

Programme Specification (Postgraduate) Date created/amended: 03/11/2022

For 2023/24 intercalated entry

1. Programme title(s):

Intercalated MSc (iMSc) Quality and Safety in Healthcare, PG Diploma[†], Certificate [†]

[†] Postgraduate diploma/certificate is an exit award only

2. Awarding body or institution:

University of Leicester

3. a) Mode of study:

Full-time

b) Type of study:

Campus-based

4. Registration periods:

The programme will follow the University regulations:

- iMSc (180 credits):
 - o Normal period of registration: 12 months full-time;

Note: MSc registration periods follow Senate Regulation 2.26.

5. Typical entry requirements:

Eligible students will be intercalating students otherwise undertaking one of the MBChB programmes (A100, A199) at the University of Leicester or an equivalent course at another UK HEI.

6. Accreditation of Prior Learning:

Students can APL credits into the iMSc from another course, and in accordance with Senate Regulation 2 and the University Policy on the Accreditation of Prior Learning. Credits must be at Level 7 and must be relevant to the programme. This will be considered on an individual basis by the course directors once evidence of the APL credits has been submitted.

The maximum accreditation of prior learning is 60 credits for the iMSc.

Where AP(C)L is approved this will be graded and, where appropriate, will contribute to the final classification of an award.

7. Programme aims:

The programme will attend to both theoretical and practical aspects of healthcare quality and patient safety; it will draw on the internationally renowned research of the SAPPHIRE (Social Science APPlied to Healthcare Improvement REsearch) and TIMMS (The Infant Mortality & Morbidity Studies) research groups as well as other experts at the University of Leicester. The course offers a sound grounding in research methods, practice and theory in the field of healthcare quality and patient safety as well as developing key transferable skills in critical appraisal, academic writing, project management and communication.

8. Reference points used to inform the programme specification:

- The modules and structure of the iMSc Quality and Safety in Healthcare are identical to the current successful MSc Quality and Safety in Healthcare, with only minor changes to the timetable of the Dissertation module in order to allow students to resume their MBChB programme on time. This is explained further in Section 10.
- We have consulted (and will continue to consult) with the **Leicester Learning Institute** for guidance on the design and development of: intended learning outcomes and transferable skills; innovative and technologically enhanced teaching and learning methods; and assessment methods and their alignment to ILOs.
- The programme is currently managed by a programme development committee which includes academic staff from SAPPHIRE and TIMMS research groups and clinicians with expertise in quality improvement.
- The programme incorporates the completion of two modules, from three possible modules, from the MRes Applied Health Research taught in the department. These MRes modules are subject to regular annual review by the MRes appointed external examiner and via the University of Leicester Annual Development Review. The modules are of high quality.
- Throughout the programme students will be invited and encouraged to evaluate sessions and modules. Module leaders will continuously evaluate the content and contributions to their module.
- An External Examiner has been be appointed according to Senate regulations 7.18-7.60.
- The programme is subject to **University of Leicester Periodic Developmental Review**.
- To benchmark and inform the standards and aims of the programme, we have drawn upon the following sources:
 - QAA Masters degree characteristics March 2010
 - QAA Masters Medicine
 - University of Leicester Learning and Teaching Strategy 2016-2020
- To benchmark and inform the content of the programme, in relation to the specific focus on patient safety and quality improvement, we have (and will continue to) engage in the following activities:
 - Consultations with key stakeholders (e.g. academics and clinicians with expertise in areas relating to each module);
 - Keeping abreast of relevant academic literature;
 - Ensuring we are up to date with documentation produced by relevant organisations and professional bodies, including:
 - Health Foundation e.g. 'Overview of Postgraduate Courses, online courses, training centres and short courses in Quality Improvement and Improvement Science in the UK' (Health Foundation, March 2015);
 - Academy of Medical Royal Colleges e.g. 'Quality improvement curriculum development recommendations' (AoMRC, Nov. 2015).

9. Programme Outcomes:

As a result of successfully completing the **iMSc** in Quality Safety in Healthcare, students will:

- be able to apply knowledge and skills acquired from the modules of the programme portfolio;
- be able to explain good principles of design, conduct, and governance of health-related research;
- be able to appraise examples of health-related research using quantitative and qualitative methods;
- be able to apply methodological knowledge and skills to their own area of practice/interest
- have practical experience of undertaking a supervised research, evaluation and/or improvement project, applying the knowledge from taught modules;

- have experience of project management, working with a research supervisor and, where appropriate, research ethics and governance procedures;
- have experience of writing a report on their project in the form of a dissertation (max. 12,000 words).

