

## Review of Lancaster Medical School

This visit is part of a regional review and uses a risk-based approach. For more information on this approach see <http://www.gmc-uk.org/education/13707.asp>

### Review at a glance

#### About the School

<b>Programme</b>	Medicine and Surgery MBChB
<b>University</b>	Lancaster University
<b>Years of course</b>	5 year MBChB
<b>Programme structure</b>	<p>The programme is divided into three phases:</p> <p>Year 1: Foundation of Medicine</p> <p>Students are introduced to key concepts in biomedical and social science, and learn about normal structure and function of the human body. They receive a thorough grounding in basic clinical skills (examinations, procedures and techniques) and undertake extensive communication skills training to prepare them for patient contact in years 2-5.</p> <p>Years 2-4: Learning to diagnose and manage illness</p> <p>During year 2 students build on the knowledge acquired in year 1 and begin their clinical placements in hospitals and the community which continue throughout the course.</p>

	<p>The special study modules (SSMs) and problem based learning (PBL) introduced during year 1 continue throughout this phase. During year 4 students complete an elective and undertake their final examinations. Year 5: apprenticeship style, intensive clinical experience.</p> <p>In year 5, students undertake five clinical attachments, two of which are Selectives in Advanced Medical Practice (SAMPs). Students can choose to undertake SAMPs in a wide variety of different clinical specialities, providing them with the opportunity to explore different potential medical careers during the course of their undergraduate degree.</p>	
<b>Number of students</b>	268 (2013 MSAR)	
<b>Number of LEPs</b>	2 acute hospitals, 2 mental health trusts and 33 GP practices	
<b>Local Education and Training Board (LETB)</b>	Health Education North West	
<b>Last GMC visit</b>	2013 New schools	
<b>Outstanding actions from last visit</b>	<b>Open requirements:</b>	<b>Update:</b>
	<p>The School must improve access to careers advice which is currently based in Liverpool.</p>	<p>Progress in this area was reported in the 2012-13 visit report. A careers adviser has been in post since August 2013. There are plans to run workshops with consultants at the Trust. Working with careers lead at HENW.</p> <p>This requirement has been met.</p>

	<p>The School must monitor and review the clinical experience for students at its LEPs in the light of any restructuring or reorganising of the LEP.</p>	<p>The timetable for consultation on reconfiguration of services has been delayed. Both the detail and timing of any reconfiguration is currently unclear.</p>
	<p>The School must ensure that it has management structures that involve individuals with an appropriate range of experience and knowledge.</p>	<p>The School is well managed by a committed and cohesive team.</p> <p>This requirement has been met.</p>
	<p>Any revisions to the Lancaster curriculum or assessment system must be approved by both schools in good time to allow for amendments to be made before students begin the next academic year.</p>	<p>The curriculum for Year 1 is now Lancaster's and has been formally approved. Minor changes have been made to Year 2 and only structural changes to year 3.</p> <p>This requirement has been met.</p>
	<p>The project plan must be developed in detail and include quantified interim outcomes to be monitored by the schools.</p>	<p>Detailed decoupling plans have been developed with Lancaster and are reviewed at regular decoupling meetings.</p> <p>This requirement has been met.</p>
	<p>A formal communication strategy must be developed to keep students and staff up to date on the progress of the decoupling and the potential implications for them.</p>	<p>A formal communication strategy has been developed and implemented.</p> <p>This requirement has been met.</p>

	<p>Lancaster must ensure that there is clarity around succession planning to ensure the future expert leadership and management of education strategy, development and delivery required to establish an independent medical school.</p>	<p>The post of Professor and Head of Medical Education was advertised earlier in the year but no appointment was made. Further approaches and discussions are being held. The current leadership remains in place with a new Faculty Dean to be appointed.</p>
	<p>Quality management procedures for community placements must be formalised and monitored. The outcomes must be recorded and shared with the practices.</p>	<p>There has been initial progress in the development of quality management for community placements. It is recognised this is not yet fully embedded.</p>
	<p>Continued monitoring and reporting of progress in the development of assessments for years 1-3, including contingency planning in case of failure to produce sufficient numbers of quality assured items.</p>	<p>The School has made significant progress in the development of assessments for years 1-3. See <a href="#">area of improvement 1</a></p>
	<p>The school must provide an assessment blueprint that shows in detail how the assessments used map against the individual curriculum objectives, rather than higher level themes. This should show sampling strategy and define how validity will be demonstrated and how a reliable result will be arrived at.</p>	<p>Assessment blueprints have been developed for the individual exam papers.</p>

