

The University of Leeds
EXTERNAL EXAMINER'S REPORT

ACADEMIC YEAR: 2017-18

QAT Received 05/09/2018

Part A: General Information

Subject area and awards being examined

Title and Name of Examiner:

Faculty / School of:

Medicine and Health / Medicine / Leeds Institute of Health Sciences

Subject(s):

Primary Care and Public Health

Programme(s) / Module(s):

Intercalated BSc Applied Health Suite

Awards (e.g. BA/BSc/MSc etc):

BSc

Part B: Comments for the Institution on the Examination Process and Standards

Points of innovation and/or good practice

Please highlight areas of innovation or good practice within the programmes or processes you have been involved with in this box.

Nothing new to comment on above and beyond that highlighted in previous reports.

Enhancements made from the previous year

No specific comments to make.

Matters for Urgent Attention

If there are any areas which you think require urgent attention before the programme is offered again please note them in this box

None.

For Examiners in the first year of appointment

1.	Were you provided with an External Examiner Handbook?	N/A
2.	Were you provided with copies of previous External Examiners' reports and the School's responses to these?	N/A
3.	Were you provided with a External Examiner Mentor?	N/A

For Examiners completing their term of appointment

4.	Have you observed improvements in the programme(s) over the period of your appointment?	Y ,but please see additional comments at the end
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		of this report.
5.	Has the school responded to comments and recommendations you have made?	Y
6.	Where recommendations have not been implemented, did the school provide clear reasons for this?	N/A
7.	Have you acted as an External Examiner Mentor?	Y

Please comment on your experience of the programme(s) over the period of your appointment, remarking in particular on changes from year to year and the progressive development and enhancement of the learning and teaching provision, on standards achieved, on marking and assessment and the procedures of the School

Subtle revisions to aspects of the programme stimulated by my observations have been made efficiently and thoughtfully. The introduction of a formal procedure clarifying the process to be followed when Faculty become aware of any patient safety issues whilst observing video recordings of student consultations with patients during The Consultation Module (GPPH3002) is a good example of this.

More generally, it has been refreshing to see the programme being managed in a collective way for the greater good of the students by members of Faculty from Primary Care, Public Health and Medical Education and is an excellent example of team work and role modelling for students. However, please also see my contrasting comments at the end of my report.

Standards

8.	Is the overall programme structure coherent and appropriate for the level of study?	Y
9.	Does the programme structure allow the programme aims and intended learning outcomes to be met?	Y
10.	Are the programme aims and intended learning outcomes commensurate with the level of award?	Y
11.	Did the Aims and ILOs meet the expectations of the national subject benchmark (where relevant)?	Y
12.	Is the programme(s) comparable with similar programmes at other institutions?	Y

Please use this box to explain your overall impression of the programme structure, design, aims and intended learning outcomes.

The programme is set and executed at a level which is consistent with similar programmes at other institutions and the intended level of the Framework for Higher Education Qualifications.

It has offered an appropriate level of challenge to students in engaging, stimulating and supportive ways. It would be difficult for a student to spend an academic year on this programme and not develop new skills, perspectives and understanding of and for healthcare.

13.	Is the influence of research on the curriculum and learning and teaching clear?	In some aspects
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Please explain how this is/could be achieved (examples might include: curriculum design informed by current research in the subject; practice informed by research; students undertaking research)

Programme faculty revise assessment briefs as required to ensure currency within the relevant discipline is preserved and topics are sensible and pertinent.

Students are encouraged to use current evidence where possible and are reminded of this when they cite somewhat outdated evidence in assignments.

However, please also see my contrasting comments at the end of my report regarding the most recent development.

14.	Does the programme form part of an Integrated PhD?	N
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Please comment on the appropriateness of the programme as training for a PhD:

If training for a PhD were to become a specific objective of this programme then some revision and redesign would be necessary.

15.	Does the programme include clinical practice components?	Y
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Please comment on the learning and assessment of practice components of the curriculum here:

This year, I deliberately asked to observe some teaching within the module which focuses on individual student clinical consultations with patients. My observations confirmed to me that this is an excellent module which undoubtedly enhances the students' in depth analysis of their own consultation styles, strengths and weaknesses. Other modules also encourage critical appraisal of various aspects of healthcare and the whole, combined package is a substantial resource for students.

