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<b>To</b>	Te Poari Whai Kounga   Quality Alignment Board	<b>From</b>	Sharon Sitters Medical Imaging
<b>Title</b>	PAQC Chair's Quarterly Report	<b>Due Date</b>	2021/02/25

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## 1. Overview

This overview provides brief reflection of the work of the PAQC during 2020.

### General Committee Health Check

*What worked well?*

*Successful completion of semesters 1 and 2 despite regional lockdown, with well-managed disruptions to programme delivery timeframes. Competencies successfully met, no concerns were raised to the committee in the ratification process. This is reflected in the consistently high successful course completion and retention rates.*

*What improvements have been/will be made for 2021?*

*We received the draft monitors report in November 2020. Which identifies the need for team support for increased blended learning opportunities and additional investment for learning apps and subscriptions to support delivery.*

*The MI response to the monitors report is in progress, however the MI TPA liaison has been contacted to look at how the above two points can be actioned.*

*What support is required (actions required) to achieve these improvements?*

*As above.*

*What issues (if any) need to be escalated to Quality Alignment Board | Te Poari Whai Kounga?*

*None at present.*

### Progress against 3 (max.) key actions

- 1. UNITEC 5 year review to be completed – postponed due to Covid. The external monitor's visit included questions relating to the 5 year review, and the programme self-evaluation report is in progress. The programme review report and programme response to monitor report to be completed in upcoming team meetings and scheduled to be forwarded to PACQ for approval on the 17<sup>th</sup> of March.*
- 2. Increase the online learning components utilised within the programme to support current teaching. The requirement for additional resources such as microphones was met, this enabled staff to record lectures to aid asynchronous learning.*
- 3. Evaluation of graduate destination data and the survey question related to the value of "graduate outcomes". Planned emails to new graduates was postponed due to Covid, however a small focus group was held and data collected at this group has been used in the interim. The proposed email 'check-in' will be undertaken in 2021.*

## **Risk management**

### Process

PAQC minutes indicate that risk is discussed and timeframes for risk resolution are also discussed.

The PAQC is a supportive environment but nevertheless feels the responsibility to question the APM and HoS as to how the risks are managed/mitigated.

### Outcomes

One key risk area was determined to be **Medium level**:

One Programme Risk area - (BHSMI Programme delivery does not meet requirements of Programme Approval and Accreditation (and related) Rules (including: course durations, timetabled hours, learning hours, sub-contracted delivery, teaching location approval)

This has been left as a risk due to the potential that Covid-19 Lockdown may happen again and this will impact on practicum. At this time, we are managing this risk but could flare up again.

With the first lockdown all practicums were the same but at the second one DHB's had various restrictions i.e. allowed students, allowed students part-time, allowed no students.

All other areas are rated **Low**

Increase of students applying – people looking at retraining so enrolments into programmes is the same or higher than last year for next year enrolments.

## **2. Student support and achievement**

### **Priority Group Strategies**

#### Process

*The PAQC is confident that these processes are being used appropriately as evidenced by the interim PEP and the CEPs for semester 2. This is demonstrated in consistently high SCC in priority groups, please see interim PEP for more information.*

#### Outcomes

*PAQC is not expecting additional actions to support priority groups success as it is clear in the PEP that priority groups are supported and achieving appropriately. 2022 UNITEC targets for all priority groups have been exceeded.*

## **Student Feedback**

*The PAQC has expressed concern that the timing of the survey was not suitable for some of our students as they were in clinical at the time. This affected response rates. The use of generic questions was not beneficial in gathering useful data for the programme. Furthermore, course coordinators have noticed that this lead to lower course survey values due to inappropriate questions.*

*Staff undertook separate surveys to gather usable data.*

Outcomes of issues and improvement plans

*The PAQC are confident that the use of an alternative approach would benefit course survey results and would also see increased survey responses. Survey information is raised to the PAQC after consideration of the CEPs by the team in the regular staff meetings.*

## **3. Academic quality outcomes**

### **Moderation**

Moderation plans

The 2021 moderation plan was created by the MI team at the end of 2020. This will be approved in the upcoming PAQC meeting, as yet no concerns have been raised.