	The School should provide anonymised documentation at the Year 5 Final Exam Board.	Summary documentation for the exam board will be anonymised.
	The student handbooks for 2013/14 need to be completed in time for the start of the academic year as these had not been completed at the time of the School visit in June 2013.	All of the student handbooks required for 2013-14 were completed and provided to students at the start of the academic year.  This requirement has been met.
	<b>Open recommendations:</b>	<b>Update:</b>
	School should ensure consistency of the clinical mentor scheme.	The School has ceased to administer the clinical mentor scheme.  This recommendation has been met.
	Students should be given more written guidance about the yellow card system and the implications for fitness to practice.	Information about the process is provided in the virtual learning environment (Moodle). Students are directed to the information through their handbooks.  This recommendation has been met.

	<p>The clinical case logbooks should be reviewed to ensure learning opportunities are not missed.</p>	<p>Revisions have been made to the logbooks to require students to reflect on feedback from staff and identify further learning needs. The year 2 and year 5 students told us there have been improvements since last year.</p> <p>This recommendation has been met.</p>
	<p>The School should explore partnerships with other LEPs in order to supplement student experience in some specialties and to mitigate for changes to placement capacity at UHMBNFT.</p>	<p>The School has held discussions with Blackpool Teaching Hospitals NHS Foundation Trust to secure additional Year 5 placements. Discussions are continuing with the Cumbria Partnership NHS Foundation Trust to explore further placement capacity in specific areas.</p>
	<p>The School should give students more detailed feedback on the formative OSCE.</p>	<p>The School is rolling out iPads for all OSCE marking from this year. Meetings and training sessions have been scheduled for the assessors. This recommendation will be followed up in future quality assurance activity.</p>

	<p>Consideration should be given to producing a regular bulletin to update teachers and students about the decoupling process.</p>	<p>Decoupling communication is now published in the Morecambe Bay Journal (a local medical journal) several times a year. An update on decoupling is provided each month at the learning and teaching committee.</p> <p>This recommendation has been met.</p>
	<p>Consideration should be given at FGH as to the use of alternative means of inclusion such as using video conference facilities to maintain relationships with the School.</p>	<p>The School is hopeful that a Deputy Director of Undergraduate Medical Education, to be based at Furness General Hospital, will be appointed in January 2014.</p> <p>This recommendation will be followed up in future quality assurance activity</p>

### About the visit

<b>Visit dates</b>	6 November 2013
<b>Sites visited</b>	Lancaster University
<b>Areas of exploration</b>	Decoupling plans, succession planning, curriculum, assessment, staffing, reconfiguration of UHMBNFT, careers advice, transfer of information to foundation
<b>Were any patient safety concerns identified during the visit?</b>	No
<b>Were any significant educational concerns identified?</b>	No

Has further regulatory action been requested via the responses to concerns element of the QIF?

No

## Summary

- 1 The north west of England has been chosen as the region for review in 2013-14 and all three medical schools have been visited as part of the review. The Liverpool and Lancaster visit team visited the Lancaster Medical School (the School), in November 2013. Currently around 50 students per year study at Lancaster and receive a University of Liverpool degree, but a process is underway for Lancaster to separate from Liverpool and deliver its own programme and primary medical qualification (PMQ). Lancaster was previously visited by the GMC in June 2013 and is under review as part of the decoupling process from Liverpool University.
- 2 We noted the continued enthusiasm and commitment of the senior management team and were impressed by the progress made by the School in many areas since the last visit. We recognise that student support remains a key positive feature of the School. The students we met told us they are very well supported by the academic staff. It was highlighted that the relatively small size of the School means that the staff know each student by name. The year 5 students we met told us they feel well prepared for their foundation year one (F1) training.
- 3 Below we have highlighted one particular area of good practice. A number of areas of good practice were identified and reported after the last visit to Lancaster and we recognise that the School has maintained and developed these areas.

## Areas of good practice

We note good practice where we have found exceptional or innovative examples of work or problem-solving related to our standards that should be shared with others and/or developed further.

Number	Paragraph in <i>Tomorrow's Doctors (2009)</i>	Areas of good practice for the School
1	152-153	The public and patient involvement in the development of the curriculum.

