

DRAFT

QUALITY MANAGEMENT AND ENHANCEMENT COMMITTEE INTERNAL QUALITY REVIEW 2014-15 INSTITUTE OF OPHTHALMOLOGY 11 MARCH 2015

Review Team:	Professor Nick Tyler, Pro-Provost, South and South East Asia <i>(IQR Team Leader)</i> Ms Clare Goudy, Director of Education Planning, Vice-Provost (Education)'s Office Dr David Spratt, Faculty Graduate Tutor, Faculty of Medical Sciences Ms Kit Leighton-Kelly, Director of the Education Support Unit, University of Bristol <i>(External Reviewer)</i>
Administrative Secretary:	Ms Chandan Shah, Academic Services, Student and Registry Services <i>(IQR Review Team Secretary)</i>

Key to abbreviations used in this report:

COMM	Commendation
DCLO	Departmental Careers Liaison Officer
DEOLO	Departmental Equal Opportunities Officer
FTE	Full-time Equivalent
GP	Good Practice
IoO	Institute of Ophthalmology
IQR	Internal Quality Review
MEH	Moorfields Eye Hospital Trust
NHS	National Health Service
PG	Postgraduate
PGR	Postgraduate Research
PGT	Postgraduate Taught
RECC	Recommendation
SEQ	Student Evaluation Questionnaire
SES	Self-evaluative Statement
SSCC	Staff Student Consultative Committee
StARs	Student Academic Representatives
SWAN	Scientific Women's Academic Network
UG	Undergraduate

1 GENERAL

- 1.1 The IQR was conducted following the Quality Management and Enhancement Committee's Guidelines for the Conduct of Internal Quality Review issued in September 2014. In accordance with IQR methodology, the Institute of Ophthalmology produced a Self-evaluative Statement at APPENDIX 1.
- 1.2 In addition to the SES, the review team requested further documentation in advance of the IQR visit, listed at APPENDIX 2. Most of the documentation requested was supplied. The visit comprised a series of meetings detailed at APPENDIX 3.
- 1.3 The aims of the review were explained at the start of each interview session as appropriate. It was noted that the IQR should be seen as a positive exercise, whose purpose was to review and, where necessary, to refine

current quality assurance policies and procedures within the Institute, and, where appropriate, to disseminate good practice across UCL as a whole.

- 1.4 A tour of the Institute and its premises took place during the review.
- 1.5 A summary of the main findings can be found in sections 10 and 11 of this report.

2 PROFILE OF THE INSTITUTE OF OPHTHALMOLOGY

- 2.1 The Institute of Ophthalmology was established in 1949 and joined UCL in 1995. The Institute is a part of the Faculty of Brain Sciences and is based at an external UCL site near Old Street Station and is close to Moorfields Eye Hospital.
- 2.2 The productive partnership with Moorfields Eye Hospital Trust strengthens its position to be the world's leading centre for eye and vision research and training. Discussions are being held to move together to a combined larger site to further enhance the collaboration.
- 2.3 The Institute has a total of 44.8 FTE academic staff, including 42 full time and 5 part time staff members. Support is provided by 27.3 FTE administrative and managerial staff including 23 full time and 6 part time staff members. 169.7 FTE Institute staff comprises of contractual support staff including technicians, clinicians and research staff.
- 2.4 The Institute offers the following Clinical and non-Clinical programmes:

Clinical:
 - PG Cert Clinical Ophthalmic Practice
 - MSc Clinical Ophthalmology
 - MSc Ophthalmology: Retina diet; Cataract and Refractive Surgery diet (last intake 2014)
 - MSc Ophthalmology with Clinical Practice (effective from 2015/16)
Non-Clinical:
 - MSc Biology of Vision
 - MSc Translational Immunobiology
 - MSc Translational and Regenerative Neuroscience
 - MRes Vision Research
 - MSc Visual Sciences (approved in 2014, effective from 2015/16)
- 2.5 The MSc Ophthalmology with Clinical Practice has combined the two MSc (Clinical) programmes (MSc Clinical Ophthalmology and MSc Ophthalmology) with the aim to provide more clinical and practical training for all students. The programme will also provide additional theory to support the students' practical experience.
- 2.6 The Institute also offers three Student Selected Components on the MBBS programme for undergraduate students. The first Summer School in Ophthalmology will be held in Summer 2015 and in conjunction with MEH, short courses will be developed and launched in Autumn 2015.

- 2.7 In the 2014 Research Excellence Framework Exercise, 75% of the research submitted by the Institute was graded at 3* or 4* (i.e. indicating “world leading” and “internationally excellent” research).

