
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:	SHEFFIELD SCHOOL OF MEDICINE	
Name of Dean/Head of School <i>(please correct if necessary):</i>	PROFESSOR NIGEL D S BAX	Contact tel: 0114 271 3956 Contact email: n.d.s.bax@sheffield.ac.uk / t.s.woodward@sheffield.ac.uk
Name of QABME contact <i>(please correct if necessary) :</i>	DENISE BEE	Contact tel: 0114 222 5361 Contact email: d.bee@sheffield.ac.uk
Number of undergraduate medical students 2008/09 (all programmes)	1322	
External QA review (e.g. by university)	Date: 2006/07 By: GMC Covering: MBChB programme Date of Next: Not known (we anticipate that there will be an Independent Evaluation of Teaching conducted by the University during the next 18 months. One had been planned for last year but was not conducted since the GMC had visited us for a QABME inspection in 2006/07).	
Internal QA review	Date: There is continuous evaluation of all modules in all phases of the programme. Covering: All aspects of teaching. Date of next: Continuous	

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
Curricular content and structure	To review scope and objectives for Student Selected Components and, in light of this review, revise the framework to increase the breadth and depth of genuine choice in both the form and content of the SSCs.	<ul style="list-style-type: none"> Review the entire SSC programme. This work has been completed and new SSC provision will start in 2009. A new form of SSC in Phase 3b, entitled 'Master Classes', will be introduced from 2009 and requires students to engage in one medical sciences based Master Class and one society based Master Class during the year. Each will involve work over four weeks with an expert in the field of study. Students will choose from a range of study opportunities. 	<ul style="list-style-type: none"> SSC Theme Leader - Professor Patsy Stark p.stark@sheffield.ac.uk 0114 222 5341 	<ul style="list-style-type: none"> SSC Working Party minutes Curriculum Committee minutes Revised Phase 3 Handbook Revised Phase 3a Handbook Briefing notes on Minerva 	<ul style="list-style-type: none"> All work covering this requirement has been completed.

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 Outcomes	Continue to develop the curriculum so as to reflect changing patterns of health and healthcare delivery.	<ul style="list-style-type: none"> • A representative from Public Health is now a member of the Curriculum Committee. • A series of meetings have occurred between Public Health and the Sheffield PCT concerning the engagement of this PCT with enhanced teaching of medical students. • Changes to the provision of Public Health teaching so as to reflect changing patterns of health and healthcare delivery will occur as from 2009. 	<ul style="list-style-type: none"> • Public Health Representative on MBChB Curriculum Committee - Dr Andrew Lee • andrew.lee@sheffield.ac.uk • 0114 222 0872 	<ul style="list-style-type: none"> • Curriculum Committee minutes • Notes of meetings with Public Health and PCT • Plan of action from Public Health to Curriculum Committee 	<ul style="list-style-type: none"> • Implementation of changes as from 2009.
Delivering the curriculum	The development of a learning resources strategy between the University and its NHS partners.	<ul style="list-style-type: none"> • A bid has been submitted to the SHA for enhanced clinical skills facilities within the Royal Hallamshire Hospital. • A bid has been discussed with the SHA and is being submitted for monies to support the development of small group teaching facilities. • Arrangements have been made with three of the local Associate Teaching Hospitals to undertake summative assessments within these Trusts. Discussions have occurred with the SHA to use SIFT funding to help support such activities. • Discussions with the SHA have been most supportive of the development of both clinical skills facilities, the development of 	<ul style="list-style-type: none"> • Professor Nigel Bax • n.d.s.bax@sheffield.ac.uk • 0114 271 3956 	<ul style="list-style-type: none"> • Bid proposal to SHA for clinical skills facilities. • Bid proposal to SHA for use of SIFT funding to support small group teaching facilities and enhanced assessment procedures. 	<ul style="list-style-type: none"> • Awaiting final response from SHA at present.

Tomorrow's doctors area	Recommendations	Action taken – If none taken, please provide your reason for this	Contact	Supporting documents list	Timeline
		<p>resources for small group teaching and the support of assessment with the Associate Teaching Hospitals.</p> <ul style="list-style-type: none"> • A lead for Undergraduate Education has been appointed by the Sheffield Teaching Hospitals NHS Trust thus emulating the arrangements that exist at the four Associated Teaching Hospitals. This group meets regularly with the Director of Teaching of the MBChB programme to consider matters such as resources and teaching and learning across all sites. • The Director of the local Foundation School has become a member of the MBChB Curriculum Committee. 			
Assessing student performance and competence	Review of assessment procedures.	<ul style="list-style-type: none"> • Formation of an assessment review panel. • Review of all assessment activities throughout the whole of the MBChB programme including blueprinting and standard setting. • Following factor and other analyses, separation of the written and clinical components of the Phase 4 final examinations so that no compensation exists between these two elements. There will be no compensation of this nature at any point in the MBChB programme in the future. • Following review of the Phase 3a assessment procedures in 2009 there will be a pilot activity to determine how best to undertake workplace based assessments for Women's Health, Child Health and 	<ul style="list-style-type: none"> • Professor Nigel Bax • n.d.s.bax@sheffield.ac.uk • 0114 271 3956 • Professor Malcolm Reed • m.w.reed@sheffield.ac.uk • 0114 271 3167 	<ul style="list-style-type: none"> • Minutes of Curriculum Committee • Minutes of Assessment Review Team • Minutes of Phase 3a Curriculum Committee 	<ul style="list-style-type: none"> • As described in the action taken column.

Tomorrow's doctors area	Recommendations	Action taken – If none taken, please provide your reason for this	Contact	Supporting documents list	Timeline
		<p>Psychiatry. This is to ensure that all students are able to undertake clinical activities that relate to patients rather than to patients and their families in simulation in OSCEs. This has resulted in extensive staff training. The plans have been widely and enthusiastically accepted. This will lead in 2010 to there no longer being an OSCE in these subjects at the end of Phase 3a and for judgements regarding clinical performances to be based entirely on workplace based assessments. There will continue to be a written summative assessment of an integrated nature at the end of Phase 3a.</p> <ul style="list-style-type: none"> • The proformas used to assess students and provide them with feedback at the end of their clinical attachments are being modified so that students have to contribute to these forms and the resulting discussions with tutors. Students will in future be required to list the clinical cases that they have seen during their attachment and the forms have been designed so as to provide enhanced feedback of their performance during such attachments. These changes will, it is hoped, promote greater engagement of a collaborative nature between students and their tutors. 			

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 Outcomes	Unchanged.				
Curricular content and structure	See Table 3				
Delivering the curriculum	See previous comments on Patients as Educators and Patients' Council as well as responses to QABME requirement and recommendations.	The PaE programme has steadily grown and now has about 650 patients who contribute. They see medical students in all Phases of the MBChB programme and help develop their communication and clinical examination skills as well as providing both formative and summative feedback.	<ul style="list-style-type: none"> • Director of Patients as Educators Programme - Mr Martin Hague • m.g.hague@sheffield.ac.uk • 0114 226 6474 	<ul style="list-style-type: none"> • Annual report from the PaE programme. • First joint meeting of all members of the Patients' Council will be held in Spring 2009 and papers will be available after this. 	<ul style="list-style-type: none"> • Currently active.
Assessing student performance and competence	See responses to recommendations regarding assessment in Table 2.				
Student health and conduct	Unchanged.				