

University of Cambridge: Programme Specifications

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POSTGRADUATE CERTIFICATE IN MEDICAL EDUCATION

1	Awarding body	University of Cambridge
2	Teaching institution	University of Cambridge Institute of Continuing Education*
3	Programme accredited by	University of Cambridge
4	Name of final award	Postgraduate Certificate in Medical Education
5	Programme title	Medical Education
6	JACS code(s)	N/A
7	Relevant QAA benchmark statement(s)	None
8	Qualifications framework level	FHEQ Level-7 credits
9	Date specification was produced/ last revised	February 2012
10	Date specification was last reviewed	February 2012

* Cognate faculty endorsement provided by the School of Clinical Medicine

Introduction

All doctors have a professional obligation to contribute to the education and training of other doctors, medical students and other professionals allied to medicine working in the healthcare team (General Medical Council 1999). Doctors need to be prepared to oversee the work of less experienced colleagues and students.

Teaching skills are not innate and at present are not part of the undergraduate medical curriculum or indeed many postgraduate programmes. This means that doctors and other professionals allied to medicine that have special responsibilities to teach need to take steps to ensure that they develop and maintain the skills that are required to fulfil this role. Doctors also have a responsibility to assess and appraise their colleagues and need to be able to both objective and honest when doing so.

The General Medical Council (GMC) defines the professional attributes of the doctor with responsibilities for clinical training and educational supervision, which include the following (GMC 2009):

- A personal commitment to teaching and learning
- Sensitivity and responsiveness to the educational needs of students and junior doctors
- The capacity to promote development of the required professional values and attitudes
- An understanding of the principles of education as applied to medicine
- An understanding of research method

- Practical teaching skills
- A willingness to develop as a doctor and as a teacher
- A commitment to audit and peer review of his/her teaching
- An ability to use formative assessment to the benefit of the student or trainee
- The ability to carry out formal appraisal of the medical student progress /performance of the trainee practising as a doctor

The universities, various Royal Colleges and postgraduate training bodies have published guidance on the outcomes that are required in the training of students and doctors. Universities, which provide medical courses, should ensure that formal training in teaching skills and in the facilitation of student learning is provided for all new appointees. The GMC also advises “Satisfactory completion of such training and evidence of competencies in teaching should be required before probationary appointments are confirmed. The training of staff already in post should also be addressed.”

However, education in medicine is distinct from teaching in higher education in general because of the central place that patient care occupies not only in teaching and learning, but also in assessment and feedback. In recognition of this The Academy of Medical Educators (AoME 2010) has developed a description of the standards that are mapped against the generic standards such as those of the Higher Education Academy and the General Medical Council. In addition the Department of Health has published a document outlining its plans for implementing and supporting medical educators (DOH 2012).

In the East of England the Multi-Professional Deanery has published its own response to these documents outlining how it will support medical educators both medical and non-medical (EoE 2012)

The AoME published standards have been considered when preparing this proposal, these recognise good practice, and they have been used along with the HEA standards during the design of this course.

The School of Clinical Medicine (Clinical School) runs three existing programmes that are recognized by the Higher Education Academy (HEA) but which are not accredited by the University:

1. The Clinical Supervisors' Programme (recognized at standard descriptor 1, SD1, of the UK Professional Standards Framework, PSF), which provided students have at least one year's practical teaching experience qualifies successful students to become Associates of the HEA (AHEA);
2. The GP Tutors' Programme (recognized at standard descriptor 1, SD1, of the UK PSF), which provided students have at least one year's practical teaching experience qualifies successful students to become Associates of the HEA (AHEA); and
3. The Clinical School Programme for Clinical Teachers (recognized at standard descriptor 2, SD2, of the UK PSF), which qualifies successful students to become Fellows of the HEA (FHEA).

These programmes do not lead to University credit or qualification.

This proposal aims to build on expertise and experience to develop the programme further in accordance with GMC and AoME guidance to allow those involved in teaching Cambridge undergraduates (and those from outside the region) to develop their knowledge and understanding and to develop as teachers in medicine.

The two existing programmes (Clinical Supervisors' and GP Tutors' Programmes) will continue, with the current assessment, for those wishing only to receive HEA recognition at Associate level.

The proposal here is that develop and seek approval for a new (part-time) Postgraduate Certificate in Medical Education (60 FHEQ-7 credits) that builds on the formative elements of the Clinical School Programme for Clinical Teachers. The programme – see figure 1 – will therefore also allow for completion on a non-credit-bearing basis for those wishing only to receive the HEA recognition at Fellowship level. [For those already holding FHEA status there will be no need to attend the first two days of Module 1, Core skills in medical education, but otherwise full completion of the Postgraduate Certificate is required; only a small number of students are anticipated on this basis.]

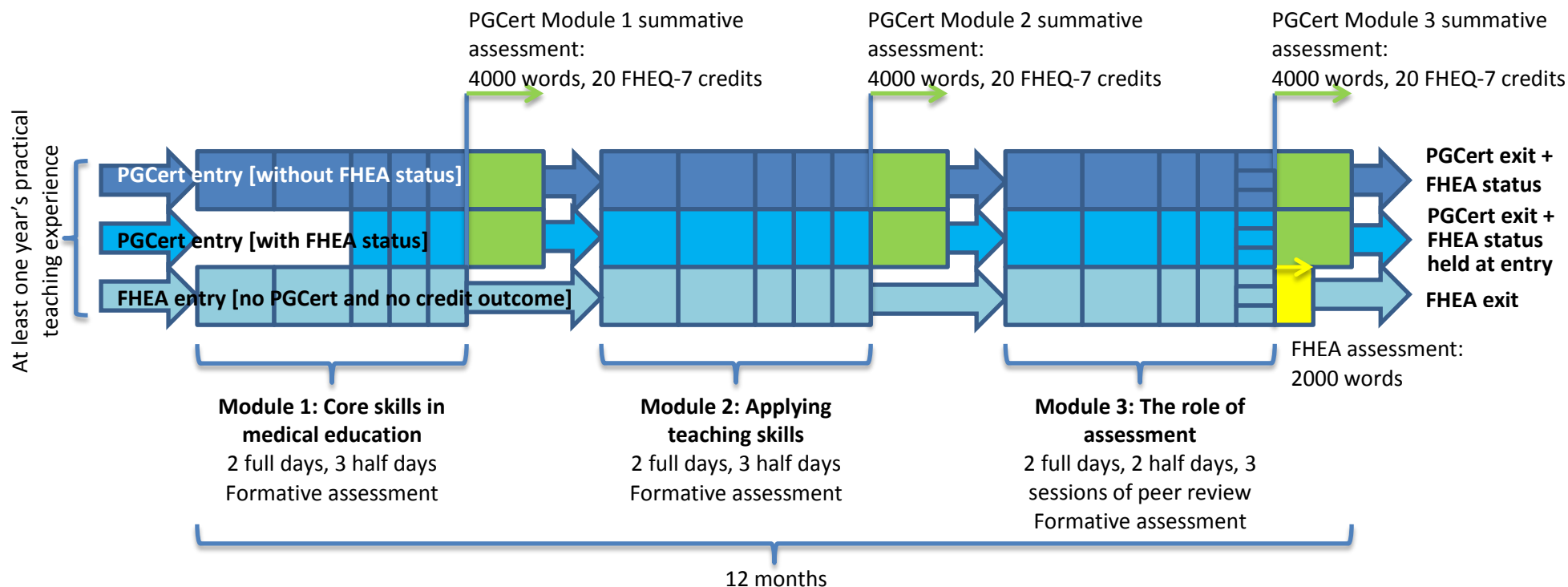
In time we may wish to develop and seek approval for a Postgraduate Diploma in Medical Education (a further 60 FHEQ-7 credits) and/or an MSt in Medical Education.

Aims of the Programme

The programme aims to:

1. Contribute to the commitment of The School of Clinical Medicine and the Faculty of Biology to the continuing professional development of staff in an integrated clinical and teaching environment.
2. Develop and create a cohort of doctors and other professions allied to medicine who will pursue and develop their roles as teachers in the field of medical education.
3. Contribute to the commitment of the School of Clinical Medicine and the Faculty of Biology to the continuing professional development of clinical and preclinical teachers involved in undergraduate and postgraduate medical education.

Figure 1



4. Expand the number of staff within the faculties who have specialist skills in teaching within the University and can demonstrate the University's commitment to meeting the standards of doctors and other allied professionals and to maintaining these at the highest level.
5. Develop a postgraduate programme that will be open to medical educators (both medical and professionals allied to medicine) of undergraduate students as well as postgraduate tutors and supervisors within the East of England and further afield. It will also aim to stimulate more inter-professional education.

Learning outcomes

Students who complete this programme successfully will have gained the skills and knowledge defined by The Higher Education Academy and The General Medical Council (and as adapted by The Academy of Medical Educators).

The Academy of Medical Educators guidance divides the skills and knowledge into a framework of seven themes. The proposed programme is designed to ensure that students (medical educators) are aware of these and for each one acquire the knowledge, skills and practice that underpin each of the seven framework areas as follows:

1. Ensuring safe and effective patient care through training
2. Establishing and maintaining an environment for learning
3. Teaching and facilitating learning
4. Enhancing learning through assessment
5. Supporting and monitoring educational progress
6. Guiding personal and professional development
7. Continuing professional development as an educator

Students will acquire through the course a basic grounding in each of these areas, which will be backed up by referral to the evidence base available in medical educational literature. The teaching will also be experiential and is designed to expose the students to not just theory but demonstration as to how it can be used. The students will also be required to maintain an educational log in electronic form where they can reflect on what they have learned as well as reflect on how they put this into practice. The Postgraduate Certificate has an important formative element of reflection, peer review.