3 MANAGEMENT AND ORGANISATIONAL FRAMEWORK

- 3.1 The previous IQR was in December 2008 and the Institute appeared to have taken appropriate action on the majority of the review recommendations.
- 3.2 The team were informed that there had been a significant increase in teaching activity over the last five years and that the culture of teaching had changed through efforts by the Director, key academic staff, the Faculty Tutor and Education Administrator. Prior to this the focus at the Institute had primarily been on research.
- 3.3 The Institute believes that the connection with MEH makes it the number one institution in the UK and a world leader within the clinical niche market. There have been recent initiatives to develop non-clinical and clinical programmes with MEH to maximise on the current position, with a drive towards creating more joint programmes with MEH and other organisations. The Faculty is also working together with MEH on these developments. The PG Certificate Clinical Ophthalmic Practice was also developed with MEH and has attracted students from Europe.
- 3.4 Staff are aware of the changes required as a result of the internal cultural change and are supportive of the consequential changes to processes and practices. A clear focus and ongoing commitment to these developments would be necessary, which the team recognised would be achievable with the current relationship between senior management and academic and professional staff at the Institute.
- **The review team commends the Institute for the transformation of its culture within the last five years, from being a predominantly research-only focused Institution to developing postgraduate taught programmes. This includes ongoing collaboration with Moorfields Eye Hospital, for example, the recently developed and delivered joint Postgraduate Certificate programme. The Faculty and Institute staff were particularly keen to further develop joint programmes with MEH and students highly appreciated access to the hospital facilities and the joint Library (COMM 1).**
 - **The review team commends the Institute for the management and approach towards addressing day to day and longer term challenges alongside the Institute’s cultural transformation towards an integrated research and teaching culture. This engaged staff well and encouraged commitment to embracing change and development of additional activities at cross faculty and cross discipline levels. The team was highly impressed by the attitude of Institute staff they met (COMM 2).**
- 3.5 Senior staff at the Faculty and Institute level have been working hard with senior members at MEH to strengthen the partnership and also to clarify that the teaching and educational elements are important and need inclusion within marketing materials. Currently the marketing focus for MEH is on research, but there is recognition that a clearer education stance requires

prominence too. Discussions are taking place to develop a joint strategy that includes research, education and clinical practice and the proposal is for a joint lead to be appointed to manage and support this new development (see also paragraph 3.9 below).

- **The review team commends the development of close working relationships between both the Dean of Brain Sciences and the Head of Institute and MEH, and their recognition that there was a need for a joint appointment to lead on Education and Strategy (COMM 3).**
- 3.6 The Institute staff are considering the portfolio on offer and reviewing the international market, with a view to offer courses beyond eye and vision field to increase student engagement. There is also recognition of room for improvement both internationally and nationally and improved marketing will assist with this. The Institute is working together with other Departments and the Faculty of Brain Sciences to enhance current resources and diversify its activity including Institute staff involvement in teaching on other programmes (particularly UG programmes). The Faculty Tutor is working closely with Vice Deans to promote a greater focus on education across the Faculty.
- 3.7 The team considered that a review of the Institute's activity in education, research, innovation and clinical practice is essential in advance of the proposed move from Old Street. Longer term thinking is required to be able to consider different options relating to the move, which will take place over five – ten years. A business case for a sustainable IoO is necessary and developing more work with MEH so that a joint MEH and UCL brand could result in potential worldwide success for vision and eye, would boost the activity at the Institute. Building on international links with Japan, Dubai and China for instance and using these joint ventures between MEH and the Institute could enhance existing opportunities.
- **The Institute should ensure that it reviews the strategic vision for both research and education and develops a plan to ensure that current activities remain sustainable as the Institute grows, and to provide a sound footing for further development. Once developed, the strategic vision and accompanying plan should be articulated clearly to all staff and students. The proposed move with MEH is one element of this strategic plan, but should not be the only focus for growth (RECC 1).**
- 3.8 The Institute and MEH are discussing a proposal for a person to jointly lead on Education and Strategy; however some colleagues at the Institute suggested an internal Education Manager was also required to create a strategic focus on education. The infrastructure requires development and commitment towards a focus on education as a whole and not simply focusing on managing increased student numbers.
- 3.9 The relationship with MEH is greatly valued by staff and students. Some Postgraduate students commented on the mixture of teaching styles delivered by staff from MEH, most being very good. It was suggested that those lecturers from a medically trained background delivering medically focused lectures could offer extra tutorials or a short course on the medical content, as the student body would be a mixture of medically and non-medically trained

students. It was noted that good resources are available both online and in hard material.

- 3.10 Academic staff could enhance material that is provided to clinicians and consultants who lecture to highlight key elements of the teaching role, for instance the process to follow in case they are unable to attend the lecture, lecture content and marking requirements. The approach to medical education affects how staff and students engage with one another and therefore could have an impact on the overall student experience, something that the Institute and MEH should work together to improve.

