

Check to Bristol Medical School

Check	Bristol Medical School
Date	12 September 2014
Programme	MB ChB
Team Leader	Professor Stewart Petersen
Visitors	Dr Ahad Wahid Mr Sanjoy Bhattacharyya
GMC staff	Samara Zinzan Hannah Watts Greg Liang
Purpose of the check	<p>In 2013-14 the GMC undertook an audit to provide an overview of undergraduate assessment practice across all UK medical schools. The aim of the audit was to identify good assessment practice and check that each school's overall assessment system met the standards detailed in Tomorrow's Doctors (2009).</p> <p>This was a paper based exercise which involved analysing data collected between 2009 and 2013 as part of our monitoring processes to form an evidence base, which was then expanded by further information requested from schools. A separate report on the findings of this audit is due to be published in Autumn 2014.</p> <p>Following this assessment audit, we identified five schools for a check focussing purely on assessment in order to triangulate the paper based evidence. Bristol Medical School (the School) was identified as a site for a check based on their submission to the audit, and as they had not been visited by the GMC since 2008-2009 academic year. We will next be visiting them in 2016 as part of the South West regional review.</p>
Summary	This is a time of change for Bristol Medical School as there is ongoing reconfiguration across Bristol University which will see the

	<p>medical school housed with the veterinary and dental schools within a single Health Sciences faculty. This should help to share good practice across the existing programmes.</p> <p>We were pleased to see the beginnings of a comprehensive curriculum and assessment review, with a new curriculum due to be implemented in 2017. There has already been a curriculum review within the veterinary and dental schools and the process used for these will be replicated for the medical school.</p> <p>The School has in the past academic year employed an external advisor to review their assessment and inform future development of assessment for the programme. This has helped the School to identify the areas which require change in order to improve assessment.</p>
Concerns	None
Requirements	<ol style="list-style-type: none"> 1. The School needs a clear overall strategy for assessment supported by a code of practice in order to be able to explain clearly their schemes of assessment and demonstrate a wide understanding of them among their staff. This is linked to requirement 19c from our report on the School in November 2009. (TD86, TD120) 2. Quality management and delivery of assessment feels fragmented across units and years within the MB ChB programme. We heard that the School has an annual programme review group that reviews reports submitted by each unit and external examiners reports, but the School must establish a single entity responsible for the quality management and delivery of assessment. (TD40) 3. The School requires a coherent approach to the assessment of outcomes in the category 'doctor as a professional'. Students were able to tell us where they were taught about professionalism but not how they were assessed. (TD112) 4. Assessment items are not blueprinted to Tomorrow's Doctors (2009) and item banks are spread across units which may lead to variation and duplication of questions. The School should have one central bank which must map directly to Tomorrow's Doctors (2009). We heard that assessments map to intended learning outcomes of the individual units. (TD112)
Recommendations	<ol style="list-style-type: none"> 1. The School would benefit from a further comprehensive psychometric justification for the use of long cases to ensure

	genuine reliability. (TD120)
Additional Findings	<ol style="list-style-type: none"> 1. The School has an effective and coordinated approach to reasonable adjustments. Students were able to clearly tell us how they could get any additional support they required. 2. The School would benefit from a coordinated and coherent approach to feedback and formative assessment of students. Students reported that formative OSCEs and feedback were variable depending on the tutor as they are responsible for coordinating this.
Monitoring	The School will need to report on what actions it is taking regarding the requirements listed above in the 2015 Medical Schools Annual Return.

Response to findings	Name of person responding on behalf of checked organisation: Professor David Cahill
Requirements	A response to the requirements will be provided in the 2015 Medical Schools Annual Return as requested above.
Recommendations	A response to the recommendations will be provided in the 2015 Medical Schools Annual Return as requested above.