Manchester Metropolitan University

Faculty of Health, Psychology and Social Care.

Masters in Medicine

Programme Handbook
2021-22 Academic Year intake

Contents

Introduction:

Purpose of the Programme

The innovative Masters in Medicine (MMed) from Manchester Metropolitan University has been designed in conjunction with strategic health service partners to support the postgraduate training of doctors pursuing a career in a variety of specialties.

Our course allows you to develop your skills in critical reflection and evaluation of your professional, education and clinical practice.

You'll study core units linked to the four pillars of practice: Leadership in Clinical Care Settings, Education and Training in Practice, Research Methods for Quality Improvement and Evidence-Based Practice to provide you with transferrable skills, for whichever career choice you make in the future.

Our optional units will allow you to expand your knowledge and understanding of your chosen specialty, and in your final year, your Project is focused on your own practice and will therefore support your development with specific relevance to your own workplace.

Purpose of this Handbook

This programme handbook will set out the way you will progress through the programme:

- Tell you the aims and objectives of the programme, its required learning outcomes and the standard of its final and interim awards;
- Give you some initial information on each individual unit, based on the approved unit specification including: in what year the unit occurs, when in the year it will occur and a synopsis of what will be covered;
- Give you some initial information about how your learning will be assessed;
- Tell you how the programme is organised and how you can contribute to our systems for quality management.

It is important that you use your programme handbook in conjunction with the Manchester Metropolitan University (MMU) [Assessment Regulations for Taught Postgraduate Programmes of Study](#) and the [Online University Student Hub.](#)

You should find that most of your questions regarding the programme are answered by referring to these documents alongside this programme handbook. In addition, the university publishes the following guide for students: [Policies, Regulations and Procedures for Students](#).

Students must successfully complete 180 academic credits at Level 7 to be eligible for the award of a Master's degree; 120 academic credits at Level 7 for a Postgraduate Diploma, and 60 Level 7 credits for a Postgraduate Certificate.

Programme Learning Outcomes

Manchester Metropolitan University: Graduate Outcomes:

On successful completion of their course of study Manchester Metropolitan University graduates will be able to:

GO1.	Apply skills of critical analysis to real world situations within a defined range of contexts;
GO2.	Demonstrate a high degree of professionalism characterised by initiative, creativity, motivation and self-management;
GO3.	Express ideas effectively and communicate information appropriately and accurately using a range of media including ICT**;**
GO4.	Develop working relationships using teamwork and leadership skills, recognising and respecting different perspectives;
GO5.	Manage their professional development reflecting on progress and taking appropriate action;
GO6.	Find, evaluate, synthesise and use information from a variety of sources;
GO7.	Articulate an awareness of the social and community contexts within their disciplinary field.

Programme-specific learning outcomes (PLO):

On successful completion of the MMed, students will be able to:

PLO1	Critically reflect and evaluate their current professional and clinical practice and the related underpinning theory, scholarship and research with reference to current issues and developments in the subject and the profession.
PLO2	Apply research to professional situations, both practical and theoretical with a comprehensive understanding of techniques applicable to their own research or advanced scholarship.
PLO3	Express ideas effectively and communicate information appropriately and accurately using a range of media including ICT**;**
PLO4	Plan, complete and evaluate an original research project that creates / expands and interprets the evidence base for their discipline;
PLO5	Demonstrate originality in the application of knowledge, together with a practical understanding of how established techniques of research and enquiry are used to create and interpret knowledge in clinical care.

On successful completion of 60 Level 7 credits students will be able to:

PGCO1	Critically reflect and evaluate their current professional and clinical practice and the related underpinning theory, scholarship and research with reference to current issues and developments in the subject and the profession.
PGCO2	Apply research to professional situations, both practical and theoretical with a comprehensive understanding of techniques applicable to their own research or advanced scholarship.
PGCO3	Demonstrate originality in the application of knowledge, together with a practical understanding of how established techniques of research and enquiry are used to create and interpret knowledge in clinical care.

Postgraduate Diploma:

On successful completion of 120 Level 7 credits students will be able to:

PGDO1	Critically reflect and evaluate their current professional and clinical practice and the related underpinning theory, scholarship and research with reference to current issues and developments in the subject and the profession.
PGDO2	Apply research to professional situations, both practical and theoretical with a comprehensive understanding of techniques applicable to their own research or advanced scholarship.
PGD03	Plan, implement and critically evaluate projects within their own practice area.
PGDO4	Demonstrate originality in the application of knowledge, together with a practical understanding of how established techniques of research and enquiry are used to create and interpret knowledge in clinical care.

