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### Principal Fellowship Booklet

### **Leadership in Education Awards Programme**

**On behalf of the LEAP programme team, I would like to welcome you to the Leadership in Education Awards Programme (LEAP) and support sessions for Principal Fellowship applications**. **We hope that you find this workbook useful in supporting your application.**

LEAP is accredited by the Higher Education Academy (HEA), can award Associate, Fellowship, Senior and Principal HEA Fellowships.

This programme supports you in documenting and evidencing your sustained record of effective strategic leadership in academic practice and academic development as a key contribution to high quality student learning. The emphasis is on leadership in teaching and supporting learning in higher education. The extent of your educational impact and sphere of influence must be significant.

In addition to the programme of activities we have in place peer support groups and LEAP mentors offering advice and feedback on your application. As Director of the **Centre for Academic and Researcher Development and Academic Lead for LEAP I welcome you onto the programme**



**Prof. Judith Williams**

**Director of the Centre for Academic and Researcher Development**

**Academic Lead for LEAP**

### Principal Fellowship

Your application should focus (but not exclusively) on the activity of the last 5 years. You can still evidence examples that are still having an impact although you initiated them more than five years ago if you can evidence the impact. The requirement for ‘sustained record of impact’ means that applications with one or two recent examples of strategic leadership without evidence of successful and sustained impact will not meet the criteria for Principal Fellowship. Significant results of leadership over longer, extended periods are required.

Can you provide a few quotations, illustrations and/or metrics of the impact of your leadership to strengthen your application? What key contributions have you made to student learning? Your writing needs to be analytical rather than descriptive. Provide a rationale for your choice of strategy and root that rationale in both your experience and literature on higher education. Weigh up and evaluate the impact of your choices and explain why you may have needed to adjust your approach to achieve the best possible outcomes. Acknowledge contextual factors which shape your work.

### Principal Fellow Pathway (D4, PFHEA)

You are able to choose between submitting a written Portfolio of no more than 8,000 words or giving an oral presentation of no more than 30 minutes (plus 30 minutes of questions). The assessment criteria are the same for both pathways and assessors will use the pro-forma.

### PFHEA Portfolio route

There is a word limit of 8,000 words for the written portfolio. It must include a reflective account of practice and four case studies aligned to D4 of the UKPSF. Your portfolio needs to include a record of educational impact (this can be submitted as a table and a template will be provided). Your case studies must provide evidence of a sustained and effective record of impact at a strategic level in relation to teaching and learning. This may be within the University of Manchester or wider (inter)national settings. It is essential that your case studies demonstrate the sustained strategic impact that you are having with your teaching and learning. Throughout your case studies you should demonstrate an active commitment to and championing of all Dimensions of the Framework, through your work with students and staff, and in institutional developments. The case studies should focus on your successful, strategic leadership. This could have led to enhanced student learning, and/or established effective organisational policies for supporting and promoting others in delivering high quality teaching and support for learning and/or championing an integrated approach to academic practice. Further advice and support is given within the LEAP to Principal Fellowship workshops. To support your application you will need to provide three referees’ statements (see page 41-45) (one of which needs to be outside the institution and one should be a fellow of the HEA).

### PFHEA Oral presentation route

The oral presentation of no more than 30 minutes should cover four case studies that are aligned with D4 of the UKPSF. Your case studies must provide evidence of a sustained and effective record of impact at a strategic level in relation to teaching and learning. This may be within the University of Manchester or wider (inter)national settings. It is essential that your case studies demonstrate the sustained strategic impact that you are having with your teaching and learning. Throughout your case studies you should demonstrate an active commitment to and championing of all Dimensions of the Framework, through your work with students and staff, and in institutional developments. The case studies should focus on your successful, strategic leadership. This could have led to enhanced student learning, and/or established effective organisational policies for supporting and promoting others in delivering high quality teaching and support for learning and/or championing an integrated approach to academic practice. Further advice and support is given within the LEAP to Principal Fellowship workshops. This will be followed by 30 minutes of questions from the assessors. In addition you will need to supply a written copy of your record of educational impact. To support your application you will need to provide three referees’ statements (see page 41-45) (one of which needs to be outside the institution and one should be a fellow of the HEA.

### My initial thoughts on which route of assessment to take

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### Mapping my activity against the UKPSF

Capture your initial thoughts around the evidence that you may use try and include which metrics you require and who may provide quotations

**D4.1 Championing of the framework – embedded into the whole application**

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**D4.2 Strategic leadership to enhance student learning**

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**D4.3 Policies and Strategies**

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**D4.4 Integrated Academic Practice**

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**D4.5 Continuing Professional Development**

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### Advice for completing your HEA Principal Fellowship application

* Make sure that your application has an excellent evidence base, is highly reflective and contains convincing examples of practice.
* Ensure that you clearly articulate your participation in, and learning from, CPD activities especially as evidence of strategic effectiveness
* Section 1 - Championing the UKPSF. This is very important and needs to be evident throughout your submission. You need to be explicit about how the UKPSF informs / has informed your practice and how you support its implementation within the university. The evidence needs to be highlighted.
* The dimensions of practice: there are two schools of thought accreditors as to how far you then need to reference them within the text.
  + Some assessors like to see reference within the text
  + Others are happy with a list at the top of each section highlighting the Dimensions it addresses
* References: if you refer to theory in the text then you need to provide a reference.
* Signpost very clearly the evidence against each criterion. eg ' as an example of my sustained strategic effectiveness, I ...'.

### Record of Educational Impact

Think about the roles you have undertaken throughout your career, capture job titles and where you think you could evidence activity against the 5 descriptors

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### Principal Fellowship Application

For each section of the application you will need to evidence what you have done and the difference you have made

### D4.1 Championing of the framework – embedded into the whole application

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### Example 1: Active commitment to and championing of all dimensions of the Framework through work with students and staff and in institutional developments

I am a Professor of XX, Deputy Associate Dean for XX and Director of XX at the University of Manchester. Throughout my career I have been dedicated to supporting, enhancing and leading the teaching and learning development of my colleagues. My roles as Director of XX and Deputy Associate Dean for XX enable me to comprehensively demonstrate my proactive and sustained commitment to all dimensions of the UK Professional Standards Framework. Throughout my application I will demonstrate how my teaching and learning leadership has influenced policy and practice not only across the University but also nationally and internationally. Outstanding teaching makes a key difference to learning and the student experience and I am dedicated to leading and supporting my colleagues to enhance the quality of their teaching at all levels and in all aspects of its delivery.

The University of Manchester is a research-led institution with over 38 000 students and more than 12 000 staff. It restructured in August 2016 into three large Faculties and I hold a number of leadership roles in the newly formed Faculty of Biology, Medicine and Health.

I initially piloted, and now lead, three embedded HEA accredited programmes which to date have resulted in 256 HEA fellowships and 56 Postgraduate certificates in teaching and learning being awarded to colleagues that embrace a wide range of teaching and learning roles including academics, professional support staff and eLearning. In all of my leadership roles, my creativity, motivation and ability to inspire excellence has been essential. I have received two University awards for my teaching, one national award and a Senior Fellowship from the Higher Education Academy (2014).

### Example 2: Reflective Account of Practice

I am having a sustained impact on health professional education through the application of behavioural science models. This is the main drive for my activities and their associated educational impact at regional, national and international levels. I am also modelling and creating an environment that supports an integrated approach to educational practice, both using and generating high quality evidence about what works in education, and this is having an impact at a national and international level.

As a health professional educator, who is also a behavioural scientist and researcher by background, I was in a unique position to see the synergy between education of healthcare professionals and behavioural science. In 2012, through discussions with educators of healthcare professionals working in low and middle income countries, I noticed that the focus that educators placed on their education of postgraduate healthcare workers was on knowledge and skill development (competence or capability). However, the principle purpose of these educational activities was usually to change practice. Education was being delivered in UK and in Uganda by these educators and although the educators thought that they were changing knowledge and skills of the students, they were not so sure that they were influencing practice. On reflection, it was the good interpersonal relationships that I create with colleagues that led to these educators discussing their work with me and to the subsequent change in direction of my activities. Whilst I believe that this is a long-held and probably naturally occurring trait, I have realized how important relationships are to innovative practice: particularly in implementing a scholarly approach to practice. In response to these discussions and my subsequent thoughts, I read around the topic of changing clinical practice and discussed the issue with other psychologists and educators (V3, V4). Through this scholarly approach to this educational issue, I developed a hypothesis i.e., that behavioural science could enhance learning of students by changing the focus of education from knowledge and skill acquisition to the performance of behaviours that make up professional practice.