Moderation outcomes

In relation to internal moderation, this was completed in 2020 as evidenced by pre and post moderation reports and detail can be found in CEPs where necessary. The external moderation plan has been approved at UNITEC the MOU is currently with UCOL and ARA for sign-off. While there is no concern that this will not occur, the PAQC will monitor progress.

Summary of any known issues and any mitigation plans

As above.

### **Research**

*The PAQC is satisfied that all relevant research requirements are being met. Each staff member will review their research plan with the APM in the upcoming ADEP planning meetings. The MI programme is expected to maintain "green light" status with a number of research projects currently underway.*

## **4. Programme design, delivery and review**

### **Course Evaluation and Planning**

Process

*The PAQC is assured that the CEP process is underway. The APM is reminding staff where necessary to complete CEPs for semester 2, 2020. There is 100% completion for semester 1.*

*The current completion rate for semester 2, 2020 is skewed as year long papers have been incorrectly added to this CEP capture.*

## Outcomes

*Required programme changes are discussed in MI team meetings, these are informed by student feedback and collated in the CEPs. Where necessary, these changes are raised to the PAQC. For example, type 1 and 2 change approvals.*

## **Programme Evaluation and Planning (PEP)**

### Process

*No changes from last PAQC Chairs report. Plan for completion of 2020 full year PEP is in place.*

### Outcomes

*As above. There is every expectation that the 2020 full year PEP will be submitted on time.*

## **Degree Monitoring**

### Process

*The PAQC is confident that programme monitoring is being effectively managed. The external monitors visit was undertaken in September 2020, with the draft report received in November. The MI team are currently draft the report response.*

### Outcomes

*As above. The 2021 monitor's visit is being arranged for semester 1, 2021.*

## **Consistency Review**

### Process

*Not applicable.*

### Outcomes

*As above.*

## **Professional Accreditation/Other**

### Process

*Six monthly report to MRTB sent end of June. Focus on the impact of Covid. No response from the MRTB as yet. An annual report is to be sent to the MRTB before the first of April as part of their usual education provider accreditation process.*

### Outcomes

*In 2020, nothing was raised by the MRTB to indicate areas of concern. All reporting requirements in 2020 were met.*

## **Stakeholder Engagement**

### Process

The PAQC is confident that there is a clear and effective stakeholder engagement strategy for the MI programme. Biannual meetings with industry stakeholder groups and student-staff liaison meetings held every 6 weeks. In 2020, engagement with industry stakeholders and student increased as we managed course delivery and clinical placements during the lockdowns.

Recent programme changes including switching to the mid-year intake and moving away from shared papers are examples of consideration of stakeholder feedback in the direction of the programme. Stakeholders have also informed recent changes to the clinical assessment model.

## **Programme Review**

### Process

The PAQC is assured that the 5 year programme review is underway. Please see information regarding the external monitor's visit above.

*The MI programme self-evaluation report and the programme response to the 2020 monitor report are scheduled to be reviewed and approved by the PAQC in March.*

## **Graduate Outcomes**

### Process

*The PAQC agreed that the collection of graduate data was incomplete. In the interim PEP the programme rated this focus area as 'good' because of issues with the data, relating to the evaluation of the data gathered. Specifically, 'value for money' and the GPO. This has not changed since the previous report.*

*Recent graduates will be contacted in April to offer feedback. Focus groups will be used, where required, to supplement survey data.*

### Outcomes

*The PAQC is satisfied that graduates are achieving the graduate outcomes for the qualifications they have achieved. All students completing the degree in 2020 achieved registration with the MRTB and were employed.*

## **Reference:**

[PAQC Terms of Reference](#)