Programme Design and Organisation

The programme offers a part-time route of Masters level study lasting 2-5 years. The possible programme schedules for 2-4 years can be found in Appendix I. Students can choose to extend study over a 5th year, provided they study at least 20 credits per year. There are three possible exit awards according to the number of credits acquired: PgCert, PgDip and MMed.

The programme seeks to enhance the critical thinking and reflective skills required to foster practitioner development in relation to personal and professional development. Extracts from the unit specifications can be seen on the following pages, but in summary for the final award of MMed, completion of the following core units is required:

Unit title (abbreviation) and code	Level 7 credits
Evidence based practice (EBP) 27590015	20
Education and Training in Practice (ETiP) 27590084	20
Leadership in Clinical Care Settings (LCCS) 27590018	20
Research Methods for Quality Improvement (RMQI) 2D7V1005	20
Project in Practice 27590021	60

All MMed students are taught together on the 20-credit core units, so you are likely to be learning alongside doctors from other specialties. The units are devised to be rooted in your own practice, so you will focus the tasks and activities around your own experiences, with staff support to make the links between the theoretical concepts covered in the unit and your own practice. Discussion forums and online group activities will enrich your learning by enabling you to engage in peer debate and compare your own experiences and practices with others. For the 60-credit Project in Practice you will be allocated a supervisor, and undertake a work-based project, for example a quality improvement project.

Core Units - Specifications:

Evidence-based practice:

Brief Summary	The aim of this unit is to ensure that clinicians have a systematic understanding of the review, promotion, application and delivery of evidenced-based medicine in clinical practice.
Indicative Content	This unit covers the rationale for evidence-based practice and introduces the components of evidence-based practice. Starting with the formulation of answerable questions derived from clinical practice, students will carry out focused database searches, and critically review appropriate literature to generate a synthesis of evidence. Subsequently students will reflect-on-action to draw conclusions that will inform future practice. The formulation and implementation of guidelines will also be discussed.
Unit Learning Outcomes	On successful completion of this unit, students will have the ability to: 1. Develop appropriate questions from real clinical scenarios; 2. Critically appraise the current evidence base linked to their clinical practice; 3. Systematically synthesise best evidence related to their practice; 4. Critically reflect on the necessity for evidence-based practice related to the question posed; 5. Critically reflect on the conclusions drawn from the synthesis of evidence.

Summative Assessment				
	Element	Type	Weighting (%)	Learning outcomes assessed
	1	Case study	60	1, 2, 3
	2	Assignment	40	4, 5

Element 1: Students will complete a case study that covers clinical scenario, related question, search strategy, data extraction table, and commentary based on a real patient case written in the 'BestBETs' format.

Element 2: Students will submit a critical reflection justifying the clinical focus for their case study, and the conclusions drawn from the synthesis of evidence (1500 words).

Brief Summary	This unit offers clinicians educators and managers involved in medical and healthcare education and training an opportunity to develop teaching skills relevant to their practice.
Indicative Content	This unit is specifically focused around the promotion and demonstration of excellence in medical and healthcare education and training. Using a case-based, discursive approach, it will explore pedagogic and educational theories related to the education and training of adult learners. The unit will incorporate consideration of frameworks related to medical and healthcare education and training and encourage the participants to critically evaluate and justify their current practice in relation to pedagogical and educational theories, which will be embedded within their portfolio of evidence that is submitted for the summative assessment. The formative and summative assessments will prepare students to develop their individual portfolio of evidence that can be submitted externally for the application of Membership of the Association of Medical Educators (AoME) *please note that there will be an additional fee payable by the student to the AoME and/or HEA for certificate of accreditation.*
Unit Learning Outcomes	On successful completion of this unit, students will have the ability to: 1. Critically evaluate a range of pedagogical approaches underpinning the design, planning and delivery of teaching, learning and assessment. *(AoME D1, 3, 4)* 2. Apply appropriate pedagogical theory to the development and delivery of an episode of inclusive clinically related teaching. *(AoME D2,4)* 3. Critically evaluate the effectiveness of their personal teaching and the pedagogical approaches applied.*(AoME D4)* 4. Critically examine approaches to management, leadership and governance of medical and healthcare education and training. *(AoME D5)*
Summative Assessment	

Element	Type	Weighting (%)	Learning outcomes assessed
1	Portfolio	100	1, 2, 3, 4

Element 1: Submission of a portfolio to demonstrate achievement of all LOs (4500 words).