Behavioural scientists have long since studied the practice of healthcare professionals and sought to influence practice e.g., to promote the take up of new guidelines or the implementation of new research into practice. However, I now realized that those educating current and future healthcare professionals were working almost entirely separately and were not aware of the advances in our understanding of what drives practice. Indeed, I observed that, although the purpose of much health professional education is to promote or change practice, the determinants of practice, as I understood them, were not a focus of the intended learning outcomes, the educational techniques used nor the evaluation of the education. I could see that there were huge benefits if I could influence other educators and other behavioural scientists to see the natural synergy between the two activities. I could imagine a situation in the future where behavioural scientists and their knowledge was translated into education, such that educators were more likely to be able to have the positive outcomes (i.e., influence on practice) for which they were aiming and that during these activities robust data were collected and used by behavioural scientists to inform the very theories on which they were based (K1, V3). I could imagine that over time this cycle would lead to gradual quality improvement of education, as well as gradual increase in our knowledge about the facilitators and barriers to using education in practice. Quite simply, this became my mission.

Although, as an educator in a medical school, I could have chosen to simply implement some of these behavioural science theories and methods into my own practice and the practice within the medical school, faculty or my own University, I made a decision that the benefits of this were so potentially great, I would attempt to work to influence policy and procedures at a regional, national and international level (A1). Indeed, although I have had success in being an influence on policy makers and educators and a champion for this approach nationally and internationally, I am only just beginning to work with people within my own institution to evaluate and enhance education delivered by my own University.

The question for me was how did I attempt to improve the education of health professionals by introducing behavioural science to educators, whilst also taking a scholarly approach to my hypothesis. I realized that the impact of my activities was likely to be at a regional and national policy level and a national and international implementation level. I reflected that I would need an integrated academic approach that focused on implementing what was currently known and by approaching the implementation in a scholarly way, conducting high quality, fundable research. With this in mind, I created a programme of work comprising: a) The creation of a group of behavioural scientists with a focus on enhancing education with behavioural science b) making relationships with health education policy makers to influence them directly and increase the focus on the behavioural impact of education at a national and international level and c) the generation of high quality evidence about the usefulness of using models of behaviour to evaluate and behaviour change techniques to enhance education. This programme of work is intended to be lifelong but I can demonstrate the educational impact that I am already having at a national and international level.

A crucial element of my strategic approach is working directly with other health professional educators to translate behavioural science knowledge to support them in improving their educational practice (A5). This is key to ensuring that the advances I am making are not advances that remain within the skill set of a handful of behavioural scientists but rather become core skills for educators of health professionals. Further, in teaching the approach (i.e., the 'virtuous circle' of using behaviour change techniques to enhance learning and evaluating on the basis of behavioural determinants of practice) I am modelling a sound, integrated approach to education and championing the scholarly approach to education as set out in the UKPSF.

### Example 3: Active commitment to and championing of all dimensions of the Framework through work with students and staff and in institutional developments

I have always wanted to empower students to become independent lifelong learners, able to develop as critical thinkers and to reflect on their experiences. I know this is not easy; before University, they are used to an environment where their learning is carefully directed and success is readily measurable in terms of assessment grades. My purpose is to enable them to start their journey as independent learners, in ways that will enhance their learning experience and transform them academically, personally and professionally. This is a necessity for medical students; on graduation, they are responsible for the lives and well-being of others. They do so in a context of rapidly advancing knowledge and technology and of challenges to the boundaries of ethical practice. It is therefore essential that they can realistically evaluate their knowledge and skills, develop a basis for making sound professional and ethical judgements and take responsibility for addressing any learning issues that arise. Such an approach requires each individual to have strong foundations as reflective learners (Schon DA. 1983. The Reflective Practitioner: How Professionals Think in Action (New York, Basic Books) **(K1, K3)**

I first recognised the crucial interplay between the personalised reflection of the individual learner and the dynamic of group learning when I began in medical education as a Problem Based Learning (PBL) tutor in 1996 **(A2, K2, K3)** . My early career was in Endocrinology, as a cell biologist, with little training in educational methods, although I was aware, from my undergraduate days at the University of Sussex, that small group learning could be effective and stimulating. I was therefore keen to be involved in delivering PBL. I learnt by “doing” about the basis for this educational approach, especially how the reflective development of the individual, in taking responsibility for her/his own learning, contributes to the interchange of knowledge within the group. It enhanced my own professional development as a tutor who motivates students to learn and stimulates them to think for themselves **(K2, K3, A2, A5)**. I was, however, impressed by the preparation, guidance and support for the actual delivery of the sessions provided by the team leading PBL in the Medical School. In my own educational journey, I have sought to emulate such excellent practice and to enhance it further and I will expand on this later in this application **(K2, D4.2aii).**

I noted that some PBL cases featured the interdisciplinary nature of clinical learning and practice. I wanted our students to explore medicine in a societal, ethical and global framework, so I designed and implemented learning activities which involved them in undergraduate interdisciplinary team projects addressing problems of global and societal importance **(A1, A3, K1, K2)**. I first attended a University wide Interprofessional Seminar and I sought out colleagues from other disciplines, including Geography, Manchester Business School and Modern Languages, and established a small discussion group with the aim of providing an educational approach to interdisciplinary learning **(V3, V4)**. Secondly, I used this as a basis for funding applications to support this initiative and obtained University grants (“Postgraduate Interdisciplinary Learning across the University” £2250 (2003-2004) “Rolling out Interdisciplinarity in the Undergraduate Curriculum” £31250 (2004 – 2005) “Embedding Undergraduate Interdisciplinary Learning: Evolution of a Generic Undergraduate EBL Module” £2,250 (2005 – 2006) **(REI 1, A5)**. Thirdly, I recognised that the outcomes of these projects would demonstrate the feasibility of interdisciplinary learning and that it was appreciated by the students involved, so that an interdisciplinary learning environment could be spread University- wide. For medical students who are taking an Intercalated BSc, I introduced a novel module “Big Issues”, where they explore wider societal and global implications of major healthcare problems and investigate possible solutions to them **(REI 2)** . Although I am no longer involved in Interdisciplinary Learning, the new University College of Interdisciplinary Learning has embraced many of the principles identified in these early years.

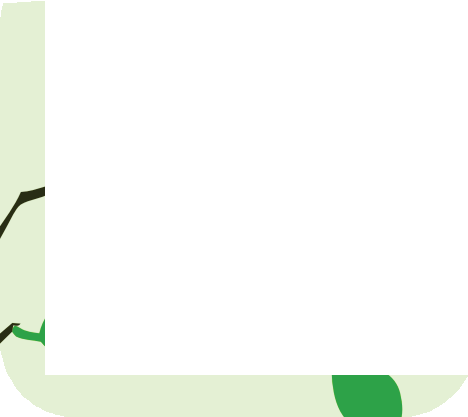
My involvement in interdisciplinary and interprofessional learning led me to recognise the importance of professional development in medical undergraduates. The then Director of the MB ChB Curriculum recognised my expertise in this area and in 2003, asked me to drive forward the introduction of undergraduate **Personal and Professional Development (PPD) and PPDportfolios.** I faced a huge challenge. I was introducing PPD *de novo* to the MB ChB curriculum which had no previous culture of PPD, or of a portfolio and the notion of reflective learning and practice was therefore certainly not evident in the undergraduate medical programme at that time. There was considerable resistance to these ideas, both from undergraduates and clinical colleagues. My success in introducing PPD **(D4.2)** led to my appointment as **Academic Lead** for this area of the programme in 2005 **(REI 3)**. My achievement in this role was recognised by my award of a **National Teaching Fellowship in 2011 (REI 22)** and by my promotion to **Professor of Medical Education** the following year **(REI 23)**.

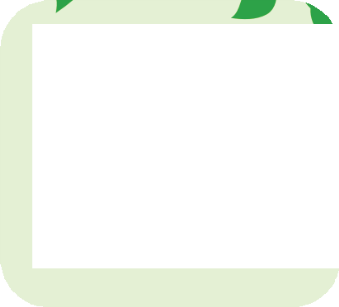
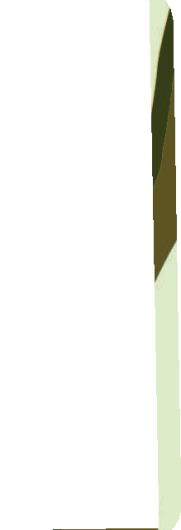
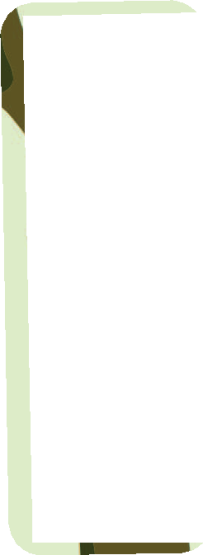
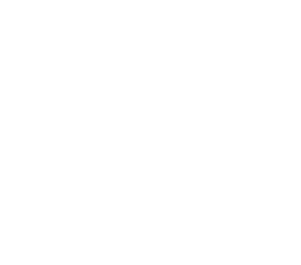
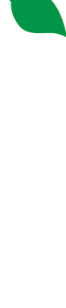
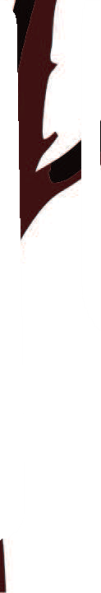
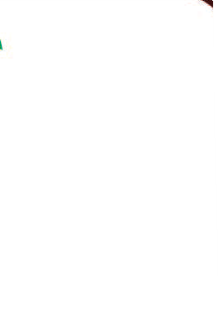
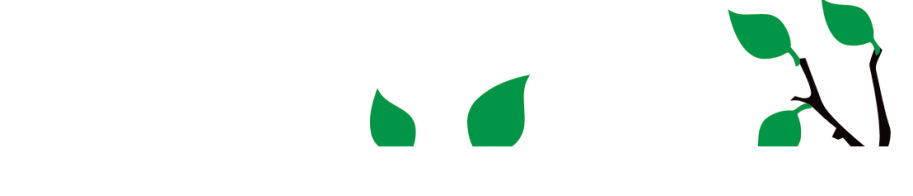
Introducing PPD and reflective practice is a major achievement for me and I have always recognised how it has profoundly affected all my Teaching and Learning and my Leadership activities **(D4.5).** The best way I can describe this is by envisaging PPD and reflective practice as the main trunk of my Learning “Tree” and from which all my other leadership activities stem.

