

Programme Specification

GENERAL INFORMATION	
Awarding Institution//Body	University of Bath
Teaching Institution	University of Bath
	(some units may be taught by other institutions and treated as APL)
Validated/Franchised (if appropriate)	n/a
Programme accredited by (including date of accreditation)	n/a
Programme approved by (including date	Initial approval:
& minute number of Senate)	School for Health Board of Studies 26 November 2009
	Senate 2 December 2009, minute 13064(2). Full approval:
	Faculty of HSS, Learning, Teaching and Quality Committee 8 December 2010
	Department for Health, Learning, Teaching and Quality Committee 23 February 2011
	PAPAC 22 March 2011
	Senate (6 April 2011)
Final award	Postgraduate Certificate, Postgraduate Diploma, MSc
Programme title	Postgraduate professional development programme in Primary Care
UCAS code (if applicable)	n/a
Subject Benchmark Statement	n/a
Intended level of completed programme (in line with FHEQ)	Level 7 = Masters
Duration of programme & mode of study	Part time blended learning continuing professional development programme. Minimum period of study for an individual unit is defined by unit specifications. Maximum period of study leading to an award (from date of first unit enrolment) is 8 years.
Date of Specification preparation/revision	October 2010
	Revised January 2011,
	Revised November 2012.
	Feb 2013.
Applicable to cohorts (For students commencing 2012/13

Synopsis and academic coherence of programme

The Primary Care Postgraduate Programme provides an academic framework designed to meet the professional development needs of General Practitioners (GPs) and doctors undertaking training for general practice.

It has been developed at the request of, and through extensive engagement with, an employer group, represented by the School of Primary Care in the Severn Postgraduate Deanery, who are responsible for postgraduate medical training in the northern part of the South West region, and with a student group, specifically a group of Specialist Training Registrars in Primary Care (GPSTRs) and representative GPs. It is designed to complement, but does not form a part of, the professional requirements of training to become a General Practitioner, as specified by the Royal College of General Practitioners (RCGP) and the General Medical Council (GMC), who, since 1 April 2010, are responsible for the regulation of medical education and training. Thus although aligned to the professional training there are no requirements for formal approval.

Also the programme is designed to be a named award within the University's Professional Development Scheme (PDS), consequently it provides an academic framework for lifelong learning and continuing professional development allowing doctors to access postgraduate education throughout their career. In line with the PDS regulations it provides a maximum of eight years for completion of the MSc qualification, thus allowing GPSTRs, and recently qualified GPs, to commence the programme in the early stages of their training or career, and progressively select units as their responsibilities and interests evolve during their early stage career.

Similarly, this programme provides:

- a mechanism within which learner-centred units, which are clearly structured, coherent and progressive, may be accumulated towards postgraduate awards;
- availability of a series of staged awards, based on the principles of credit accumulation and transfer;
- a range of units/courses drawn from across the University and not limited by programme or departmental boundaries;
- a mechanism for accrediting bespoke learning, in-house training, prior and experiential learning.

The programme design includes the following features:

- i) an underpinning theme of evidence-based practice that develops key analytical and research skills
- ii) a practice enquiry, experiential approach that requires students to engage with the literature in relation to their practice in order to conduct action research enquiries
- iii) a variety of optional units that extend the RCGP clinical curriculum into areas that are relevant to general practitioners but not covered by the clinical curriculum iv) a practice-related research project
- This is achieved through:
 - i) an introductory unit on Evidence-based Practice in Primary Care
 - ii) two units, Practice enquiry I and Practice Enquiry II, that progressively build skills of critical engagement with the evidence-base, application of evidence and implementation for changing practice
 - iii) a range of units selected from across the University
 - iv) opportunities for APL of specialist topics not provided for at Bath

To ensure relevance to contemporary general practice a comprehensive series of consultations was undertaken involving market surveys to identify key topics and, based on

these data, the formation of topic-focused curriculum development groups, comprising GPs and GPs in training (GPSTRs), GP Educators, other clinical experts, academics and educational developers. An initial set of sixteen groups established the core and early options. This consultation model, with stakeholder groups, and with prospective learners, continues formally, as part of the academic management processes, in order to accommodate the evolving requirements of primary care physicians within a changing NHS. Bespoke units to suit the needs of specific groups of GPs or GPSTRs are also enabled. This participative approach is seen as an example of good practice.