### Good practice 1: The public and patient involvement in the

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## development of the curriculum.

- 4 Lancaster is continuing work to develop its own curriculum for years 2-4. The curriculum management team advised us of various initiatives to increase the involvement of both patients and the public in the delivery of the Lancaster curriculum. The School involved a local charity to develop teaching about disability in year 3. The charity has worked with the school to develop a workshop for the students which is facilitated by service users who have learning disabilities.
- 5 The School has also collaborated with the Expert Patients Programme (EPP), a national group offering courses for carers and patients with long-term health conditions to manage their conditions better. With EPP, a workshop has been developed and is delivered by carers of patients who have profound multiple disabilities, in which they can share their experiences of healthcare.
- 6 There is also teaching delivered by a local organisation and it is felt by the School that this enhances the learning experience.
- 7 The School is continuing to develop patient involvement further. We heard there are plans to expand 'Real patient problem based learning' which has so far been piloted in community and psychiatry. In some areas this is known as case based learning involving groups of students focussing on specific cases, rather than derived, written for the purpose scenarios. Case based learning is more structured and led by the teaching staff.

## Areas of improvement

We note improvements where our evidence base highlighted an issue as a concern, but we have confirmed that the situation has improved because of action that the organisation has taken.

Number	Paragraph in <i>Tomorrow's Doctors (2009)</i>	Areas of improvement for the School
1	86	The School has made significant progress in developing assessments for years 1, 2 and 3.

2	111	The School has improved the timeliness of feedback to students on their SSM so that 95% of marks are returned within four weeks of submission.
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**Area of improvement 1: The School has made significant progress in developing assessments for years 1, 2 and 3.**

- 8 We set a requirement for the School following the visit in June 2013 regarding the development of assessments for years 1-3. Since the visit, the School has provided regular progress reports to us. We were pleased to find that the School is meeting its milestones and plans for assessment development. All of the papers required for the formative exams during this academic year have been completed and quality assured on schedule.
- 9 The Director of Assessment provided a demonstration of Rogō, the University of Nottingham e-Assessment management system software the School is using to create assessments. This system also allows the assessments to be completed online by the students. The School continues to work on assessment development, with all of the summative papers to be set by March 2014 and the papers for resit exams to be set by May 2014. We will explore this further during the future quality assurance activity at the School.

**Area of improvement 2: The School has improved the timeliness of feedback to students on their SSM so that 95% of marks are returned within four weeks of submission.**

- 10 We previously reported hearing of delays in providing SSM feedback to students, in some cases of up to several months. Lancaster has been able to reduce the turnaround time to within four weeks in 95% of cases. The remaining 5% are escalated and returned within five weeks. The School management team advised us they have now taken over responsibility for moderation of SSM marking from Liverpool. We heard that the marking sheets have been simplified, with a clear space provided for feedback comments. Training sessions in the process were held with the SSM convenors at the LEP and the university. An email was also sent to the convenors to remind them of the changes.
- 11 The year 1 and 2 students we met reported receiving feedback on their SSMs within a month. However, we heard from some students that there was still some variability in the marking and quality of feedback received. For example, there is a perception that the marking scheme is general

and broad. The students told us they have heard differing views from the convenors about the level at which a distinction may be given. The students were concerned about the impact this may have on their Educational Performance Measure (EPM) and ranking within the cohort which could impact on their applications to the foundation programme.

## Requirements

We set requirements where we have found that our standards are not being met. Our requirements explain what an organisation has to address to make sure that it meets those standards. If these requirements are not met, we can begin to withdraw approval.

Number	Paragraph in <i>Tomorrow's Doctors</i> (2009)	Requirements for the School
1	28 (e)	The School must ensure that all students are aware of and able to follow the process for raising patient safety concerns when on clinical placements.
2	39	The School must develop an overarching quality management document which sets out a clear framework or plan for how it organises quality management and control including who is responsible for this.
3	112, 151, 155, 156, 157	The School must ensure the contingency plans for the decoupling from Liverpool University medical school continue to be feasible. The Lancaster curriculum must be mapped to the new Liverpool curriculum to ensure no students are placed at a disadvantage for assessments. Were the decoupling process be delayed or reversed, the Lancaster students would be required to take the Liverpool assessments in order to complete their studies.