By the end of the course the students should be able to demonstrate understanding of:

Knowledge and understanding underpinning teaching

- The formal approaches to teaching and learning
- The essential features of real, simulated and virtual learning environments (VLEs)
- The relationship between assessment, learning and teaching

- The importance of the effective use of learning resources

Practical skills relating to teaching in medical settings

- The principles of teaching with real patients
- The importance of planning for teaching in clinical setting
- Methods for involving all students in a teaching session
- The importance of understanding the need to be able to engage students at different stages and abilities
- The importance of the brief debrief and the concept of one minute preceptor model
- The need to set clearly defined learning objectives
- The principles of Bloom's taxonomy
- An appreciation that teaching less is more
- The role of effective lecturing /encouraging active learning
- The need to appreciate the need to match teacher and learner expectations
- The effective use of educational resources
- The effective use of audio and visual aids
- Handouts and VLE materials

Skills related to teaching students

- The importance of assessing learning needs
- How to develop an awareness of the students stage of self-direction
- How to make effective use of questions
- How to manage groups and enable group interaction
- How to use materials to promote critical thinking
- How to ensure that teaching is relevant to practice (clinical or scientific)
- The importance of being an effective tutor
- Ensuring that all students are engaged during teaching of examination skills within group setting
- The importance of professionalism and role modelling in small group teaching
- The four step approach to teaching skills
- The role of materials on the VLE to support teaching of practical skills
- The role of simulated patients in teaching practical skills and communication skills
- The role of the simulator in teaching students practical skills
- The role of the practical skills team in hospitals in teaching

Skills required in assessment of students and also evaluation of teaching

- The role of feedback and its importance in clinical education
- The educational theory underpinning feedback
- The distinction between validity and reliability
- The feedback and learning process
- Methods available to give effective feedback and their advantages and disadvantages
- Some of the barriers to giving effective feedback
- The use of Informal and formal feedback
- The principles of the written assessment
- The importance of ensuring that assessment fits with teaching
- The importance of using regular evaluation to assess the effectiveness of teaching
- The role of the learning cycle and reflection on improving the effectiveness of teaching
- The use of reflection on the students' own experience in developing their teaching skills
- The role of different methods of written assessment that are available for use in undergraduate examinations
- The importance of any assessment matching the learning process

Teaching and learning methods

Teaching methods will include a combination of interactive seminars, large and small group work with emphasis on reflection of not only the content of what is being taught but also the process by which it is taught. Students will also be required to reflect on their own experience as learners as part of the group and in a reflective online blog.

Teaching sessions will introduce concepts, conceptual frameworks and theory relating to the topics being covered and there will be online material to complement each session to allow students to follow these in greater depth after the formal face-to-face sessions. There will also be reflective online components and resources, which form part of the teaching material. The reflective component will themselves be designed to be interactive to encourage feedback from students and course tutors.

Periods of self-directed study and reading between face-to-face sessions will be required and preparation for forthcoming sessions. This will be enhanced through the programme's Virtual learning Environment (VLE).

Programme entry requirements

Applications are invited from Doctors who have completed their foundation 1 year of postgraduate training up to Consultant level and from primary, secondary and tertiary care and from other professions allied to medicine that are involved in teaching students at undergraduate and postgraduate levels. It is requirement that students should have had at least one year of experience as a teacher prior to starting the course.

Eligible employees within the NHS within the East of England will be encouraged to apply especially where they have a role in training and

appraising health-care professionals who are learning whilst working. The programme will recognise the experience of those who have successfully gain Fellowship of the HEA, by dispensing with the need to attend the initial two days of introductory sessions (Module 1).

Applicants to the programme will be expected to demonstrate proficiency in the English language; students whose first language is not English must be able to satisfy the current English Language Competence requirements of the University's Board of Graduate Studies in the year in which they apply for admission to the course.

Assessment methods

Students will be assessed formatively throughout the three modules of the programme using a variety of techniques and interrelated strategies including evidence of regular reflection in their online reflective diary/blogs, demonstration of active participation in the programme will also be required. There will also be a requirement for the students to take part in peer review of other students both as the observer and as the learner and then to provide a written reflection on that process.

In summary, formative assessment will have four main components:

- Evidence of active participation including online reflective element
- Participation in peer-review process with evidence of this process
- A written reflection on this review of their teaching and that of their peers.

And each module will conclude with a summative assessment in the form of:

- A written assignment of a maximum of 4000 words.

Students must be able to demonstrate that they have covered all of the areas outlined in the UKPSF and AoME descriptors.

Assessors and examiners will be appointed following standard procedures and assessment of the summative elements will follow the standard graduate-level procedures, with double marking and (moderating) external examination.

Programme structure:

The Postgraduate Certificate is a one-year part-time M-level programmes resulting in 60 FHEQ level-7 credits and the University of Cambridge award. Referring again to Figure 1, there are three modules providing a total of approximately 92 contact hours with significant additional between-module reflection, study and assignment work.