- **The Institute is advised to continue to build on the closer working relationship with MEH to further improve the communication and understanding of the Institute's research and education activities and how to build a strong mutual support in both areas (RECC 6).**

4 CURRICULUM PLANNING AND DESIGN

- 4.1 Programme information is available to students on the Institute website and in student handbooks. This includes information on the degree structure and module options, the application process and the rationale for the provision. Programme specifications for the entire Institute's PGT provision were provided to the team.

- 4.2 A major development for the Institute has been an expansion of programmes to include teaching and clinical practice, evident in the new programmes on offer and to be offered in the near future. This also provides an opportunity to work with MEH to develop and deliver programmes. The timeframe and marketing need development, which the Institute is aware of and working towards to ensure courses are well recruited.

- 4.3 Sharing modules across departments and offering modular options for undergraduates on the MBBS programme provide exposure to courses available at the Institute. The team was impressed with staff engagement and willingness to provide courses, seminars to a wide range of students, including the 'Master' class (a series of lectures/seminars involving leading academics in the field).

- **The review team wishes to highlight as good practice the Institute's integration of research with teaching and work across programmes and the Institute's and Faculty's departments (e.g. Institute of Neurology) to offer students a range of options. The 'Master' class concept are extra events that provide a good way of utilising UCL and external key researchers in the field, exposing students to research through teaching, which links in with the UCL 2034 Strategy. These 'Master' class events are open to all students and are an opportunity for students to further explore key concepts with leading practitioners and researchers (GP 1).**

5 LEARNING, TEACHING AND ASSESSMENT

- 5.1 The Institute is committed towards promoting courses to increase female intake on programmes and supporting female staff colleagues with their professional development (see SES document section 3.4.12).
- **The review team commends the Institute for the silver Athena SWAN award achieved in 2013, encouraging female students and staff to undertake more lead roles in research and teaching activities (COMM 4).**
- 5.2 All the PGT and PGR students and the staff the team met commented on the excellent resources available to them and the valuable support provided by the Library staff and technicians (see also section 7.3).
- **The review team commends the Institute for the joint Library and other resources available to users, which were highly valued by staff and students. The current Library display of historic equipment provided an additional learning experience and source of information to Library users and visitors. The Institute might wish to extend the use of these resources through object based learning (COMM 5).**
- 5.3 The PGR students commented on their upgrade process and the information given to students. Different practices were taking place on different programmes with varying involvement of MEH staff. Students are aware of the research e-log but are not fully completing this. Initially this log was seen as useful to a few students especially leading up to the upgrade point. As research progressed, students became busy with laboratory work and therefore they would have limited time to complete the research e-log. The PGR students commented on there being limited input after their upgrade, as data collection would be taking place. A more formal phase and guidance on input required after a student's upgrade would have assisted in some student's usage of the research e-log.
- 5.4 The Graduate Tutors reported monitoring the research e-log on a regular basis, checking the progress when meeting students and contacting students for updates. The supervisor monitors the log and regularly liaises with students. The team was concerned that as the log is a mandatory UCL process and should be student driven, it was important for students to engage with it. Also where clinicians were involved in supervising students, there could be confusion around email communication that is sent to their UCL or MEH email accounts, which would cause delays in responding to research e-log deadlines.
- **The Institute should review internal processes for research students to ensure that (i) a standardised process is developed for the IoO upgrade process (presentation, report and viva) and is in line with UCL requirements for the upgrade; (ii) for students registered elsewhere but working at the Institute, a process is in place to engage them in the Institute's culture and for the IoO to learn from the culture they have brought with them, for example, by requesting a presentation to staff / students; registered at the Institute but take**

modules / conduct research at other departments; (iii) all research students complete the UCL Research Student Log. This is a mandatory component of doctoral research programmes and provides a record of student progress. A review on how this is used in practice could be helpful to students and staff, particularly after the student's upgrade, as highlighted by a few PGR students (RECC 2).

5.5 The students and staff the team met reported different turnaround times for returning assignment feedback to students. Some programmes allow two weeks for first marker feedback and other programmes had a range between four - six weeks for providing feedback to students. A few students commented on some modules having quicker turnaround times, compared to other similar modules from the same programme. The team noted that the UCL policy states that marked work should be returned to students within one calendar month. The feedback students received from exams was highly valued by them.

