
UK Medical Schools Annual Return 2008/09: QABME

The QABME Annual Return Process

Every year, each medical school must provide a return to the GMC that:

- a. Identifies significant changes to curricula, assessments or staffing.
- b. Highlights risks or issues of concern, proposed solutions and corrective actions taken.
- c. Identifies examples of innovation and good practice.
- d. Responds to issues of interest and debate in medical education, including promoting equality and valuing diversity.
- e. Identifies progress on any requirements or recommendations arising from the QABME visit process.

The GMC writes to each medical school towards the end of the calendar year to request the specific information required that year. School returns allow the GMC Education Committee to identify:

- a. Issues to explore with all medical schools.
- b. Examples of good practice that can be shared.
- c. Issues to be investigated with individual medical schools.

If we need to explore an issue, for example the introduction of a new curriculum or significant changes to the curriculum or facilities, the school may be requested to submit detailed information for analysis or may be selected for the QABME visit process.

Basic Information

Please complete this table and update details if necessary

Name of Medical School:	GLASGOW MEDICAL SCHOOL	
Name of Dean/Head of School <i>(please correct if necessary):</i>	PROFESSOR DAVID BARLOW (EXECUTIVE DEAN OF MEDICINE)	Contact tel: 0141 330 3362 Contact email: d.barlow@clinmed.gla.ac.uk / execdean@clinmed.gla.ac.uk
Name of QABME contact <i>(please correct if necessary) :</i>	CAROLINE MALLON	Contact tel: 0141 330 8042 Contact email: c.mallon@admin.gla.ac.uk
Number of undergraduate medical students 2008/09 (all programmes)	1223	
External QA review (e.g. by university)	Date: Session 2005-6 By: The University of Glasgow Covering: The undergraduate programme Date of Next: 2012-13	
Internal QA review	Date: November 2008 Covering: The undergraduate programme Date of next: November 2009	

QABME Annual Return Table Templates

Tables 1 to 5 below are part of the GMC's QABME Annual Return Process. They track:

- The steps the School is taking to address specific requirements and/or recommendations arising out of the previous QABME review.
- The changes in provision of undergraduate degrees, including risks and innovations resulting from the School's own quality management systems.

What you need to do: Complete Tables 1 to 5 with brief notes. Instructions on what you need to include in each column of the tables are given below.

Tomorrow's doctors area	Requirement/ Recommendation/ Change/ Innovation/ Risk or challenge	Action	Contact	Supporting documents list	Timeline
<p>Identify the most relevant area of Tomorrow's Doctors.</p> <p>This has been pre-populated for each table with general areas. Please amend, delete or duplicate the rows as appropriate.</p>	<p>Identify the areas under each category in the individual tables for:</p> <ul style="list-style-type: none"> ▪ Requirements ▪ Recommendations ▪ Changes ▪ Innovations ▪ Risks or challenges 	<p>List the key actions and steps the school plan to take in order to address each:</p> <ul style="list-style-type: none"> ▪ Requirement ▪ Recommendation ▪ Change ▪ Innovation ▪ Risk or challenge 	<p>State the working group/committee/ person that will be taking the lead on the action identified.</p> <p>Include details of the:</p> <ul style="list-style-type: none"> ▪ Contact name ▪ Email address ▪ Telephone number 	<p>List the document names of any committee decisions, management plans or other documents that evidence the actions.</p> <p>Please do not attach these documents.</p>	<p>State the timeline for each action stipulated.</p> <p>Include an estimate for the final deadline of when the school expects to be able to fully meet any requirements listed.</p>

A fictional example response is provided in Table 1.

Please note that your responses may be published on the GMC's education website pages.

Please send your completed responses on this template by **Friday 12 December 2008** by email to QABME@gmc-uk.org.

Table 1 – Requirements

Please list the requirements from the School's last QABME report that have been completed since your last annual return. Please also list those that have not been fully implemented. Please indicate how the requirements have been addressed since your last annual return in 2007/08 (http://www.gmc-uk.org/education/undergraduate/undergraduate_qa/medical_school_reports.asp)
Expand the table as necessary. If you do not have any requirements in your last report please check this box

Tomorrow's doctors area	Requirements	Action	Contact	Supporting documents list	Timeline
Example: Assessment procedures	To ensure that students receive clear guidance about what is expected of them in their Year 5 OSCE	<ul style="list-style-type: none"> Review of guidance on the Year 5 OSCE on the student intranet Review guidance on the Year 5 OSCE in the Year 5 Handbook Revise student briefing for Year 5 OSCE 	<ul style="list-style-type: none"> Assessment Working Group Dr Joe Bloggs Dir. of Clinical Studies joebloggs@medschool.ac.uk 01234 567 890 	<ul style="list-style-type: none"> Working group minutes Intranet Revised Year 5 Handbook Briefing notes 	<ul style="list-style-type: none"> Intranet revision completed New handbook due for publication Dec 08 Briefing notes; July 09
Curricular Outcomes					
Curricular content and structure					
Delivering the curriculum					
Assessing student performance and competence					
Student health and conduct					

