

Check	Cardiff University School of Medicine
Date	14 October 2014
Programme	MBBCh
Team Leader	Professor Stewart Petersen
Visitors	Dr Ahad Wahid
GMC staff	Kate Gregory Greg Liang Jean-Marc Lam-Hing
Purpose of the check	<ol style="list-style-type: none"> 1. We last conducted a full visit to Cardiff University School of Medicine (the School) in December 2011 as part of the Wales regional review. At the time of the visit, we noted several items of good practice and raised three requirements and ten recommendations relating to assessment and student support. 2. At a subsequent exam board observation in June 2012, we raised two further recommendations relating to exam board protocol and the administration of assessments. 3. The main purpose of this check was to review the progress made since the visits in 2011 and 2012 and close any open recommendations and requirements if appropriate.
Summary	<ol style="list-style-type: none"> 4. In 2013 the School changed its assessment strategy and began the staged implementation of a new integrated curriculum 'C21' (Cardiff 21st century). 5. The main aims of C21 are earlier and longer clinical placements, greater integration of basic and clinical sciences, and the use of a broader range of teaching and learning methods. Years 1 and 2 are organised around core science and clinical practice. Years 3 and 4 are organised around patient pathways and the learning of increasingly complex clinical skills. Year 5 of the course is aligned closely with the first year of the Foundation Programme and is spent almost exclusively in long clinical placements and student assistantships. 6. Students, foundation doctors and teaching staff we met were

	<p>universally enthusiastic about the staged implementation of the C21 curriculum.</p> <p>7. Since our last visits in 2011/12, the School has worked very hard to satisfy the recommendations and requirements we set and we were pleased to advise the School that these can now be closed.</p>
Concerns	None
Good practice	<p>8. Harmonisation – the School is working effectively in partnership with the Wales Deanery and NHS partners on a number of projects including student transitions, curriculum planning and student support.</p> <p>9. Support for students needing reasonable adjustments and students who are in difficulty is comprehensive and innovative.</p>
Recommendations	10. The School could benefit from a more comprehensive approach both to the evaluation of the new course and its ongoing quality management, considering areas beyond just student reaction.
Additional Findings	<p>11. This is a forward thinking and ambitious medical school which aspires to improve its scores year on year in the National Student Survey 'in order to compete with the best schools in the UK and produce world-class graduates and teachers'.</p> <p>12. Students and F1 doctors we met spoke highly of the support offered to them by the School. There are three mechanisms of support for students including academic mentoring, personal mentoring and Medic Support which provides and sources tailored support for health, complex social, personal and exam performance issues. Case managers are assigned to support students during their time with the service.</p> <p>13. We support and encourage the collaboration of the School, the Wales Deanery and NHS partners on a number of 'harmonisation' projects which they believe will produce high calibre junior doctors. The principal aims of harmonisation are:</p> <ul style="list-style-type: none"> • Responsibility in a supervised and safe learning environment • Continuity of contact with clinical teams • Strengthening, deepening and contextualising learning • Learning about process of healthcare and the role of health professionals <p>14. Students and foundation trainees we met advised us that the School is responsive to their evaluations and makes every effort to keep them informed of changes made to the programme through <i>Dean's question time</i> and various workshops. Whilst this is to be commended, we found that quality management of the C21</p>

programme could be more extensive and the School should look into building in more robust systems to plan, implement and review enhancements or changes to the curriculum and assessment or their delivery.

15. As per the 2014 Assessment Audit report findings, we were able to confirm that the School's assessment strategy is robust and the roll out is progressing well.
16. The University has been working with the School in order to help minimise the workload of the assessment team and reduce risk. The School no longer uses local assessment databases and now results are processed through the central University data management system. This system appears to be working well and the School reported that there were no errors with the storage and distribution of results in Year 5.
17. The School has good plans to include inter-professional learning in all years of the programme and expand learning opportunities with other Schools of Health at Cardiff. We heard about plans for Year 1 students to work alongside colleagues from the School of Pharmacy and Year 4 students to work with midwives. We support this initiative and look forward to seeing how it develops.
18. Foundation trainees we met who had recently graduated advised us that the revised final year had prepared them well for their clinical practice. This is supported by the Schools F1 survey results which demonstrate that almost 80% agreed or strongly agreed that they felt adequately prepared for their foundation posts.

Monitoring

The School will need to report on what actions it is taking regarding the recommendation listed above in the 2014 Medical Schools Annual Return.

Response to findings	Name of person responding on behalf of checked organisation: Professor Nicholas Topley, Dean of Medical Education
Good practice	The School welcomes the recognition of the examples of good practice and will be pleased for them to be used as an example of good practice for other Schools.
Recommendations	A document outlining an extensive programme of evaluation will be attached as part of the MSAR return for December 2014.