- **The Institute is advised to ensure that return of coursework and feedback to students is consistent across the Institute. Review current practice on [Assessment and Feedback](#) in line with UCL requirements (RECC 7).**

6 STUDENT RECRUITMENT, ADMISSION AND RECEPTION

6.1 The team was informed that there is a general sector wide issue to recruit students on courses such as those held at the Institute, as there are currently low numbers of ophthalmologists in the UK. The IoO is therefore reviewing other avenues to offer courses to potential students, for example, more engagement with the non-ophthalmological market, modular teaching with other departments and programmes to increase exposure to courses and consideration of other marketing methods, such as through Facebook and working with partner organisations. A new website has been launched to help generate interest in the field and activity that IoO is involved in. The website functionality for mobile users would make a difference in numbers accessing information from the website and it is hoped that this would result in an increase in applications received.

- **The Institute is advised to review the connection with [UCL Partners](#) and consider the use of the individual partnerships to offer programmes beyond the small niche market of Ophthalmology. This will better assist the Institute to participate in the competitive market, at the national and international level (RECC 8).**

7 STUDENT SUPPORT AND GUIDANCE

7.1 Students are sent pre-course information including supplementary texts and chapters to prepare for the start of the programme. Different types of support are offered to students as appropriate to their level. Students commented on receiving information and were pleased with the induction and level of support provided by staff at the Institute.

7.2 Through the StARS system, students are slowly becoming more involved and are making contributions to improve facilities available to them. Students are being encouraged by staff to share their feedback, talk and raise views to be heard and highlighted at higher-level committees such as, the Institute Education Committee. A few students commented on appropriate power given to academic staff to be able to implement changes that are beneficial for students.

- **The review team commends the Institute for the arrangements for facilitating effective student and staff interaction. This is exemplified by the shared staff and student common room that holds a daily coffee morning for all staff and students to meet and engage in discussions across programmes and research activities. This engenders a sense of community among the disparate body of students, many of whom are part timers and working. The coffee mornings provide an informal opportunity for students to (i) seek additional support from professional and academic staff members and (ii) give feedback on their programmes and wider experience in the Institute. The team felt that this is of particular importance in an Institute where there are many part-time students with busy working lives beyond the requirements of the courses they are following. It would be helpful for the Institute to check whether this is also feeding through into improvements in student performance (COMM 6).**

7.3 Both the staff and students that the review team met spoke highly of the level of support provided by the professional support staff. The team was informed that limited resources result in professional staff being overstretched and asked to provide support in different ways. The roles of professional staff members and the nature of support they provide is changing in Higher Education. The professional staff felt more valued by the Institute but stated that they would be able to provide further directed support if they were better resourced and there was better usage of their specialist skills.

- **The review team commends the Institute for the outstanding quality and extensive level of support provided to staff and students by the small number of professional support staff. The Education Administrator and her team were highly valued by the staff and students the team met during the IQR (COMM 7).**

7.4 Some of the students the team met had limited knowledge of the Personal Tutoring process and that there was a UCL policy. Students on some programmes had been given an allocated Personal Tutor at the start of their programme but others were directed to their supervisors for support. Students receive a good level of support due to small numbers on programmes but the Institute is aware that changes to practices and processes is required to prepare for a potential increased intake in the Autumn term. There are informal Personal Tutor relationships in place on some programmes that require to be formalised. The recent change to the culture of teaching and the approach to education have improved the situation for students. There are

plans to change the pattern of teaching and provide timetabled slots for meeting allocated Personal Tutors. More work is required however to raise staff awareness and understanding of the role of pastoral support for students, which is part of their teaching role.

- **The Institute should ensure that the [Personal Tutoring](#) process is urgently addressed and formal tutorial methods are in place to support all students for the duration of their programme of study. The team are aware that the Institute, with the help of the Faculty Tutor, is reviewing this process. The professional support staff could assist in setting up the processes to ensure that each student is allocated a Personal Tutor, separate from the Programme Director, at the beginning of the academic year with timetabled meeting slots in line with the UCL policy (RECC 3).**

8 STAFF SUPPORT AND DEVELOPMENT

8.1 From meeting various staff members, it was evident that there was a cultural shift happening where colleagues were changing their focus from research only activity to incorporating education with research. Staff attitudes have changed and the value of education has increased in the Institute. It is clear that staff are engaged and working towards enhancing the student experience at the IoO whilst also working as part of the wider Faculty ethos.

- **The review team commends the impressive collegial attitude of staff at the Institute. It was evident that people worked collectively together and supported one another within the limited resources available to them (COMM 8).**

8.2 Staff appraisals are conducted annually and measures are in place to review situations as they arise. Clinicians are appraised twice: once with UCL and again with the NHS due to regulatory procedures. The Institute recently reviewed this process and will combine the timing of the processes to assist staff to complete the appraisals, which will aid management of the process too. This will also fit in with the UCL promotions process, which staff will be able to take advantage of in the appropriate academic year (i.e. not having to wait until the following year). The Education Administrator liaises with colleagues to ensure the process is in practice and offers support when required.