Intended Learning	Teaching and Learning Methods	How Demonstrated?			
Outcomes	:-::-!:				
(a) Discipline specific knowledge and competencies Knowledge					
Demonstrate mastery of a broad range of contemporary issues and a broad body of theory relating to quality and safety in healthcare.	Lectures, seminars, directed and self-directed reading and study, group work, workshops and consultation with teaching staff. Project supervision.	Summative assessment (written reports and essays, oral presentations), formative assessment (written assignments, activities undertaken via the virtual learning environment (VLE) and oral presentations) and non-assessed group work. Dissertation.			
	Concepts				
Define and critically appraise key concepts and theories in: patient safety and quality improvement in healthcare; human factors, measuring and monitoring, and leading, managing and organising quality and safety.	Lectures, seminars, directed and self-directed reading and study, group work, workshops, consultation with teaching staff. Project supervision.	Summative assessment (written reports and essays, oral presentations), formative assessment (written assignments, VLE activities and oral presentations) and non-assessed group work. Dissertation.			
Apply key concepts used in analysis of quality and safety, and recognise the challenges in conceptualising and defining quality in healthcare.	Directed and self-directed reading and study, group work, workshops, consultation with teaching staff. Project supervision.	Summative assessment (written reports and essays, oral presentations), formative assessment (written assignments, VLE activities and oral presentations) and non-assessed group work. Dissertation.			
	Techniques				
Demonstrate competence and a critical approach to problem identification, solution design and testing.	Seminars, group work, team problem solving activities and consultation with teaching staff. Project supervision.	Summative assessment (written reports and essays, oral presentations), formative assessment (written assignments, VLE activities and oral presentations) and non-assessed group work.			
		Dissertation.			
Analyse and interpret data related to healthcare quality.	Seminars, directed reading, group work, computer practical classes and consultation with teaching staff. Project supervision.	Non-assessed computer-based activities, formative assessment (group work and presentation) and summative assessment (written reports). Dissertation.			
		Dissertation.			

Intended Learning Outcomes	Teaching and Learning Methods	How Demonstrated?			
Critical analysis / Appraisal of evidence					
Evaluate the quality of methods and evidence used in quality and safety improvement projects and studies.	Seminars, directed and self-directed reading and study, group work, team problem solving activities and consultation with teaching staff. Project supervision.	Summative assessment (written reports and essays, oral presentations), formative assessment (written assignments, VLE activities and oral presentations) and non-assessed group work. Dissertation.			
Presentation					
Present knowledge, arguments and evidence relating to quality and safety in healthcare, clearly and critically in a variety of written, visual and oral formats, and to a range of audiences.	Directed and self-directed study, group work and feedback from peers and staff. Project supervision.	Summative assessment (written reports and essays, oral presentations), formative assessment (written assignments, VLE activities and oral presentations) and non-assessed group work. Dissertation			
	(1) Torrest or the all the				
	(b) Transferable skills Research skills				
Apply appropriate and sophisticated research methodology; analyse and interpret quantitative data; and use statistical software.	Workshops (including computer-based classes) and consultation with teaching staff. Independent research and project supervision (if quantitative in nature).	Summative and formative assessment (written reports and oral presentations) and non-assessed computer-based activities. Dissertation (if quantitative).			
	Communication skills				
Written: Express ideas, theories and concepts clearly in writing in an academic style.	Seminars, directed and self-directed reading and study, group work and consultation with teaching staff. Project supervision.	Summative and formative written reports and formative VLE activities. Dissertation.			
Oral: Communicate clearly and with sensitivity with peers and different stakeholder groups (including staff and patients) in relation to issues of patient safety.	Seminars, group work, team problem solving activities and consultation with teaching staff.	Summative and formative oral presentations and non-assessed group work and contribution to seminar discussions.			
	Data presentation				
Present methods, findings and conclusions from data analysis in a variety of formats (written, visual and oral formats).	Directed and self-directed study, seminars and group work. Independent research and project supervision.	Summative and formative written reports and oral presentations. Dissertation.			
Haramand in the state of the st	Information technology	Allerman			
Use word processing packages to produce, format and present written work professionally.	Directed and self-directed study. Independent research and project supervision.	All written coursework and contributions to VLE activities. Dissertation.			
Employ presentation packages to support the development and delivery of presentations.	Directed and non-directed study and group work.	All presentations.			