The programme enables units from disciplines across the University, and from APL arrangements, to be offered on a stand-alone basis as well as being aggregated towards these postgraduate awards:

- PG Certificate in Primary Care
- PG Diploma in Primary Care
- MSc in Primary Care

The programme framework allows for the future introduction of specialist specific Primary Care awards at the PG diploma and MSc levels only, eg MSc Primary Care (named subject). Popular topics that are being considered for such an arrangement include Primary Care (Learning and Teaching) and Primary Care (Musculoskeletal Medicine).

Educational aims of the programme

The Programme aims to develop advanced general practitioners with skills that go beyond the clinical competences required by, and provided through, their professional clinical training through a critical engagement with the academic literature relevant to their practice. It aims to supplement their clinical training through the provision of a flexible framework for learning in a number of non-clinical areas (eg leadership, management, education) and clinical areas (eg public health, medicines management, musculoskeletal medicine). In these ways the programme will supplement the clinical and practice-based role with a theoretical and evidence-based perspective for enhancing practice and extending professional roles.

Students' choice of units will reflect their professional needs; some may be looking to update a clinical area, or be extending into a new speciality, others may be looking to develop a commissioning or leadership role, whilst others may be looking to develop a portfolio career in which they combine clinical practice with other professional activities, such as education, clinical advisors in commissioning, specialist advisors to professional groups, doctors to local companies and organisations, expedition doctors etc.

Intended learning outcomes (including teaching, learning and assessment methods, specifying those applicable for interim awards where appropriate)

~	Knowledge & Understanding: K1-5	1.	Demonstrate a systematic understanding of evidence-based knowledge in applied and specialised areas relevant to primary care; (T/F/A); (PgCert, PgDip, MSc)
		2.	Demonstrate the awareness and ability to manage the implications of ethical dilemmas and work pro- actively with others to formulate solutions; (T/F/A); (PgCert, PgDip, MSc)
		3.	Demonstrate a comprehensive understanding of techniques / methodologies applicable to their own work (theory or research-based); (T/F/A); (PgCert,

	4. 5.	PgDip, MSc) Demonstrate the ability to relate academic content to professional or work-based practice or considerations. (T/F/A); (PgCert, PgDip, MSc) Design and conduct audit and research and manage ensuing change in a practice context (T/F/A); (PgDip, MSc)
➤ Intellectual Skills: I 1-7	4.	(With critical awareness) undertake analysis of complex, incomplete or contradictory areas of knowledge communicating the outcome effectively; (T/F/A); (PgCert, PgDip, MSc) (With critical awareness) synthesise information in a manner that may be innovative, utilising knowledge or processes from the forefront of the discipline / practice; (T/F/A); (PgCert, PgDip, MSc) Demonstrate initiative and originality in problem solving; (T/F/A); (PgCert, PgDip, MSc) Act autonomously in planning and implementing tasks at a professional or equivalent level, making decisions in complex and unpredictable situations. (T/F/A); (PgCert, PgDip, MSc) Critically review complexity in their clinical / practice context (T/F/A); (PgDip, MSc) Critically evaluate change in their clinical / practice context (T/F/A); (PgDip, MSc) Demonstrate a level of conceptual understanding that will allow her/him critically to evaluate research, advanced scholarship and methodologies and argue alternative approaches; (T/F/A); (PgDip, MSc)
Professional Practical Skills: P 1-10	3.4.5.6.	Operate in complex and unpredictable and/or specialised contexts, and have an overview of the issues governing good practice; (T/F/A); (PgCert, PgDip, MSc) Exercise initiative and personal responsibility in professional practice; (T/F/A); (PgCert, PgDip, MSc) Demonstrate technical expertise, perform smoothly with precision and effectiveness; (T/F/A); (PgCert, PgDip, MSc) Adapt skills and design or develop new skills and/or procedures for new situations; (T/F/A); (PgCert, PgDip, MSc) Translate and adjust academic content and debate into practice and application within a professional context. (T/F/A); (PgCert, PgDip, MSc) Identify and lead innovation and service development relevant to their practice specialism or area of practice and evaluate its impact (T/F/A); (PgDip, MSc) Contribute to clinical developments in their specialism at an advanced level and critically review its efficacy and use (T/F/A); (PgDip, MSc) Commission and make sense of research (T/F/A);