The modules are structured as follows:

Timing	Provisional dates	Hours face to face	AoME agenda	Topics to include

Michaelmas Term		28		Module 1: Core skills in medical education
2 Full days Friday-Saturday	September	16	Ensuring safe and effective patient care through training Establishing a safe and supportive learning environment	Basic theory in medical education Principles of teaching with patients
Half day 1 Wednesday pm	October	4	Teaching and facilitating learning	Applying core skills when teaching in clinical settings
Half day 2 Wednesday pm	November	4	Teaching and facilitating learning	Applying core skills when working with small groups
Half day 3 Wednesday pm	December	4	Ensuring safe and effective patient care through training	Applying core skills to learner's individual roles as educators. Special groups to include, e.g.: GP registrars, hospital supervisors etc.
			Summative assessment:	4000-word assignment, 20 credits

Timing	Provisional dates	Hours face to face	AoME agenda	Topics to include
Lent Term		28		Module 2: Applying teaching skills
2 Full days Friday-Saturday	January	16	Ensuring safe and effective patient care through training	Teaching clinical reasoning Teaching effective consulting Teaching clinical examination
Half day 1 Wednesday pm	February	4	Teaching and facilitating learning	Applying principles of teaching to teaching a practical skill
Half day 2 Wednesday pm	March	4	Teaching and facilitating learning	Applying core skills when working with larger groups
Half day 3 Wednesday pm	April	4	Ensuring safe and effective patient care through training	Applying skills to learner's individual roles as educators. Special groups to include, e.g.: GP registrars, hospital supervisors etc.
			Summative assessment:	4000-word assignment, 20 credits

Timing	Provisional dates	Hours face to face	AoME agenda	Topics to include
Easter Term		36		Module 3: The role of assessment
2 Full days	May	16	Enhancing learning	Principles of assessment

Friday-Saturday			through assessment, feedback and appraisal	Work-based assessment Assessing trainees in the work place Principles of feedback Appraisal
Peer review time	3 Sessions observe/ teach/ debrief	12	Enhancing learning through assessment, feedback and appraisal	Observing teaching Being an observer of teaching episode Giving feedback in practice
Half day 1 Wednesday pm	June	4	Enhancing learning through assessment, feedback and appraisal	Reflection on peer review process Reflection on giving feedback
Half day 2 Wednesday pm	June	4	Evaluating teaching and reflective learning	Evaluating teaching Reflection on the course
			Summative assessment:	4000-word assignment, 20 credits

Employability

The majority of students will already be in full or part-time clinical employment. The majority will continue in this employment but may increase their commitment to teaching allowing them to develop as Tutors, Directors of Clinical Studies and as members of Educational Deaneries at undergraduate and postgraduate level.

Managing Teaching Quality and Standards

The teaching quality and standards will be monitored by the programme advisory committee who are members of the faculty at the School of Clinical Medicine and ICE members as agreed by the educational committee.

The HEA and the Academy of Medical Educators provide the basic standards for the course and assessments.

Student Support

Advice to students is available both before and after they have registered for course from the course director or administrative staff assigned to the programme. All students are provided at the start of the course with the ICE student handbook.

Signed: _____ (Course Director)

Date: _____

Signed: _____ Date: _____

References

2010: Academy of Medical Educators professional standards

<http://medicaleducators.org/index.cfm/linkservid/AE86A517-CB91-4FF5-8A9756FE12A607D5/showMeta/0/>

GMC 2009: Tomorrow's Doctors

http://www.gmc-uk.org/education/undergraduate/tomorrows_doctors_2009.asp

GMC 1999: The Doctor as a teacher

http://www.gmc-uk.org/education/postgraduate/doctor_as_teacher.asp

Higher Education Academy – Professional standards framework

<http://www.heacademy.ac.uk/ukpsf>

Implementing Educational Equity and Excellence; a framework to support the development of health care educators throughout the East of England

January 2012 East of England Multi-Professional Deanery

https://www.eoedeanery.nhs.uk/medical/page.php?page_id=1760

Developing the Healthcare workforce – a consultation on proposals

Department of Health

January 2012

http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_122933.pdf

Appendices

Appendix 1

HEA UK Professional Standards Framework (UKPSF)

Appendix 2

Academy of Medical Educators competency framework and training requirements

Appendix 3

ICE Administering Body Arrangements for Non-Matriculated Postgraduate Programmes

Appendix 1: HEA UK Professional Standards Framework

UKPSF Area of Activity	
1	Design and planning of learning activities
2	Teaching and supporting student learning
3	Assessment and giving feedback to learners
4	Developing effective learning environments and student support and guidance
5	Integration of scholarship, research and professional activities with teaching and supporting learning.
6	Evaluation of practice and continuing professional development

AREAS OF ACTIVITY	CORE KNOWLEDGE	PROFESSIONAL VALUES
<ol style="list-style-type: none"> Design and planning of learning activities and/or programmes of study Teaching and/or supporting student learning Assessment and giving feedback to learners Developing effective environments and student support and guidance Integration of scholarship, research and professional activities with teaching and supporting learning 	<ol style="list-style-type: none"> The subject material Appropriate methods for teaching and learning in the subject area and at the level of the academic programme How students learn, both generally and in the subject The use of appropriate learning technologies Methods for evaluating the effectiveness of teaching 	<ol style="list-style-type: none"> Respect for individual learners Commitment to incorporating the process and outcomes of relevant research scholarship and/or professional practice Commitment to continuing professional development and evaluation of practice

Appendix 2: Summary of Academy of Medical Educators standards and framework

3. Competency framework and training requirements

3.1 This section specifies exactly what is expected of educational supervisors, and provides an indication of the training that might support or enable effective delivery of those functions.

3.2 The framework is defined in terms of expected supervisory behaviours or outcomes, leaving local organizations and supervisors themselves the freedom to decide how best they might achieve the outcomes given their local circumstances.

3.3 The framework distinguishes between threshold descriptors and hallmarks of excellence, in order to provide a backdrop against which continuous improvement may be encouraged, planned and measured.

3.4 Specifically, this guidance does not mandate specific training courses or curricula; however some suggestions have been made about topic areas that might be covered in any training programme that might reasonably be expected to result in the intended outcomes.

3.5 The framework is designed around seven key areas of activity, all of which relate to the role of the postgraduate medical supervisor. The emphasis on individual areas will vary depending on the supervisory role⁸.

3.6 The seven framework areas are as follows:

1.Ensuring safe and effective patient care through training	7. Continuing professional development as an educator
2. Establishing and maintaining an environment for learning	
3. Teaching and facilitating learning	
4. Enhancing learning through assessment	
5. Supporting and monitoring educational progress	
6. Guiding personal and professional development	

3.7 Clinical supervisors are expected to meet the requirements of sections 1,2,3,4 and 7.

3.8 Furthermore, in line with the recently published generic curriculum, *Core Competencies for Doctors*⁹, an expectation at completion of training (i.e. on obtaining a CCT or CESR) would be that doctors can demonstrate attainment of competence in areas 1-4 sufficient to enable to function satisfactorily as a clinical supervisor from the first day of their first consultant post.

⁸ Adapted from the London Deanery Professional Development Framework for Supervisors, with permission.

⁹ Academy of Medical Royal Colleges (2009) *Core Competencies for Doctors* London: AoMRC

Appendix 3

Administering Body Arrangements for Non-Matriculated Postgraduate Programmes

Where ICE is the administering body for a non-matriculated postgraduate programme, e.g. Postgraduate Certificate or Postgraduate Diploma,¹ the responsibilities held by ICE complementing the academic delivery of the programme by the partner department/faculty include the following:

- ICE has administering body status from the General Board's Education Committee and takes the lead on QA matters with the support of the partner department/faculty.
- ICE administers the approval of any new programme and any substantive modifications to already-approved programmes via the relevant committees through to Education Committee.
- ICE approves the syllabuses (including *inter alia* learning outcomes, reading lists, assignment details and mark weightings) for course/modular elements via its Academic Operations Committee (AOC).
- ICE expects the partner departments/faculties to provide timetable information (e.g. teaching sessions and assignment deadlines) and information on who has attended courses/modular elements. ICE approves arrangements for late assignment submissions.
- ICE expects to appoint the examiners, moderators and assessors – the Course Director may not also be the Internal Assessor if the Course Director teaches or marks the course.
- ICE's website is usually the primary source of information for the programme with links from the partner's website. Enquirers are normally directed to ICE in the first instance but academic questions will be forwarded appropriately.
- Applications are normally sent to ICE in the first instance. ICE administers the admissions process, including the consideration of non-standard applicants, English-Language requirements and information on student-visitor-visa requirements. ICE's AOC considers and approves applications to the programme based on recommendations from the academic specialists.
- ICE approves the marking criteria.²
- ICE's AOC confirms the award or non-award of credit to students for the individual modules successfully completed and also the award or non-award of the final qualification.
- ICE expects to run the Subject Moderation Panel comprising the Course Director/Internal Assessor, University Moderator, External Examiner, chaired usually by the ICE Director and serviced by the programme administrator.

¹ Not overseen by the Board of Graduate Studies.

² Double marking is expected at postgraduate level and a sample of the work will be moderated (e.g. borderline cases, very high marks and something in the middle)

- ICE has full responsibility for student records, so requires the necessary data to set up the programme and any course/modular elements in CamSIS, as well as entering students and tracking the award of credit in CamSIS.
- ICE issues the ICE Student Handbook to students, expects to receive a copy of any programme-specific handbooks together with identification of amendments, and expects these handbooks to provide advice to students consistent with the ICE Student Handbook, particularly, for example, in respect of matters that might lead to complaints and appeals, and in respect of the procedures for dealing with complaints and appeals that arise.
- ICE normally expects to host the VLE for the programme and provide online submission of assignments via the VLE.