**Integrated Practice:**

**ePPD portfolio**

**Integrated educational approaches inside/ outside Manchester**

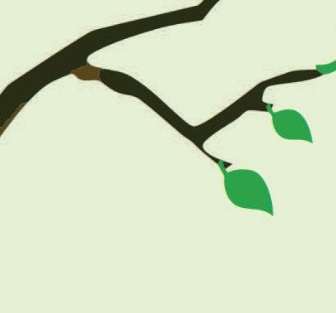
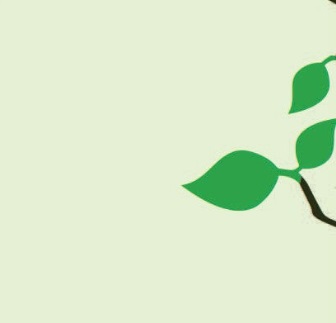
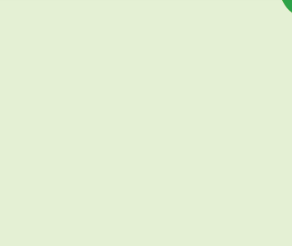


****On reflection, I also recognise the fundamental importance of these earliest experiences, gained through my involvement in interprofessional learning often dismissed at the time, but with inestimable value later on. Lessons learnt in applying clear educational principles and learning from colleagues were key to my leadership in introducing PPD and the PPD portfolio.

**Professional Development of Tutors**

**Enhancing women’s careers**

**Continuing Professional Development – passing on wisdom**



**Policies:**

**Assessing PPD**

**Reflective Learning throughout the whole programme**

### Example 4: Championing the Framework Career Journey

Reflections underpinning this application span approximately 18 years. The application validates contributions I have made to the development of teaching and learning strategies within my own School, wider faculty/university and international arena (REI 1, REI 2, REI 3, REI 4, REI 16). The application covers three domains of practice: international curriculum development and ongoing quality management (REI 2, REI 3, REI 5, REI 19); realignment of assessment frameworks (REI 2, REI 6), and integration of educational practice and curriculum innovation (REI 7, REI 8, REI 9, REI 10, REI 17, REI 18, REI 20). Finally, the impact my own CPD has had on my ability to engage in knowledge transfer and develop my peers across a wide spectrum of educational contexts is also examined (REI 11, REI 12, REI 13, REI 14, REI 15, REI 20).

Since moving into education in 1987, I have championed all elements of the UKPSF predominantly through my gift for leading curriculum planning, design and implementation projects while supporting and mentoring others (D4.3). Moreover, I have always striven to ensure that students have the best learning experience possible first by ensuring that they have access to programmes of study that are equitable and fairly assessed (D4.2) and by endeavouring to develop programmes of study and teaching activities that are innovative, cutting edge and based on research (D4.4).

From the outset of my career as a Tutor in Nursing Education (1987), I have always been dedicated to developing educational opportunities that challenge students to see the world from a different perspective from their own (REI 17). Initially this approach to education encompassed developing experiential learning opportunities for students that were meaningful and directly related to their clinical practice (D4.4). Not satisfied with simply producing experiential learning encounters when I moved to the University of Manchester on taking up the post of BNurs Programme Director (1999- 2002) in addition to Chair/Vice Chair of an NHS (2004-2012) and University REC Chair (2010-2016), I have been fervent in pushing back the boundaries of education even further by leading the development of interprofessional learning (IPL) opportunities with a group of likeminded medical practitioners, pharmacists and latterly ethics committee members locally and nationally (1999-2016) (REI 7, REI 8, REI 11, REI 12, REI 15, REI 18, D4.4). These learning events had a profound impact on students such that they were hungry for more opportunities to learn in this way. Hence, as a consequence of their success, I was appointed Faculty Academic Lead (2005-2007) for IPL whereby I generated an initiative designed to educate staff regarding the benefits of IPL and strategically plan how this form of learning might be embedded into health care curricula.

In addition, over a 17 year period I have played a significant role in Developing, Managing and Maintaining the Quality and Standards of Education across a range of roles as: BNurs (Hons) Programme Director (1999-2002), MSc Advanced Nursing Studies Programme Director (2002-2004), PGT Quality Assurance and Enhancement Officer (2004-2009), School Academic Lead for Quality Assurance and Enhancement 2009-2014), Singapore Liaison Officer (2010-2016), Director of Transnational Education (2014-2016). These roles have required me to develop new educational curricula, lead the strategic development, accreditation, and validation of a new programme of study in Singapore, whilst also developing policies and strategies to enhance the educational experience for both UG and PG students underpinned by a series of in-house staff CPD workshops or online support tools related to key areas of educational policy and practice, which I helped to develop, lead and deliver to academics and external examiners alike (REI 1, REI 2, REI3, REI 4, REI 5, REI 6, REI 16, REI 18 D4.3). Hence, throughout my career, I have striven to reflect the values of the UKPSF, leading by example, developing my leadership activities to become increasingly strategic and externally focused (D4.5) as outlined in the subsequent case studies.

### D4.2 Strategic leadership to enhance student learning

Focusing on how your leadership has enhanced teaching quality in institutional and/or (inter)national settings.

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### Example 1: Active Leadership

I have applied my experience of government and higher education to strategically position pedagogy at the core of substantive international projects. I have enacted a strategy for student learning at a range of levels in institutions at home and internationally using case studies taken from actual incidents. As part of the learning experience, explosions shake the ground beneath students and fire-tunnels heat their faces with bursts of flame emitted from a duct. Through experiencing effect, and reflecting on cause, these insights reduce risk, increase assurance and inculcate future managers and leaders in best practice. The UK has achieved the lowest rate of workplace accidents in the world using such methods, and experiential and problem-based learning strategies will reduce accidents internationally to transform the world of work [7].

I am proud of the feedback received from governments, peers and students across the years. I have been judged *‘… truly impressive in showing insight, analysis and strategic understanding of complex issues; he has the rare attribute of combining undoubted academic excellence with an ability to manage and persuade people…’*

Dean FSE, University of Manchester

Under my leadership, teaching and learning has been immersive, inclusive in ownership of outcomes, with rigorous core values and judged excellent in feedback. I reflect on my performance, see capability established and functioning, and am excited at future possibilities; I shall discuss the strategies that underpin these efforts in the next section.

### Example 2: Postgraduate Certificate in Teaching and Learning

To raise the standards of teaching and learning and to improve the employability prospects of PhD students and early career researchers I wrote a business case outlining the importance of developing postgraduate certificates in teaching and learning. Approval through the Staff Learning and Development Board (REI 13) enabled the establishment of a university wide PGCert in Higher Education, a Faculty 4 year PhD programme with integrated PGCert in Teaching and Learning and a HEA accredited Graduate Teaching Assistant framework. I have worked in partnership with colleagues from the Manchester Institute of Education to ensure we moved from the concept to successful graduation of the first cohort through the postgraduate certificate. Since its inception in 2014 56 colleagues have graduated from the programme and enhanced their practice.

*“The PGCert in HE gave me the space and time to challenge my thinking. Contact with a diverse group of committed educators, helped widen my perspective and change my practice.”* Feedback received from a Clinical Senior Lecturer.

To support postgraduates and early career researchers develop and enhance their teaching skills I have linked the training programmes to a teaching opportunities website where the skills learnt can be put directly into practice. 886 unique users visited the website within the first month. The students also appreciate and value having practical teaching sessions to support their learning. Feedback includes *“every session I have attended has motivated me to change and improve my teaching capabilities. Prof. XX is a constant support for all the students and is committed to producing the highest quality of teaching.”*

### Example 3: Assessing PPD in Manchester

1. Overcoming the Problems and Challenges

Having introduced PPD into the undergraduate programme my next goal was PPD assessment; students would be much more likely to engage seriously, if PPD was assessed summatively (K3). I discussed the issue with the Programme Director and the Director of Studies for Years 1 and 2 and they ensured that I was invited onto Medical School Assessments Committee (REI 8), which was an excellent preparation for Programme Committee discussions.