Table 2 – Recommendations

Please list the recommendations from the School’s last QABME report that have been addressed since your last annual return in 2007/08 (expand the table as necessary). If you do not have any recommendations in your last report, please check this box

Tomorrow’s doctors area	Recommendations	Action taken – If none taken, please provide your reason for this	Contact	Supporting documents list	Timeline
Curricular content and structure	<p>16.b. During the School’s ongoing curriculum review next year it is advised to pay particular attention to:</p> <p>i. Ensuring the integration of the underpinning science of women and children’s health is adequate and balanced across the course.</p> <p>ii. Ensuring that the PBL cases reflect current health problems and practice, particularly in Year 3.</p>	<p>We continue to try to ensure this on annual curriculum review and we have a Clinical University Teacher (lecturer level) who is examining the Child Health content of the curriculum for her Masters project. She has currently completed more detailed mapping of years 1-3 of the curriculum.</p> <p>The cases used in year 3 were revised over the last year.</p>	<p>Dr Sarah Brown, Clinical UT in Child Health. sa104e@clinmed.gla.ac.uk</p> <p>Dr Kay Hadley, Director of Year 3. k.hadley@clinmed.gla.ac.uk</p>		<p>Two years.</p> <p>Revision completed and updated annually</p>
Delivering the curriculum	16.a. The school is advised to give priority to the training and quality assurance of, and communication with, clinical and community teaching	The SUT has delivered or arranged a total of 7 sessions of staff development covering a range of relevant topics. He also has delivered several workshops on assessment	Phillip Evans, SUT Medical Education p.evans@clinmed.gla.ac.uk	CES Programme of Meetings	Ongoing

Tomorrow's doctors area	Recommendations	Action taken – If none taken, please provide your reason for this	Contact	Supporting documents list	Timeline
	<p>staff. We welcome the recent appointment of a senior university teacher who will have responsibilities in these areas.</p>	<p>and feedback in addition to these. Some of these workshops are delivered centrally and some are delivered on-site in hospitals.</p>			
<p>Assessing student performance and competence</p>	<p>c. The School is advised to continue the improvement of assessment in line with international best practice. Particular areas for attention include: i. The refinement of final examinations blueprinting to ensure balanced coverage of the curriculum.</p> <p>ii, The consistency of student selected module (SSM) assessment.</p>	<p>This has continued. The blueprint has been refined.</p> <p>We have reviewed all of the scores awarded in SSM assessments (1750 per year) and identified outliers. We are also in the process of developing a computerised feedback system to give assessors feedback about their scores</p>	<p>Dr Peter Barton, Chair of Assessment Working Group Pjmb1r@clinmed.gla.ac.uk</p> <p>Professor Bill Ferrell, SSM Director W.Ferrell@bio.gla.ac.uk</p>	<p>Examinations Blueprint</p>	

Tomorrow's doctors area	Recommendations	Action taken – If none taken, please provide your reason for this	Contact	Supporting documents list	Timeline
	<p>iii. In-course, end of block assessment during clinical placements.</p> <p>iv. Arrangements to ensure adequate psychometric and statistical input into assessment processes.</p>	<p>so that these can be compared with other examiners along with ongoing briefing etc.</p> <p>Three workshops so far have been offered to educational supervisors delivering end of block assessments by the SUT in Medical Education.</p> <p>We took advice from an international expert and were advised that we would need to appoint a highly experienced appointee to this purpose. It has not, so far, been possible for us to make an appointment. It has been discussed at Scottish Deans Medical Education Group and a potential project to establish principles of best practice in this area is planned.</p>	Phillip Evans – as above		
Student health and conduct	16.d The continued expansion and improvement of the	We have appointed a new Associate Dean for Student Welfare. He is conducting a	Dr Philip Cotton, Associate Dean for Student Welfare p.cotton@clinmed.gla.ac.uk		This current academic session.

Tomorrow's doctors area	Recommendations	Action taken – If none taken, please provide your reason for this	Contact	Supporting documents list	Timeline
	<p>student academic advisory system and career guidance for students which we strongly support.</p>	<p>thorough review of our system including discussions with students about a parent system with senior students mentoring younger students etc. We have added several further sessions on career guidance and support and are also continuing to work on a student personal development profile.</p>			

Table 4 – Innovations & potential good practice

Please identify any innovations the school is piloting or potential good practice that it would like to report.

If you do not have any innovations currently being piloted or planned, please check this box

Tomorrow's doctors area	Innovations/Good practice	Action	Contact	Supporting documents list	Timeline
Curricular content and structure	Preparation for Practice has been developed using the evidence from the GMC funded project led by Jan Illing et al. How prepared are medical graduates to begin practice? A comparison of three diverse UK medical schools. A report for the GMC Education Committee. September 2008. We have developed the block with colleagues from the West of Scotland Postgraduate Deanery and two of our previous graduates who are now at ST1 level.		Professor Jill Morrison Head of the Undergraduate Medical School Jmm4y@clinmed.gla.ac.uk	Preparation for Practice	Being implemented in March 2009.