Proposal Version: 2nd draft
Date last amended: 06/02/2012

University of Cambridge Institute of Continuing Education

Business Case for New Programmes

SECTION A: OVERVIEW

1. The award

(a) Subject and Title of Award	<i>Postgraduate Certificate in Medical Education</i>
(b) Level of Award	FHEQ Level 7 (M Level)
(c) Proposed dates of commencement and first examination	Start: September 2012, completion in one year.
(d) Student status (e.g. part-time, non-matriculated)	Part-time, non-matriculated

2. Proposed student intake

(a) Initial number	25 (annual intake)
(b) Minimum no of students per cohort to make course financially viable	15
(c) Maximum cohort size	30
(d) Total no of students on programme at any given time	30

SECTION B: THE PROGRAMME

Please cross-refer as necessary to the attached Programme Specification for the programme

- a) *Please identify by cross-referring to the Programme Specification the main features of the proposed syllabus and curriculum.*

The syllabus for this course takes account of the recommendations of the General Medical Council (2009, 2012), The Academy of Medical Educators (2011) and the Department of Health (2012) which defines the attributes of doctors who have responsibilities for teaching and educational supervision. It also takes note of the guidance of the Higher Education Academy following and

mapping to their UK Professional Standards Framework (UKPSF) for teaching in higher education. Finally the syllabus and curriculum have been designed to take account of the guidance produced by the Academy of Medical Educators (AoME 2011) who have recognised that Education in Medicine is distinct from teaching in higher education in general because of the central place that patient care occupies not only in teaching and learning but also in assessment and feedback. The AoME have developed a description of the standards that are mapped against the generic standards such as those produced by the GMC and the HEA. In the East of England the Multi-Professional Deanery has published its response to the recommendations of the DOH, GMC and AoME.

The curriculum covers the principal areas in which a medical professional will be expected to teach, it looks at educational theory, the evidence about teaching in general in higher education, in medicine in particular. The proposed curriculum is partly delivered face-to-face but there is the expectation that there will be a considerable amount of self-directed learning, experiential learning and reflective practice. It involves peer review. There is note made of how to deliver teaching, set educational objectives and also about how to carry out feedback, evaluate teaching and learning and how to reflect on what has been achieved. The course materials include a blended learning programme of written and online components as well as the face-to-face learning.

See the programme specification for details of the structure and assessment.

- b) *Please state the academic purpose in putting the programme forward, together with the objectives it seeks to achieve, including a profile of the students at whom it is aimed.*

All doctors have a duty to teach undergraduate students and also colleagues who are doctors or professional allied to medicine. They have a duty to ensure that they are proficient in this role but traditionally very little formal training has been available. However, the practice of medicine is about teamwork and professionals of different disciplines working together. The School of Clinical Medicine has already been running its own educators training programme (non-credit bearing) for two years and this has been over-subscribed, hence the need to for greater provision with University accreditation.

The proposed Postgraduate Certificate course is designed to be open to any doctor who has completed their first year of foundation training onwards as well as other professionals allied to medicine who have a role in the education of undergraduate medical students and colleagues who are doctors as well as other health care professionals. The programme is designed to produce a practical approach to teaching but one, which is based on the current evidence that is available about education of adults in general and medical personnel in particular. It is also designed to be multi-professional in terms of its applicants.

It should provide a rigorous postgraduate programme and associated University award and remove the need for Cambridgeshire-based medical professional to travel elsewhere to study.

- c) *Give a brief summary of particular regulatory, financial or other issues which have needed to be addressed in framing the proposal.*

Section (a) above details the HEA, GMC and AoME frameworks in operation.

Teaching is being increasingly recognised as an important part of the medical professional's roles. It is now also becoming recognised by the Department of Health, GMC that medical professionals who teach need to be trained to do so and also regularly appraised.

To this end, funding has been made available to each region through the NHS East of England Multi-Professional Deanery to support postgraduate study for medical professionals who are involved in teaching. In the East of England, four postgraduate education centres³ for hospital specialists, GPs and other medical professionals have been allocated bursary funding for postgraduate programmes in medical education: up to £3,000 towards a Postgraduate Certificate and £7,500 for Master's programmes. In Cambridgeshire alone, CUH NHS Foundation Trust holds bursary funding for up to 24 people per annum and the other three postgraduate education centres hold similar amounts for educators in other areas within the East of England within easy reach of Cambridge.

Courses available nationally, regionally and online to support the development of medical educators have been reviewed in the design of this course, which is on the recommendations of the Academy of Medical Educators guidelines and is modular. This programme is unique in being open to doctors at a relatively early stage in their careers. We have found that the demand for places on the current development programmes run within the University of Cambridge School of Clinical Medicine have been oversubscribed and there has been interest and uptake of places by doctors and other medical professionals who are at both junior and more senior stages in their career. A formal teaching qualification is now a recognised part of personal development for many doctors who teach as part of their duties.

The cost of the course to students will be set at a level, which is within the range of fees charged by other local and national bodies that run similar courses, and aligned with available bursary funding.

- d) *Describe the consideration given to, and identify any, generic elements of the programme that might have wider use, e.g. for other programmes or student support.*

The proposed Postgraduate Certificate has been designed to allow people to complete the course on a non-accredited basis as well if they simply want the professional recognition as Fellow of the HEA.

- e) *Describe the consideration given to, and identify any, elements of the programme that might be used for public engagement, e.g. as open-access resources and/or tasters, and/or for other types of course, e.g. in-company courses, short courses, day and weekend courses and weekly classes.*

Not applicable.