After 2005, publications on portfolio assessment became evident; for example, Driessen and colleagues, awarded marks or grades to portfolio entries (*Medical Education* 39: 214-220, 2005) although Rees et al (*Medical Education* 38: 238 – 144 2004) reported significant interrater variability. Johnstone (*Studies in Higher Education,* 29: 395-412, 2004) and Gordon (Medical *Education* 37:335- 340, 2003), used a semi structured interview with the student by a carefully trained Reviewer (A5). I concluded that this was more appropriate for assessing students’ development as reflective learners and whether they evaluate their learning over time (V3). I obviated interrater variability of marks and grades, by developing summative assessments with satisfactory or unsatisfactory outcomes. Over time, I have developed and refined the process, but here, I focus on the current assessment strategy. Common standards of PPD assessment across our large, dispersed Medical School and uniform delivery of PPDportfolio assessment are enormous challenges. Furthermore, the procedures required approval by Assessment Committee, and Programme Committee and at Faculty level. My response is an educational strategy in which appropriate academic staff members conduct the Reviews, the criteria are clear and robust with an assessment process transparent to students and assessors (A3).

I had already created two roles for providing personalised guidance and feedback for individual students to help them enhance their PPD and maintain their PPDportfolios, namely Tutors for Personal and Professional Development (TPPDs) in Years 1 and 2 and Clinical Academic Advisors (CAAs), based in the clinical teaching environments, in Years 3 – 5 (A4). In their initial training, a strategy I use to ensure that students’ professional development is delivered across the Medical School to a common standard and no-one is disadvantaged, is to include sample PPDportfolio entries, which Advisors (or Tutors) discuss (A1, A2, V1). As TPPDs and CAAs understand their students’ development over time it was therefore appropriate that they also conduct PPDportfolio Review interviews (D 4.3, A3).

The next aspect of my strategy was the criteria for satisfactory PPDportfolio entries. Key to my approach was to base the Review on the “Doctor as Professional” ILOs (K1, K2, D4.2 a iii), which relate directly to the PPDportfolio structure so it was clear whether PPDportfolio entries demonstrated that they had been met. To ensure these criteria were applied to a common standard, I used bench-marking activities in which Reviewers applied the criteria to sample PPDportfolio entries at differing levels, i.e. an extension of their initial training. It is essential that they are group activities through which Reviewers reach a consensus view by discussion. I knew that this promotes ownership and thereby engagement of the TPPDs and CAAs in the Review process (D4.3, K2, A3).

For our Medical School, I needed to prepare large numbers of CAAs and TPPDs (240 and 72, respectively) in a timely manner to conduct Reviews. It was tempting for this to be delivered at local level. At Assessments Committee, I learnt there were issues in monitoring the quality of such training. The Head of School’s view was that maintaining these standards was a central responsibility of the appropriate academic Leads. He therefore supported my establishment of a core PPD/PPDportfolio Team under my leadership within the Medical School, of two Deputy Academic Leads, one for years 1 – 2 and the other Years 3 – 5 together with an administrator, responsible for training PPDportfolio Reviewers (REI 7, K2, K6, A3).

Finally, to ensure my assessment process was transparent to both students and their Reviewers, I publish the ILOs, together with the evidence and criteria for satisfactory PPDportfolio entries at the beginning of each academic year, so that they are readily accessible, to students, TPPDs and CAAs (K2). Further, we record a series of short screencasts, one for each year of the programme, (K4) which talk students through preparation for their PPDportfolio, readily accessible online to students and their Reviewers (K6, A3).

ii) Outcomes

The clarity of this strategy, which emphasised common standards throughout the Medical School, was key to its approval by Assessments Committee, Programme Committee and at Faculty Level. Summative PPDportfolio Reviews are now mandatory Medical School Assessments and stand alongside assessments of knowledge, clinical reasoning and clinical skills. Satisfactory PPDPortfolio Reviews are essential for progression for each year from Year 2 to Year 5 and are mandatory for graduation (A3).

Our procedures are regarded as excellent practice by External Examiners: (K6)

*“it is a mammoth task to oversee a portfolio assessment strategy for such a large student body, yet the portfolio has been very well implemented and the students appear to value it. The portfolio plays a critical role in determining student progression at critical points in the curriculum – this clearly places a high value on reflective practice in the students’ minds … .I do think that Isobel has endeavoured to ensure that the portfolio assessment and standard setting is as robust as possible."*(K2, A3)

**Year 5 5 External Examiner 2014/2015**

*The student portfolios were excellent. The reflection and professionalism displayed by second year students were impressive and the feedback given to the students was exemplary. I was given a sample of portfolios that included assignments that had been passed or failed in the summative assessment.*

**Year 2 External Examiner 2014/2015 July 2016 (A3)**

Overall, this aspect of my application (D 4.2) demonstrates the importance of developing further the earliest lessons learnt; a scholarly approach to identify areas where innovation was required, in assessing PPD for example, and setting apparently limited goals, which, if reached, provided evidence of success and thereby approval for further developments. Of utmost importance was to learn not to rely on myself, but gain support from others who championed my plans.

### D4.3 Policies and Strategies

Establishment of effective organisational polices and/or strategies for supporting and promoting others

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### Example 1: Academic Excellence career workshops (2009)

In 2005 University data indicated that women were under represented in senior roles and that in particular teaching and learning focused staff were failing to progress. With career and promotions advice given by the Associate Dean, a more effective approach at encouraging underrepresented groups to progress was required. Due to my teaching expertise and working knowledge of the promotions criteria I developed and led an approach to deliver a series of strategic academic career planning workshops. These provided advice and support to individuals applying for promotion. CV clinics, individual coaching and video clips from senior colleagues highlighting and interpreting the essential promotions criteria further supported the process. Furthermore sessions specifically supported Athena SWAN applications and link to the University’s Equality and Diversity agenda by increasing applications from minority groups. In the last two rounds of promotions 27 of the successful academic applications had attended strategic career planning workshops and career coaching sessions. My expertise in leading this initiative has been further recognised through invitations to deliver sessions on developing academic excellence at 8 national conferences since 2010.

In recognition of my championing in this area I was invited onto the Faculty promotions committee (2012). As a teaching focused member of staff I led reviewing the teaching aspects of applications and discussions regarding teaching focused members of staff. This experience ensured I had the expertise and experience to identify where the promotion process could be further supported and integrated across the Faculty. My leadership in this area now means each school and division across the Faculty now has trained academic promotions champions, who support and encourage staff to go for promotion. Furthermore, in my role as Deputy Associate Dean for XX I have created and led sessions and masterclasses on evidencing teaching excellence for delivery as part of the pedagogic and staff development programme (figure 2). This approach has ensured an integrated continuum of developmental support for early career researchers through to senior academic colleagues.

### Example 2: Leading on policies to support others

I have served on specific committees around the courses I have designed and lectured in each of my three universities and within the PSRE in which I worked, representing teaching to the board. Within Cambridge I proposed, designed and delivered a novel lecture module for the Part III physics syllabus [2]. This topic had not previously existed within an undergraduate programme at a university in the UK [REI22; K2, 3, 4; A1, 2, 5; V3, 4]. Contact with stakeholders has always been a core tenet of my course design, one that has shaped the career paths of new staff. This has allowed grounding of learning within the core needs of a field and transformed learners into employees able to hit the ground running within their new posts. This process was greatly aided by using international partners from a range of science, technology and maths backgrounds to contribute to the development of components of the course and to act to peer review content and delivery [REI25; K5, 6; A4, 5; V3, 4]. By these means I have put into place a ladder of achievement for fellows on courses, ensuring excellence in their teaching and validating content and delivery [3]. So equipped, they have moved in their careers to other universities around the world.

As demonstrated in the previous section, my work in teaching and learning over the past years has impacted pedagogy but also national and international programmes designed to achieve governmental strategic objectives [3]. I have created policies involving a series of strategies that deliver not only new and vibrant research, but also a cadre of world-class teachers to spread competence and assure excellence in critical arenas [K1, 2, 22; A4; V3, 4]. This requires a strategy to proselytize an area in order to attract new blood; ‘We must provide a programme of high level training (including experiential through blended learning) for industry and regulators in both the UK and overseas.’ [4] For my latest project, the experience gained in this context has allowed me to disseminate good practice within my own faculty and in PSREs more widely and to other partners internationally to create a generation of educators at all levels to teach regulatory science.

### Example 3: Influencing education policy makers

I created support for staff to engage in scholarship. During my 6 years at Manchester Medical School, I witnessed local and national attempts to support staff in scholarly activities, with short-lived successes. In my early career, I was fortunate to be employed in a highly successful multidisciplinary research department and I reflected that the heart of each research team were regular meetings, discussing work at a granular level. The groups in education were higher level, typically presentations with less discussion about the ‘nuts and bolts’ of research. I had witnessed poor academic practice, for example abstracts submitted without co-author consent and approval. When convening the mobile technology research group (see section D.4.IV), I created a focus on discussing the progression of our work, the papers we had read and the thoughts we had, i.e., the minutiae of designing and developing good education research and scholarship, thus creating a sound learning environment for the development of teaching scholarship and research (A4). This approach was successful with many outputs from this group (see section D.4.IV), including six authors from Manchester Medical School and three student authors for whom it was their first education research paper. I realised that this approach might be successful with a wider focus and, with my colleagues, established the Teaching Scholarship and Research (TSAR) Group. This group meets once a month, continuing to model good research practice. Approximately 30 members of staff and students have attended at some time, with a regular attendance of 4-10 members, all of whom are now active in research and scholarship. The group has had an impact on the promotional prospects of members by supporting robust scholarship: publishing, presenting at conferences, submitting ethics applications, evaluating own practice and developing programmes of research alongside curriculum developments.

### D4.4 Integrated Academic Practice

How have you championed an integrated approach to academic practice? This can be within the institution or in a wider setting. Choose relevant examples from your REI and draw on the dimensions of the framework to think about and explain how you promote integrated approach to academic practice. Where you have worked with others, make clear your specific contribution.

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### Example 1: New Academics Programme (NAP)

In 2008 I led on the development of a new academics programme (NAP) for my Faculty, providing staff with training in order to help them excel. Initially there was resistance and lack of engagement from colleagues who didn’t want to take part in continued professional development especially for teaching and learning. To overcome this I developed a high quality interactive and informed programme which colleagues can identify with and value (Anderson *et al* 2011, Owens 2012). A former Associate Dean for Research and Head of School said *“I am enormously impressed by the effective way in which Judith runs this programme and offers very relevant advice to contributors, including me, which always significantly improves the sessions”.*

The NAP supports all aspects of academic life and provides an integrated approach to academic practice supporting and aligning with the University goals in the areas of:

1. Research Excellence
2. Inspirational Teaching and Learning
3. Personal and Professional Development

To capture the impact that NAP was having I developed an exit survey (2012). This was based on Kirkpatrick’s evaluation model and indicated that 96% of participants changed their teaching as a direct result of the programme and 212 academics have been awarded HEA fellowships. Feedback from participants describes NAP as ‘inspirational’ and ‘transformational’ (scoring 4.9 out of 5). When asked if they had achieved something having taken direct action as a result of attending the programme the responses included successful grant applications, taking on teaching leadership roles, developing new course units, being awarded prizes for their teaching and publishing research on their teaching.

Further success of the NAP can be evidenced by the impact alumni are having in gaining teaching grants, awards and promotions. Five of the six Education Academy Grants awarded in 2014 were to teams with alumni from NAP and in the last 5 years 46 alumni have been promoted. In recognition of my work in promoting teaching and learning excellence I was awarded The University of Manchester Teaching Excellence Award 2015. Feedback from NAP participants includes:

*“Her commitment to excellence in teaching practice is shown through the evidence base upon which she draws and the innovative practice she highlights within her sessions.”*

To illustrate the impact of my role in leading in this area I have been invited to deliver nine talks at national and international conferences on elements of the NAP. This includes what was described as an “*Excellent inspirational interactive*” plenary talk, on Clinical Leadership, at the National Consultant Oncology Conference (March 2017). The MRC Fellowship review panel (2015) cited the NAP as “*a national beacon of good practice*.” In addition I am regularly invited to inform practice and deliver aspects of the NAP at other universities: *“feedback is outstanding, well done on what has been a hugely successful session*” Lancaster University.

I am passionate about enabling academics in the developing world to fulfil their potential and provide support programmes integrating academic and clinical practice. I was approached as an expert in academic development to develop a leadership programme for the African Midwives’ Research Network, to make a step change in research outputs. Having worked with the project lead on a Master’s programme and having taught a number of junior members of her team on the NAP she approached me as an identified expert in academic development and someone who could affect behaviour change. I adapted the NAP to deliver a bespoke research leadership programme for national leaders from Kenya, Uganda, Malawi, Tanzania, Zambia and Zimbabwe. As a group of highly-motivated midwives who aim to enhance teaching and research informed practice, thus improving care for women and babies across Eastern Africa. Importantly it was essential the programme focused on individual needs and gave tailored support for individual circumstances. The leadership programme was underpinned by executive coaching to enable and develop excellence. This experience will have an unforgettable and lasting impact: evaluations reported that the teaching programme strengthened leadership and project management skills for national leaders, leadership styles were adapted and altered. This was evidenced by the Government Minister and Head of Women’s Health who commented *“I have learned that I am much better than I knew myself. That with planning I am able to achieve what might have looked impossible.”*

By looking at the whole picture I am striving to develop a culture where all aspects of academic practice are valued and rewarded, supporting and developing an integrated approach to academic practice is fully embedded within all of the programmes that I develop, lead and oversee.

### Example 2: Establishing an International Institute to deliver research, training and learning

I have had a rich teaching career that has allowed me to draw on prior experiences that has led to a more integrated approach. For instance, policy changes in safety have led me to champion regulation in taught courses across my university.

A significant uplift by HSE in applied research and a wish for them to increase public engagement, has allowed me to establish an International Institute to deliver research, training and learning on the national and global stages, taking the lessons learned from failures to deliver world-class research to lead to productivity and growth [1]. To deliver these plans I have devised a holistic and adaptable training methodology. The institute has a series of significant teaching and learning goals to deliver in its first years. These include a thriving research activity, support for an academic learning package and provision of a programme of high level training emphasising experiential learning to industry and regulators (both UK and overseas). In particular, the institute will follow an ‘Academy Model’ to enable HSE courses to be accredited to a University standards as well alongside a programme of higher-level Masters degrees which support gaps in the UK’s national competency infrastructure [REI32;K1,3,5;A2,3,4;V2,3,4]. We are involved in ongoing discussions with the research councils to reflect the Nurse review, and to establish through Research UK, an interdisciplinary CDT with a taught masters year to compliment research [REI33;K1,2,3,4;A1,2,3,4;V1,2,4]. Furthermore, HSE wishes to provide CPD and other education and development internationally, to spread UK culture to specific target countries in the next few years through its alliance with the university. We are already beginning the process of delivering executive education together and Masterclasses have been delivered in Singapore. I have spent the last year managing a new student experience, standardized in its delivery across the university and within CPD environments targeted by the regulator. Such a framework will deliver both thinking strategies and domain knowledge to graduands, reflecting research programmes to establish standards for professional qualifications throughout the world. This provides a complex working environment, with a multiplicity of roles for staff, including teaching, management, leadership, mentoring, research, administration and collaboration with local universities abroad. I have integrated this component of the institute with other activities to deliver a new national resource.

The form of the education must equally span a range of different methods and learning opportunities. We incorporate e-learning modules that have been successfully piloted in the CPD courses that the university has previously delivered internationally. Within the UK, industrially relevant problems and historical, operational incidents will be studied alongside industry visits to review circumstance and trace methodologies in the workplace. These case studies, with simulations of previous accidents, can reduce instructor-led classroom training with a tranche of related seminars, workshops and guest lectures.

In all of these initiatives, identifying appropriate resources to support learning, including a mix of people (staff, industry lecturers, technicians) is key to activities based on knowledge, personality and teaching style. Study at undergraduate level is of course weighted around formal lectures but even here variety, though such aids as self-study questions, practical workshops (where appropriate), self-study online videos, tutorials and group project work, can add to output and maintain high standards. Each approach has advantages and disadvantages; I have designed policy over the whole project, mentored staff in delivery of their specialist modules and taught in my specialist areas to place the student at the centre of course frameworks to encourage deeper learning across a range of different levels. I have leant heavily on experienced inspectors and colleagues to measure my own methodology against the experience of colleagues through all of this planning and devised a yearly review to share success and pass on best teaching practice to colleagues.

In a centre with international reach, distance and blended learning have been embraced and adapted to enhance learning experience with a whole-value approach for the cadre of professionals engaged. We aim to reduce traditional, teacher-led instruction with supporting printed material in favour of student-centred, blended learning with computer-mediated instruction and web-based assessment. We have had success from our first CPD courses delivered using distance learning, and look forward to innovation in experimenting with new technologies in the future. Collaboration abroad requires new partners in teaching as well adaption to research and learning from the most successful techniques [REI22,24;K3,4;A4;V2,3,4]. Planning includes intergovernmental and strategic political leadership alongside practical administrative support from regulatory inspectors. This requires a complex, connected library of resources, created to deliver guidance online to an intelligent workforce in industry, and a qualified inspectorate amongst regulators. This goal embraces the concepts of the new data revolution along with blended learning approaches in the digital classroom [2]. I have worked with HSE to construct a unique database of libraries to give students 30 years of experience to inform their learning [3].