**Requirement 1: The School must ensure that all students are aware of and able to follow the process for raising patient safety concerns when on clinical placements.**

**12** The year 5 students we met were uncertain about the process they should follow if they were to encounter a patient safety concern when on

a clinical placement. The students could describe examples of situations which may give rise to a concern and reflected on who they may be able to inform, should such a situation occur. Nonetheless, we were concerned that the students did not seem familiar with the formal processes in place to support them in this area.

- 13 This contrasted with the year 2 students who could clearly describe the process they would follow. These students told us they had been provided with the information during the introduction at the beginning of the academic year.

**Requirement 2: The School must develop an overarching quality management document which sets out a clear framework or plan for how it organises quality management and control including who is responsible for this.**

- 14 The School has previously provided a document which outlines the various quality management activities that are undertaken in different aspects of the programme. However, this document does not clearly set out the framework or overarching strategy. The School advised that quality management is embedded in all of their processes and it continues to develop its activities in this area.
- 15 Nonetheless, it is essential that a clear document is developed which sets out the framework and who is responsible for each stage. This will be helpful for both the School and stakeholders such as the LEPS to understand the purpose and importance of quality management activity. This will also provide assurances that the quality management activity encompasses the full MBChB programme.

**Requirement 3: The School must ensure the contingency plans for the decoupling from Liverpool University medical school continue to be feasible. The Lancaster curriculum must be mapped to the new Liverpool curriculum.**

- 16 We have received confirmation that a formal agreement is in place between the University of Liverpool and Lancaster University in the event of the decoupling process not being successful, for the Lancaster students to continue their studies, following the Liverpool curriculum, to obtain a Liverpool PMQ.
- 17 We recognise that much progress has been made in the decoupling process since the 2012 visit to Liverpool and that both Schools continue to monitor the plans and risks through the joint decoupling meetings.

- 18** As the two medical schools continue to develop their own curricula, both will need to ensure these contingency plans remain viable. If decoupling was not to succeed, consideration would need to be given, for example, as to whether students who completed year 1 of the Lancaster curriculum would be able to continue year 2 of the Liverpool curriculum. The School must ensure that the curriculum followed by each cohort of students will enable them to achieve all of the outcomes for graduates in *Tomorrow's Doctors*.

## Recommendations

We set recommendations where we have found areas for improvement related to our standards. Our recommendations explain what an organisation should address to improve in these areas, in line with best practice. No new recommendations have been set following this visit. There are a number of recommendations which remain open from previous visits and we will continue to monitor these.

## Acknowledgement

- 19** We would like to thank Lancaster Medical School and all the people we met during the visits for their cooperation and willingness to share their learning and experiences.

## Appendix 1: Sources of evidence

### Visit team

<b>Team leader</b>	Professor Paul O'Neill
<b>Acting team leader</b>	Dr Steve Ball
<b>Visitor</b>	Mrs Sue Hobbs
<b>Visitor</b>	Dr Matt Kirkman
<b>Visitor</b>	Professor Judy McKimm
<b>Visitor</b>	Dr Will Owen
<b>Regional Coordinator</b>	Mr Graham Saunders
<b>GMC staff</b>	Trish Raftery – Education Quality Analyst Tasnim Uddin – Education Quality Analyst

## Visit action plan

The document register (in appendix 2) gives more detail on the documents we reviewed.

Paragraph in <i>Tomorrow's Doctors</i> (2009)	Areas explored during the visit	Documents reviewed	People interviewed	Our findings
<b>Domain 1: Patient Safety</b>				
28(a)-(c)	Explore student awareness of guidance on ensuring only undertake appropriate tasks in which they are competent, and with adequate supervision.	Aug 04 Quality Management Reports	Students years 2-5	Standard met. Students aware of guidance.
<b>Domain 2: Quality assurance, review and evaluation</b>				
39	Explore the School's QM Strategy	Aug 03 Quality Management Strategy	Quality management team	Standard not met (see <a href="#">requirement 2</a> )
40-41	Explore QM of community placements	Oct 2013 Doc 3 Summary of community placement QM	Quality management team	Standard not met. (Progress made but not yet fully embedded - see open requirements)
42	Continue to monitor	Aug 07 Curriculum Map	Curriculum team	Continue to monitor curriculum