- **The review team commends the Institute on the move to synchronising staff appraisals to meet UCL and NHS requirements by allocating a full month to complete the appraisal process for both organisations. This is a new initiative that could feed into UCL's staff development processes and could be used elsewhere in UCL in similar departments (COMM 9).**

8.3 The team discussed the four Graduate Tutor roles with the academic and research staff members. It was suggested that distribution of the role was required to balance students that are supported by the respective tutor along with their research activity and teaching responsibilities. Formal teaching is now a requirement of an academic's role although time has not been clearly allocated for research. Staff showed their willingness to incorporate research with teaching (see also section 3), but noted the need to reward this type of

activity as a motivational tool for staff to continue with research and teaching commitments. Some staff members also commented on the nature of the Graduate Tutor roles in comparison to other Tutor roles, such as the Admissions Tutor role. Certain roles are perceived as more rewarding than others, which results in an imbalance of the activities that are distributed amongst and / or preferred by staff members.

- **The Institute is advised to review the role and responsibility of the four Graduate Tutors with a view to ensuring that flexibility in staff cover and consistency is maintained. The Institute could also address concerns on workload with a possibility to rotate various areas the Graduate Tutors could cover. For instance, one of the Graduate Tutors could fulfil the role as a Director of Studies with an overall strategic view of education and research (RECC 9).**

8.4 The Institute is a supportive environment for staff and students. Staff informally mentor students and provide support as Personal Tutors. Academic staff members highlighted that due to there being no limit to the number of students allocated to a supervisor, space and time constraints especially for PhD supervision exist. Supervising students and managing programmes was not realistic for majority of the staff the team met. Clinical practitioners face other factors in terms of professional support to manage clinics in addition to teaching and supervision activities. The clinicians highlighted that they did not have enough time to effectively carry out the various activities that are held in multiple locations.

- **The Institute is advised to review current supervisory arrangements and consider a Graduate Tutor role that has oversight on: (i) the arrangements for management of the supervision of PGT and PGR students, specifically the staff workload and allocation of students and (ii) the support provided to clinical practitioners for carrying out their teaching and supervisory duties. The team heard from both sets of staff that there were concerns over workload and time required to carry out their duties (RECC 10).**

8.5 Staff were open to the idea of teaching on central departments and teaching on courses across the SLMS school as a process for staff development as well as promoting the Institute's work to a wider group of students. The Institute of Neurology, part of Faculty of Brain Sciences, and IoO are currently sharing modules and therefore this increases staff resilience in supporting students and assists with succession planning. The Faculty is working together with MEH to develop more joint programmes like the PG Certificate Clinical Ophthalmic Practice, which will assist staff and eventually students in training and development of skills and experience. Academic staff also welcomed the opportunity for more training on teaching and organising courses.

8.6 The PGR students had good opportunities for teaching and appreciated the experience to work alongside academic staff in supporting students on programmes. The students are trained locally and centrally through UCL Arena and are paid for teaching. These opportunities for students to develop teaching skills could be a good resource for supporting staff to manage potential increase in student numbers.

8.7 Staff commented on limited access to funds to support professional and technical staff to support students, particularly PhD students as well as support for clinical practitioners. This is an issue especially when academic staff are occupied in other areas of their work and cannot offer extra provision to the PhD students. Clinical practitioners have the added pressure to arrange clinics and understand different processes at UCL and NHS.

- **The Institute is advised to consider succession planning of academic and professional support staff to manage the potential significant increases in student numbers and to manage future changes in the market. Succession planning could also provide developmental opportunities for current staff and additional support to balance the staff workload (RECC 11).**

9 ACADEMIC QUALITY REVIEW, MONITORING AND FEEDBACK FRAMEWORK

9.1 The Institute follows the Annual Monitoring process and procedures where the Self Evaluation Questionnaires (SEQ) is also considered. The Institute highlighted that a more transparent feedback process was required where the feedback loop was closed and students informed of the actions taken from the feedback they had provided. The SEQ template has recently been adapted to support this and to suit the Institute's requirements and students have welcomed this change.

9.2 The Institute informed the team that a review of the formal committees would occur and there would be more opportunities for student involvement on these committees. The Institute has valued student engagement and feedback, however this has been less frequent due to the nature of the student body and currently there is not enough student representation on the formal committees. Many students are not regularly on campus and have clinical practice commitments therefore student representatives find it difficult to attend the formal committee meetings. Students generally provide feedback through informal meetings with the Education Administrator, Chair of the Institute's Education Committee, the Graduate Tutor (PGR students) and / or the Institute Manager.

9.3 The Chairs of the Institute's formal committees also commented on the difficulties in getting students on committees due to their time commitments. Getting feedback from the student body through the representatives was challenging and required a review. Students highlighted that most issues at the Staff Student Consultative Committee (SSCC) meeting appeared to be more related to social events, rather than academic issues. The Student Representatives that have recently been appointed are gradually making contact with the student body through email and Facebook. Events had also been planned to combine PGT and PhD students to create better connections. The team were aware of the Institute's challenges and efforts in improving student engagement and supported the notion that more improvements were required in this area.

- **The Institute should review arrangements for student representation by (i) monitoring the [Staff Student Consultative Committee](#) (SSCC) meetings, ensuring these take place regularly**

in line with UCL policy and student body participation to meet the SSCC policy requirements, which the team noted was under review and (ii) ensuring students are represented at Institutional level committees, such as the Education Committee (equivalent to a [Departmental Teaching Committee](#)). Student involvement should be considered, where appropriate, at all levels, particularly when meetings focus on project planning and student engagement could be increased by allowing students to Chair meetings, where appropriate. Students' views and participation are then included from the onset (RECC 4).

9.4 The team received some copies of summaries from the SEQs and were informed that this form had been revised in early 2014 and had been welcomed by the students. The team did not see the revised template but noted that this feedback process appeared to have improved student's engagement and be more effective in quickly implementing changes than the previous process. It was not clear from the staff and additional evidence provided whether as per the UCL policy, relevant committees receive these summaries (Institute Education Committee and Staff Student Consultative Committee).

- **The Institute should ensure that the summary of the main issues arising from [Student Questionnaires](#) is prepared and reviewed as part of the Quality Monitoring process. The summary should also be added to the Departmental Teaching Committee (in this case the Institute Education Committee) and SSCC agendas (RECC 5).**

10 CONCLUSIONS

10.1 The Institute of Ophthalmology is experiencing substantial internal and external changes, such as a cultural shift towards combining research and education, the proposed move with MEH and an expansion of courses to increase exposure in the national and international market. The Institute is forthcoming with solutions to tackle possible challenges, albeit constrained by the limited resources available. The team was impressed overall with the Institute's approach to these challenges and the collegial attitude of staff in managing significant change whilst effectively continuing with day-to-day activities at the Institute. The team's recommendations are therefore made in the spirit of helping the Institute to identify certain areas and to assist it in making the necessary changes.

10.2 The review team is grateful for the hospitality of the Institute during its visit and for the collegiality shown by its Director, staff and students.

10.3 The review team commends the Institute of Ophthalmology for:

- (1) The transformation of the Institute culture within the last five years, from being a predominantly research-only focused Institution to developing postgraduate taught programmes. This includes ongoing collaboration with Moorfields Eye Hospital, for example, the recently developed and delivered joint Postgraduate Certificate programme. The Faculty and Institute staff were particularly keen to further develop joint programmes with MEH and students highly appreciated access to the hospital facilities and the joint Library (paragraph 3.4).

- (2) The management and approach towards addressing day to day and longer term challenges alongside the Institute's cultural transformation towards an integrated research and teaching culture. This engaged staff well and encouraged commitment to embracing change and development of additional activities at cross faculty and cross discipline levels. The team was highly impressed by the attitude of Institute staff they met (paragraph 3.4).
- (3) The team was impressed by the development of close working relationships between both the Dean of Brain Sciences and the Head of Institute and MEH, and their recognition that there was a need for a joint appointment to lead on Education and Strategy (paragraph 3.5).
- (4) The silver Athena SWAN award achieved in 2013, encouraging female students and staff to undertake more lead roles in research and teaching activities (paragraph 5.1).
- (5) The joint Library and other resources available to users, which were highly valued by staff and students. The current Library display of historic equipment provided an additional learning experience and source of information to Library users and visitors. The Institute might wish to extend the use of these resources through object-based learning (paragraph 5.2).
- (6) The arrangements for facilitating effective student and staff interaction. This is exemplified by the shared staff and student common room that holds a daily coffee morning for all staff and students to meet and engage in discussions across programmes and research activities. This engenders a sense of community among the disparate body of students, many of whom are part timers and working. The coffee mornings provide an informal opportunity for students to (i) seek additional support from professional and academic staff members and (ii) give feedback on their programmes and wider experience in the Institute. The team felt that this is of particular importance in an Institute where there are many part-time students with busy working lives beyond the requirements of the courses they are following. It would be helpful for the Institute to check whether this is also feeding through into improvements in student performance (paragraph 7.2).
- (7) The outstanding quality and extensive level of support provided to staff and students by the small number of professional support staff. The Education Administrator and her team were highly valued by the staff and students the team met during the IQR (paragraph 7.3).
- (8) The impressive collegial attitude of staff at the Institute. It was evident that people worked collectively together and supported one another within the limited resources available to them (paragraph 8.1).
- (9) The move to synchronising staff appraisals to meet UCL and NHS requirements by allocating a full month to complete the appraisal process for both organisations. This is a new initiative which could feed into UCL's staff development processes and could be used elsewhere in UCL in similar departments (paragraph 8.2).