- f) *Describe the consideration given to, and identify any, use of multimedia, digital and video resources. Describe the consideration given to online or distance provision/learning support that might relate to the target student population.*

The programme is a blended programme with elements of the programme being delivered face-to-face but for each of the three modules there will be VLE resources available and between-module support provided. There will also be reflective spaces with questions and self-assessment exercises. The students are required to keep an online reflective diary and blogs and they are encouraged to interact and share experiences. Part of the peer appraisal can include video submissions of teaching episodes and these can also be uploaded and used for reflection by the students and their tutors.

- g) *What is the expected geographical spread of the students? [Local to Cambridge, widespread across the UK, overseas]*

The course will be open to students throughout the UK but it is likely that the majority of the students will be from the East of England (especially because of the available bursaries in the region) and especially those with links to the School of Clinical Medicine in the early stages and hopefully a wider catchment with time. There is already a waiting list from people who are currently participating in the other programmes currently run by the School of Clinical Medicine.

- h) *Describe the consideration given to the programme structure to ensure, if appropriate, that it is as accessible to international students as possible [include consideration of visa regulations].*

The programme will be delivered in three modules (each being two full consecutive days – Friday and Saturday – and a number of half days). The weekend blocks are intended to be convenient to students who are working full time and may have to travel to the Maddingley Hall, where face-to-face sessions are delivered. Video evidence of teaching for peer review allows participants to participate in the process without being forced to work locally. But peer review of the material will be part of the course structure for several of the modules. It is unlikely that there will be many students based abroad undertaking the programme.

- i) *Students who are in full-time employment often find it difficult to keep up with their studies if their employer increases or changes their workload. If it is expected that the students are to be recruited and admitted from a profession that is likely to be demanding, stressful or erratic, what steps have been taken to ensure that employers have agreed to support students from the outset of their studies?*

Study leave is allowed for most medical professionals as part of their contract and to support their own professional development. However, as the faculty themselves are medical professionals careful consideration has been given to the timing particularly of the face-to-face components of the modules with a maximum block of two days per academic term plus a few monthly half days. The timetable for the full year will be made available well in advance to allow early booking of study leave.

- j) *How will the views of the student body on the course be identified and taken into account in course planning and development?*

Course evaluation is collected at the close of each face-to-face session and there is open discussion about material covered and the way in which it was delivered. Reflection on the course itself and the process followed is an integral part of each teaching session as well as opportunities to reflect in the on line diary and discussion after the sessions.

- k) *If the proposed course is to replace a similar course, which will then be discontinued, are there vested interests, and how is it proposed to address them?*

There are currently three non-credit-bearing courses run by the School of Clinical Medicine. Two of these are designed to allow students to be recognized as Associate Members of the HEA – these will be left unaffected. The PGCert builds on the third of these courses such that the PGCert can be studied not for credit and result in recognition as Fellow of the HEA.

SECTION C: RATIONALE

- a) *Describe how the programme fits in with:*

- *The Institute's vision and mission [including: strategic fit; reputational enhancement; and financial sustainability]*
- *Existing subject provision within the Institute and more generally within the University.*

The School of Clinical Medicine has recently successfully developed a programme for recognising excellence in research but has to date not run an equivalent programme in Medical Education. There is an increasing need to demonstrate that there is quality in the medical education that is offered and this is regularly reviewed by QAMBE (Quality Assurance in Basic Medical Education). The School is proud of its reputation and sees the development of a formal staff development as one of its priorities over the next 5 years to match its achievements over the past 5 years when it was highly rated at its last inspection and it figures well in the national student survey. It is also keen to work with the School of Biological Sciences and to work alongside them in improving teaching standards.

This Postgraduate Certificate meets many of elements of ICE's vision and mission ...

ICE Vision: Sharing Cambridge with the world – communicating research and scholarship through teaching, locally and globally

ICE Mission: To enrich and transform lives and prospects with innovative programmes that inform and educate, making the experience of Cambridge learning available to all by:

- Fostering a culture within which communication of the University's research and scholarship to diverse audiences is held in the highest esteem
- Anticipating and responding, where appropriate, to educational needs regionally, nationally and internationally

- Providing flexibly-delivered, academically-challenging accredited and non-accredited programmes across the University's disciplinary range for both personal and professional interests
- Offering part-time undergraduate, graduate and alumni programmes for global audiences and leading international institutions
- Developing e-learning resources and programmes to extend Cambridge's distinctive approach to teaching and learning, and contributing to its knowledge-transfer activities

b) What is the expected demand for the programme, in terms of student numbers and quality of potential intakes? [Describe any surveying (online or otherwise) conducted. Attach any available evidence from employers, other HE institutions, careers services, etc.]

The existing programmes have been oversubscribed by up to 100% with waiting lists of up to a year such that a duplicate FHEA programme has had to be run. A survey of current students on the FHEA programme suggests that up to 50% of current participants would like to move on to a higher-level qualification. These programmes have been advertised internally within Cambridge and two other NHS trusts only. A similar postgraduate programme run in the West of the region is now heavily oversubscribed and is the nearest course available for people working within the Eastern region.