	curriculum development			developments
43b	Explore plans for future patient involvement in the programme and curriculum development	-	Curriculum team	Standard met (see 152-153 and area of <a href="#">good practice 1</a> )
43c	Explore with the School plans for tracking of graduates including feedback from employers	-	School management team	Standard not met. School has sought advice from HENW but unable to help.
44	Review the risk register		School management team	Standard met Continue to monitor as part of decoupling quality assurance activities.
49	Explore collection and use of evaluation in primary care	Oct 2013 Doc 3 Summary of community placement QM	Quality management team	Standard not met – see 40-41 above
52, 84, 106	Explore partnerships with LEPs, reconfiguration and breadth of curriculum	Previous requirement	School management team	See open requirements and recommendations. Reconfiguration plans delayed - Continue to monitor as part of

	coverage			decoupling quality assurance activities.
54	Explore QM of assessment development	Oct 2013 doc 6 Assessment item development	Assessment team	Standard met. QA of assessment items completed on Rogo.
55	Explore relationships with the faculty, School and university.	-	School management team	Continue to monitor as part of decoupling quality assurance activities.
<b>Domain 3: Equality, diversity and opportunity</b>				
-	-	-	-	-
<b>Domain 4: Student selection</b>				
-	-	-	-	-
<b>Domain 5: Design and delivery of the curriculum, including assessment</b>				
82	Explore curriculum development	-	Curriculum team	Standard met Continue to monitor as part of decoupling quality assurance activities
85	Explore feedback provided to students.	Previous recommendation. Student handbooks and logbooks	Assessment team	Standard met. Revisions made to handbooks – see previous recommendation.

86, 89	Explore development of assessments and blueprinting	Previous requirement Oct 2013 Doc 5 Assessment item development.	Assessment team School management team	Progress made but still work in progress. – See area of <a href="#">improvement 1</a> .  Continue to monitor development of assessments and blueprinting as part of decoupling quality assurance activities.
92, 93	Continue to monitor curriculum development	-	Curriculum team	Progress made but still work in progress.  Continue to monitor as part of decoupling quality assurance activities.
95	Explore variability in feedback for SSCs. Explore what training has been given to the convenors	Aug 07 Curriculum map	Curriculum team Students	Progress made but still hearing of variability. Training planned for convenors.  Continue to monitor as part of decoupling. quality assurance activities.
105	Follow up the consent process for students visiting patients at home (discussed during June 2013)	From previous report	School Management Team	Standard met.  This no longer forms part of the curriculum.

	visit).			
111	Explore feedback from SSMS, logbooks and GP placements.	From previous report	Assessment team Students	Standard partially met (see area of <a href="#">improvement 2</a> ).  SSM feedback timeliness addressed and improvements made to logbooks but will explore other areas as part of decoupling quality assurance activities.
119	Explore anonymising the exam board documentation for year 5	Previous requirement.	School management team Assessment team	Standard not met. See open requirements
<b>Domain 6: Support and development of students, teachers and the local faculty</b>				
125	Monitor capacity and development of careers advice	Previous requirement	School management team	Standard met See open requirements
126	Explore provision of pastoral support to students. How are students with mental health conditions supported?	Student handbooks	School management team Students	Standard met  Students happy with level of support. Confirmed awareness of counselling service within the university and the process for requesting reasonable

				adjustments.
<b>Domain 7: Management of teaching, learning and assessment</b>				
151, 155	Explore succession planning	Previous requirement	School management team	See open requirements – continue to monitor as part of decoupling quality assurance activities.
152-153	Explore public and patient involvement in the curriculum	-	Curriculum team	Standard met See area of <a href="#">good practice 1</a>
<b>Domain 8: Educational resources and capacity</b>				
161-165	Explore the potential reconfiguration at UHMBNFT and the impact on facilities and curriculum delivery. Explore progress in developing partnerships with other LEPs	Aug 02 Organisational risk register Aug 03 Quality Management Strategy	School management team Curriculum team	See open requirements and recommendations. Reconfiguration plans delayed - Continue to monitor as part of decoupling quality assurance activities.
<b>Domain 9: Outcomes</b>				
170, 171	Explore the curriculum and whether this meets the outcomes	NW deanery summary of visits QM Reports	School management team LEPs	Continue to monitor as part of decoupling quality assurance activities as the curriculum is

	for graduates.	Agreements with LEPs Contextual information documents.	Curriculum team	being developed.
172	Transfer of information to foundation. Explore collection and use of information about the subsequent progression of graduates	Aug 02 Organisational risk register	School management team	Standard not met. School has sought advice from HENW but unable to help. See 43c.

