

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)
QA10389	GMC visit recommendation	Theme 5 Developing and implementing curricula and assessments	The school should monitor the consistency of assessments carried out by supervisors.	28/02/2018	2017/18 GMC QAF National Review of Scotland - Glasgow School of Medicine	A - Double marking of scripts is now carried out in all three SSC blocks. B - Data on marks awarded in different blocks is fed back to all SSC supervisors to allow them to 'benchmark' their performance against other blocks. C - Now standard to feedback marks awarded to OSCE examiners – allows for self-reflection. Any significant 'outliers' must undertake training before being allowed to examine OSCEs again. We are reviewing the IT support in place for assessment. Enhanced software will facilitate quality control across SSC assessments as well as the assessments at the end of each clinical teaching block	We have run our first Educators' Day at the start of the academic year to train our clinical and educational supervisors in (among other things) assessment theory and methods. Feeding back performance on marks awarded in clinical exams will be facilitated once we have our electronic OSCE package fully functional (by end 2020). We have instituted a Certificate of Merit option for students in each clinical placement. We continue to monitor the rate of award of this to ensure equity across sites.			Plan in place	Head of UG Medical School	
QA10388	GMC visit recommendation	Theme 4 Supporting educators	The school should monitor time in jobs plans for undergraduate educators to ensure there is sufficient time for educational responsibilities.	28/02/2018	2017/18 GMC QAF National Review of Scotland - Glasgow School of Medicine	We are developing a contributors' database to ensure that we have a robust accessible record of all of our contributors to teaching and assessment feeding into recognition in individual job plans. Once the database complete, we will be in a position to have a fully informed discussion with the NHS Boards to ensure adequate provision of SPA time to consultants who have teaching and teaching administration roles and responsibilities	The Contributors' Database remains in development. This has evolved to ensure that all individual sessional contributions are recognised. We have advertised specific specialty and topic leads with remuneration taken from ACT monies. Additionally, where SPA time has been poorly provided for teaching we have been working with the DME t outline provision of specific teaching sessions funded by ACT allocation.			Plan in place	Head of UG Medical School	

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)
GLA1819-g001		All 5 years of the MBChB course		Enhanced Clinical Skills curriculum		Feedback from the students and staff		Integrated approach to enhance clinical skills curriculum	Continuing development of Clinical Skills curriculum overseen by our Director of clinical skills and ensuring clinical competencies rolled out coherently across the 5 years.			Clinical lead		
GLA1819-g002		All 5 years of the MBChB course		Online marking of all coursework		Feedback from the students and staff		All of the MBChB coursework is now marked online, providing quality feedback to our students	Investigation of move to a University-wide portfolio to ease with online marking			Year leads and Assessment team		
GLA1819-g003		MBChB3		Training courses for clinical teaching fellows and Case based learning tutors		Feedback from the students and staff		Training courses to enhance and standerise teaching skills of clinical teaching fellows and Case based learning tutors				Year 3 Leads		
GLA1819-g004		MBChB3, 4 and 5		Introduction of digital management workshops		Feedback from the students and staff		To engage with e-learning, and the introduction of digital management workshops in partnership with students to demonstrated the importance of digital professionalism to the students	Ongoing education and training as necessary for educational and clinical supervisors for use of Moodle and MyCampus			Year 3, 4 and 5 Leads		
GLA1819-g005		All 5 years of the MBChB course		Online feedback of exam performance		Feedback from the students		Online feedback of exam performance allowing students to reflect on their areas of strengths and weaknesses in terms of knowledge and understanding	Implementation of exam software will allow improved, more detailed feedback on OSCE performance			All year leads and Assessment team		
GLA1819-g006		All 5 years of the MBChB course		Quarantining for OSCE exams		Feedback from the staff		Students awaiting the OSCE examinations are now "quarantined" to avoid any possibility of collusion				OSCE Lead		
GLA1819-g007		All 5 years of the MBChB course		Wednesday afternoons freed from timetabled activities		Feedback from the students		Most Wednesday afternoons were freed from timetabled activities, allowing students time to establish a sustainable work life balance				All year leads		
GLA1819-g008		MBChB1		Improved MBChB admission interviewer training and feedback		Feedback from the students and staff		Improved training workshops were organised for the MBChB admission interviewers to ensure consistency and fairness in admission processes. The interviewers were also provided feedback about their performance during the interviews				MBChB admission team		
GLA1819-g009		MBChB3		Flipped-classroom case based reasoning approach to clinical attachments		Feedback from the students and staff		Introduced flipped-classroom case based reasoning approach to clinical attachments				Year 3 Leads		
GLA1819-g010		All 5 years of the MBChB course		Procurement of PRACTIQUE (electronic OSCE software)		Feedback from the students and staff		Procurement of PRACTIQUE to improve assessment analysis of OSCE performance	Roll out expected over 2020			Assessment Lead		
GLA1819-g011		MBChB3		Virtual learning environment in Year 3		Feedback from the students and staff		Introduced Virtual learning environment in Year 3 with micro lecture series and use of virtual patients	Will continue to be rolled out in the next academic year			Year 3 Leads		
GLA1819-g012		MBChB3		Introduction of Q&A sessions using SLIDO software		Feedback from the students		Introduced regular (every 5 weeks) Q&A sessions using the new SLIDO software to improve communication and allow us to address any student concerns in a timely manner				Year 3 Leads		
GLA1819-g013		MBChB1		Occupational Health training workshop		Feedback from the students and staff		A new Occupational Health training workshop was organised for the students				Year 1 Lead?		