Leadership in Clinical Care Settings (LCCS)

Brief Summary	The aim of this unit is to introduce clinicians to leadership concepts and models that can be applied in their role as an emerging leader. It explores relationships between team members and the need to develop leadership in context. It will enable individuals to develop and build on their strengths through a process of self-awareness and reflective learning.
Indicative Content	This unit introduces the theoretical underpinning of leadership, leadership and organisational culture; both internal and external to the organisation. It includes: Leadership and relationships; leadership competencies; emotional intelligence and leadership; emerging issues & dilemmas of leaders. The unit will focus on self-awareness by exploring tools, strategies and techniques for supporting self-awareness and reflection in practice, leadership credibility, career progression and development of ongoing support mechanisms.
Unit Learning Outcomes	On successful completion of this unit, students will have the ability to: 1. Critically discuss the theoretical concepts of models of leadership that may influence and impact on practice in clinical settings. 2. Critically appraise the personal, professional and hierarchical influences on leadership approaches within the clinical care setting. 3. Reflect on their own experiences to draw comparisons between their own experiences and the theoretical concepts of leadership. 4. Compare and contrast leadership styles in themselves and others in order to set personal objectives for development of their own leadership skills.
Summative Assessment	<table><tr><td>Element</td><td>Type</td><td>Weighting (%)</td><td>Learning outcomes assessed</td></tr><tr><td>1</td><td>Portfolio</td><td>50</td><td>3 and 4</td></tr><tr><td>2</td><td>Assignment</td><td>50</td><td>1 and 2</td></tr></table> Element 1: Students complete three reflective accounts of personal experiences of leadership in the clinical setting, and analyse leadership styles, impact and effectiveness of these within their teams. The reflection will include concluding & d personal action planning for the development of their own leadership skills (2250 words). Element 2: Students will complete a written assignment to discuss the theoretical concepts of leadership, and the influences on the approaches taken in the clinical setting, and the potential impacts of this on patient care (2250 words).

Research Methods for Quality Improvement (RMQI)

Brief Summary	This unit introduces the student to the concept of quality improvement applied within the contexts of clinical practice and healthcare delivery. It will prepare the student to design and undertake sound quality improvement projects within their own area(s) of clinical practice.
Indicative Content	Students will be taught concepts and models of quality improvement and their application to clinical practice, with critical understanding of the processes used to achieve and measure quality improvement. The unit is also designed to give students an enhanced knowledge of quantitative and qualitative research processes, including project/research design, ethical considerations, research methodologies, data collection, outcome measurement, data analysis and methods of research dissemination. This unit culminates in the submission of a written quality-improvement proposal, allowing the student to demonstrate their knowedge of the design and implementation of a quality improvement project relevant to their own area of clinical practice.
Unit Learning Outcomes	On successful completion of this unit students will be able to: 1. Critically apply research methodology to the process of Quality Improvement to practice. 2. Critically examine the tools used in the Quality Improvement process. 3. Critically justify the use of measurement processes used to drive and monitor Quality Improvement. 4. Critically apply the theoretical principles that underpin data collection or generation, and data analysis, in the context of Quality Improvement
Summative Assessment	

Element	Type	Weighting (%)	Learning outcomes assessed
1	Written Assignment (Research proposal)	100	1-4

Element 1: A 3500 word Proposal of a quality improvement or research project, including ethical considerations.

