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)
N/A												

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)
HYK17-02		All	Theme 5 Developing and implementing curricula and assessments	Marking of Critically Appraised Topics took longer than planned with markers difficult to identify and appoint.	07/02/2017	Report from the Phase II Sub-Committee to the MBBS Programme Board	i) CAT markers now comprise clinical tutors (c 65% CATs) and HYMS academics (c. 35% CATs); ii) Students in Year 3 now take their first CAT during rotation 2 (not 1), to reduce the demand on students at the start of transition to Phase 2; iii) Students in years 3 and 4 now take their second CAT of the year during rotation 3, so that feedback on CATs is always received a long period before summer exams; iv) CAT submission and marking is carried out on the HYMS Virtual Learning Environment, increasing the monitoring of submission and marking timeliness, and allowing moderation of marking; v) markers have been set realistic marking deadlines. For the first CAT in 2017-18 all marking was returned to students in 17 working days; we are on course to repeat this for the second CAT of 2017-18. vi) CATs now have dedicated administrative support in HYMS, which has increased the efficiency of marking and moderation.	See supporting evidence Medical School Annual Return January 2019 : Section C : HYK1702	N/A	13.09.2018 (concern closed with report to MBBS Programme Board)		Head of Quality and Standards	N/A	See supporting evidence Medical School Annual Return January 2019 : Section C : HYK1702
HYK1819-g001	Good Practice	0	Theme 5 Developing and implementing curricula and assessments	A foundation year (Gateway to Medicine) was developed, which forms the first year of a 6 year MB BS programme. This programme is specifically marketed to applicants from a Widening Participation (WP) background, who are not predicted to attain the A-level grades to enter the standard 5-year MB BS programme, but have key attributes to study and practice medicine. Applicants from the Medical School's operational region are prioritised. The first cohort is due to start in September 2019.	27/06/2017	During the Medical School's expansion bid development, an identifed priority was to enhance local recruitment and the School's objective of increasing Widening Participation (WP) via the development of the gateway programme. A paper was initially presented at the Management Board in summer 2017, showing evidence of similar programmes offered by other Medical Schools. The intention to develop the programme was submitted as part of the expansion bid in November 2017. Discussions took place with Gateway Programme Directors from other Medical Schools, and they were very encouraging regarding the impact that this additional year has. Final approval was received in July 2018. Promotional strategies involving local schools were developed and a webinar held and website created. We worked with the Admissions teams both in the Medical School and at the University of York to ensure the new programme was on UCAS when the application cycle began.		The programme received academic and business committee approval. This involved external assessment, as is standard practice.	We are actively promoting the new MBBS programme with the Gateway Year at Open Days and locally (working with the Communications Team, the Student Recruitment and Admissions team) via various fora, including updates from the Dean in the Annual Monitoring visit /documents and our NHS Partnership Group.			Gateway to Medicine Programme Director	N/A	N/A
HYK1819-g002	Good Practice	01/01/1900	Theme 1 Learning environment and culture	The five year medical undergraduate programme is undergoing a period of expansion. This is in-line with national plans to increase the number of medical students which was announced in March 2017. The Year 1 intake in 2019 will be 220 students compared to the previous 141.	01/03/2017	Initially through government consultation. The allocation of places was notified in March 2018.		A project team and steering group were put in place to provide guidance. An Expansion project team was formed to scale up academic and placement requirements for the increase.	The teaching space on the York Campus will be redeveloped with a focus on providing appropriate space for the increased student numbers. Additional teaching space provision on the Hull campus is already in place.			Chief Operating Officer	N/A	N/A
HYK1819-g003	Good Practice	current Year 2 medical students	Theme 3 Supporting learners	Following an evaluation of the quality of the student experience at a Year 2 GP practice - and a mutual recognition that the practice currently lacked capacity to deliver the activities required - students were removed from a GP practice at the end of December 2018.	01/11/2018	Problems were identified as a consequence of (i) a query directed to all students on the quality of delivery of a planned activity (ii) a student-initiated concern raised with the Medical School about the quality of the placement.		As part of our active management, and embedded quality assurance of all Primary Care placements (as documented in our current Policy on the Quality Assurance of Primary Care Pac elements (2018) a site-visit was conducted by the School Primary Care team. All issues were explored and a decision was reached that the practice could not currently support placement requirements. Students have now been reallocated to a new placement with an established track record of delivering teaching. This process was completed within 4 weeks of the problems being first raised.	A new Service Level Agreement has been collaboratively created with students and primary care teaching partners. Requirements for teaching are comprehensively outlined for existing and future primary care teaching partners.			Director of Primary Care Educationj	N/A	N/A

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)