	 (PgDip, MSc) 9. Develop and support others to work effectively in the practice context and critically review the impacts of such development in order to create a culture of lifelong learning within their workplace (T/F/A); (PgDip, MSc) 10. Manage their professional development in such a way as to develop greatest impact on their practice (T/F/A); (PgDip, MSc)
> Transferable/Key Skills:	Work effectively with a group as leader or member; (T/F/A); (PgCert, PgDip, MSc)
T 1-10	2. Clarify tasks and make appropriate use of the capacities of group members; (T/F/A); (PgCert, PgDip, MSc)
	3. Negotiate and handle conflict with confidence; (T/F/A); (PgCert, PgDip, MSc)
	4. Use a full range of learning resources; (T/F/A); (PgCert, PgDip, MSc)
	5. Reflect on own and others' functioning in order to improve practice; (T/F/A); (PgCert, PgDip, MSc)
	6. Be an independent and self critical learner, guiding the learning of others and managing own requirements for continuing professional development; (T/F/A); (PgCert, PgDip, MSc)
	7. Engage confidently in academic and professional communication with others, reporting on action clearly, autonomously and competently; (T/F/A); (PgCert, PgDip, MSc)
	8. Demonstrate independent learning ability required for continuing professional study, making professional use of others where appropriate. (T/F/A); (PgCert, PgDip, MSc)
	9. Manage complexity and change in their clinical / practice context (T/F/A); (PgDip, MSc)
	10. Competently undertake research tasks with minimum guidance; (T/F/A); (MSc)

Structure and content of the programme (including potential stopping off points)

Programme structure and format

See the Programme Description in Annex 1. Details of unit contents can be found from the Unit Catalogue from http://www.bath.ac.uk/catalogues/other.html - please note that these are updated in July of each year to list units for the following academic year.

The programme has been designed for a target audience of doctors in training for general practice, who have recent or current learning experiences, although not involving M level competences, and mature and experienced GPs who have not been in a formal learning environment recently. The programme is modular and places emphasis upon the development of advanced skills and knowledge in leadership, clinical practice and research. Learners will be at different stages of their career and professional development and be

working in different contexts. An early outcome for the programme is to allow learners to 'locate' their academic study within their particular and current practice context and this is achieved through the creation of a learning contract agreed, on registration for an award, between the student and the Director of Studies.

Access and relevance are absolutely fundamental to the programme design, thus in order to provide access to the best and most appropriate learning experiences, units can be drawn from across relevant departments and disciplines in the University, and in cases where Bath not provide a critical topic, from other accredited providers.

On successful completion of each individual unit of study the student will be presented with a Certificate of Completion, confirming that they have attained credit at the M level.

To receive the award of Postgraduate Certificate students must successfully complete 30 credits worth of study. Students must demonstrate satisfactory completion of programme level learning outcomes K 1-4, I 1-4, P 1-5 and T 1-8.

To receive the award of Postgraduate Diploma students must successfully complete 60 credits worth of study. Students must demonstrate satisfactory completion of programme level learning outcomes K 1-5, I 1-7, P 1- 10 and T 1-9.

To receive the award of MSc students must successfully complete 90 credits worth of study, which must include 30 credits worth of work that demonstrates the design and implementation of a small-scale research project relevant to primary care. Students must demonstrate satisfactory completion of programme level learning outcomes K 1-5, I 1-7, P 1-10 and T 1-10.

Delivery mode

Because of the range of sources of the units, and the different requirements of specific content, the delivery mode for individual units varies, involving e-learning, campus based face-to-face teaching, experiential practice-based learning, field courses and practical clinical sessions. In all cases units have a VLE based component, using Moodle, either as the prime source for learning or as a source of information and supportive learning resources. This ensures a structural coherence for the programme and permanent access, during a learner's registration, to the units and learning resources.

The VLE provides the platform for the online discussion events, delivery of learning resources and an overall learner support infrastructure for each unit, and for the programme as a whole. The VLE is the main interface for students with the University enabling them to make contact with the Unit Convenor and tutors and, importantly, with other learners.

At the research project stage, students are supported by an academic supervisor and normally a clinical co-supervisor based in practice. The development of the student's project proposal is supported through the Research Project Design unit (HL50077) and its associated tutors. There is further support available to students in terms of achieving ethical approval and for research governance arrangements within the NHS.

Scheme of study

Candidates may either register initially as a cpd student or apply for direct entry to an award programme. On registration they can select any available, and eligible, taught unit from the programme portfolio which is published on the website and which gives details of delivery mode and attendance requirements. The availability of units within the scheme is subject to a

minimum number of participants.