16.	Is the programme accredited by a Professional or Statutory Regulatory Body (PSRB)?	N
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Please comment on the value of, and the programme's ability to meet, PSRB requirements here:

As stated last year, whilst the programme is not directly accredited by a Professional or Statutory Regulatory Body it is of additional professional value to the students who successfully complete it as students receive additional ranking points from the UK Foundation Programme for Foundation Year job allocation ranking for their BSc. They also get opportunity to enhance other aspects of their approach to medicine, be it consultation skills, a deeper understanding of Public Health and population approaches to diseases and their prevention, or simply the opportunity to explore a topic of interest to them in more depth than would be possible within the Primary Medical Qualification core curriculum.

Assessment and Feedback

17.	Does the programme design clearly align intended learning outcomes with assessment?	Y
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Please comment on the assessment methods and the appropriateness of these to the ILOs, in particular: the design and structure of the assessment methods, and the arrangements for the marking of modules and the classification of awards; the quality of teaching, learning and assessment methods that may be indicated by student performance.

Nothing to add to my comments of last year which were:

"The alignment of ILOs and assessment methods is carefully considered by the programme faculty team. I have personally witnessed constructive discussion and group reflection on this precise topic which highlighted to me the thoughtful approach to continuous improvement adopted by this programme team."

18.	Is the design and structure of the assessment methods appropriate to the level of award?	Y
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19.	Were students given adequate opportunity to demonstrate their achievement of the programme aims and intended learning outcomes?	Y
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Please comment on the academic standards demonstrated by the students and, where possible, their performance in relation to students on comparable courses; the strengths and weaknesses of the students as a cohort:

The students' overall performance this year was comparable to that of students in similar programmes in other institutions I have witnessed.

Please use this box to provide any additional comments you would like to make in relation to assessment and feedback:

The June presentation day was, as in previous years, a superb microcosm of all that is good about this course – enthusiastic students, committed members of faculty, superb student work, accurate and constructive feedback, and careful marking across a range of subjects relevant to medical students ultimately studying for a primary medical qualification.

The Progression and Awards Process

20.	Were you provided with guidance relating to the External Examiner's role, powers and responsibilities in the examination process?	Y
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21.	Was the progression and award guidance provided sufficient for you to act effectively as an External Examiner?	Y
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22.	Did you receive appropriate programme documentation for your area(s) of responsibility?	Y
23.	Did you receive appropriate module documentation for your area(s) of responsibility?	Y
24.	Did you receive full details of marking criteria applicable to your area(s) of responsibility?	Y
25.	Were you provided with all draft examination papers/assessments?	N
26.	Was the nature and level of the assessment questions appropriate?	Y
27.	Were suitable arrangements made to consider your comments on assessment questions?	Y
28.	Was sufficient assessed work made available to enable you to have confidence in your evaluation of the standard of student work?	Y
29.	Were the examination scripts clearly marked/annotated?	Y
30.	Was the choice of subjects for final year projects and/or dissertations appropriate?	Y
31.	Was the method and standard of assessment appropriate for the final year projects and/or dissertations?	Y
32.	Were the administrative arrangements satisfactory for the whole process, including the operation of the Progression and Awards Board?	Y
33.	Were you able to attend the Progression and Awards Board meeting?	N – annual leave
34.	Were you satisfied with the recommendations of the Progression and Awards Board?	Y
35.	Were you satisfied with the way decisions from the School Special Circumstances meeting were communicated to the Progression and Awards Board?	N/A
<p><i>Please use this box to provide any additional comments you would like to make on the questions above:</i></p> <p>Nothing to add.</p>		

Other comments

Please use this box if you wish to make any further comments not covered elsewhere on the form

This is my final external examiner report for this programme. During my three years, I have thoroughly enjoyed my contact with the students and the members of Faculty running the various modules that go to make up an excellent offering for the students.

I was, however, saddened to discover that the combined Public Health, Medical Education and Primary Care approach to the intercalated BSc is to be disbanded. It has been clear to me during my time as External Examiner that this has been a tremendously positive and forward thinking feature of the programme and was one of the reasons that I was so enthusiastic to be an external examiner for this course when invited to take up the appointment. The collective resource the combined faculty have brought to bear has been greater than the sum of the parts and it is a shame to see that fragmented.

More specifically I am particularly concerned about the implicit message given to the medical students about the apparent loss of support, whether temporary or permanent, for the BSc in Primary Care and the activities it encompasses. This is contrary to the guidance provided by the Health Education England report "By choice – not by chance" (Wass, 2016) and occurs at a time when the national drive is for increased exposure of medical students to Primary Care. I am not at all surprised that this has already had an adverse effect on recruitment to next year's BSc in Primary Care and would urge the University of Leeds to ensure that the opportunity for medical students to undertake an intercalated degree in Primary Care is restored at the earliest opportunity.

