

## Update – September & October 2017

The review has been moving on apace over the last month. [Dr Chris John](#)'s (Systems – Early Years TRG Chair) trip to take part in a six-day training course with [Carl Wieman](#) at Stanford University, as part of a wider group from Imperial College London and the Education Development Unit, was a success. The training was used for supporting and recognising 'Departmental Educational Specialists'.

He has shared some of his experience with us below:

“One of the key aims for the group was to consider how this course might be used to inform the College-wide curriculum review process. Our recommendation was that a similar course (or courses) may be a starting point for those actively engaged in curriculum review and design aligned with the [College's Learning and Teaching Strategy](#).”

The course provided numerous examples of good teaching practice that could be incorporated into course redesign. However, those involved with the curriculum review at a more strategic level would normally need to have a more substantial educational understanding and /or qualification (e.g. the MEd) to allow greater influence on the implementation and development of the learning and teaching strategy. The group also provided recommendations for how a two-stage curriculum review process could be implemented across College.

In addition, I visited the University of Bristol to discuss how they have implemented a new Medicine curriculum. The curriculum review at Bristol was a two-year, heavily project-managed process. The initial stages involved the development of clear methodology for the review process, followed by an analysis of the current curriculum, looking at strengths and weaknesses. A 'Babies and Bathwater' document was produced, to suggest what should be kept in place and what could be replaced. Staff engagement was maintained with regular feedback sessions throughout. There were numerous away days where key stakeholders came together to discuss and develop the process. A variety of groups were formulated, initially focused on strategy and eventually focused on implementation. The new curriculum, to be introduced this October, utilised a case-based approach with reduced content, refocused on key medical issues that the majority of doctors will come across in their careers. A lighter-touch assessment regime will also be implemented, although regular tests will be utilised to allow students to monitor their own progress.”

Closer to home, [Professor Steve Gentleman](#) (Anatomy, Pathology and Radiology TRG Chair), [Professor Ceri Davies](#) (Professor of Anatomy in the Department of Surgery Cancer) and [Gideon Shimshon](#) (Director of Digital Learning & Innovation) visited Leiden University to discuss opportunities for use of digital technology in the teaching of anatomy, and Steve shared the following update:

“The trip to Leiden University was both fruitful and engaging. Aiming to rethink anatomy education using technology, we agreed that the best approach was to bring academics, IT and educational design professionals together to produce novel learning experiences for students to broaden and enhance their education experience. As part of this, we discussed shared online anatomy tools, practical dissection videos and tutorials, a new endoscopic dissection approach and the potential for augmented reality approaches. We will continue to think of new ways to collaborate, and plan to organise a Learning Experience Design workshop in London. We aim to have another meeting at Leiden to include a wider range of Imperial staff in the discussion of new teaching approaches, and to examine the infrastructure required to enable more staff to create digital learning materials and media in their curriculum.”

The School was also pleased to receive a visit from [Dr Richard Schwartzstein](#), Director of the Harvard Medical School Academy, who spent two days teaching our students, workshopping with staff, holding teaching and digital education forums, as well as giving an open lecture called '*Pathways: Creating a 'Thinking Curriculum' for 21<sup>st</sup> Century Doctors*'. The lecture discussed the thinking behind Harvard's innovative medical curriculum, and covered the 'flipped classroom' method, as well as research Dr Schwartzstein himself had conducted into the ways students learn best.