The start date for units varies dependent upon their type and the normal arrangements of the host department. For example, units that are drawn from other University programmes will be made available when they normally run, whilst units that are designed specifically for the Primary Care programme will run dependent upon demand and the appropriate sequence within the programme structure. A schedule of available units is published annually, covering 2-3 years, to enable students to plan a coherent programme and one that relates to their practice or placements schedule.

Students can apply to register for an award at any point but must apply once they have reached a threshold point for the award, which is 18 credits for the Postgraduate Certificate and 24 credits for the Postgraduate Diploma or MSc. Applicants will be guided on the appropriate choice of units ensuring that they will satisfy any pre-requisite or co-requisite requirements.

Students who complete units and leave with credit only are permitted to re-register on the programme and undertake other units of study until they have attained enough credit to register for a specific award.

Programme structure

The modular programme consists of three stages each leading to an award.

Structure and Organisation GP Speciality Training GP practice Integration options Practice Enquiry II Primary Care Project Design Research Enquiry Primary Care Phase 1 PG Diploma MSc Phase

MSc in Primary Care

Notes:

- 1 The academic programme can be commenced at any career point from Specialist Trainee Year 1 (ST1) to registered GP.
- 2 Double-headed arrows indicate integration with practice.
- 3 Named boxes indicate core units.
- 4 Untitled boxes indicate optional or elective units that are drawn from the programme portfolio. Any units can be taken for cpd purposes only.

Programme Content

The programme consists of a series of core units and a portfolio of option and elective units that will be regularly reviewed and modified subject to demand and availability. The current schedule of units is indicated in Appendix 1.

Potential areas for future optional units (not indicated in Appendix 1) include:

- Expedition medicine (Department for Health)
- Leadership in Health (School of Management/ Department for Health)
- Palliative Care (Department of Psychology)
- Diabetes (Department for Health/ Primary Care Diabetes Society)
- Medical Education (Department for Health, Department of Education)
- Dementia (Department for Health, Department of Pharmacy and Pharmacology)
- Behavioural change for public health (Department for Health/ Public Health Directorate)

The availability of units will be published on the programme website and updated regularly to allow learners to plan their future learning.

Elective units

Students can select up to 12 credits of elective units from the University's PDS portfolio, subject to the approval of the Director of Studies. Such requests must demonstrate relevance to the students' professional development requirements and to postgraduate study in primary care. If approved they will be defined within the student's learning contract.

In the event of an application from a candidate already holding units from the PDS portfolio, the APL sub-committee, subject to the conditions above, will determine the eligibility of the elective units.

Assessment

Study units are summatively assessed individually using a variety of assessment techniques, chosen to be appropriate to context and content and to be aligned to unit learning outcomes. Examples will include case presentations to peers and primary care teams, critical appraisal of a clinical, or non-clinical, evidence base, clinical audit, communications facilitating patient understanding of clinical results, videos of clinical examination techniques and use of OSCE examinations. Specific assessments are included in unit specifications.

Formative assessment is provided through a similar range of techniques and throughout units. Examples will include hands-on clinical examination techniques, peer assessment, online discussion of problem-based learning, face-to-face seminars and developmental assignments including the submission of draft assignments.

The programme is designed to progressively develop key skills, specified in the programme learning outcomes, as students move from one stage of the programme to the next, culminating in the research project. There is no assessment of the programme overall.

Requirements for an award

To be eligible for an award a student must achieve the following:

Postgraduate Certificate in Primary Care

The core units from Stage 1 totalling 12 or 18 credits (HL50168 and either HL50173 or HL50174)

Optional or elective units totalling 18 or 12 credits.

Postgraduate Diploma in Primary Care

The core units from Stage 2 totalling 24 credits (HL50168, HL50175 and HL50174) Optional or elective units totalling 36 credits

MSc in Primary Care

The requirements for a postgraduate Diploma in Primary Care The core units of Stage 3 (HL50077 and HL50176)

Postgraduate Diploma in Primary Care (named subject award)

The requirements for a postgraduate Diploma in Primary Care with a minimum of 50% of credit designated as appropriate for the named award

MSc in Primary Care (named subject award)

The requirements for an MSc in Primary Care with a minimum of 50% of credit designated as appropriate for the named award

Units designated as appropriate for a named subject award are published on the programme website and discussed during the development of the student's learning contract.

APL arrangements may apply to the above awards subject to the normal University regulations.

