
UK Medical Schools Annual Return 2007/08: 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.

Name of medical school:	University of Bristol
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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 schools are taking to address specific requirements and/or recommendations arising out of their 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 **Monday 17 December 2007** by email to QABME@gmc-uk.org

Table 4 – Innovations

Please identify any innovations the school is piloting or planning to introduce.

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

Tomorrow's doctors area	Innovations	Action	Contact	Supporting documents list	Timeline
Curricular Outcomes	Established a Faculty Innovation Group	The group has already established three main vehicles for disseminations: Annual Learning and Teaching conference, Annual eLearning Conference and Medical Education Seminar Programme with monthly talks on topical medical education issues	Dr P J Williams	Minutes of the Innovations Group	Est. 2007 Ongoing
Curricular content and structure	Vocational Studies	Merging of the existing vertical themes with the development of the Personal and Professional Development strand	Dr T. Thompson	APR (11/07/07)	July 2006 on
Delivering the curriculum	Enhancement of the teaching of Histology in Yrs 1 & 2 using the "Virtual Microscope"	Use of the virtual microscope to complement the use of light microscopy, leading to enhancement of understanding.	Prof P. Martin Dr P. Langton	http://www.bris.ac.uk/cetl/aims	Piloted Spring 2007 Full implementation Oct 2007
	Enhancement of the teaching of Physiology and Pharmacology using patient simulators	Use of the simulators to illustrate normal and abnormal physiological responses and pharmacological actions in CVS, Respiratory and Renal systems	Prof J. Harris Dr E. Lloyd	http://www.bris.ac.uk/cetl/aims	Piloted Spring 2007 Full implementation Oct 2007

Tomorrow's doctors area	Innovations	Action	Contact	Supporting documents list	Timeline
	e-learning packages Yrs 3-5	Incorporation of the best student authored e-learning teaching packages (SSC projects) into the electronic tutorial provision.	Dr Jane Williams		From Sept 2007.
Assessing student performance and competence	A number of curriculum units have introduced electronic marking of assessments either on a formative or summative basis.	Summative: Training for students in the actual examination environment has occurred for summative assessments; Examiners have been trained on the systems to be used and the way assessments are to be delivered Formative: Students are being given material to test themselves formatively, but will have had previous experience in using it summatively. We expect to expand this further in time, but this would require training of the appropriate students	Dr Jane Williams Dr David Cahill	Student Handbook Year 1 report	2007 onwards