GLA1819-g014		MBChB2 and 4		SSC – implementation of moderation process		Feedback from the students and staff		Implementation moderation process for SSC coursework marking to standerise and make the process fair for the students	Audit of processes and output will continue across all elements of the SSC programme			SSC Lead		
GLA1819-g015		MBChB3		Increased provision of formative assessment throughout Phase 3		Feedback from the students		Increased provision of formative assessment throughout Phase 3 to provide more continuous feedback to students	Reinforce principles of Clinical Reasoning by further training of our Clinical Teaching fellows and Consultants on the benefits and requirements for introducing CR in undergraduate education.			Year 3 Leads		
GLA1819-g016		All 5 years of the MBChB course		Professionalism		Feedback from the staff		Developing more placement based professionalism teaching with NHS Lanarkshire	Will continue to be rolled out in the next academic year			Head of Professionalism	NHS Lanarkshire	
GLA1819-g017		MBChB3, 4 and 5		Prescribing		Feedback from the students and staff		Efforts will be made for better integration into blocks and generally need to address how School examines prescribing as PSA is not the way to do it	Increase focus on prescribing in Medical and Surgical clinical placements.			Year 3, 4 and 5 Leads; Prescribing Lead		
GLA1819-g018		MBChB2		Improvement in students attendance data		Feedback from the staff		Attempts were made to have a paper-based method of recording attendance at practical classes.	We will continue to explore the implementation of electronic means of recording student attendance			Year 2 Lead		

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)
GLA201702	Concern	NHS Greater Glasgow and Clyde	Inverclyde		3rd and 4th year	Theme 5 Developing and implementing curricula and assessments	Review of feedback indicators identified that students in surgery were less than satisfied in respect of the level of teaching and organisation of the placement	01/08/2015	Review meeting of all data relevant to placements	School visit 7.6.16 and 22.6.16: Key recommendations were made in respect of induction, educational supervision, supporting educators, educational governance, supporting learners, and educational facilities Action Plan delayed for some time after multiple staff changes. Received in 17/18. Additional support has now been provided to the site (with subsequent very positive feedback) and documentation issues have been addressed. Issues are outstanding relating to job plans and teaching facilities. GMC feedback 17/18 - Improvements have been made, however there are still outstanding issues which need to be monitored, therefore agree with status. Please provide an update in the next MSAR.	We have changes team structure of Surgery across all sites, with identification of a new Lead for Surgery. This has allowed clearer separation between the Junior and Senior surgery blocks. Regular team meetings have taken place with representation from each of the surgical units. This has resulted in a marked upsurge in feedback scores from Surgery placements across the region. - almost uniformly green across the domains in early 2019-2020.		Progress being monitored	QA Lead			
GLA201705	Concern	NHS Greater Glasgow and Clyde	Queen Elizabeth University Hospital		years 4 and 5	Theme 5 Developing and implementing curricula and assessments	Routine visit to O+G on account of the large service reconfiguration and commissioning of a major new hospital	31/10/2015	Planned in response to the opening of the new site	School visit 16.12.15: The overall impression from students was of a positive experience and largely supportive consultants. The experience gained followed an apprentice style model which provided excellent one-to-one consultant contact. However, staffing issues in the unit, and a general lack of co-ordination and governance of the student experience were concerns. Recommendations were made in respect of administrative support, supervision, induction, teaching, adequate experience, and educational governance. An action plan and update in response to the visit was sought and has been provided by the site. This has shown that work is underway to progress action. The school will continue to work with the site to progress actions into 201718 Ongoing normal review through standard feedback procedures. There are new issues raised in feedback for the site around organisation and induction and the block leader has recently retired. The School is engaging closely with the DME on this and the Year 5 lead is actively working on the placement. Ongoing review in feedback with possible visits to be discussed at the new QA meetings, determined by progress. GMC feedback 17/18 - An action plan is now in place which will continue to be monitored. Suggest that the status is progressed to 'plan in place'. Please provide an update in the next MSAR.	New Lead for Obstetrics and Gynaecology appointed to provide oversight of ILOs and student feedback. Additionally we have identified some consultant sessions to provide an O/G Teaching week and ensure uniformity of educational experience among all final year placements. We will continue to monitor student feedback across the region.		Plan in place	QA Lead			