Study guides

The programme study guide presents a summary of key information required for students on the full programme. Each unit has a study guide, made available online, through the programme VLE, Moodle.

Practice-Based Learning

Core and optional units in this Programme are designed to be relevant to contemporary primary care practice. They encourage students to reflect on work-based issues and challenges and to apply knowledge and experience to solve essentially practice problems, such as service redesign, clinical procedures, commissioning implications, leadership of change, enhancing management of services, developing practice-based audit and research, etc. In some assessments, students will work in peer-learning sets to solve problems and challenges in practice.

The Programme VLE

The VLE is used to allow all students (cpd and programme) to access a wide range of learning resources, access information sources, both internal, such as the University library, and external, such as medical journals, and submit all assignments and assessments. Students can use the VLE as a workspace for shared working, personal reflection, and being in contact synchronously and asynchronously. An online induction is provided to all students before they engage with their first unit to ensure that they can navigate the VLE and use its full functionality.

Online Discussion Events

Where the VLE is used as the prime delivery mode, learning will normally be delivered using

a problem-based learning (PBL) or activity-based approach. At regular points during the study period there will be scheduled online discussion events, or group or individual activities. These typically run over a one or two-week period and comprise a series of online activities (e-tivities) which present topics for discussion and group problem solving, moderated by tutors. The nature of these e-tivities will vary and is selected discussion on a synchronous chat or through video synchronous technology (webinar) dependent on the nature of the learning activity. These online events are important in building and sustaining communities of practice and contribute to the maintenance of programme coherence.

Details of work placements / work-based learning / industrial training / study abroad requirements

A number of units, specifically those relating to Practice Enquiries (HL50173 and HL50174) and the Research Project Enquiry (HL50176), are located in the work place, either general practice or, for GPSTRs, in one of the clinical placements.

Some GPSTRs elect to undertake a clinical experience outside of the clinical training, ie an Out of Programme Experience, (OOPE), often overseas. HL50173 or HL50174 are designed to be suitable for demonstrating such experiential learning and allowing its assessment for credit.

Many unit assessments will be designed to reflect real practice issues within primary care.

Details of support available to students (e.g. induction programmes, programme information, resources)

All students are registered students of the University for the period of their studies and have full access to the facilities (e.g. Library, Learning Support etc). On completion of the registration process, students are issued with a username and password, which they can use to access programme and unit level resources on Moodle. These include a student programme handbook, Unit specific study guides and an on-line induction programme and other support materials. The on-line induction programme is incorporates a guide to learning online. Where there is employer involvement in specific units, for instance with the Severn Deanery, face-to-face Induction sessions are provided at regional centres covering an introduction to the specific unit, to the overall programme and to online learning.

Most units have both practice-based and University-based academic tutors. Where units are aligned to clinical practice, which includes all core units, practice-based tutors are drawn, where possible, from the groups of GP Educators involved in clinical training for general practice. Unit Convenors will be responsible for the coordination of tutors and for the overall coherence of the unit.

The University Department, or the equivalent externally, will be responsible for students studying their unit. The Programme Committee, will review the student support arrangements offered by participating departments on an annual basis and make recommendations. The Director of Studies, in concert with the Student Staff Liaison Committee (SSLC) will be responsible for monitoring that the support is appropriate.

Emphasis will be placed on the importance of other learners to the learning process, especially on a programme looking at developing practice across healthcare professionals. To support the establishment of such *communities of practice*, students will be encouraged

to share their practices and ideas for developments through *online discussion events* and at face-to-face sessions. These peer support groups will be important part of the curriculum design for each unit.

Students are expected to seek, and arrange, support from their practice base in identifying an appropriate work-based mentor. For GPSTRs this will be arranged through their GP Educator network. The Director of Studies will provide advice and guidance to these work-based mentors.

Students completing the research stage (Stage 3) will be allocated an internal supervisor and, normally, will need to propose a practice based supervisor, who will be approved by the Board of Studies, to support them in undertaking their research project.

The Director of Studies, in association with the CPD Support and Development Office, monitors unit registrations and contacts students regularly. Students are advised of the opportunity to work towards an award and, if they are interested, will be advised to discuss this with the Director of Studies. Students who are not interested in working towards an award are able to continue to accrue credit but are advised that they may not be able to count some of this towards an award at a later date.

The Programme Director of Studies will work with all staff to ensure that the students are well supported on their learning.