HYK17-03	Concern	Various	Various		Years 3, 4 and 5	Theme 1 Learning environment and culture	Student feedback suggested that a high number of teaching sessions were cancelled whilst they were on various clinical placements. The perception of students was that this had increased from previous years.	Autumn 2016	Student feedback predominately via surveys but also as part of our Annual Programme Review.	Cancellation logs were kept by each of the three largest partner Trusts. The number of instances where teaching sessions were cancelled without being rescheduled was low (i.e. less than 4%). Analysis of the data and follow up discussions with the students revealed that the issue was not actually that sessions were being cancelled (and rescheduled) but that the source of dissatisfaction was more when sessions were cancelled either at very short notice when the reason could have been foreseen, or with no notice.					Head of Quality and Standards		
HYK1819-p001	Good practice	General Practice providers	Multiple		4	Theme 3 Supporting learners	Following the successful introduction of a 16 week primary care attachment in Year 3 in 2015-16, Year 4 students have also moved from the 8 week attachment model to 16 weeks in 2018-19.	May-13	The notion of Phase II students being attached to one general practice for a Rotation i.e. 16 weeks was initially identified in the MBBS Curriculum Review 2013. The change was implemented in 2015-16 for Year 3 students. Implementation of the full Phase II Curriculum was paused until November 2017, when plans were approved by the MBBS Programme Board to complete implementation, including the move to 16 week primary care attachments.			Good practice sharing to take place with colleagues at national events such as the Heads of Teaching meetings.			Director of Primary Care Education		
HYK1819-p002	Good practice	Various	Multiple		3	Theme 1 Learning environment and culture	Clinical Teaching Fellows have been recruited by the main acute trust partners and one mental health partner organisation. Student and staff feedback regarding the impact of Clinical Teaching Fellows has been positive, particularly in relation to contributions around teaching seminars which were introduced in line with revisions to Year 3 teaching blocks in 2017-18.	2017-18	The good practice has been identified through student feedback and through Annual Monitoring Visit discussions with partner organisations' senior leadership teams.		Evidence of the good practice has been shared with partner organisations who haven't yet employed CTFs. This is encouraging some of those without CTFs to develop recruitment plans.	Link the CTFs across the sites by way of a support network for each other and to assist with their own progression through the role.			Director of MBBS	HEE local Quality Manager included in all Annual Monitoring Visit processes.	
HYK1819-p003	Good practice	General Practice provider	GP		3	Theme 1 Learning environment and culture	Longitudinal Integrated Clerkships (LICs) are due to be piloted in 2019-20 for a small group of Year 4 students. Students will be attached to a General Practice and follow patients on their journey through the healthcare system for a period of one year in the North of the Hull York Medical School operational region including new partners at Northallerton and South Tees.	Oct-17	Some preliminary discussion about introducing LICs had taken place and the Director of Primary Care Education attended the world Clinical Longitudinal Integrated Clerkships Conference in Singapore in 2017 to gather information and best practice.		Planning has been underway to develop relationships with partners who may be able to provide the LICs opportunities for students. The MBBS Programme Board approved the proposal in September 2018 to pilot a LIC in 2019-20.	Plans to implement the pilot LIC for 2019-20 will continue to develop, progress will be monitored and good practice will be updated on the 2019-20 MSAR and through local events with other partner provider organisations.			Director of Primary Care Education		
HYK1819-p004	Good practice	Various	All Year 4 clinical placement providers		4	Theme 1 Learning environment and culture	Introduction of revised study blocks in 2018-19 including new Acute Care placement. Student feedback overall in Year 4 has so far improved in End of Placement Surveys for the year to date compared to the same period in 2017-18.	Dec-16	A project team was formed in December 2016 to identify and implement the final elements of the 2013 Curriculum Review which had been paused.		Monitoring of student feedback to evaluate the success of the new Year 4 curriculum.	Continued monitoring to provide an end of year evaluation at the end of the academic year.			Phase II Academic Lead		
HYK1819-p005	Concern	Various	Year 3 and 4 clinical placement providers		3 & 4	Theme 3 Supporting learners	Student feedback scores relating to the 'Observation of history taking and examination' in the End of Placement Surveys in 2017-18 are significantly lower than all other scores.	Jun-18	Through end of the year analysis of Hull York Medical School student End of Placement Survey data.	N/A	Student feedback is shared on a placement by placement basis with operational and academic leaders. In addition, key items are shared annually with LEP senior management teams through the Annual Monitoring visit process to highlight issues / good practice. Awareness has been raised amongst clinical tutors through the student feedback processes and training sessions have been delivered. Scores have so far been higher in 2018-19.	The Medical School continues to share feedback on a placement by placement basis so that tutors and leaders can monitor scores. Tutor training supports this work and/or areas identified via surveys and the plethora of other student feedback mechanisms that are in pace e.g. focus groups, electronic suggestion box etc. Specific links to the observation of history taking and examination have taken place e and/or are planned for the academic year 2018-19 with for example Clinical Reasoning and Calgary Cambridge tutor development sessions.	End of Academic Year 2018-19 (improvement already seen in student End of Placement Survey feedback for the year to date)	Progress being monitored	Phase II Academic Lead (Years 3 and 4)	Annual Monitoring Visit reports shared with local Health Education England Quality Managers.	N/A