GLA201706	Concern	NHS Greater Glasgow and Clyde	Queen Elizabeth University Hospital		3rd and 4th year	Theme 5 Developing and implementing curricula and assessments	Routine visit to Surgery on account of the large service reconfiguration and commissioning of a major new hospital	31/10/2015	Planned in response to the opening of the new site	School Visit 14-16.12.15: Students had a lot of praise for the efforts of the lead educator. However, they felt the placement had the potential to be much better. Teaching and supervision time was not felt to be valued or protected within job plans placing unnecessary pressure on a small group of staff struggling to meet the needs of a larger student cohort. An area of good practice was the provision of a surgical 'taster week'. Recommendations were made in respect of induction, supervision, formal and experiential learning, educational governance and student support. An action plan and update in response to the visit was sought and has been provided by the site. This has shown that work is underway to progress action. The school will continue to work with the site to progress actions into 201718 Surgery feedback improved through 1617. The curriculum changed to try and improve for the 3rd year cohort by feedback identified key concerns with these changes. The School Quality Group discussed the issue in August 2017 and it was decided to continue review the placement as the curriculum was being readjusted and a new overall Surgery lead would be in place to support. Subsequent feedback has shown significant improvements but some issues are outstanding and close review will continue. The Site has identified student numbers as being the key issue with the 3rd year placement (due to start in March). GMC feedback 17/18 - An action plan is now in place which will continue to be monitored. Suggest that the status is progressed to 'plan in place'. Please provide an update in the next MSAR.	As above - We have changed team structure of Surgery across all sites, with identification of a new Lead for Surgery. This has allowed clearer separation between the Junior and Senior surgery blocks. Regular team meetings have taken place with representation from each of the surgical units. This has resulted in a marked upsurge in feedback scores from Surgery placements across the region. - almost uniformly green across the domains in early 2019-2020.		Plan in place	QA Lead			
GLA201707	Concern	NHS Greater Glasgow and Clyde	Queen Elizabeth University Hospital		3rd and 4th year	Theme 5 Developing and implementing curricula and assessments	Routine visit to Medicine on account of the large service reconfiguration and commissioning of a major new hospital	31/10/2015	Planned in response to the opening of the new site	School Visit 14.12.15: The students' emphasised the key issue was organisational - 'if everything happened it would be the best teaching and QEUH has the potential to give you an experience covering all areas within Medicine'. However, the visit identified significant concerns about the organisation of teaching. Recommendations were made in respect of induction, administration and communication, formal and experiential teaching, supervision and educational governance An action plan and update in response to the visit was sought and has been provided by the site. This has shown that work is underway to progress action. A review in December 2016 closed off all items on the initial DME action plan as complete with the exception of 2 related to job planning. These were carried forward to the updated DME Action Plan. Some smaller organisational issues were also raised, around access to clinics and the size of some teaching groups. An action plan and update in response to the visit was sought and has been received from the Board. Ongoing normal review through standard feedback procedures. New concern - issues around staffing in one of the medicine groupings were raised by students at the beginning of the 1718. The School and site were fully engaged with this issue and initial feedback suggests this has been addressed. GMC feedback 17/18 - Following the action plan implementation a new concern was identified, however this has now been resolved. Agree that this item should continue to be monitored to ensure no other concerns are identified. It would be helpful to have details of the action taken to resolve the staffing issues, Please provide an update in the next MSAR.	Medical feedback has improved significantly with clearer team structures and expansion of our ILOs for the early and later medical block placements. We have actively identified site Leads and SubDeans to ensure local management of the student experience.		Progress being monitored	QA Lead			

