

**MSc Applied Biomedical Science
Revalidation
Outcome and Conditions**

Thursday 26th September 2024
On Microsoft Teams

PANEL MEMBERSHIP

Chris Baker (Chair)	Head of Centre for Allied Health, City St George's, University of London
Dr Alison Cottell	Programme Director for Microbiology and Biomedical Science, University of Surrey
Dr Lidia Maryniak	Lecturer in Biomedical Sciences, Birmingham City University
Dr Mathew Paul	Co-Director for PgCert Research Skills & Methods, City St George's, University of London

In attendance

Glen Delahaye	Senior Quality Assurance and Enhancement Manager, City St George's, University of London
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Decision

- 1) The Panel recommended reapproval of the MSc Applied Biomedical Science for a further period of five years. The course would next be reviewed or revalidated in 2029/30. A number of Conditions and Recommendations were agreed by the Panel and are listed below.
- 2) The course team would need to address the conditions and submit an action plan to the Chair of the Panel by the 19th November 2024. The action plan should also include a response to the recommendations, although the recommendations were not mandatory to complete.

Conditions

1. Review Learning Outcomes to ensure that they are appropriately set at Level 7 and that they are reflective of what is being assessed.

The Panel noted that there were several modules for which the learning outcomes were not consistent with what would be expected at postgraduate level. In particular, they highlighted the following modules:

- Hot Topics in Biomedical Science
- Population Health Research
- Laboratory Research Skills

They found that the content of the modules and the work students would be doing for the modules appeared to be more advanced than that described in the outcomes.

The Panel wished to highlight the following modules as examples of well written learning outcomes:

- Clinical Trials

- Personalised Medicine

The Panel suggested that QAA benchmark statements might provide a useful reference point when writing Learning Outcomes. They also noted that rewriting the learning outcomes would help to prepare them for accreditation, should they pursue it at a later date.

2. Reduce the content of the Personalised Medicine module to maintain consistency with other modules.

The Panel described the Personalised Medicine module as being “overtaught”. They suggested that the high number of contact hours might be contributing to low pass rates, as students could be overwhelmed by the amount of material they needed to revise. They welcomed the change in assessment format from a timed exam to an open-book exam, but suggested a further review of the content of the module and to consider reducing it to maintain consistency with other modules.

3. Review the assessments strategy.

The Panel found that overall, the approach to assessment was clear, but noted that it might be helpful if assessments were described in more detail in student facing documents, such as the module descriptors. They noted that not all the module descriptors had information on the word count of assessments or the duration of assessed presentations.

For some modules, students would have only two weeks to complete the assessment. The Panel found that this could put some students at risk of not submitting the coursework at all. This would be particularly concerning for modules where one assessment contributes to 100% of the module mark.

Recommendations

1. Develop a new marketing strategy that better highlights the many strengths that the course has to offer.

As part of this, consider nominating a specific member of the course team to focus on marketing.

2. Consider nominating a member of the course team to be the admissions tutor.

Nominating an admissions tutor would allow a member of the course team to attend the admissions decision group.

It was noted that postgraduate course teams were not yet represented on the group. The Chair would liaise with the Deputy Head of the Graduate School (Taught Programmes) in order to get them added.

3. Consider further coordination of the course with other courses and activities within the University.

The Panel noted that the Hot Topics in Biomedical Science module worked well and that it could be shared with other courses. They noted that the PgCert Healthcare Research Skills and Methods had a critical appraisal module that could perhaps be aligned with the Hot Topics module.

The Panel also acknowledged that the Data analysis skills module was intended to be shared with the MRes Biomedical Science course. Additionally, the Panel suggested that the Laboratory research skills module might appeal to students of other courses.

4. Review whether there might be an appropriate and recognised body that could accredit the course.

The Panel acknowledges that the course team had previously considered accreditation. They wondered whether accreditation from the Royal Society of Biology might be appropriate.

5. Review and clarify the rationale for the assessment weighting for the Clinical Trials module

The Panel remained unclear as to why the completion of the Research ethics course for the Clinical Trials module only contributed 5% to the overall module mark and recommended that the course team review it.

6. Ensure that there is clear detail on how engagement with students is undertaken, both in terms of collecting feedback and closing the loop.

This could be described within the programme specification, as it is a student-facing document.

7. Engage with employers to gain a better understanding of their needs, to help ensure the programme remains fit for purpose.

8. Review the supplementary reading to ensure that it is up to date.

Technical Conditions

1. The Panel noted that the previous course title (MSc Translational Medicine) was still used in some of the documentation.
2. It was not clear to the Panel what exit awards were available (such as PgCerts or PgDips).
3. It was not clear how many references students would need in order to be admitted on the course, as it was described differently in the Programme Regulations, Programme Specification and Resource and Delivery Document.
4. The modules listed in the Programme Specification document were not consistent with other documentation. The document appeared to refer to the previous structure of the programme and the total number of credits added up to 165 (instead of 180 credits) due to one module not being listed in that section.
5. The Scheme of Assessment Document listed three modules ("Case Studies in Drug Discovery and Development", "Clinical Trials" and "Genomic Technologies in Clinical Diagnostics") as cores modules. However, the 'Genomic Technologies in Clinical Diagnostics' was not listed in the proposed new course structure and most likely should be removed from this document.

GD/Oct2024