School of Medicine Research Committee:
Working group on doctoral students in the School of Medicine (November 2011)

SOMRC Working Group on Doctoral Students
Charles McGhee, Simon Hatcher, Guy Warman, John Windsor, and Trevor Sherwin

This working group was established to consider ways in which doctoral student numbers and completions can be increased in the School of Medicine. John Conaglen advised that the Waikato Clinical School has its own working group for doctoral students. Prof Ross McCormack was advised of progress and his further input accepted.

TERMS OF REFERENCE
To advise the SOMRC and SOM Heads Group on the strategic direction of the School on doctoral students, and specifically how to:

1. Sustain the numbers of doctoral students
2. Expand the numbers of doctoral students
3. Improve the timeliness of doctoral completions
4. Increase the numbers of doctoral completions

RECOMMENDATIONS

1. SOM Interdepartmental Forum
   a) Consider introduction of a regular forum, twice per year, for SOM departments to share ideas, challenges, successes and potential collaborations in relation to doctoral students.
   b) All new supervisors should be encouraged to attend fora

2. Goal setting for PhD completion
   a) The full-time PhD should be considered a 3 year degree and appropriate targets set
   b) Completion and submission should thus be timed to occur by the end of the third year
   c) Examiners should be identified and primed in advance (30 months) to review thesis promptly
   d) Extensions should be limited to 6 or 12 months except in exceptional circumstances

3. First year review
   a) Although some departments already have a first year review a formal process should be developed for all first year students to provide support both to students and supervisors.
   b) This may take the form of an SOM presentation/review day or, depending upon student numbers departments with similar research strategies might pair-up for an annual review.
   c) An alternative might include 1-2 experienced supervisors external to the department providing additional input to the annual review process
4. Attracting students

a) Attracting science students remains an issue and departments should re-evaluate access to teaching in science curricula to attract students – particularly potential honours students
b) Specific projects should be developed to attract BMedSc Hons students
c) Summer studentships should be encouraged and positions filled competitively
d) Faculty websites should be used to promote potential Doctoral projects
e) SOM remains poor at attracting international doctoral students (2011 73 domestic EFTs, compared to 0 international EFTs) and this should be an area for major development
f) Alternative funding sources e.g. health boards, colleges, philanthropic should be developed

5. Supervision capacity:

a) Department Heads should regularly assess and document levels of doctoral supervision.
b) Recommended maximum of up to 5 students per 1.0 FTE and at least one per staff member
c) Excessive numbers should be avoided especially for those with large clinical commitments in order to maximise student access/supervision and overall quality thereof.

6. Managing workload:

a) Co-supervision should be encouraged to share workloads
b) Non clinical staff should be considered as co-supervisors and advisors in clinical projects
c) Non-university SMO’s who are suitably qualified should be encouraged to be supervisors
d) Post-doctoral to doctoral student ratio is too low in the SOM (1:12 in one dept) therefore an expansion of the post-doctoral cohort should be a priority
d) The 0.05 FTE guideline (2 hours per week) allotted for supervision per doctoral student is probably unrealistic in SOM and should be re-assessed

7. Funding:

a) Doctoral funding and respective contribution to departments should be transparent
b) Additional funding should be identified for post-doctoral appointments
c) Departments should ensure the EFTS for any students being supervised from outside of the school of medicine are claimed.

8. Research Space:

a) Appropriate planning of space required for clinical activity
b) Laboratory space continues to be a premium and utilisation of space across departments should be considered where co-supervision is interdepartmental
c) Head of School and Dean should be updated annually regarding research space requirements.

9. Supervised Doctoral Students in SOM November 2011

Table deleted: