

Action Plan for Bristol Medical School, University of Bristol

Requirements

Report Ref	Due Date	Description	Action taken by medical school to date	Further action planned by the medical school	Timeline for action (month/year)	School lead
BMS1	May 2017	The school must clarify further how future intercalating students will integrate and transfer into the new curriculum.	We have planned a bespoke teaching block, modelled on our successful 'Learning in the Hospital Environment (LiTHE)' programme – retitled Learning in the Healthcare Environment. It is intended that this will be delivered in the summer term 2019, i.e. after completion of intercalated degrees and before students enter Year 3 of the new curriculum. In addition to (MB21)	A detailed programme of the transitional LiTHE module will be developed in consultation with staff offering intercalated degrees. Dates and timetabling will be confirmed during the next Academic year and communicated to the students well before they choose their intercalation subjects in January 2018. This falls	Oct 2016 Plenary session and FAQs for 2016 Entrants. Ongoing sessions timetabled October 2016 Appointment of a dedicated member of the MB ChB Senior Management Team to follow this cohort	John Henderson/Eugene Lloyd (MB21 Programme Directors: Curriculum Development) Justin Morgan and Eamonn Kelly (Co Chairs MB21 Year 3 Development Group) Anthony Kerry

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			<p>preparation for teaching in the Academies, this will include supported learning, including application of previously acquired knowledge, in the Case-based Learning (CBL) approach.</p> <p>Much of the structure of Year 3 will remain unchanged as students will be in Academies learning about common medical and surgical problems in acute, chronic and community settings. The emphasis on learning will shift to patient pathways and the curriculum delivery will include CBL and central delivery of underpinning biomedical science, which will inevitably revisit some topics previously covered but embedded in a clinical context.</p> <p>These changes have been</p>	<p>under the remit of our MB21 Year 3 Development Group</p> <p>A member of the MB ChB Senior Management Team to follow this cohort through the programme</p> <p>This cohort of students will be introduced to the process of Case Based Learning through voluntary sessions to pilot our cases as they are developed.</p> <p>This cohort will benefit from the introduction of Progress Testing during their second year at medical school to help familiarise them with the concept.</p> <p>A detailed timetable of Year 3 teaching and learning in the Academies is in development. This is</p>	<p>through the programme</p> <p>November 2016 through to 2018 Pilot CBL sessions</p> <p>Feb 2017 Production of detailed transitional programme</p> <p>2017/18 Academic year Introduction of Progress Testing</p>	(LiTHE organiser)

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			communicated to our 2016 entrants through a plenary session and through distribution of a Frequently Asked Questions (FAQ) factsheet providing contact details for further information/ There is ongoing dialogue with the student body through our medical student society (Galencals) and our Student Staff Liaison Committee.	mapped to intended learning outcomes for the Year, including Helical Themes, in the context of progression to Outcomes for Graduates.		
BMS2	May 2017	The school must improve the reliability of the long case clinical assessments.	The long cases has been retained as part of the Clinical Competence Assessment in year 5 because of the wish to emphasise to students the importance of being able to undertake a complete history and examination of a patient, as will be required of them as foundation doctors. It is recognised that a	If the reliability of the Long Case is not improved, in 2017/18 the long cases will become formative only. This change will be possible because the School has a new summative assessment of clinical skills at the end of year 4: a 16 station OSCE. The current cohort of students in their final year of the MB ChB	October-December 2016 - Training for staff May 2017 – decision will be made by the Medicine Assessment Group as to whether the Long Case will be made	Dr Andrew Blythe, Director of Assessments

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			<p>Cronbach's alpha of 0.64 is a little low for a high stakes summative assessment. For 2016-17 changes have been made to the Clinical Competence Assessment aimed at improving its reliability. Specifically, the number of global descriptors for each component of the Clinical Competence Assessment is reduced from 5 to 4. Instead of fail, borderline, clear pass, very good and outstanding, the new descriptors will be clear fail, borderline fail, clear pass and very good.</p> <p>New training sessions for examiners have been held throughout October with one final session being scheduled for December.</p>	<p>programme sat this OSCE in June 2016; Cronbach's alpha was 0.75. This OSCE is set to become the main assessment of clinical competence in the new curriculum (MB21).</p>	<p>formative only in 2017/18</p>	

Recommendations

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BMS1	November 2017	The school should ensure adequate quality of feedback to students on portfolio work to support their learning and development.	<p>This recommendation is in keeping with our own internal audit of assessment and feedback processes and was prioritised at the Annual Programme Review in September 2016. Therefore, all teaching staff have been instructed to provide students with individual, face to face feedback on their portfolios twice during each unit of study in Years 3 to 5 (typically 9 weeks long): once midway through the unit and again at the end.</p> <p>Training for teaching staff is currently in progress and we will be monitoring the delivery of feedback.</p>	For 2017-18 it is intended that portfolios will be standardised across the programme so that the feedback is more consistent and supports students' learning.	<p>October - February 2017 – Ongoing programme of staff training.</p> <p>October – July 2017 Monitoring of delivery of feedback</p> <p>May 2017 - Decision on standardised portfolios for 2017/18 to be made by Medical Assessments Group</p>	Dr Andrew Blythe, Director of Assessments

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