Name of School and Head of School (or nominee)

Title and Name of Examiner:

Subject(s):

Applied Health Suite

Programme(s) / Module(s):

Applied Health (Primary Care)
Applied Health (Public Health)

Awards (e.g. BA/BSc/MSc etc):

Intercalated BSc

Title and Name of Responder:

Position*:

Course Director, Applied Health Suite

Faculty / School of:

School of Medicine

Address for communication:

Level 10
Worsley Building
University of Leeds
Leeds
LS2 9NL

Email:

Telephone:

*If the individual responding to the report is not the Head of School please state their position within the School.

Completing the School response

The completed School response (including the full original report) should be attached to an e-mail and sent to the Pro-Dean for Student Education in the relevant Faculty. Following approval by the Pro-Dean for Student Education, the School must send the response (including the full original report) directly to the External Examiner. A copy must also be emailed to the Quality Assurance Team at gat@leeds.ac.uk. External Examiners should receive a formal response no later than six weeks after receipt of the original report.

Response to Points of innovation and/or good practice

Many thanks to _____ for ongoing contribution as external examiner over the 2017-18 academic session. thoughtful advice and constructive comments have led to improvements within the course, particularly around formal documentation of processes. _____ has consistently provided robust and detailed feedback whenever this has been called for and this has helped to ensure our benchmarking and the quality of feedback across modules has remained valid and consistent. I am glad to hear that _____ continues to have a high regard for the standards of our teaching, the quality of feedback, and our students' academic output.

Response to Enhancements made from the previous year

No specific comments made

Response to Matters for Urgent Attention

If any areas have been identified for urgent attention before the programme is offered again please provide a specific response to them here:

No matters raised

Response to questions 1-7 (and related comments)

Schools may provide a general response; however, where Examiners raise specific points these must be addressed individually:

No specific points made. Previous recommendations were noted to have been acted upon. highlighted the positive aspects of team work and collaborative practice within the Applied Health Suite and stated that this provided good role modelling for students.

Standards

Response to questions 8 to 16 (and related comments)

Schools may provide a general response; however, where Examiners raise specific points these must be addressed individually:

It was good to hear that deems the programmes to be consistent with similar programmes at other institutions and in keeping with the intended level of the Framework for Higher Education Qualifications. felt that an appropriate level of challenge was provided for students and that the educational environment was supportive. We thank for recognition of the new skills students are likely to develop as a result of undertaking this course.

An area of teaching excellence was noted (observed teaching during The Consultation module). The comments are appreciated and in keeping with the high level of positive feedback provided by students for this module in particular.

Assessment and Feedback

Response to questions 17 to 19 (and related comments)

Schools may provide a general response; however, where Examiners raise specific points these must be addressed individually:

No specific comments raised, nil to add from the comments made last year.

The Progression and Awards Process

Response to questions 20-35 (and related comments)

Schools may provide a general response; however, where Examiners raise specific points these must be addressed individually:

Question 25 – examinations do not form part of the assessment framework for these programmes, no draft assessments were provided as these had all been formalised prior to the start of the academic session. had access to handbooks and the VLE for all modules. The full details of each assessment are found in these areas.

Other comments

Response to items included in the 'Other Comments' section of the report

I share the disappointment voiced in final comments, particularly given the energy that has gone into ensuring strong collaboration and the development of a shared culture and identity across the 3 programmes that currently make up the Applied Health Suite, since its inception in 2012. The decision to separate the medical education programme from the primary care and public health programmes was not taken lightly and was felt to be in the long-term strategic interests of the respective programme strands. The changes to the Clinical Placement module (cessation of the longitudinal placement in general practice) have negatively affected recruitment to the Primary Care programme for the 2018-19 session and it is hoped that this area can be revisited in the future, if the fiscal environment and recruitment to any subsequent programme become more favourable. Work to develop a new programme with Primary Care and Public Health at its heart has already started. We aim to ensure that the spirit of the current Applied Health Suite is not lost and that the fostering of scholarship, skills of enquiry, and new ways of thinking will remain as essential components to any new development.

The Applied Health (Primary Care) programme in its current form meets recommendations 9, 12, and 13 of the Wass Report in that it presents positive and enthusiastic General Practitioner role models in leadership positions within the course, provides a pathway into academia, and raises the academic profile of general practice. Any

future iteration of the programme will, again, ensure that these recommendations are at the forefront of development and implementation.