review conclusions

<u>Confidence statement</u>

The review team found that Clinical Education has effective management of the quality of the student learning experience, academic standards, and enhancement and good practice

Key Strengths and Areas of Positive Practice for sharing more widely across the institution

No	Commendation	Section in report
1.	The ClinEd programme should be **commended** on delivering quality provision with high levels of student satisfaction and international external recognition. The CEP programme should be **commended** on delivering quality provision with high levels of student satisfaction and external recognition.	1
2.	The demonstrable and well-evidenced high levels of student satisfaction and student experience, and the loyalty engendered to both the ClinEd and CEP programmes, is to be **commended.**	2.4.2
3.	The review team **commends** the leadership of the Director for Postgraduate Education, Dr Gill Aitken, and her excellent team-building achievements in very challenging circumstances around a strategic vision and strong underpinning values.	1
4.	The review team **commends** the academic staff on both the ClinEd and CEP programmes for their commitment, expertise and their collegiality.	2.7.1
5.	The work of the administrative staff on both the ClinEd and CEP programmes is to be **commended**. The review team particularly note the work of the eProgramme Support Officer, Debbie Spence, and recognise her centrality to the success of the ClinEd programme, both in terms of administration and student support. The review team further recognise her personal approach throughout the student journey, from point of enquiry to graduation and beyond.	2.3.2
6.	The review team **commend** the Director for Postgraduate Education, Dr Gill Aitken, and the Director of the Edinburgh Medical School, Professor David Kluth, for their strategic and integrated vision of how they want to see Clinical Education moving forward. The review team recognises that a clear vision has been developed around an integrated journey, as well as the strategic imperative of the merger of the CEP and ClinEd programmes.	1
7.	Dr Gill Aitken's distributed leadership model is to be **commended.**	1
8.	Both the ClinEd and CEP programmes are to be **commended** for their success in creating and maintaining communities of online learning and practice. The review team additionally recognises the flexibility and student-centeredness of their approaches and the attention to the diverse needs of students across career stage, specialism and geographical location.	2.4.1
9.	The external profile of academic staff on the ClinEd programme and how deeply connected and embedded they are within online clinical and medical education communities is to be **commended**.	2.1.3
10.	The review team **commend** the collegiality of staff within Clinical Education and their expert contribution the University's ongoing pivot to online learning. This contribution has gone above and beyond within a context where staff are very hard-pressed.	2.1.1

Recommendations for enhancement/Areas for further development

Priority	Recommendation	Section in report	Responsibility of
1	The review panel **recommends** that urgent action is taken to address the culture and practice of overworking within the Group through the development of a workload allocation model (WAM), which takes the specific nature of Online Distance Leaning into account. Fundamental discussions around what are reasonable expectations will be key and should also be built into financial modelling and recruitment planning. The panel notes that this will only improve the situation if the WAM has a realistic tariff for teaching related activities and is developed in consultation with those currently in active teaching roles. This recommendation follows on from recommendation 9 of the *2014/15 Postgraduate Programme Review Online Distance Learning Postgraduate Taught Programmes in the College of Medicine and Veterinary Medicine Postgraduate Programme Review Report,* regarding engaging with ODL provision; this does not appear to have been addressed.	2.7.2	College, Group.
2	While being mindful of the University-level reviews into the fitness of IS systems and the Curriculum Transformation Project, the review panel **recommends** that the University's Information Services Group holds urgent discussions with experts from the Group and more widely to ensure that the technological architecture is not at odds with the University's Teaching strategy or pedagogical principles. There are clear lessons that can be learned from experts within the Group who have found that existing VLEs prohibit them from co-production of content with students. In terms of VLE platforms, Information Services needs to find a way to invest in plug-ins and workarounds to address more specialist needs.	2.8.1	University – Information Services Group.
3	The review panel **recommends** that urgent attention is directed towards addressing the needs of online and professional programmes, particularly the ClinEd programme, primarily in order to address the concerns regarding the extensions and special circumstances system. The University's Extensions and Special Circumstances team is encouraged to take a more collaborative approach, drawing on experiences and expertise of staff and students on this programme.	2.7.3	University – Extensions and Special Circumstances team.

4	The review panel **recommends** that urgent attention be given by the University's Academic Policy and Regulations Committee (APRC) to enable greater flexibility in the 3rd year of the MSc Clinical Education programme in relation to considering the approval of alternatives to the final 60-credit project. Consideration of this should be in line with relevant Learning Outcomes and relevant benchmarking, as well as precedents in other programmes across the institution.	2.2.1	University - Academic Policy and Regulations Committee.
5	Taking into account the recent merger and the evident issues of sustainability on both programmes in terms of meeting both urgent and projected demand, the review panel **recommends** that College revisits its business planning models and works proactively with the Group around short and medium-term investment, with clearer information around funding streams and resourcing models. This recommendation underlines the importance of producing a Workload Allocation Model for workload and resource planning, and to underpin a business case for a sustainable staffing model. Discussions between the Group and College should be held to underpin this and to gain further clarity on funding streams, maximum capacity and the resourcing model.	1	College
6	The review panel **recommends** that the Group further integrates the administrative teams of ClinEd and CEP, and that an exchange of best practice is ensured, while remaining cognisant of their distinctiveness. Moving forward, efforts should be made to ensure that CEP is incorporated into quality planning processes.	1	Group
7	The review team **recommends** that the Group delivers an administrative structure which incorporates a team who are clear on the roles and responsibilities within the Group and across the wider College. In order to support this, a business case should be created for a sustainable staffing model.	1	College, Group
8	In order to create further benefits in the context of curriculum development, the review panel **recommends** that the Group clarify what the shared vision is for the programmes; their commonalities, their distinctive elements and how these fit within the amalgamation of the ClinEd and CEP programmes.	2.1.1	Group
9	The review panel **recommends** that the Group offers an alternative form of assessment to the Year 3 CEP reflective essay, for example reflective blogs.	2.2.1	Group

Suggestions for noting

If an issue is minor but the review team nevertheless wants to flag it as a potentially useful action, it will be couched as a suggestion rather than a formal recommendation. Suggestions are not tracked in onward reporting.