## Appendix 2: Document register

Document number	Document name	Description	Publication date and version	Source
Aug 01	Management and governance structures	Diagrams to represent a) Lancaster Medical School committee structure b) Lancaster Medical School organisation and reporting lines.	Committee structure diagram was previously submitted as part of doc 5.1 of the March 2013 set. This was a slightly revised version of doc 19.1 from the original Dec 2011 documents. The organisation chart was previously submitted as part of doc 19.2 in the original Dec 2011 documents – it has been brought up to date (6 August 2013)	LMS intranet
Aug 02	Organisational Risk Register	Joint Lancaster Liverpool Risk Register for the introduction of an independent medical degree at Lancaster, identified by GMC domains. Lancaster Medical School is also considered in the risk analysis carried out by the Faculty of Health and Medicine of which it is a part – the Faculty considers its risk register annually at one of the meetings of its Policy and	The joint risk register was originally submitted in March 2013. Since then two revised versions have been submitted (17 April 2013 and 29 May 2013). No further changes have been made since 29 May 2013.	LMS intranet

		Resources Committee. The Faculty risk register for 2012-13 is included here (see worksheet following Domain 8) – of particular relevance to Medicine are the risks in lines 4, 5, 13, 14, 22 and 23.		
Aug 03	Quality Management Strategy	No single strategy document exists due to the ongoing work to transfer QM responsibility to Lancaster from Liverpool. This document is made up of several previously submitted on quality management.	December 2011 application form; AP and SUPP documents in May 2012; documents in October 2012.	LMS intranet
Aug 04	Quality Management Reports	Reports on the Quality Monitoring Visits to the Royal Lancaster Infirmary (as part of UHMBFT) undertaken in February 2012 and March 2013. Action points are listed at the end of each report.	The report on the February 2012 visit has been previously submitted as part of document AP4, 1 May 2012.	LMS intranet
Aug 05	Equality and Diversity Strategy	Links to the University's Equality and Diversity web pages (part of the Human Resources site) including the link to the strategy document. Information about on-going redrafting by the University.	The strategy document was previously submitted in December 2011 (doc 24.1, domain 3)	Lancaster University web pages
Aug 06	Good practice	Examples of good practice identified in MSAR 2012 and Q9 of the contextual		

		information.		
Aug 07	Curriculum map	Explanation that curriculum map cannot be provided in document format due to on-going revision to take into account revised learning objectives.	Originally submitted as document 29.2 in December 2011. Explanation of further work submitted in May 2012 (documents AP11 a-h)	LMS intranet
Aug 08	Student Assistantships	Plans and guidance – as previously submitted in information about year 5. Learning outcomes as part of the PETA process. Evaluation via the exit survey.	Documents previously submitted with December 2011 application (year 5 handbook, portfolio, patient safety programme, exit survey).	LMS intranet. Moodle (future).
Aug 09	Assessment	Assessment Policy document (Aug 09.1) and Assessment Handbook (Aug 09.2) (both currently undergoing substantial revisions). Assessment blueprints as recently supplied.	The Assessment Policy document was supplied in December 2011 as doc 33.a.ii.1. The Assessment Handbook for 2011-12 was also supplied as doc 33.a.ii.2. Document Aug 09.2 is the 2012-13 version of the Assessment Handbook. The assessment blueprints were supplied on 25 July 2013 as docs July 13 AR.1 to AR.5.	LMS intranet. Moodle (future)

Aug 10	Statistical report on final examinations in 2011 and 2012	Data for three cohorts of 4 <sup>th</sup> year students at Lancaster showing number of students failing papers 1, 2 or 3, OSCE, LOCAS and as a percentage of the cohort. Liverpool equivalent statistics are also included. The reliability statistics are also included.	Some of this data was previously provided as Appendix 2 to the December 2011 document 12.1, Business Plan.	LMS intranet (access for those involved in assessment only)
Aug 11	Annual reports for 2011-12	Annual reports for years 1, 2 and 5 for 2011-12 are supplied here. The reports for years 3 and 4 will follow shortly (unable to access due to annual leave).	Annual reports in a similar format for 2009-10 and 2010-11 were submitted as part of the December 2011 application (docs 20AR1 to 20AR9).	LMS intranet
Aug 12	Key dates	12.1 Calendar for all five years in 2013-14. 12.2 Exam timetable for 2013-14.	Not submitted in this form before but a large amount of timetable information was submitted in December 2011 (domain 5 Q31).	LMS intranet, student handbooks, Moodle (future)
Aug 13	Agreements with LEPs	As originally submitted with December 2011 application form.	December 2011 application form and documents 12.5-12.11	LMS intranet
Aug 14	Access to VLE	Username obtained for GMC access to Moodle. Description of material in Moodle to provide links to handbooks etc as	N/A	Moodle; LMS intranet