Project in Practice

Brief Summary	This unit will enable the student to apply and integrate relevant aspects of knowledge, understanding, skills and experiences developed in previous units of the programme to produce a scholarly piece of work related to their professional clinical practice.
Indicative Content	This unit will enable the students to apply their skills in appraising, integrating and synthesising evidence to support clinical decision-making application of appropriate, evidence based interventions. Projects will be based on topics which have clinical and professional relevance. The unit culminates in the submission of a scientific paper, which will be developed with the benefit of supervision from a member of the programme team, and a viva.
Unit Learning Outcomes	On successful completion of this unit students will be able to: 1. Critically apply appropriate research methods theory to a practice based research project; 2. Carry out a project on a topic relevant to their clinical professional practice, using an appropriate methodology for both data collection or generation, and data analysis; 3. Present the project report in the format suitable for a draft journal article; 4. Communicate an effective academic argument that critically evaluates and defends their question, methods and findings with academic peers.
Summative Assessment	<table><tr><th>Element</th><th>Weighting</th><th>Type</th><th>Description: Assesses LOs</th></tr><tr><td>1</td><td>75%</td><td>Journal article</td><td>1,2,3</td></tr><tr><td>2</td><td>25%</td><td>Viva</td><td>4</td></tr></table> **Element 1:** Written element: Students will produce a draft journal article (6000 words), based on their project, which is potentially suitable for publication. **Element 2:** Viva: The student will discuss their work with two examiners for a maximum of one hour.

Optional Units:

Our optional units will allow you to expand your knowledge and understanding in specialist areas. Optional units are chosen up to a maximum of 40 credits. The following options are all 20-credit units, and will run **if there is sufficient demand**. Students whose place on the programme is funded or co-funded by their employer / another funding body, may have their options stipulated by the funder.

Route	Option cluster 1 (January)	Option cluster 2 (April / May)
MMed	Any combination of available options that does not constitute a named route, plus additional options of Acute Medical Emergencies and the Independent Study Medicine.	
MMed (ENT Surgery)	Common ENT disorders	ENT Emergencies
MMed (Primary Care)	Health Inequalities	Clinical Complexity and Deprivation
MMed (Psychiatry)	General Psychiatry	Psychotherapy and the Psychological Basis of Mental Health Symptoms
MMed (Emergency Medicine)	Trauma Emergencies	Paediatric Emergencies
MMed (Sports and Exercise Medicine)	Emergency Care in Sport	Sports Team Physician
MMed (Neonatology)	Neonatal Care	Neonatal Emergencies
MMed (Trauma and Orthopaedics)	Management of common orthopaedic conditions	Orthopaedic trauma
MMed (Simulation)	Simulation and Technology Enhanced Learning in Healthcare: learning theory, curriculum design, and evaluation	Simulation and Technology Enhanced Learning in Healthcare: Practical Application
MMed (Head and Neck Reconstruction)	Introduction to Risk Management and Neck reconstruction	Head Reconstruction- Upper-Midface, Midface and Lower Face Reconstruction

Learning and Teaching

We teach you via blended learning, through methods such as weekly tasks supported by online sessions and discussion forums and group work to help you network and share best practice with fellow students. We'll also use a range of online digital media. for example: podcasts and videos, and resources available through St.Emlyn's virtual hospital, which will be accessed through the institutional Moodle platform. This will maximise accessibility, enabling students who are practitioners to engage with learning at times and locations that accommodate their busy schedules.

In some cases, organisations will support a cohort of students through this course. In this case, face-to-face tutorials may be facilitated by local clinicians working with Manchester Met. These sessions will use a problem-based learning (PBL) approach, in which students will be facilitated by a consultant practitioner to negotiate and develop their own learning objectives and collaborate to achieve them. PBL supports a student-centred approach to learning, and will ensure that students can develop their learning in a way that is directly applicable to their own personal and professional development and directly related to their current situational learning needs.

Assessment

Assessment and learning are closely intertwined, as well as being developmental. Formative assessment is intended to provide feedback to enable students to judge their level and depth of learning and develop their own personal learning objectives. Summative assessments are designed to test students' achievement of the unit learning outcomes.

Feedback on summative assessments will be given with the following purposes in mind:

- To enable participants to understand how their work has been judged against the given criteria;
- To motivate participants by identifying areas of good practice;
- To enable participants to identify areas for development and where and how improvements could be made.

Assessments will be linked to the student's practice and will facilitate them to support this with theory and research. A range of assessment methods is used to ensure the assessment allows demonstration of the unit learning outcomes. Modes of assessment include: case studies, reflective reports, assignments, literature synthesis, practice focused project and viva.

Students will be informed about assignment tasks through the unit Moodle areas, provision of a comprehensive assignment specification and through discussion with unit teaching staff. Deadlines will be articulated on the online learning platform.