Intended Learning Outcomes	Teaching and Learning Methods	How Demonstrated?	
Master technology (including VLE) to support collaborative working with peers.	Group work – both within and out with timetabled sessions.	Contribution to group work and VLE activities.	
Demonstrate competence in use of statistical software.	Seminars, computer-based classes and consultation with staff. Independent research and project supervision (if quantitative).	Any coursework involving analysis. Dissertation (if quantitative).	
	Problem solving		
Works effectively both independently and with others to stimulate and evolve solutions to problems.	Group work, team problem solving activities, directed and self-directed study and consultation with teaching staff. Independent research and project supervision.	Summative and formative coursework and presentations, formative contribution to VLE activities and non-assessed group work. Dissertation.	
Applies relevant theory and appropriate methods to problems (e.g. case studies).	Seminars, directed and self-directed reading and study, group work, team problem solving activities and consultation with teaching staff. Independent research and project supervision.	Summative and formative coursework and presentations and non-assessed group work. Dissertation.	
	Working relationships		
Work effectively in a team with individuals from different backgrounds; and practise the principles of inter-professional working.	Seminars, group work (both within and out with timetabled sessions) and team problem solving activities.	All group work and summative written reports on group activities.	
	Managing learning		
Demonstrate capacity for independent study, self-organisation, time management and prioritisation and project planning.	Self-directed reading and study. Independent research and project supervision.	Managing own workload, meeting deadlines and contributing to group activities. Dissertation.	
Engage in reflective practice, evaluate own strengths and limitations and respond to constructive feedback.	Group activities, VLE activities and consultation with staff.	Completion of reflective learning diary.	
Plan and coordinate activities in a team setting.	Group work and team problem solving activities.	All group work and summative written reports on group activities.	

10. Special features

In order to allow students undertaking the iMSc to resume their MBChB programme at the end of the iMSc, the timetable for the Dissertation module (MD7560) has been amended for those students taking the iMSc compared to the students taking the MSc. An example of these timetables is given for 2019-20 in Appendix 3.

There important points to note from this timetable are:

1) The taught sessions are identical for MSc and iMSc.

- 2) The iMSc students will progress to the Dissertation after all taught sessions are completed but before their assessment marks are confirmed at an Exam Board. However, this is exact the same situation for the MSc students and it is made clear that continuation on the dissertation is conditional on appropriate marks being confirmed at the Exam Board.
- 3) The period of time that the iMSc students have to complete their dissertation project is exactly the same as that for the MSc students (14 weeks).
- 4) The difference between the two routes is that the iMSc students start their dissertation projects before submitting all of the assignments for their taught modules. This is necessary to allow them to submit their dissertation reports before their return to the MBChB programme at the necessary time point. The students will be made clear about this difference before accepting a place on the course.
- 5) There is the possibility to have an additional meeting of a Panel of Examiners to provisionally agree dissertation marks for the iMSc students in the beginning of September.

The administration and teaching of the iMSc programme will be conducted in the George Davies Centre. In addition to the classrooms for teaching delivery, the building includes computer rooms and space for self-directed study with 24-hour access for postgraduate students. A close relationship exists with the local NHS (providers and commissioning groups) providing opportunities for collaborative dissertation projects focused on developing, implementing and evaluating interventions to improve real-world quality and safety.

11. Indicators of programme quality

- The programme is be subject to standard University of Leicester procedures for quality assessment, including Annual Development Review, liaison with College Academic Committee and the programme will report to the department's Learning and Teaching Committee (L&T).
- An External Examiner has be appointed according to Senate regulations 7.18-7.60.
- There will be systematic, regular evaluation by students registered with the programme, including anonymous evaluation of sessions and modules. A student representative will be invited to attend L&T committee meetings (for unreserved business only).
- The programme's teaching staff will engage with University procedures for peer assessment of teaching and marking.
- We will be seeking accreditation from relevant bodies/organisations. This is likely to involve seeking accreditation for individual modules; for example, accreditation of module MD7457 from the Chartered institute of Ergonomics and Human Factors.

12. Scheme of Assessment:

As defined in <u>Senate Regulation 6:</u> Regulations governing taught postgraduate programmes of study.

13. Progression points

As defined in <u>Senate Regulation 6</u>: Regulations governing taught postgraduate programmes of study.

14. Rules relating to re-sits or re-submissions:

As defined in <u>Senate Regulation 6:</u> Regulations governing taught postgraduate programmes of study.

15. Additional features (e.g. timetable for admissions)

N/A

Appendix 1: Programme structure (programme regulations)

iMSc MD7455, MD7470, MD7458, MD7549, MD7560, plus 2 options from MD7431, MD7461 & MD7433.

Module code	Module title	Credits
MD7455	Quality and Quality Improvement in Healthcare	30
MD7470	Patient Safety and Applied Human Factors	30
MD7458	Measuring and Monitoring in Healthcare	15
MD7459	Leading, Managing and Organising Quality and Safety in	15
	Healthcare	
MD7460	Dissertation (Quality and Safety in Healthcare)	60
MD7461	Quantitative Methods for Quality and Safety in Healthcare	15
MD7433	Qualitative Methods in Applied Health Research	15
MD7431	Fundamentals of Applied Health Research	15

Appendix 2: Module specifications

See the Module specification database (log in required)