The organizations accessed in workshops between UoM and HSE wanted a range of themed courses at undergraduate level, to bespoke CPD for CEOs and executives of companies worldwide, targeting existing national stakeholder and existing government and industry links. From a national viewpoint, we will equip UK companies to move into new countries with different H&S approaches. Whilst most present teaching methods tend to use a formal didactic learning methodology, we shall move to experiential learning to create new appreciations within students. This strategy will unlock teaching resources from within the archives to benefit the inspectors and industrial leaders of tomorrow. Using the wealth of data held by government and generated by industry, it will be possible to mine these resources remotely and in real time. Thus, building on advances in blended learning within the university, most particularly with the experiences and resources of my colleagues in the risk-management sector, cyber resources now exist that will allow active interrogation and real-time data management. With video review and frequent reflective observation lead by leaders and educators from our organisations, it will be possible to illustrate the methodology and conclusions from analysis to draw out abstract concepts that inform a new safety culture in a truly digital classroom. Since the university and HSE already has traction in several key countries across the far east in particular, multinational companies in Singapore have experienced blended learning with an ever-more significant online component. My mentoring of teachers in other universities and other countries has already delivered courses assessed as excellent for the institute.

Whilst some of the traditional immersive approaches will not be possible, I hope to replace more restrictive methods of didactic learning with new information streams. Providing and managing the supply of online resources with web and computer-based tools will allow reading, experimentation and reflection, through the new display technologies in the virtual classroom. Of course these new media must be managed and technical resources carefully planned and integrated in order to deliver. However, computer and web-based learning resources will allow real time simulations, access to a library of recordings and broadcast media archives, and active connection between educators and peer support communities. As a first step we have made available a report database with archives of approved and declassified accident reports for discussion and review during learner study or analysis in the virtual classroom [4]. I hope that such experiential learning using a web-based environment will deliver and mentor better managers and a more responsive inspectorate for health and safety in the 21st century.

Our active learning portal will be a means of retaining the newest procedures and innovating the best teaching methodologies. Such a function will be driven by the interdisciplinary nature of the courses that make up the rich subject areas covered by the institute coupled by diversification strategies designed to augment the core areas of the curricula. This may be in specialized technical training in areas such as impact, explosives and fire. We will monitor and assure progress using systematic review schedules on an annual, but in later years on a triennial basis. Coupled with this, there will be a periodic enrichment of online resources including new cases for examination and analysis, new improved access methodologies and enhanced communication routes via different media resources. Our proof of success will lie in the enrichment of projects with increased student recruitment across the workforce from the shop floor to the board-room recruiting the brightest international talent. ‘We will use our combined knowledge and experience…levering existing capabilities in our institutions to offer a unique opportunity to establish masters and CPD packages for this unique market.’ [5]

I hope that the above accounts reflect my personal commitment to the development of a primarily deductive learning approach to an inductive one, using the rich databases of experience to deliver core competence and personal effectiveness. This strategy holds the promise of enhancing risk awareness through increased social intelligence, a toolset of data-mining techniques to inform decision, and the ability to impart a strong set of core values to support the culture that UK government wishes to establish. Further we have the opportunity to build a UK methodology within other national cultures and in the multinational workplaces of the future. This has only been possible through the rich experience I have gained in launching other initiatives across my roles and in consultation with the leaders in these areas who have helped me develop my work.

With industrial and government partners it is of course important to develop a programme of blended learning, to promote a professional working environment whereby a student can control and influence their development. The whole requires a means of integrating teaching with effective management, leadership, mentoring, research and administration within both higher education and the government community, in order to equip the professionals of tomorrow with the best tools and information. I have planted resources and advanced pedagogy within my own subject area in and now in a new area of health and safety nationally and internationally as evidenced by my awards and international network. The challenge remains to find and inspire proactive and independent learners and equally to project these skills with a caring ethos and I mentor colleagues to grow this resource for the future. I hope our learners will retain knowledge and values, effectively projecting their training goals and becoming truly global citizens.

### D4.5 Continuing Professional Development

Evidence your sustained and successful commitment to and engagement in continued professional development related to academic, institutional and/or other professional practices.

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### Example 1: Continuing Professional Development

I am constantly striving to further develop my teaching and Leadership by undertaking continuing professional development activities that I can incorporate into my practice, as well as bringing into my teaching to support the development of others (Carr and Kemmis 1986, Schön 1987).

I undertake CPD activities that I can incorporate into my teaching to support the development of others and myself. When I started teaching in 1999 as a postdoctoral scientist I received fantastic support, training and mentorship from senior colleagues and through the Vitae network. Through these relationships I have been able to reflect on and discuss my continuing professional development and teaching. In 2008 I was awarded a distinction from the Chartered Institute of Personnel Development for a certificate in training practice. This programme helped me understand and use pedagogy to enhance my teaching. I took more from the programme than I expected: I had just returned from maternity leave and as an experienced teacher felt I needed to manage my work-life balance. I found the programme fantastic, it gave me the time and space to explore my teaching practice further and as a bonus gave me a network of colleagues with whom I could share best practice and innovations. My self-reflection and self-awareness also increased, helping me to balance my new role of mother against the demands of work. I also gained confidence to innovate my teaching further. This programme successfully helped me to understand and use pedagogy to enhance my teaching, it also gave me a strong foundation from which to develop and enhance my teaching practice. I have successfully cascaded and embedded this learning to help inspire the next generation of academics through my directorship of the XX, leading developmental programmes for postgraduate students, postdoctoral staff and new academics helping to create a step change in teaching excellence.

I have found being a mother has made a huge impact on my teaching and learning. I have two dyslexic children who learn in very different ways from each other and from me, their dyslexic mother (Williams 2013). Supporting them so closely with their learning journeys has enabled me to think differently about how I teach; it has encouraged me to try new approaches and to be creative. I have realised that my dyslexia is no longer a barrier that can prevent me from progressing, but it enables me to be creative finding novel solutions with my leadership and teaching and learning (Everatt *et al* 1999).

In 2011 I completed the University’s New Academics Programme and was awarded a Fellowship of the Higher Education Academy. Having developed and delivered this programme for a number of years I wanted to improve my colleagues’ scholarship, pedagogy and reflection. Writing my new academics portfolio helped me understand the challenges of producing a reflective piece of work and enabled me to alter my teaching to provide more varied examples of best practice to illustrate the level and depth of reflection and how this is grounded in theory (Driscoll 2007, Gibbs 1988 and Schön 1987).

In 2013 I piloted a Higher Education Academy Senior fellowship programme, supporting colleagues through a tailored programme of support with peer support groups and a mentor. Through this process I reflected on the impact my practice was having on others. I was able to gain a holistic view of my teaching and learning practice and reflected on my strengths and weakness. By gaining my senior fellowship I was able to use my learning to develop capacity for LEAP and roll this programme out across the University.

In 2013 I attended a University Senior Leadership Programme this enabled me to meet fellow academics in leadership roles and start to develop networks and support structures. This has been invaluable as being a leader can be isolating. Through the programme I learnt the importance of being an authentic leader and developing environments which successfully support communities of practice (Wenger?). I have been able to bring this into the leadership programmes that I run within the University, nationally and internationally as evidenced throughout my application.

The University’s strategic vision commits to the development of a coaching style of leadership (Whitmore 2010). To support this in 2012 I registered for a coaching and mentoring programme accredited by the Institute of Leadership and Management. It delivered far more than I had expected, helping me to reassess my potential and refocusing my learning. The skills I learnt have helped me in teaching and team leadership. I saw how beneficial this approach was to developing life-long learners and have since become an executive coach and a member of the UK Association of Coaching. I use coaching in all my programmes, either by offering 1-2-1 support or upskilling the participants, enabling them to begin developing coaching style conversations. This has been successful for GPs looking for ways to teach medical students, clinical research fellows looking at developing leadership skills, and PhD students facing problems with their supervisory teams. Developing this skill set further I have completed the EQ-i 2.0 / EQ 360 Certification Programme in Emotional intelligence (Goleman 1995), which I have been able to bring into many of my leadership sessions. I brought coaching into the 18-month Faculty Senior Leadership Programme (2013) that I developed. The first cohort completed the programme and five have gone on to taken senior leadership roles. I have also introduced executive coaching to support the African Midwives Network (2013). This work supported the development of a thriving, collaborative and sustainable research network of midwives with the capacity and skills to strengthen evidence based practice in East Africa.

When I started supervising PhD students the only experience I had was from my relationship with my supervisor. Therefore I explored management and leadership styles and models of supervisory practice and sourced an intensive, external training course to develop my skill set. I attended a two day PhD Supervision workshop at the Missenden Centre for the Development of Higher Education. It provided many examples, case studies and opportunities to discuss issues that supervisors faced. I attended the UKCGE workshops on supervision and doctoral examination, gaining further experience and examples. Using the knowledge from these training events and my knowledge from the workplace I developed support programmes for established and new supervisors. Through the Faculty Research Degree Panel I noticed that new supervisors or new PhD examiners experienced many problems, despite being part of an experienced team and mentored by experienced colleagues. I therefore developed and deliver workshops taking new supervisors from recruiting a student through to examination of the PhD. To date, 346 new academics have attended these sessions giving a mean feedback score of 4.9/5. Comments highlight the useful, thought-provoking and practical nature of the sessions. Fewer new supervisors come to the Faculty Research Degree Panel with problems. With the new supervisors programme I have ensured that new colleagues receive the right information, understand the University’s process and set up projects successfully.