GLA201709	Concern	NHS Greater Glasgow and Clyde	Glasgow Royal Infirmary		3rd and 4th year	Theme 5 Developing and implementing curricula and assessments	Surgery and T&O: Significant issues raised through the year in terms of teaching, organisation and experience in surgery and orthopaedics. DME and HSD have acknowledged issues and arranged meetings to progress action.	01/08/2016	Ongoing quality review and annual quality review meeting with report from site	School visit to be scheduled early 2017. Following agreement with DME in response to work done in Summer 2016 the visit took place in June 2017. Jointly with PG. Feedback had significantly improved in both Surgery and MSK (PG category T&O is included here - the QA group decided the complete overhaul of MSK meant it could be removed as a potential trigger visit). Students were very positive about the placement, emphasising the broad experience they received across the specialty. Students felt supervisors were supportive in assessment but there were still issues around sign-off sheets, which not all used consistently. The site visit confirmed the student comments and it was noted that the lack of consultant oversight was a potentially significant concern in terms of developing the curriculum (the block is currently run by clinical fellows on a rolled-forward basis). An action plan and update in response to the visit was sought and has been requested from the Board and the DME confirms this should be with the School this month. The school will continue to work with the site to progress actions over 2016-17. NB dropdown list in Column P doesn't quite cover the correct response. GMC feedback 17/18 - An action plan has been sought and there is a plan in place to improve the placements. Agree with the status. Please provide an update in the next MSAR.	We have changed team structure of Surgery across all sites, with identification of a new Lead for Surgery. This has allowed clearer separation between the Junior and Senior surgery blocks. Regular team meetings have taken place with representation from each of the surgical units. This has resulted in a marked upsurge in feedback scores from Surgery placements across the region. - almost uniformly green across the domains in early 2019-2020.				Plan in place	QA Lead		
GLA201710	Concern	NHS Dumfries and Galloway	Dumfries		3rd and 4th year	Theme 5 Developing and implementing curricula and assessments	Surgery: New and repeated issues were reported this year. The site has engaged with this and offered a plan for next year, including the timetabling of formal teaching and the involvement of new teaching-engaged junior staff to improve the programme. An additional concern in respect of possible undermining has been received.	01/08/2016	Ongoing quality review and annual quality review meeting with report from site	Visit took place in March 2017. Students felt the pro-active student could benefit greatly from the opportunities offered but a student that needed more support would have greater concerns. Both noted the lack of formal teaching. Action plan produced and regular discussion/updates with the site. A new DME is also in place. Work done over the summer 2017 included putting additional support and formal teaching for students into place during the placement. Initial feedback in 2017-18 is positive, with red/amber flags dropped and an overall green flag noted. GMC feedback 17/18 - Action has been taken to try to resolve this issue. Agree with the status and we would hope this item can be closed in the next MSAR if the improvements are sustained. Please provide an update in the next MSAR.	We have changed team structure of Surgery across all sites, with identification of a new Lead for Surgery. This has allowed clearer separation between the Junior and Senior surgery blocks. Regular team meetings have taken place with representation from each of the surgical units. This has resulted in a marked upsurge in feedback scores from Surgery placements across the region. - almost uniformly green across the domains in early 2019-2020.				Progress being monitored	QA Lead		
GLA201711	Concern	NHS Greater Glasgow and Clyde	Royal Alexandra Hospital		years 4 and 5	Theme 5 Developing and implementing curricula and assessments	Ophthalmology: Recurrent issues were raised in respect of organisation of this placement	01/08/2016	Quality review meeting	Visit took place in January 2017. Students were very positive about the placement generally, and on some of the key staff interactions. Concerns raised were around Ophth assessment and some inconsistency of experience. The Educator team had already considered both issues and an action plan was already in place locally to address issues around the Ophth case assessment. DME plan was received and reviewed and outcomes also reviewed through standard feedback procedures. No new concerns raised. GMC feedback 17/18 - Action plan is in place and is being monitored. Agree with status. Please provide an update in the next MSAR.	We have identified a new Ophthalmology Lead to oversee the ILOs and student experience across the region. Structure of the attachment (shared with ENT) is in process of changing to accommodate an initial teaching week of both theory and clinical skills. We continue to monitor student feedback to assess the speed and extent of implementation.				Progress being monitored	QA Lead		