The pass mark for each **unit** of study is 50. Where a unit has more than one **element** of assessment, marks from each element are combined to generate a weighted average mark. Where a student receives a unit mark in the marginal fail band (40-49), compensated passes will be allowed according to the stipulations in the Assessment Regulations for Taught Postgraduate Programmes of Study.

All summative assessments will normally be anonymously marked. However, for the Project in Practice unit, one marker is the supervisor and, in this instance, the internal moderator (second marker) will provide the anonymous scrutiny. Anonymity ends after marking has been completed and students are named for Assessment Board purposes.

Moderation procedures adhere to University guidelines for all written work.

Submission of assessed work

Submission of assignments is electronic via unit Moodle areas. Assignments must be submitted by or before the specified deadline. The deadlines for submission of coursework are clearly stated in the assessment block on the right-hand side of the Moodle page.

Marking Procedures

1. Student's work is identified only by their identification number.
2. Assignment requirements are normally released to students at the beginning of the unit. Dates for release of assignment tasks are published in the unit Moodle area.

3. Marks and individual feedback are normally released 4 weeks after submission.

4. Due consideration is given to all borderline and fail candidates in all assessments.

5. Where more than one marker is involved in marking the assessment, all members of the marking team meet in order to ensure that the approach to marking is consistent across all members of the marking team.

6. Students are provided with written feedback on their assignments. Every attempt is made to provide feedback that is constructive, developmental, and which clearly indicates specific reasons for the grade awarded.

7. In line with University policy, the programme employs a process of sampling or moderation for all assessments. This sample reflects the spread of marks awarded and includes samples of all the markers' work. A sample of marking is also reviewed by a designated external examiner.

8. When differences exist between markers during marking they are resolved in line with university policy.

Late submission

Penalties for late submission are as stated in the [Taught Postgraduate Assessment Regulations](#)

Exceptional factors

If exceptional factors arise which make it impossible for the student to submit assessments by the deadline they should seek advice from the unit leader, the programme leader or the Student Hub as soon as possible. Procedures are in place for students to seek [Consideration of Exceptional Factors.](#)

These circumstances may take a variety of different forms for example family/personal circumstances, or health issues. Third party written evidence must be provided in all cases. As far as possible, this evidence should be presented **before** the assessment procedure in question. The written evidence should give enough information about the circumstances to

include the nature and duration of the problem, and some reference to the degree of effect that the problem has had.

Non-submission of assignments/non-attendance at examinations

If you do not submit an assignment, and you are unable to produce evidence of illness or exceptional factors through the procedure outlined above, then you will be recorded as having failed the assessment, and be awarded a mark of 0.

Reassessment

Students will normally be permitted one reassessment attempt.

Assessment Boards

For membership and role of Assessment Boards, see the [Taught Postgraduate Assessment Regulations.](#)

The programme Assessment Board will meet according to the Programme Schedule in Appendix I. The Assessment Board has access to all assessment material produced by the students.

Students are not permitted to retake assessments until results have been ratified by the Assessment Board. Any results published before a meeting of the Assessment Board should be considered to be provisional and may in exceptional circumstances change.

Academic Appeals – The Review Procedure

See [Procedure for Academic Appeals and Review of Assessment-Related Matters.](#)

External Examiners

An external examiner is appointed and approved by the University. Each external examiner is normally appointed for a period of 4 years and normally fulfils duties related to assessment of all years of the programme. The responsibilities of external examiners are clearly defined by the University regulations for external examiners, and this includes the requirement for them to produce an annual report at the end of each academic cycle.

Students are able to view and comment on the reports. External examiner reports, with responses from the Programme Leader will be made available in the Masters in Medicine Moodle area.

Academic Misconduct

For definitions and procedures of academic misconduct, including plagiarism see The Procedure for Handling Academic Misconduct.

Students with Specific Learning Needs

It is advisable for students with specific learning needs to inform the Programme Leader or contact the Inclusion and Disability Service as soon as possible. This enables the identification of student's individual needs, and the development of strategies to ensure any recommendations are in place to support student's performance in assessments. There is further information on this on the Disability Support pages.

Roles and Responsibilities:

The Director of the Postgraduate Medical School takes overall responsibility for the provision of the programmes in the Postgraduate Medical School and maintains oversight of each programme through regular meetings with the programme leaders.