I strive to incorporate my professional development activities into my teaching and training programmes. I believe in enabling people to excel and that everyone should have the support that they need to reach their potential. Through my professional development programmes and 1-2-1 support sessions I am able to evidence the impact that experiential learning and coaching has on individual development. The feedback I receive helps me to understand my impact as a teacher and develop further, trying new and innovative methods of teaching. “XX is the best educator I have encountered in this university, generating an excellent and innovative portfolio of sessions” Professor of Gastroenterology and Nutrition and Academic training lead for Clinical Fellows, “An outstanding example of teaching excellence” Hugh Kearns internationally acclaimed educator and researcher.

I was delighted to be picked to attend a University Leaders in Teaching programme led by Professor Marshall (CEO HEA). Through the programme we explored how to effectively lead transformational teaching and learning (Marshall 2016). I found that the programme cemented my expertise and experience giving me the confidence in leading and managing change. Outstanding teaching makes a tremendous difference to learning and the student experience. I am leading and supporting my colleagues to enhance the quality of their teaching through my strategic leadership roles I hold. I am delighted to be able to shape the support and development of teaching and learning for academics within the university, clinicians and health care practitioners in the NHS, and early career researchers.

As a result of my coaching training I reflect at the end of every committee meeting I chair, I am fully committed to continuous self-improvement striving to develop and enhance my own teaching leadership, and feel it is essential that I listen to the voices and opinions of others. I am fortunate that within my role I come into contact with the majority of staff and postgraduate students across the Faculty. Their views and opinions help to shape my thinking as a leader in teaching and learning. Together with my CPD this helps inform my development. I was delighted with my Teacher of the Year and University Teaching Excellence Award, where the Vice-President for teaching and learning recognised *“XX is the best educator I have encountered in this university, generating an excellent and innovative portfolio of sessions.”*

### Example 2

My teaching career taught me that all my activities are learning experiences and that I cannot expect students to evaluate their own progress critically and formulate clear plans to address specific areas for improvement if I am not doing so myself. The sudden onset of ill health 14 years ago faced me with stark choices. To continue contributing to academic life, I discovered and used other aspects of myself, previously untapped. Becoming actively involved in Teaching and Learning was a new beginning, which gave my analytical skills, learned as a research scientist, a different direction. In 2004, when I introduced PPDportfolio, I swapped my lab book for my own learning journal, which I maintain for evaluating my own practice. I recognise areas that have gone well, establish the basis for this, so that I can build further. Equally important is identifying those aspects which require improvement, understanding the reasons for them and formulating clear action plans. I can resonate with our own students, when they record their own reflections and see the process from their perspective. I use the same approach in responding to feedback from students and colleagues. Our online assessment tool **(K5)** through which students anonymously evaluate their own Tutors, including me, by scoring them for specific aspects of their role and providing free text comments **(D 4.3aii)** I find illuminating and insightful. One example concerned format and availability of PPD information, to which my response, as Lead of the PPD Team **(REI 7)** , was to ensure that we prepared our material earlier, prioritised our activities differently but also informed the students of our actions clearly and professionally **(A5, K6)**.

I have always recognised the importance of both Equality and Diversity and Unconscious Bias as professional issues, emphasised further by my role in Athena SWAN. I participate in appropriate training workshops for each of them **(V1, V2)**. Early on, I recognised that I must improve my management skills and attended an excellent series of University-wide workshops, part of the Women in Leadership Programme, from which I learnt the importance of negotiation and appropriate assertiveness **(V4).**

Knowledge and awareness of current literature and scholarship is essential to my professional development, which is helped by writing research papers and grants in medical education. I review articles for the main medical education journals (Medical Education, Medical Teacher, Advances in Health Sciences Education Theory and Practice) and the British Medical Journal and select key papers for annual conferences of international medical education societies (e.g. Association for Medical Education in Europe) **(A5)**. Presenting our work at national and international conferences also provides excellent opportunities to keep abreast of developments in medical education e.g. using social media (Association for the Study of Medical Education, Brighton 2015), workshops on critical thinking and provision of feedback (International Conference on Medical Assessment, Perth Australia 2016) **(A5)**. As a result, I have amended our preparation of Tutors and Advisors by emphasising the importance of clear action plans when providing feedback to students and incorporated use of social media, as a professional issue, in Group PPD learning sessions **(V3)**.

I wrote and led the Medical School’s successful application for membership of Cohort IV of the International Coalition for eportfolio research (2007 – 2011, supported by Centre for Recording Achievement and Higher Education Academy) (**REI 18)**. It comprised other selected Universities from the UK, the Netherlands and USA and promoted development of eportfolios and reflective learning. The cohort exemplified group collaboration, exchange of ideas, educational research and scholarship to enhance portfolio activities **(V4)**. Their meetings utilised excellent methods for participation by colleagues in developing new ideas. One example was World Café, in which participants literally draw out their ideas and then integrate further suggestions from other colleagues, so that everyone achieves ownership of the final outcome. I used this approach to introduce new ideas about PPD in Belfast (**D4.3aii, A5, V3)** and in Auckland New Zealand (See Below). Activities were also used in which participants articulated their own misgivings about new developments and the next stage focused on addressing these concerns. I used this approach **(V3)** when developing new PPD Tutors in Manchester **(D4.3a)** and with Athena SWAN **(D4.3b)**.

My National Teaching Fellowship (NTF) **(REI 22)** award had a major impact on my professional development. Completing the full “Claim for Fellowship” was the most taxing and daunting of tasks, requiring careful analysis and reflective evaluation of my whole approach to teaching. I was fortunate to be mentored throughout this procedure by Professor Iain Mackie, then Head of the School of Dentistry. He was an excellent role model, with a wonderful way of asking key questions that drew out from me my educational story, yet he did so without telling me what to do. I believe that this experience was as effective as a training session on mentoring. I try to emulate this approach whenever I mentor or advise another colleague **(V3, V4)**. My appointment to the National NTF Panel **(REI 21)** , enables me to understand further the process for writing applications for major Teaching and Learning Fellowships, which also helps me guide other colleagues **(A5, V3, V4)** .

The funding associated with the Award enabled me to visit Medical Schools in New Zealand facing similar problems to our own, especially geographic dispersal of students in a variety of learning environments. I learnt so much from them; the way they incorporate diversity and different cultures into their teaching, the importance of physical learning environments and the use of different media to record reflection, for example pictorial art **(V1)**. I also shared with them my approaches to group learning and to designing an ePPDportfolio **(V3, V4, K4)**. One outcome is that I have been asked to write a Chapter on Professional Development in students and Academic Faculty for an internationally authored book on “Well Being in Higher Education” edited by Henning MA, Krägeloh CU, Dryer R Moir F, Billington R and Hill AG, to be published by Routledge **(A5).**

Promotion to Chair **(REI 23)** through the Teaching and Learning track is perceived as particularly challenging. I am sought out especially by female academics across Faculties to mentor and advise them in career progression by this route. I am also a trained mentor **(A5)** for the Aurora Leadership Programme **(REI 19)**, which, together with the approach I found so helpful in my NTF application, helps support my mentoring of six academics **(V3, V4)**. This aspect of my own professional development also influenced the Medical School to introduce an academic staff development policy and I was appointed as Lead for Academic Staff Development **(REI 20)**. In addition to advising candidates for promotion, I introduced and ran, together with a team of academic colleagues including a newly promoted female professor, our first Medical School “Away Day” **(V3, V4)** for academic staff professional development in March 2015. It covered the academic professional journey, HEA Fellowships, Research and Scholarship in Medical Education, experiences in further postgraduate qualifications and applying for promotion. It was highly rated (4.6 on a scale of 5, n=34).

*“This Away Day was run by a truly inspiration team led by XX; I learnt so much especially how far in advance you have to prepare for promotion and the organisation required. This will be very helpful for my next appraisal”* Clinical Lecturer, Community Based Medical education

My role as line manager required specific training. My aim is to ensure that my own PPD Team take over more responsibility for delivery and development of the PPD strand. I actively encourage them to use all appropriate opportunities for developing their own careers **(V4)**, for example through Transfer of Knowledge to other Institutions **(D4.4a)**, which leads them on to their own applications for Senior HEA Fellowships, through LEAP. Here they are provided with mentors, but I referee their applications and I am delighted that one of our Team already has an SFHEA award.

Looking back on my journey as an educator, I am aware of the profound influence that my earlier experiences have on my own career progression, encapsulated by my image of the Tree. At the Perth Conference our workshop sparked a discussion about the professional value of wisdom, which still lives with me, especially the wisdom of handing on to others my own experience.