Admissions criteria (including arrangements for APL/APEL)

Admissions

Students who are interested in professional development would normally enrol upon individual units of study in the first instance. The Director of Studies, the CPD Support and Development Office, and the unit's host department, will advise on this process. Individual units may have specific admissions' requirements. Alternatively students may apply to register for an award at the outset for which the admissions criteria are:

- Possession of a medical degree
- Current registration with the General Medical Council or its equivalent overseas
- Meeting the University's standard English language requirements and provision of documentary evidence of this standard, if required
- Provision of an academic reference. If it is not possible for the student to provide a reference (due to the length of time since they last completed formal study) the student will be advised to enrol on a cpd basis. In considering a subsequent application to undertaken an award programme, the Director of Studies will look at the students' performance on previously studied cpd units and use this as an indication of academic performance.

Students who wish to register for an award must apply once they have reached the threshold point of 18 credits, for the Postgraduate Certificate, or 24 credits, for the Postgraduate Diploma or MSc.

APL Arrangements

Candidates who have completed CPD for M-level credit, on this programme or from another organisation, are able to apply for credit to be transferred to this programme. An APL accreditation sub-committee, reporting to the Faculty Board of Studies, considers applications for credit based on APL and will use the criteria set out in the University's Code of Practice for APL - QA 45. This credit must have been obtained within the previous 5

years, must not exceed 50% of the final award being sought, and should not comprise work which has contributed to the award of a degree from another institution. Transcript results will be used to determine marks for the calculation of the award of pass, merit or distinction.

Where units are commissioned from, and provided by, external organisations the approval of the unit, and its associated arrangements, will be confirmed annually by the Programme Committee and the APL sub-committee. Consequently units commissioned in this way will receive prior approval for APL benefiting student choice. The process will be included in the Annual Monitoring Report, which may prospectively indentify, and confirm, such units as part of the action-planning requirement.

Direct Entry

Participants who have successfully completed a Postgraduate Certificate or Postgraduate Diploma in a cognate area, specifically in an area of primary health care or a related area of specialism, and have received the award within the last 5 years may apply for direct entry to a higher credited award. Applications for credit will be made to the APL sub-committee as above and credit will be awarded in line with the maxima set out in QA 45. All APL cases will be considered on a case-by-case basis dependent on the nature of the programme studied and fit with the learning outcomes of the Postgraduate Programme in Primary Care. A list of normally approved programmes, established by case law, will be published as examples emerge.

APEL Arrangements

In line with QA 47, candidates who have several years of relevant professional practice experience may compile a portfolio of evidence to demonstrate that they have met the learning outcomes of a particular unit. Applications for APEL must be made against specific units and the portfolio must illustrate how the candidate has met the learning outcomes of that unit. Members of the APL accreditation sub-committee, who will also determine the process, will assess the portfolio and if successful, the candidate will be awarded credit in relation to that specific unit. The process will start with a discussion with the Director of Studies about the candidate's suitability to undertake this work. A fee will be charged for formally assessing each portfolio (and for each unit). Candidates may submit APEL requests in respect of no more than 50% of the credit value of the final award they seek. There is a standard format and procedure for this and details can be found on the programme website. The marks awarded for the APEL portfolio(s) will be carried forward and used for the calculation of the award of distinction.

Summary of assessment and progression regulations

Programme regulations are consistent with the University's Framework for Assessment for cpd programmes (NFAAR-cpd) and elaborated in the Programme Regulations. A summary is as follows:

Unit Regulations

Credit is gained for successful completion of a unit. This is normally defined as the achievement of at least 40% of the total marks available for the summative assessments. Credit is also gained on successful re-assessment of a unit. Students who retake and pass a unit gain the credit for the unit.

Coursework must be submitted by the specified deadline. Requests for extensions should be submitted to the Unit Convenor. Coursework submitted late, without prior approval, will normally receive a maximum mark of 40%. Coursework that is handed in after five working

days, without prior approval, will normally receive a mark of zero.

Re-assessment: Where students fail a unit at the first attempt, they will be required to submit additional work and/or sit a further examination as detailed in the unit description.

Repeat: Where students fail a unit at the second attempt (i.e. through re-assessment) they will be permitted to repeat the unit. Repeating a unit means retaking the unit and all associated assessment with attendance and paying the appropriate tuition fee.

Where students without mitigating circumstances successfully retrieve failure through reassessment in a unit a maximum unit mark of 40% will be awarded. Students with mitigating circumstances who successfully retrieve a unit will be recorded as having gained the actual mark achieved at the second attempt.