The Programme Leader is responsible for the oversight of the programme including quality assurance; curriculum / programme review; and advising staff and students with regard to the implementation of institutional policies and codes of practice, for example: assignment marking and moderation, personal learning plans, exceptional factors, recognition of prior learning, academic misconduct and appeals. The Programme Leader is also responsible for the development and production of key documentation such as the Programme Handbook, which is a vital resource for students and staff, and for ensuring that the student voice is heard and responded to. They will intermittently visit sites involved in delivering the provision at key points in the academic cycle, for example induction. The Programme Leader

will maintain overall responsibility for ensuring that communication between all parties is effective.

The Unit Leaders and Teaching Teams are subject experts who are responsible for planning and delivering teaching, learning and assessment to ensure that students meet the unit learning outcomes. This encompasses for example: development and maintenance of the Moodle area; and development and production of unit materials including a comprehensive assignment specification to guide students. Ensuring that reading lists are current and appropriate, and that essential reading is predominantly available electronically, in compliance with the library reading list policy, will be vital given the mode of delivery. They are also responsible for assignment marking, and may occasionally be involved in face-to-face delivery.

An External Examiner is in place to ensure that the assessment process is managed in accordance with the University's policy and procedures. Responses to External Examiner communications and annual reports will be written by the Programme Leader. Formal opportunities for students and staff in the workplace setting to engage with the External Examiner will be afforded with either virtual or face-to-face meetings. The Programme Leader will ensure that arrangements are in place for students to view External Examiner report(s) for their programme via the VLE.

Student Complaints Procedure

There is a [University Student Complaints Procedure](#), but students are encouraged to discuss complaints with the Programme Leader.in the first instance.

Withdrawal or suspension from the Programme

Students failing to satisfy progression or award assessment requirements after all reassessment entitlements have been taken and are therefore left with no route open to complete their programme of study and/or to obtain its final award shall be withdrawn. from the programme.

Students may voluntarily withdraw from the programme at any time and are advised to discuss their options with the Programme Leader. See the Student Transfer, Suspension and Withdrawal Policy for more information.

Student feedback

Each cohort of students is encouraged to elect a spokesperson to represent them in staff-student discussions of the provision. General feedback is sought from the student body approximately termly. Student feedback is a means of ensuring that the students' opinions are reflected in the development of the programme. Additional unit specific feedback is also encouraged regularly through unit evaluations.

Two Year Structure

Year 1											
August	September (Assessment Board)	October	November (Assessment Board)	December	January	February (Assessment Board)	March	April	May	June	July
	Evidence based practice (EBP) (9)				Option 1			Option 2 *And* Research Methods for Quality Improvement (RMQI) (4)			

Year 2											
August	September (Assessment Board)	October	November (Assessment Board)	December	January	February (Assessment Board)	March	April	May	June	July
Retake period	Leadership in Clinical Care Settings (LiCCS) (9) *And*				Education and Training in Practice (ETiP) (1) (AoME accredited) *And*						
	Project in Practice (9)										

Appendix I: Programme Structure

Three Year Structure

		Year 1											
		August	September (Assessment Board)	October	November (Assessment Board)	December	January	February (Assessment Board)	March	April	May	June	July
Sept start		Evidence based practice (EBP) (9)					Option 1				Option 2		

		Year 2											
		August	September (Assessment Board)	October	November (Assessment Board)	December	January	February (Assessment Board)	March	April	May	June	July
Sept start	Retake period	Leadership in Clinical Care Settings (LiCCS) (9)					Education and Training in Practice (ETiP) (1) (AoME accredited)			Research Methods for Quality Improvement (RMQI) (4)			

		Year 3												
		August	September (Assessment Board)	October	November (Assessment Board)	December	January	February (Assessment Board)	March	April	May	June	July	August
Sept start	Retake period	Project in Practice (9)												

Appendix I: Programme Structure

Four Year Structure

		August	September (Assessment Board)	October	November (Assessment Board)	December	January	February (Assessment Board)	March	April	May	June	July
	Year 1												
Sept start		Evidence based practice (EBP) (9)					Option 1						
	Year 2												
Sept start	Retake period						Education and Training in Practice (ETiP) (1) (AoME accredited)			Option 2			
	Year 3												
Sept start	Retake period	Leadership in Clinical Care Settings (9)								Research Methods for Quality Improvement (4)			
	Year 4												
Retake period		Project in Practice (9)											