11 SUMMARY OF FINDINGS

GOOD PRACTICE¹

The review team commends the Institute of Ophthalmology for the following example of good practice:

- (1) The Institute's integration of research with teaching and work across programmes and the Institute's and Faculty's departments (e.g. Institute of Neurology) to offer students a range of options. The 'Master' class concept are extra events that provide a good way of utilising UCL and external key researchers in the field, exposing students to research through teaching, which links in with the UCL 2034 Strategy. These 'Master' class events are open to all students and are an opportunity for students to further explore key concepts with leading practitioners and researchers (paragraph 4.3).

RECOMMENDATIONS

The review team recommends the following:

Necessary action

The Institute of Ophthalmology should take action to:

- (1) Ensure that the Institute reviews its strategic vision for both research and education and develops a plan to ensure that current activities remain sustainable as the Institute grows, and to provide a sound footing for further development. Once developed, the strategic vision and accompanying plan should be articulated clearly to all staff and students. The proposed move with MEH is one element of this strategic plan, but should not be the only focus for growth (paragraph 3.7).
- (2) Review internal processes for research students to ensure that (i) a standardised process is developed for the IoO upgrade process (presentation, report and viva) and is in line with UCL requirements for the upgrade; (ii) for students registered elsewhere but working at the Institute, a process is in place to engage them in the Institute's culture and for the IoO to learn from the culture they have brought with them, for example, by requesting a presentation to staff / students; registered at the Institute but take modules / conduct research at other departments; (iii) all research students complete the UCL Research Student Log. This is a mandatory component of doctoral research programmes and provides a record of student progress. A review on how this is used in practice could be helpful to students and staff, particularly after the student's upgrade, as highlighted by a few PGR students (paragraph 5.4).
- (3) Ensure that the [Personal Tutoring](#) process is urgently addressed and formal tutorial methods are in place to support all students for the duration of their

¹ As defined in the UCL Academic Manual, good practice can be identified where there is clear evidence that it has contributed to outstanding achievement in one or more areas of recruitment, progression, student satisfaction, student achievement and employability.

programme of study. The team are aware that the Institute, with the help of the Faculty Tutor, is reviewing this process. The professional support staff could assist in setting up the processes to ensure that each student is allocated a Personal Tutor, separate from the Programme Director, at the beginning of the academic year with timetabled meeting slots in line with the UCL policy (paragraph 7.3).

- (4) Review arrangements for student representation by (i) monitoring the [Staff Student Consultative Committee](#) (SSCC) meetings, ensuring these take place regularly in line with UCL policy and student body participation to meet the SSCC policy requirements, which the team noted was under review and (ii) ensuring students are represented at Institutional level committees, such as the Education Committee (equivalent to a [Departmental Teaching Committee](#)). Student involvement should be considered, where appropriate, at all levels, particularly when meetings focus on project planning and student engagement could be increased by allowing students to Chair meetings, where appropriate. Students' views and participation are then included from the onset (paragraph 9.3).
- (5) Ensure that the summary of the main issues arising from [Student Questionnaires](#) is prepared and reviewed as part of the Quality Monitoring process. The summary should also be added to the Departmental Teaching Committee (in this case the Institute Education Committee) and SSCC agendas (paragraph 9.4).

Advisable action

The Institute of Ophthalmology is advised to take action to:

- (6) To continue to build on the closer working relationship with MEH to further improve the communication and understanding of the Institute's research and education activities and how to build a strong mutual support in both areas (paragraph 3.10).
- (7) Ensure that return of coursework and feedback to students is consistent with the best performance in the Institute. Review current practice on [Assessment and Feedback](#) in line with UCL requirements (paragraph 5.5).
- (8) Review the connection with [UCL Partners](#) and consider the use of the individual partnerships to offer programmes beyond the small niche market of Ophthalmology. This will better assist the Institute to participate in the competitive market, at the national and international level (paragraph 6.1).
- (9) Review the role and responsibility of the four Graduate Tutors with a view to ensuring that flexibility in staff cover and consistency is maintained. The Institute could also address concerns on workload with a possibility to rotate various areas the Graduate Tutors could cover. For instance, one of the Graduate Tutors could fulfil the role as a Director of Studies with an overall strategic view of education and research (paragraph 8.3).
- (10) Review current supervisory arrangements and consider a Graduate Tutor role that has oversight on: (i) the arrangements for management of the supervision of PGT and PGR students, specifically the staff workload and allocation of

students and (ii) the support provided to clinical practitioners for carrying out their teaching and supervisory duties. The team heard from both sets of staff that there were concerns over workload and time required to carry out their duties (paragraph 8.4).