Students will not be permitted an opportunity to improve their marks through re-assessment if they have already passed a unit.

Programme Regulations

The period of study will be determined at the point at which the first unit is studied, whether as part of cpd, an APL submission or following programme registration. Students will normally be permitted a maximum of 8 years to complete all three stages.

Students will progress at their own rate through the negotiated programme of study and their progression will be measured in terms of unit completion rather than completion of a year of study.

Students may undertake units for more than one stage of study concurrently where:

- all pre-requisites and other conditions have been met;
- approval has been received from the Director of Studies.

Each unit contributing to an award must be passed and failure cannot be condoned by taking into account compensating higher-level performance elsewhere in the student's profile.

To be eligible for the award of the Postgraduate Certificate in Primary Care, students must have achieved 30 ECTS credits, of which at least 75% must be at Level 7. This must include the designated core units.

To be eligible for the award of the Postgraduate Diploma in Primary Care, students must have achieved 60 ECTS credits, of which at least 75% must be at Level 7. This must include the designated core units.

To be eligible for the award of MSc in Primary Care, students must have achieved 90 ECTS credits, of which at least 75% must be at Level 7. This must include the designated core units, the research methods unit (FH50077) and a research project. Students will be eligible for the award of an MSc with Distinction if they achieve a mark of at least 70% in the dissertation/project and an average mark across the taught units of 70% and an award of MSc with Merit if they achieve a mark of at least 60% in the dissertation/project and an average mark across the taught units of 60%. Similar arrangements apply to the Postgraduate Diploma and Postgraduate Certificate, without the requirement for a dissertation.

Progression

The Board of Examiners will normally allow students undertaking re-assessment in units to the value of 12 credits to progress to a further unit of study. Students undertaking re-assessment in units totalling more than 12 credits will not normally be allowed to progress until they have completed their reassessment successfully.

To proceed to the MSc stage a mean pass mark of 50% must be achieved across the taught stages.

CPD

Students studying units on a stand-alone CPD basis are subject to the assessment regulations related to the units studied but not the programme regulations.

Assessment and progression regulations are based on those in current use for CPD programmes in the University. Full Programme Regulations are available in the Student Handbook and on the web.

Schedule for Board of Examiners and Timings of Re-assessment

Once assessed work has been marked/moderated and viewed by the external examiner, all marks are considered by a Board of Examiners for Units (BEU) – these typically meet at the end of each unit. Once the marks have been officially agreed by a BEU, they are then collated and subsequently considered by a Board of Examiners for Programmes (BEP).

Decisions on condoning and/or supplementary assessment requirements will be made at the first available full BEP *during* the taught stage to avoid the student having to wait until they have completed all their taught units – typically at the end of each yea. Any decisions regarding condoning and/or supplementary assessment requirements will be based on the Persistent Generic PGT Rules *for the whole taught stage*

(http://www.bath.ac.uk/registry/nfa/nfaar-pgt-appendix-11.pdf). It should be noted however that, very occasionally, those decisions made *during* the stage may have to be reconsidered at a subsequent BEP, depending on the students' performance during the remainder of the stage, taking into account the timeframe in which supplementary assessment has to be completed. Interim sub-BEPs *may* meet at specific point(s) during the taught stage of the programme to monitor student performance.

BEPs meet at the *end* of the taught stage to make formal progression decisions. Dependant on the submission date for dissertations, formal award decisions (including progression with resubmitted dissertations, exit with a lesser award, and failing) may be recommended at other BEPs.

Indicators of Quality and Standards

The University's Quality Assurance Code of Practice is the key reference point that describes the academic processes and principles, roles and responsibilities through which the University develops and implements an effective and efficient quality management framework, assuring itself and external bodies of the quality and standards of its provision. It is also one of the channels of communication via which good practice in learning and teaching is encouraged and disseminated.

The Faculty Learning, Teaching and Quality Committee (FLTQC) will be responsible for approving the aims, learning outcomes, academic standards, admissions criteria, curriculum

and assessment of the programme. The FLTQC will also be responsible for the approval of staff teaching on the programme, approving the appointment of external examiners, approving annual monitoring reports on the programmes, and ensuring that appropriate monitoring, evaluation and review procedures are carried out and result in quality enhancement.