		requested.		
Doc 17	GMC education Evidence report	Summary of the GMC evidence base for University of Liverpool Medical School	June 2013	GMC
Doc 18	North West Medical School Student Survey Summary	Results of the GMC survey of north west medical students in April-May 2013	June 2013	GMC
Doc 19	Letter to Lancaster University confirming contingency agreement	-	September 2013	Liverpool Medical School
Sept 2013 Handbooks	Handbooks from September 2013	Student handbooks for all years: Year 1 Communication for Medical Practice Tutor handbook 2013-14 Year 1 Handbook 2013-14 Year 1 Logbook 2013-14 Year 1 PBL tutor handbook modules 1.1 – 1.5 2013-14 Year 2 Clinical Logbook 2013-14 Year 2 Comms Student workbook 2013-14 Year 2 Handbook 2013-14 Year 2 PBL Guide (Tutor) 2.1-2.6 2013-14	September 2013	Lancaster Medical School

		Year 3 Clinical logbook 2013-14 Year 3 GP course Handbook 2013-14 Year 3 handbook 2013-14 Year 3 PBL Guide (Tutor) 2013-14 Year 5 Handbook 2013-14 Year 5 Pharmacy PSP Booklet 2013-14 Year 5 PSP Logbook 2013-14		
Oct 2013 Handbooks	Further Handbooks from October 2013	Lancaster Medical School Programme Handbooks years 1 and 2 2013-14  LMS Special Study Module Handbook 2013-14  LMS Year 2 Community Course Student Handbook 2013-14	October 2013	Lancaster Medical School
Oct 2013 Docs 1 & 2	QM reports	Quality visit reports for Cumbria partnership NHS Foundation Trust and Lancashire Care Trust	November 2012	Lancaster Medical School
Oct 2013 Doc 3	Summary of community placement QM	Summary of progress and plans	October 2013	Lancaster Medical School
Oct 2013 Doc 4	Lancaster University E&D Policy	University policy	October 2013	Lancaster Medical School

Oct 2013 Doc 5	Assessment item development	Table showing all exam items needed for 2013-14 and progress.	October 2013	Lancaster Medical School
Oct 2013 Doc 6	Year 2 GP/PM handbook 2013-14		2013	Lancaster Medical School
Oct 2013 Doc 7	GP sample service contract		2013	Lancaster Medical School
Oct 2013 Doc 8	Decoupling meeting minutes	Minutes of the decoupling group meetings with Liverpool University	April and September 2013	Lancaster Medical School
Doc 9 - 11	Correspondence confirming transfer of information documentation	Email to year 5 students about transfer of information to Foundation School; Details of TOI sent to year 5; receipt of documentation from the Foundation Programme Office	2013	Lancaster Medical School

## Appendix 3: Abbreviations

E&D	equality and diversity
EPM	Educational Performance Measure
EPP	Expert Patients Programme
F1	foundation year 1
FGH	Furness General Hospital
GMC	General Medical Council
GP	general practice/practitioner
LEP	local education provider
MB ChB	Bachelor of Medicine and Surgery
MSAR	Medical School Annual Return
NHS	National Health Service
OSCE	objective structured clinical examination*
PMQ	primary medical qualification
QIF	<i>Quality Improvement Framework</i>
QAA	Quality Assurance Agency
SAMP	Selective in Advanced Medical Practice
SSM	Special Study Module
UHMBNFT	University Hospitals of Morecambe Bay NHS Foundation Trust

\*See glossary (in appendix 4) for definition.

## Appendix 4: Glossary

OSCE      A type of examination to test clinical skill performance and competence in skills such as communication, clinical examination, medical procedures or prescription, exercise prescription, joint mobilisation or manipulation techniques, radiographic positioning, radiographic image evaluation and interpretation of results.