### Referee statements

You will need to provide three referees statements to accompany your application.

* One needs to be a Fellow, Senior Fellow or Principal Fellow of the HEA
* One needs to be in a position to comment on how you have directly influenced their practice
* One needs to be external to the University of Manchester

### What the referee needs to supply

Your referee needs to comment on your application specifically the evidence of commitment to and effectiveness of sustained leadership and impact at strategic level rather than general academic achievement. The referee needs to comment on your most recent roles and responsibilities and use their knowledge and awareness of your work to provide examples in their recommendation.

The reference should provide practical examples of how your work has supported, influenced and impacted them directly and/or that of others. The reference should primarily refer to your experience and achievements in learning and teaching. Your referee should clearly recommend how you meet the dimensions of the UKPSF at Descriptor 4, using their knowledge of your work.

The reference should refer to your experience and achievements in that you have made in strategic teaching and learning responsibilities. Similarly, the reference may comment on any evidence of effective organisational policies and/or strategies for supporting and promoting others and/or contribution to developments in learning and teaching at an institutional level. The reference may also comment on your contribution to national initiatives in developing approaches to learning and teaching. The reference should refer to the national or international context in which you have worked. Comment on any evidence of strategic impact and influence in relation to learning and teaching that extends beyond the applicants own institution.

There is no fixed word limit for your comments but we would suggest around 400 - 500 words as a typical length.

### What needs to be in the reference

The reference should include

• name;

• job title (where applicable);

• institution (including department where applicable);

• email address (we may wish to contact you to clarify points in your recommendation);

• the perspective from which you are providing your recommendation.

### Sample references

### Example 1

Name: X

Job title: University X

Email address: vvvvv@university.ac.uk

As someone who has worked with Professor XX in a professional teaching context I am pleased to provide this reference in support of her application for Principal Fellow of the HEA. I am writing from the perspective as one member of the small team that manages all the teaching and learning activity of undergraduate and postgraduate-taught students in our Faculty. The team members act with a high degree of autonomy and XX leads the professional development strategy for all staff (both Faculty based and within the NHS/workplace) who are engaged in the education and training of over 8,300 undergraduate and 2,200 postgraduate (PGT and CPD) students undertaking programmes in the Faculty of Biology, Medicine and Health (FBMH). It is in these areas, as outlined in her statement, that X has made her most significant contributions at Faculty, University, National and International level.

1. **Active commitment to and championing of all Dimensions of the Framework, through work with students and staff, and in institutional developments**

As Professor of XX, Deputy Associate Dean for XX and Director of the XX at The University of Manchester, XX’s approach to working with both students and staff and in Institutional developments encompasses all Areas of Activity, Core Knowledge and Professional Values. In particular she ensures an emphasis on supporting and enhancing the teaching and learning development and delivery by colleagues. During her career at The University of Manchester she has been recognised for her contribution to individuals with two University awards and one National award.

1. **Successful, strategic leadership to enhance student learning, with a particular, but not necessarily exclusive, focus on enhancing teaching quality in institutional, and/or (inter)national settings**

As noted in her Record of Educational Impact, XX has held a number of senior positions in Learning and Teaching. These are substantial posts in a University and Faculty of the size of Manchester and her workload, level of responsibility and strategic leadership would be more than equivalent to that of an Associate Dean or Dean in other UK Universities. X’s strategic leadership in the area of student and staff development are amongst her most significant achievements. She has ensured that individuals at all stages of their academic journey and career gain valuable experience as a result of the introduction of embedded frameworks underpinned by sound educational principles. Importantly this approach has extended beyond her individual Faculty to across the University, through National schemes and into the International arena.

1. **Establishing effective organisational policies and/or strategies for supporting and promoting others (e.g. through mentoring, coaching) in delivering high quality teaching and support for learning**

X has been instrumental in establishing a programme of mentored teaching support and development at all levels. Importantly she has been active in championing how this can also contribute to peer review for academic staff. Her positive approach to this whole process has persuaded staff, including the Senior management team across the University, that peer review should be embedded to support staff developmentand is distinct from activities concerning performance management.

1. **Championing, within institutional and/or wider settings, an integrated approach to academic practice incorporating, for example, teaching, learning, research, scholarship, administration etc.)**

An ability to integrate processes at a number of levels is one of the reasons that X has proved to be so successful in her roles. By always recognising the ‘bigger picture’ she has identified and undertaken new roles which complement each other and enable her to more effectively deliver, establish and embed good practice. This is clearly seen, for example, with the activities and support in the programmes she provides. Perhaps one of the most impressive aspects of X’s achievements is the way she has raised the profile of teaching within a research-intensive Faculty where there is always pressure on academic staff to focus on their research.

1. **A sustained and successful commitment to, and engagement in, continuing professional development related to academic, institutional and/or other professional practices**

X recognises the value of her own professional development as a teacher and shares best practice within her institution and across professional communities and societies nationally and internationally. This personal development is then shared with colleagues and implemented into practice; something Judy is able to do through all her leadership roles.

### Example 2

**Advocacy statement to support application for Principal of the Higher Education Academy.**

**Professor X**

**Head of School of Medicine, X University**

I have been aware of and influenced by Prof X’s work during my roles in medical education as (i) Senior Lecturer at GKT Medical School London 1995-2003, (ii) Professor of Community Based Education Manchester Medical School (2003-9) and (iii) Head of X School of Medicine since 2009. We worked together during my time in Manchester on both undergraduate and postgraduate programmes. I can therefore comment on all three areas as I have close knowledge of his work both within the same and from the view of an external institution and I have been influenced by his publications.

X has pioneered and championed work nationally to address the inequalities of selection into medical education which unfortunately still remains very much orientated to social class 1 and 2 (D4;1) despite a continuing drive to widen participation. His early work demonstrating that students from lower social classes and from ethnic minority groups were disadvantaged has had wide national influence and is still referred to. This has arguably led to a strong awareness and, to some extent, successful improvement in widening ethnic representation; although Afro-Caribbean student entry remains disproportionate. He has undoubtedly influenced both selection policy within Manchester University (D4:2) national policy and strategy (D4.3) and continues to demonstrate a sustained and successful commitment to address inequality (D4.5). This was demonstrated by his recent commission to report for the General Medical Council on perceived ethnic inequities in postgraduate licensing examinations. I can confirm this from all three of your suggested perspectives: i.e. influence within the same and external medical schools and nationally.

I have also personally witnessed (both internally while at Manchester and subsequently externally) X’s work in the arena of undergraduate and postgraduate education. He has had significant influence, nationally and internationally, through his leadership on the development of the Manchester Masters Programmes in Primary Care and Public Health. He has approached this in a very integrated way supporting the planning and delivery of the Programme modules to ensure learning is evidence based and scholarly. The modules use a range of teaching methods for distant learning and he has established the strong administration required to attract and sustain a wide international student market (D4.4). X has always championed Primary Care (D4.1). The acknowledgement that Public Health Medicine is essential to Family Medicine development globally underpinned the extension of the Masters opportunities to embrace public health. I am aware of students who have undertaken these courses and can confirm that the leadership has been strategic in broadening prospects to address the inequalities of health care both locally and globally (D4.3, D4.5). I worked alongside him during my time in Manchester and he was a powerful role model for championing and broadening student understanding of primary care and health inequalities at both undergraduate and postgraduate level.

X has always championed the disadvantaged and, although I cannot contribute a direct perspective on influence, his appointment as X (2005-2014), was entirely consistent with the strength of his leadership and extensive experience. He remains a passionate academic champion leading at a level truly reflective of your criteria for appointment to the role of a Principal of the Higher Education Academy.

## Application Checklist: Principal Fellow

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| --- | --- |
| **Written Portfolio (8000 words, excluding references and mapping exercise** |  |
| Reflective Account of Practice (approx. 500 words) |  |
| Case Study 1 (approx. 1500-2000 words) |  |
| Case Study 2 (approx. 1500-2000 words) |  |
| Case Study 3 (approx. 1500-2000 words) |  |
| Case Study 4 (approx. 1500-2000 words) |  |
| Bibliography |  |
| Three references (one from outside UOM) all fully aligned to UKPSF |  |
| Completed Mapping Exercise and Record of Educational Impact |  |

|  |  |
| --- | --- |
| **Oral Presentation (30 min present, 30 min discussion)** |  |
| Introduction – about me (approx. 1-2 slide) |  |
| Case Study 1 (approx. 4 slides) |  |
| Case Study 2 (approx. 4 slides) |  |
| Case Study 3 (approx. 4 slides) |  |
| Case Study 4 (approx. 4 slides) |  |
| Summary/Questions (approx. 1-2 slides) |  |
| 1 A4 handout (optional) |  |
| Three references (one from outside UOM) all fully aligned to UKPSF |  |
| Completed Mapping Exercise and Record of Educational Impact |  |