Quality assurance mechanisms include:

- Appointment of external examiners to the programme and the establishment of appropriate reporting mechanisms
- Annual examination of standards by External Examiners for the programme
- Staff-student liaison committee
- Annual Monitoring and Periodic Review of programmes by the University of Bath
- Board of Examiners meetings confirming assessment activities, the annual assessment schedule and confirming the assessment recommendations
- Student evaluations of each unit using a standard pro-forma and a questionnaire covering the whole programme. Quantitative results and written comments are discussed at the Staff-Student Liaison Committee
- Individual staff appraisal, peer monitoring of teaching, induction and mentoring of new staff. Teaching staff have access to a continuous University-wide staff development programme
- University of Bath's consistent placing around the top 10 of UK Universities
- QAA Institutional Audit 2008 identification of the University's engagement with its partners in work-based learning as good practice.

Governance:

The academic coherence of this programme is determined with the academic framework of the University of Bath via the Faculty Board of Studies and institution-wide committees consistent with the University QA Code of Practice Statement, QA3. The programme management is overseen by the Programme Committee which comprises both internal and external members of the Department and includes both employer and student representation.

Review and Monitoring:

The academic performance of this programme is assured and managed by the Programme Committee, the FLTQC and ultimately the Faculty Board of Studies. The equivalence of academic rigour is scrutinised by the Programme's External Examiner.

Student Voice:

Student feedback is essential to the effective development and delivery of this programme. Students have representation on the Programme Committee, through the workshop, conference and unit feedback processes and through their representatives on the SSLC.

The participative approach to curriculum specification, design and development, described previously, is a commended mechanism for student engagement.

Staff Development:

All staff contributing to this programme receive support from the University to develop and enhance their learning and teaching, and research skills. Specifically, staff are offered online development modules, and briefing days, to enhance their abilities for technology-enhanced learning essential for the support of distance learning students.

Sources of other information

Department for Health website: http://www.bath.ac.uk/health/primarycare/

- University of Bath CPDSDO Website: www.bath.ac.uk/cpd/ Student handbook

Appendix : Programme Description

This programme conforms to the CPD version of the NFAAR.

	is prog			E CPD version of the NFAAR.	Nistance Lo	arning)	
Programme code Programme title							
				MASTERS in PRIMARY CARE			
Award type			Award type				
	Award title			MSc in Primary Care with the following intermediate qualifications: THHL-APL02 PG Dip Primary Care THHL-APC02 PG Cert Primary Care			
		Mode of	f Attendance	Distance Learning			
			Length				
	Stat	e if coexi	stent M-level programme				
Sta	State any designated alternative programme(s)			PG Dip Primary Care (as for PG Cert plus HL50175 and HL50174 and a further 12 optional TSCs) PG Cert Primary Care (HL50168 and HL50173 plus 18 optional TSCs)			
	Appro	ving body	y and date of approval				
Part	Stag e	Durati on	Unit code	Unit title	Unit status	Credits	Taught, or Dissert'n/ project credits
1	1	2-4 years	HL50168	Evidence-based practice in primary care	С	6	TSC
			HL50173	Primary care practice enquiry 1	С	6	TSC
				select 18 credits from portfolio of ava below	ilable optic	onal units	
	2	4-6 years	HL50175	Implementing change in primary care	С	6	TSC
			HL50174	Primary care practice enquiry II	С	12	TSC
				OPTIONAL UNITS Select 12 credits from portfolio of a units below	available o	ptional	
			HL50071	Exercise Physiology	0	6	TSC
			HL50072	The psychology of sport and exercise	0	6	TSC
			HL50111	Sports injuries and rehabilitation	0	12	TSC
			HL50120	Communication	0	6	TSC
			HL50121	Consumer health informatics	0	6	TSC
			HL50122	Knowledge and information management	0	6	TSC
			HL50123	Learning and teaching in healthcare	0	6	TSC
			HL50157	Exercise for Health	0	6	TSC
				Common musculoskeletal medicine for primary care	0	12	TSC
				Advanced musculoskeletal medicine for primary care	0	12	TSC
			HL50181	Introduction to learning and teaching in primary care	0	6	TSC

		XX50194	Tobacco control in practice	0	6	TSC
3	18 months – 2 years	HL50077	Research project design	С	6	DPC
		HL50176	Primary care research project	С	24	DPC

Stage	NFAAR-CPD decisions reference See: http://www.bath.ac.uk/registry/nfa/index.htm			
Stage 1	All assessment: Appendix 17			
Stage 2	All assessment: Appendix 17			
Stage 3	All assessment: Appendix 17			