

UG SSCC Meeting (12.10.2016)

1. Apologies
2. Previous Meetings
3. Matters Arising
4. AOB
5. Next Meeting
6. Chairman's Name & Date
7. To Do

COLOUR CODING:

BLUE – Matter arising/Student Comment

GREEN – Tutor Comments

Red – What we can do about it

1. Apologies

Vicki Cormie, Paul Reynolds, Evelyn Watson, Isaac Bonisteel, Rachel Davies

2. Previous Meetings

N/A

3. Matters Arising

MD2000

- **Clarifying the role of tutors** – Variations between students meeting tutors – can we clarify the role of them? Baseline standards. (Re) Definition in first lecture about what we can expect from them. Problem with baseline is that some people give more and so baseline is higher.
- **Clinical Skills** – On Galen, can we be told in advance of starting medical school about others clothes/equipment we might need. Dress Code (Shorts/Sports, Smart attire) etc.
- **Galen** – Could we have a guide about how to use it? When should it be put up? – in the summer before starting so we can get a hang of it before starting university. Could we link it to flying start? – Example or a video of someone using it. ALSO Drop in session at the beginning of the year, run by students.

MD3000

- **Excellent Course structure**
- **More Example questions?** Could we have an example question at the end of a lecture? – MCQ/SWA - We should use PEERWISE. Sessions on how to answer SWAs.
- Could we **Add in cases** to the lecture making it more relevant?
However, cases at the end of a lecture – can't necessarily impose this on all lecturers, but some are taking this feedback on board.
- **Learning Outcomes** – Sometimes doesn't match the content of the lectures. Feedback if this is the case. Lecturers should match it but it is often just a mistake when adding/deleting slides – use workload monitors to report when this is happening. .

- **More Info about the placements.** Confusion time we go home. Normally 4.30-5pm. Ask the taxi driver.

MD4000

- **Tutorial feedback is great** – A great opportunity to go over hard lecture content in a helpful way.
- **LONGER TUTORIALS?** – To ask more questions. Longer tutorials might be too hard to maybe more 1 hour tutorials instead of 2 hour tutorials. Could you block out 2 hours and people can leave after 1 hour if they were happy – however, smaller groups might be less effective. **Question and Answer Sessions are helpful** as concepts are quite hard.
- **OSCE Feedback** – Not very consistent. However, sometimes it is hard to write in short period after one student (1 minute). It's not about their exact mark but we are looking for whether they are competent or not – so don't need such detailed feedback. MD4000 will make a survey to ask about how students feel about the OSCEs and Feedback. Many other Medical schools don't give any feedback at all. Emphasis on exam preparation rather than looking back afterwards. Present questions for feedback (Common mistakes eg. didn't present yourself properly)
- **Revision sessions in independent learning week** – Q&A sessions? Don't want to create inequalities for those not here in ILW. Also, a break for tutors- module controller decision. Feedback to Rachel and Paul. Will have towards them at the end of the semester.

4. AOB

- **Galen** - When going onto element need to go back to timetable. So ease of use – could we get a next button to go to next element? – Will ask to see if this is possible
- **Societies** - Societies use FB as a way of communicating. A lot of events can be missed if they don't have Facebook... Could there be a condensed timetable for these societies. So, we can plan forward. These are student run societies. Coordinated google calendar. – iSaint? Orientation app? – Guidebook software. University might have bought a yearly subscription so will ask to see if we can use it - **Mariella can bring it up in the university meeting.**

• **Alun – Feedback**

End of module questionnaires – turn out rate is very low.

Summary:

- **Is everything done in a fair and diligent way?** – Satisfied with academic standards and examinations.
- **Dissertation module** – Assessment is quite different. But improvements have been made as there are a reduced the number of dissertations that are required for third marking.
- **Problems with lecturers** – **LECTURE LENGTH: Re-iterate** – Number of slides presented can we keep it to a standard so we can get through all the slides in time. Cut out on lecture echo. Is it possible to screen the lectures before so they aren't pitched too high? **Black-on-White slides.**

FEEDBACK: Don't necessarily get a response back when we email lecturers. Lecturers will work on this BUT Can the students also email and acknowledge receiving feedback from lecturers.

5. Next Meeting

Feedback Cards

6. Chairman's Name & Date

Mariella Fortune-Ely

13/10/2016

7. To Do

- Galen:
 - Add advance notice of starting medical school about others clothes/equipment we might need -Dress Code (Shorts/Sports, Smart attire) etc.
 - Next button on – will ask to see If this is possible
- MD4000 will make a survey to ask about how students feel about the OSCEs and Feedback
- Mariella can bring up using the Guidebook software at university meeting for a coordinated School of medicine events calendar.
- Find a way to encourage the use of Peerwise among students