GLA201712	Concern	NHS Forth Valley	Forth Valley Royal Hospital		Years 3 and 4	Theme 4 Supporting educators	Medicine. The UG School attended a scheduled joint visit with the PG Deanery.	01/01/2017	Quality Review meeting - decision on scheduled visits, using PG Deanery Schedules.	Visit took place in February 2017. While students had a generally positive view of the placement, site and staff several issues came up during the visit process. Support for educators/job planning was the key concern for staff. Students raised concerns about the induction, the skew to certain specialties, access to clinics and IT. DME plan was received and reviewed and outcomes also reviewed through standard feedback procedures. No new concerns raised. Induction has been dealt with and the site has put a financial plan in place to offer sessions across several sub-specialties (not only in Medicine placements) GMC feedback 17/18 - Action plan is in place and is being monitored. Agree with status. Please provide an update in the next MSAR.				Progress being monitored	QA Lead			
GLA201713	Concern	NHS Forth Valley	Forth Valley Royal Hospital		Years 3 and 4	Theme 5 Developing and implementing curricula and assessments	Surgery The UG School attended a scheduled joint visit with the PG Deanery.	01/01/2017	Quality Review meeting - decision on scheduled visits, using PG Deanery Schedules.	Visit took place in April 2017. Students described a positive learning environment with a very supportive team on site. Their key concerns were around scheduling and how this impacted on access to clinical vs formal teaching. The Educator team were already developing ideas to address this at the time of the visit. Wi-Fi access is an issue around the site. DME plan was received and reviewed and outcomes also reviewed through standard feedback procedures. WiFi in the accommodation has now been fully implemented. No new concerns raised GMC feedback 17/18 - Improvements have been made, including access to wifi and an action plan is in place. Agree with status. Please provide an update in the next MSAR.	n/a			Progress being monitored	QA Lead			
GLA201714	Concern	NHS Greater Glasgow and Clyde/NHS Ayrshire and Arran	All Psychiatric Hospitals		years 4 and 5	Theme 4 Supporting educators	Psychiatry. The UG School initiated a scheduled visit to Psychiatry as a specialty. This covers 8 hospital sites across 2 NHS Boards (one hospital is in NHS A&A)	01/08/2017	Quality Review meeting decision on scheduled visits	The Educator element of the visit took place on 15th January 2018 - students will be interviewed on the 9th of February 2018. Initial concerns falling out from the Educator Panel focus on support for Educators, pressure on the Service and time in job plans. GMC feedback 17/18 - New concern. The school is mid-way through information gathering. Status should be changed to 'new concern identified'. Please provide an update in the next MSAR.	Plans with Psychiatry lead to ensure utilisation of capacity in Units with most time allocated for teaching and avoid overloading clinicians without specific SPA time for teaching.	Assess the provision of SPA time in individual units as we follow a similar programme in place in Medicine.		New concern identified	QA Lead			
GLA201715	Concern	NHS National Waiting Times Centre	Golden Jubilee National Hospital		years 4 and 5	Theme 5 Developing and implementing curricula and assessments	Review of feedback indicators identified that students in surgery were less than satisfied in respect of the level of teaching and organisation of the placement	01/08/2017	Ongoing quality review and annual quality review meeting with report from site	The Quality Group annual meeting noted a range of student concerns about the organisation and level of teaching during the placement. It was agreed to closely review the placement rather than triggering a visit at that point. Significant issues arose in the 1st couple of 1718 blocks due to delayed recruitment of key staff. The Board DME was closely involved in dealing with issues in contact with the Head of the UG School. Although some improvements have now been seen in block 3 into 4, and there is a local plan identified to enhance bedside teaching, the January Quality Group meeting agreed a visit was appropriate. A visit will take place in 1718. GMC feedback - New concern, however a plan is in place to conduct a visit. Status should be changed to 'plan in place'. Please provide an update in the next MSAR.	Ongoing evolution of the Cardiology Block (shared with Neurology) will include provision of a teaching week and inclusion of more dedicated consultant time in GJNH from Medical Cardiology.	Implementation of Teaching week.		Plan in place	QA Lead			