**Medical School Annual Return - Section B**
**GMC quality assurance items**

**This sheet is pre-populated with open GMC visit requirements and recommendations. Please provide updates on all items. Supporting documents and action plans may be required to evidence progress.**

| Item number | GMC item | Promoting excellence theme | Description of item | Date item was identified (DD/MM/YY) | How was the item identified? | Previous updates with additional information requested by the GMC | What actions have been taken to resolve the concern over the past 12 months? | What further actions have been planned to resolve the concern? | Deadline for resolution (DD/MM/YY) | Status | Person responsible | Supporting documents (if required) |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| QA9549 | **GMC visit recommendation** | Theme 2 Educational governance and leadership | The school should formalise relationships with HEKSS and local education providers. This will clarify the allocation of educational tariff funding | 28/05/2015 | 2015 GMC regional review of Kent, Surrey and Sussex | First SLAs just being implemented in Elderly medicine, Emergency Medicine and Palliative Medicine in May 2018 to review quality directly linked to tariff in 6 months time. New Quality and Placements team now in place and in discussion with HEE-KSS regarding the development of a formal QA framework.<br><br>GMC response: Thank you for this further update. It is obvious that you are making progress and we look forward to hearing more about the plans you have regarding the development of a formal quality framework. If in future you are able to include specific details of how you have been collaborating with HEE KSS we can consider closing this item. | | | 09/10/2018 | Progress being monitored | | |
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**Medical School Annual Return - Section C**
**Quality of medical education within the medical school**

**You should use this sheet to highlight concerns and areas of good practice within the medical school to us. The reporting thresholds in the guidance document would guide you for reporting.**

| Item number | Item type | Please list the years of students affected | Promoting excellence theme | Description of item | Date item was identified (DD/MM/YY) | How was the item identified? | Previous updates with additional information requested by the GMC (outstanding items ONLY) | What actions have been taken to address the concern or to promote the area of good practice over the past 12 months? | What further actions have been planned to address the concern or to promote the area of good practice in the future? | Deadline for resolution (DD/MM/YY) Concerns ONLY | Status Concerns ONLY | Person responsible | Engagement with deanery, HEE local offices or other organisations including healthcare regulators (if any) | Supporting documents (if required) |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| BRG1819-g001 | | | | | | | | | | | | | | |
| BRG1819-g002 | | | | | | | | | | | | | | |
| BRG1819-g003 | | | | | | | | | | | | | | |
| BRG1819-g004 | | | | | | | | | | | | | | |
| BRG1819-g005 | | | | | | | | | | | | | | |
| BRG1819-g006 | | | | | | | | | | | | | | |
| BRG1819-g007 | | | | | | | | | | | | | | |
| BRG1819-g008 | | | | | | | | | | | | | | |

**Medical School Annual Return - Section D**
**Quality of placements**

**You should use this sheet to highlight concerns and areas of good practice at student placements (education providers). The reporting thresholds in the guidance document would guide you for reporting.**

| Item number | Item type | Local education provider (if applicable) | Site (if applicable) | ODS/NSS code (if applicable) | Please list the years of students affected | Promoting excellence theme | Description of item | Date item was identified (DD/MM/YY) | How was the item identified? | Previous updates with additional information requested by the GMC (outstanding items ONLY) | What actions have been taken to address the concern or to promote the area of good practice over the past 12 months? | What further actions have been planned to address the concern or to promote the area of good practice in the future? | Deadline for resolution (DD/MM/YY) Concerns and GMC visit items ONLY | Status Concerns ONLY | Person responsible | Engagement with deanery, HEE local offices or other organisations including healthcare regulators (if any) | Supporting documents (if required) |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| BRG1015-29 | Concern | | RSCH | | 3 & 5 | Theme 1 Learning environment and culture | Issues with too many students attending the surgical wards | 01/10/2015 | Student Feedback | The issues around surgery and allocation of students has much improved – the teaching fellows altered the timetable and most importantly we have introduced the emergency week, which has helped a lot. We do need to continue to monitor the structured teaching that is delivered on the GI firm with slightly lower satisfaction scores than the other firms (but it is OK).. good feedback from the vascular firm and the urology firm<br><br>Update May 2018: A quality assurance visit to the Surgery Department at BSUH took place on 23 January. The visit included a meeting with a student representative, a tour of facilities and a meeting with the teaching lead and two other key members of the teaching team. Feedback/ findings included that the students felt the student handbook was confusing, the teaching team did not have a method of helping students to access informal learning opportunities, many of the surgery consultants had not attended the BSMS teaching support course and that card access to certain areas (eg. changing areas) was not working for students. These items would be followed up via student feedback and reviewed in due course.<br><br>GMC response: Many thanks for this comprehensive update. The original concern related to too mnay students attending the surgical wards. Has this issue now been resolved? With regard to the other issues that came out of the Jan 2018 visit, do you consider that these items need to be monitored via the MSAR or are you content that these issues can be monitored through your own QM processes? If the former I would suggest creating a new item. | | | | Concern created | | | |
| BRG2018-08 | Concern | | RSCH | | 4 | Theme 3 Supporting learners | Students felt that there was a lack of formal teaching within the Paeds rotation, and a reliance on student led seminars which had left them feeling unprepared for end of year exams. | 25/04/2017 | Quality Assurance visit | Update May 2018: Teaching content reviewed, particularly the delivery of the seminars, and the student- led component changed to paediatric team-delivered session – feedback improved as a result.<br><br>GMC response: Thank you for your update. Is any further action planned or can this item now be referred for closure? | | | | | Module Team | | |