- (11) Consider succession planning of academic and professional support staff to manage the potential significant increase in student numbers and to manage future changes in the market. Succession planning could also provide developmental opportunities for current staff and additional support to balance the staff workload (paragraph 8.7).

APPENDIX 1

Self-evaluative Statement (SES) (*to be added once report is submitted to the IQR Panel*)

Supporting Documentation

List of Information available within the SES, its appendices or as additional information (available on Institutional intranet or Moodle pages)

Strategy

1. Institute Teaching and Learning Strategy
2. Faculty of Brain Sciences Strategy 2011-15

Committees (including terms of reference and membership)

3. Institute Committee Structure Organogram
4. Minutes of the Education Committee (equivalent to DTC) 2009-14 and Terms of Reference
5. Minutes of the SSCC 2010-14 and Terms of Reference
6. Notes of the Heads of Research Departments committee 2012 -2014
7. Minutes of the Institute's Board of Management committee 2012-2014

Board of Examiners' Minutes and Visiting Examiners' Reports

8. Minutes of the MSc Board of Examiners 2012-14

Student Recruitment and Admissions Information

9. Ophthalmology Graduate Programmes Prospectus 2009/10
10. MSc Biology of Vision 2015/16 entry flyer
11. PG Cert Clinical Ophthalmology Practice 2015/16 entry flyer

Information material for students: handbooks, assessment criteria

12. PG Cert Student Handbook 2014-15
13. MSc Students' Handbook 2014-15
14. MRes Student Handbook 2014-15
15. Assessment Guidelines and Marking Criteria for essays and dissertations 2014-15
16. MSc Clinical Ophthalmology and MSc Ophthalmology Retina module exam papers with answers.

Other material

17. Institutional Student Intake Profile Data 2014
18. Programme Specifications (PG Cert Clinical Ophthalmic Practice; MSc Clinical Ophthalmology; MSc Ophthalmology; MSc Biology of Vision; MSc Translational Immunobiology; MSc Translational and Regenerative Neuroscience; MRes Vision Research)
19. Annual Monitoring reports and documents 2011-14
20. Augmented Annual Monitoring Report and Documents 2013
21. Student Evaluation Questionnaires 2014 15 (PG Cert Clinical Ophthalmic Practice; MSc Clinical Ophthalmology; MSc Ophthalmology – Retina; MRes Vision Research)
22. Peer Observation of Teaching booklet and supporting documents
23. Institute New Staff Induction checklist

APPENDIX 2

ADDITIONAL DOCUMENTATION

The following documentation was received from other sources (given in brackets):

- 1) Student Data – Quantitative and Qualitative Indicators (Student Data Services, Student and Registry Services)
- 2) Research Log-book Completion Data (Doctoral School)

INTERVIEWEES

11 MARCH 2015

Session 1	Professor Phil Luthert (Tour of the Institute)
Session 2	Professor Alan Thompson (Executive Dean, Faculty of Brain Sciences) Dr Julie Evans (Faculty Tutor, Brain Sciences)
Session 3	Professor Phil Luthert (Director of Institute)
Session 4	Dr Steve Bunting (Institute Manager)
Session 5	Postgraduate Taught Student Group 7 students (5 female, 2 male)
Session 6	Research Student Group 7 Students (6 female, 1 male)
Session 7	Mrs Helen Gibbons (PG Cert Programme Director) Professor Sue Lightman (MSc Programme Director) Dr Tim Levine (MSc Programme Director) Dr Jacqui van der Spuy (MRes Programme Director) Professor Alison Hardcastle (Graduate Tutor) Professor Andrew Webster (Graduate Tutor)
Session 8	Ms Leigh Kilpert (Education Administrator) Mr Andrew Dehany (Education Assistant) Ms Gill Tunstall (DEOLO) Mr Danny Daniels (IT support) Ms Naheed Kanuga (Lab technical support) Professor Clare Futter (DCLO)
Session 9	Professor Sue Lightman (Education Committee Chair, SSCC Chair, Clinical Board of Examiners Chair) Dr Jacqui van der Spuy (Biology of Vision Board of Examiners Chair) Professor Phil Luthert (Research Committee Chair)
Session 10	Professor Alison Hardcastle (experienced) Professor Julie Daniels (mid-career) Dr Patric Turowski (mid-career) Professor Tom Salt (experienced) Professor Gary Rubin (experienced) Mr Gus Gazzard (early career; clinically experienced) Dr Ant Vugler (early career) Dr Mariya Moosajee (early career) Dr Maria Balder (mid-career)
Session 11	Professor Phil Luthert (Director of Institute) - final session to summarise review team's main findings