Recent developments and guidance from the Department of Health, GMC and AoME have led to a local response by the East of England Deanery, including bursaries for postgraduate programmes. We expect a typical cohort of about 25.

c) What is the rationale for the expected demand for this course? [Describe any surveying (online or otherwise) conducted. What does this course offer that can't be found elsewhere; is there sufficient surfeit of students from existing courses offered by other HE institutions; how popular is the subject across the target audience and what competing courses are available?]

The rationale for this course is based on the experience of those running similar courses in Eastern England, a national course in London and some online courses run elsewhere in the UK. The School itself has paid for a number of its own teachers on a course run elsewhere and would rather in future that its own teachers could study with the University.

The recent statement from the Eastern Deanery is likely to increase demand even more especially as there is funding to support participants develop their skills. It appears that there will be up to 100 funded places within the region and at least 24 administered through the Postgraduate Education Centre in Cambridge alone.

d) What are the views on the case for the proposed course and its suggested format from academic peers inside and outside the University, potential collaborative partners, relevant employers, professional or statutory bodies, any other external advisers? Does the relevant faculty/department in the University support the proposal? [Attach copies of letters/responses]

The proposed course is designed to reflect the recommendations of the GMC, HEA and AoME as outlined in section B (a).

SECTION D: RESOURCES

1. Teaching, Assessment and Examining

- a) What level of teaching resources is required in terms of staff hours and numbers of staff? [Part-time tutors, Institute lecturers, supervisors, etc.]*

The programme contains approximately 92 hours of contact time with students. It is envisaged that a core of faculty members who already deliver teaching in the current programmes will deliver teaching. Many of these have teaching and staff development as part of their existing contracts but depending on the response we may have to recruit some faculty members to deliver specialist topic teaching sessions and to support the faculty in small group work and completing assessment and appraisals.

- b) How will new or extra teaching be provided? [Please mention any issues concerned with its availability within the timescales and at the levels of quality proposed.]*

The School of Clinical Medicine sees the programme, which is being proposed, as a responsibility for several faculty members. Over the past 5 years many of the faculty have themselves followed one of the educational programmes designed to support medical educators and there are at least 5-6 who now have Masters in Medical Education. The timing of the modules has been designed not only to allow working participants to attend but also to coincide with the working patterns of faculty members who are nearly all full time clinicians as well.

- c) Have those expected to contribute to the teaching, supervision and assessment indicated their willingness and ability to do so?*

This proposal has been developed by a core of faculty members who support this development and have shown willingness and an ability to do so.

- d) Are there any implications for the availability of resources for other courses within the Institute? [Will existing provision have to be given up in order to allow the new programme to be offered? Will it be necessary to make adjustments to other parts of the Institute's teaching resources in order to release teaching resources for the proposed new programme?]*

Not applicable.

- e) Have the necessary examiners and moderators been secured?*

Not as yet but this is not expected to be problematic given the pool of expertise within the School of Clinical Medicine and extensive links with other educational establishments should allow for the necessary external examiners.

2. Other Resources not covered elsewhere:

- a) *How many full-time equivalent administrators and clerical staff will be involved in running the programme?*

The programme will be administered through the ICE and taught at Madingley Hall. We envisage 0.25FTE of administrative programme staff (a mixture of APM and secretarial support) once in steady state, plus additional Teaching and Learning Divisional support via the Registry and eLearning for VLE set up and maintenance.

- b) *Are students expected to have access to computers?*

Yes

- c) *What equipment, teaching accommodation, residential, catering facilities may be required?*

There will need to be teaching space for face-to-face sessions sufficient to allow 25 students at a time to work in café-style format as well as two breakout rooms for small group work. The group will internet access and flipcharts – video equipment will also be required which the Clinical School will provide. Standard day and half-day catering will be required.

Teaching will be at Madingley Hall if it can be accommodated. Students tuition may require overnight accommodation on Friday nights for the three two-day blocks – this will be booked and paid for separately from the tuition fees.

- d) *If a matriculated programme, have colleges agreed to take students? Please list the colleges which have agreed to take students on this course. [Attach letters confirming this.]*

Not applicable.

- e) *Please specify any implications for staff training and development.*

No additional training as staff involved have completed their training already

- f) *What are the proposed student fees (HEU and Overseas)?*

PGCert: £3000 HEU and £6000 Overseas*

PGCert module: £1000 HEU and £2000 Overseas

[FHEA non-credit-bearing study only: £1050 HEU and Overseas]

*£2800 and £5600 if already holding FHEA status and not attending the first two days of module 1.

- g) *Specify 'additional' costs such as field trips, equipment, unusually expensive books. (When and how will these be made known to potential students?)*

Not applicable.

What is the medium term (five-year) financial forecast for the course [including upfront development costs and attach budget spreadsheets]?

There is a forecast breakeven number of 24 based on all paying £3000, i.e. no overseas fees and any taking the non-credit-earning FHEA route provide additional income. We anticipate recruitment at this level from year.

References

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http://www.gmc-uk.org/education/postgraduate/doctor_as_teacher.asp

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