

To Te Poari Whai Kounga | Quality Alignment Board From Jo Thorogood

**PAQC-BHSMI** 

Title PAQC Chair's Quarterly Report Date 2020 / 07/ 31

#### Overview

2 PAQC meetings: 28th April & 9th June both via Zoom

Both meetings were focussed on Covid-19, the impact (real and potential) on students and mitigation strategies. Overall, it was evident that students and staff had coped well to this rapidly escalating situation which resulted in a very sudden move to online teaching; a process which was new to all concerned.

## **General Committee Health Check**

What is going well?

Despite the impact of Covid-19, staff completed all scheduled teaching for semester 1 on time. This included online assessments which went well; ARC approval received for required semester one changes.

Anecdotal evidence from the student rep., in June PAQC meeting, indicated students appreciated the level of support they had received from academic staff and Unitec in general over this difficult time.

No requests for student deferrals or withdrawals due to Covid-19.

What improvements can be made?

Issues around computer lab availability had been previously raised and escalated – HoS to review and consider potential solutions (June PAQC minutes)

What support is required (actions required) and/or what issues need to be escalated to Quality Alignment Board | Te Poari Whai Kounga?

None at present.

# Progress against 3 (max.) key actions

- APM met with MI Kaihautū and TPA liaison to consider approach to embedding Mātauranga Maori. Subsequent actions completed:
  - APM attended Te Tipare workshop
  - Library purchased 2 copies of He Pukapuka Reo Māori Hauora to assist staff in becoming familiar with using health related te reo terms.
- 2. The MI team have gained skills which will support the development of online learning resources 2020 work plan, as per the June PAQC minutes.
- 3. Graduate survey developed (action point in previous memo)



# **Priority Group Strategies**

### **Process**

Discussed at June PAQC meeting and was focussed on impact on Covid-19 and move to online learning. Learner outreach process and academic personal tutor system used to contact all students including priority groups; identify needs and most appropriate support mechanisms for individual students.

#### **Outcomes**

There has been no increase in withdrawal or requests for deferral due to Covid-19, for any students including priority groups. As noted in the June PAQC minutes, the online assessments went well.

## Risk management

# Summary

The risks to the MI programme during semester 1 were principally focussed on the impact of the Covid-19 pandemic on clinical placements, particularly for year 3 students due to graduate at the end of the year. This risk was mitigated by a proactive approach taken by the APM and Clinical Coordinator to work with our clinical partners, as well as all other UG MI providers in NZ, to create a plan that would safely support the student clinical experience, without overburdening the clinical departments. This process was supported by the ARC approved extension of the year 3, semester 2 period by up to seven weeks- to allow students to complete their clinical practicums and be eligible to graduate. In addition, further support around the safe return to clinical was achieved through APM being part of regional inter-disciplinary conversations.

The other major risk was related to learner success in a new and unexpected online environment and the subsequent level of support required for both learners and staff. These risks were managed in a number of ways. Students were supported by the Learner Outreach process, with the offer of WIFI packages/ laptops where necessary. Students were contacted at least twice over the lockdown period by their academic personal tutors as part of a check in process. Student-staff liaison meetings were increased to allow student reps to voice any concerns on behalf of their peers. As usual, individual course coordinators worked with students to ensure content related queries were dealt with effectively and efficiently. Finally, staff provided synchronous and asynchronous learning material to allow students to study when it was most convenient to them.

Support for staff to adjust to an online teaching environment was achieved through various means such as the departmental TPA liaison staff; AQA staff; online teaching guides; in conjunction with departmental colleagues.

At this stage there does not seem to have been a negative impact on student success and retention -with the ratified grades for semester 1 demonstrating a similar grade differentiation as in previous years.

As many of the year three papers extend over semester 1 and 2, it is not yet obvious whether final grades will be adversely impacted for those papers. However, there is no indication of a downward trend- as evidenced by the semester 1 tests and assignments results. As previously identified, semester two has been extended to allow year three students to complete their clinical practicums. This extension allows the MI programme to ensure the students have had the time to demonstrate the required competencies prescribed by the NZMRTB (our accrediting body).



# *Improvements*

MI staff are using this experience to look at ways in which to capture delivered lecture content for students.

# **Quality Reporting**

#### **Student Success**

Grades and Completions

Grades ratified 16th July at exam subcommittee not yet discussed at PACQ.

## Moderation

Moderation plans

Adhering to approved 2020 moderation plans i.e.

- Five courses (HEAL5254, HEAL5255, HEAL6252, HEAL6254, HEAL7175) due for external moderation during 2020
- Eight courses were internally moderation for semester one 2020. (HEAL7173, HEAL7174. HEAL7175, HEAL7178, HEAL5250, HEAL5251, HEAL5253, HEAL6256)

#### Moderation outcomes

CEPs in progress or completed for semester 1.

Summary of any known issues and any mitigation plans Completed CEPs to be reviewed and evaluated by MI team.

## **Student Evaluation of Courses**

Summary of response rates for programmes – Reported via TKK tracking

Main Program	Surveys Sent	Surveys Completed	Response Rate
BHSMI	376	113	30.1%
Total	376	113	30.1%

Reminder was sent from APM to ask students to complete surveys to try and increase response rates (noted in June PAQC minutes). Survey results being reviewed by MI team-PAQC has not been scheduled since release of surveys.

Summary of issues and improvement plans As above- TBA.

## **Course Evaluation and Planning**

Engagement

100% MI staff engagement with process. Completed CEPs to be available once all re-sit grades available to ensure CEP data accurate

#### Outcomes

All assessments were internally pre and post moderated, with relevant moderation packs completed. CEPs to be discussed at an MI team meeting in conjunction with student survey outcomes and will be used to identify where changes or improvements can be made.



# **Degree Monitoring**

**Process** 

**Outcomes** 

Monitor visit scheduled for semester 1, 2020 was deferred due to Covid-19. Rescheduled for semester 2, 2020.

# **Programme Review**

**Process** 

Programme review scheduled for semester 1, 2020 was deferred due to Covid-19. APM met with TQQ representative and determined evidence to be collated. Rescheduled to semester 2, 2020.

## **Professional Accreditation/Other**

**Process** 

Awaiting information from NZMRTB in relation to ongoing accreditation requirements. This is due to change in the accreditation process at NZMRTB, announced December 2019 i.e no change from previous report.

APM provided a six monthly update to NZMRTB in June to reflect impact Covid-19 had on the programme.

## Stakeholder Engagement

#### **Process**

Due to Covid-19 the stakeholder meeting scheduled for the 3<sup>rd</sup> April took place via Zoom and was focussed on supporting students through the pandemic i.e. changes to clinical placement dates to: ensure student safety; support student learning; provide the opportunity to meet the required competencies of the programme and our regulatory body. This was undertaken in conjunction with the need for clinical departments to focus on treating patients. The latter point is particularly significant given the nature of MI practice and the high level of imaging required for Covid-19 patients.

### **Outcomes**

The clinical placement extension request (approved by the ARC as noted above) was a direct result of conversations with clinical managers and other external bodies (noted in risk summary). In this way we have been able to provide support for our year 3 students in completing the programme and eligible to graduate by the end of the year.

## Research

To be discussed at next PAQC; scheduled for 17<sup>th</sup> August 2020.

# Programmes overseen by the PAQC:

Bachelor of Health Science Medical Imaging Level 7