No	Suggestion	Section in report
1	The review panel suggests that the ClinEd programme team explore the creation of an informal icebreaker session at the beginning of the programme to help foster a strong student community.	2.4.1
2	The review panel suggests that academic staff on the CEP considers introducing working groups within CEP cohorts in order to enhance a community of practice.	2.4.1
3	The review panel suggests that the Group should continue to contribute to the working group on VLE requirements for external students on standalone courses, and that the Director of Postgraduate Education should share the finalised report with Group colleagues.	2.8.1

Appendices

<u>Appendix 1 – University remit</u>

The University remit provides consistent coverage of key elements across all of the University's internal reviews (undergraduate and postgraduate).

It covers all credit bearing provision within the scope of the review, including:
- Provision delivered in collaboration with others
- Transnational education
- Work-based provision and placements
- Online and distance learning
- Continuing Professional Development (CPD)
- Postgraduate Professional Development (PPD)
- Provision which provides only small volumes of credit
- Joint/Dual Degrees
- Massive Open Online Courses MOOCs (even if non-credit bearing)

1. **Strategic overview**
   The strategic approach to:

   - The management and resourcing of learning and teaching experience,
   - The forward direction and the structures in place to support this.
   - Developing business cases for new programmes and courses,
   - Managing and reviewing its portfolio,
   - Closing courses and programmes.

2. **Enhancing the Student Experience**
   The approach to and effectiveness of:

   - Supporting students in their learning
   - Listening to and responding to the Student Voice
   - Learning and Teaching
   - Assessment and Feedback
   - Accessibility, Inclusivity and Widening Participation
   - Learning environment (physical and virtual)
   - Development of Employability and Graduate Attributes
   - Supporting and developing staff

3. **Assurance and Enhancement of provision**
   The approach to and effectiveness of maintaining and enhancing academic standards and quality of provision in alignment with the University Quality Framework:

   - Admissions and Recruitment
   - Assessment, Progression and Achievement
   - Programme and Course approval
   - Annual Monitoring, Review and Reporting
   - Operation of Boards of Studies, Exam Boards, Special Circumstances
   - External Examining, themes and actions taken
   - Alignment with SCQF (Scottish Credit and Qualifications Framework) level, relevant benchmark statements, UK Quality Code
   - Accreditation and Collaborative activity and relationship with Professional / Accrediting bodies (if applicable)

<u>Appendix 2 Additional information considered by review team</u>

All of the following appendices to the reflective report were uploaded to the review Wiki as individual files. All files were in PDF format except where otherwise indicated.

Prior to the review visit:

- Appendix 1: Status of recommendations from previous review – ClinEd
- Appendix 2: Glossary of Terms
- Appendix 3: ClinEd student feedback on Sections 2.1-2.4 of the Reflective Report
- Appendix 4: Clinical Educator Programme Evaluation
- Appendix 5: Clinical Educator Programme Evaluation Form

The following documents were also considered by the review team prior to the review visit:

- School Annual Quality Assurance Reports (2017-2020)
- External Examiners Summary Reports
- Clinical Education and CEP Organisation Chart
- Current Clinical Education Group Staff Information
- Programme Handbook
- Programme Specification Information (Clinical Education DPTs)
- Statistical Reports
- Equality Diversity Monitoring and Research Committee Reports
- Postgraduate Taught Experience Survey (PTES) 2020 results and Reflection
- Student Staff Liaison Committee meeting minutes 2019/20
- University of Edinburgh Standard Remit 2020/21
- Subject Specific Remit
- Edinburgh University Students' Association School Report

During the review visit:

No further documentation was provided to the review team during the review visit.

<u>Appendix 3 Number of students</u>

There are currently 301 students matriculated on the ClinEd programme across all years of study. 3,073 participants are registered on the CEP database, not all of whom are actively involved with the programme at the same time. In 2020, 88 students completed the CEP across its three levels, with approximately 700 taking part in workshops / online sessions and 66 taking part in teaching observations. There were 52 workshops/online sessions, each with between 12 and 15 attendees.

ClinEd:

Entrant for Selected Programmes

Entry Programme Name	2015/6	2016/7	2017/8	2018/9	2019/20	2020/1	2021/2
Clinical Education (Online Learning) (MSc) (Part-time)	29	37	40	45	36	54	0
Clinical Education (Online Learning) (PgCert) (Part-time)	28	38	38	46	47	98	0
Clinical Education (Online Learning) (PgDip) (Part-time)	2	4	2	3	4	13	0

CEP:

	Workshops/Online Sessions	Teaching Observations	Level 1	Level 2	Level 3
2019	93	137	118	86	21
2020	52	66	42	40	6

	Workshops/Online Sessions	Teaching Observations	Level 1	Level 2	Level 3