

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)
QA10214	GMC visit recommendation	Theme 2 Educational governance and leadership	The School should continue to implement and monitor the new concern form process, and evaluate to measure its effectiveness.	09/10/2017	2016/17 QAF Lancaster Medical School	The concern form has been renamed and is now called a 'Support Form'. The new process will be reviewed on an ongoing basis throughout the year with a full evaluation towards the end of the academic year to examine its effectiveness. The review will be led by the Fitness to Practise Lead and will involve lay and student input. The new process will also be an agenda item on the Staff Student Liaison Meetings. Appropriate actions seem to have been taken, and students have been included as part of this. As we do not yet know what the outcome of the evaluation is this should continue to be monitored.	<ul style="list-style-type: none"> The membership of the Good Medical Practise Decision Group has been reviewed to include a wider pool to call on for decisions on course of action. The membership of the Good Medical Practise Committee has been reviewed to include members from other University departments – Social Work and Computing. The flow chart on the Support Form has been reviewed and amended to be more transparent. The Support form is reviewed on an ongoing basis at the Good Medical Practise Committee meeting. Academic lead and professional service lead have review meetings in place for the FIP processes of LMS including the Support Form. The support form has been discussed at Staff Student Liaison Meetings, students are satisfied with and understand the purpose and process of the record of conversation and support forms. There has been no negative feedback and it has been perceived as a supportive and positive process. 	<ul style="list-style-type: none"> Ongoing and full review of all FIP processes. Extensive programme of training for those involved in FIP at all levels from staff using concern forms up to full FIP Panel members. Discussion forum planned for next Education Day to include academic, professional, lay and student stakeholders. 		Progress being monitored	Fitness to Practise Lead	
QA10215	GMC visit recommendation	Theme 3 Supporting learners	The School should consider making qualitative feedback mandatory for the Lancaster Clinical Assessment. Many examiners appear to be doing so already, so formalising this step should have little negative impact.	09/10/2017	2016/17 QAF Lancaster Medical School	The School has added mandatory feedback to examiner training and will update the examiner information pack and briefing for the 2018 LCA. A number of steps have been taken to address this. A further update following the next examiner feedback is required to judge the success of these.	All examiners provided written feedback for all students except for one examiner. This examiner was a new examiner, who did receive training and the pre-exam information, in addition to the 'on the day' examiner briefing which all include the requirement for written feedback. All examiners received feedback on their performance after the exams and a reminder was sent to all regarding the mandatory requirement for written feedback.	We will continue to monitor this and are exploring a technological solution on the i-pads to aid compliance.		Progress being monitored	Head of Clinical Skills	
QA10216	GMC visit recommendation	Theme 4 Supporting educators	The School should consider whether there is equality of access to online resources and access to course information for all clinical supervisors.	09/10/2017	2016/17 QAF Lancaster Medical School	A plan is in place but no action has been taken to date. Please provide a further update next year and include the timeline for the next steps.	We have just launched a new public facing primary care teaching website as a resource for GP tutors. It will allow all clinicians to have access to training resources and news to standardise educational practice and raise the quality of learning in all our placements website GPs	We will monitor the success of the primary care website		Plan in place	Community Lead	
QA10217	GMC visit recommendation	Theme 5 Developing and implementing curricula and assessments	The School should take steps to ensure that all examiners do not deviate from their script for the Lancaster Clinical Assessment with prompts or leading questions. This will promote consistency and parity of experience	09/10/2017	2016/17 QAF Lancaster Medical School	The School will update the examiner brief to be more explicit on this issue. Suitable plan in place. Will need monitoring to ensure issue is addressed.	This issue has been reinforced in examiner training, pre-exam information and on the day briefing. In addition, the presentation of and instructions for the three core questions have been simplified and are more explicit on the requirement for consistency of the core questions for all students in a station (in the context of their specific patient). Further guidance has been given on how examiners can use follow up questions to explore students' clinical reasoning in relation to the core questions. Observation/ listening in to station performance by staff and the external examiners found this to be working well with consistency between examiners and across sites	We are happy with the action taken to date and will continue to monitor examiners at the LCA.		Progress being monitored	Head of Clinical Skills	
QA4969	GMC visit recommendation	Theme 2 Educational governance and leadership	The role of patients in the quality management of the programme should be clearly defined.	03/09/2014	2016/17 QAF Lancaster Medical School	We continue to grow our public and patient involvement with recruitment events including having a stand at the County Show in Cumbria in September. Patients are also involved in assessment via the development of a new OSCE station and a lay person is always part of the team for our quality visits. Patients are recruited for the LCA and lay representatives sit on the Admissions Committee and contribute to the MMIs. Please continue to monitor the success of this involvement and feedback in the next MSAR.	In addition to the Medical School involvement previously reported, we have now added a lay representative to the membership of our Learning and Teaching Committee. We are currently developing our Patient Educator Group. This year they will be involved in teaching sessions with undergraduates in years 1 and 2 in the community, to help students develop information taking and imparting skills. As the group grows we hope to develop more involvement in later years sessions. Recruiting is currently occurring through GP surgeries but a new primary care teaching website will also become a portal for the general public. Members of the group will be trained and supported through the sessions by experienced local GPs	We will monitor the success of the Patient Educator Group.		Progress being monitored	Quality Lead	
QA8339	GMC visit recommendation	Theme 3 Supporting learners	The School's communication with students does not always appear effective and should be reviewed.	09/10/2017	2016/17 QAF Lancaster Medical School	We are seeking to appoint an academic member of staff as Communication Lead who will develop additional guidelines and a School strategy. We continue to improve communication, for example, we have delivered the elective information sessions earlier in the year (brought forward to May of Year 3 from Year 4) following feedback from students. Specific guidance on the new support form was delivered as part of the introductory sessions for each year group. The issues identified have only been partially addressed, but a plan is in place with various actions to take which will hopefully resolve this. This will need further monitoring once the plans have been fully implemented.	The Head of School and Director of Medical Studies have oversight of communications within the Medical School. Identification of a member of staff for the role of Communication Lead is ongoing and remains a priority for 2019. The Quality Manager continues to ensure timely responses to student feedback via 'You Said We Listened' on Moodle as well as the Staff/Student Liaison Committee Minutes.	The Medical School plans to identify a Communications Lead to develop a school strategy. The Quality Manager also plans to introduce a student newsletter at the start of each academic year to inform students of any changes within the Medical School.		Plan in place	Quality Manager	

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)
LAN1819-g001	Good practice	2	Theme 5 Developing and implementing curricula and assessments	Health Promotion - Schools Project	2017/18	NHS England's five year forward view highlighted the need to develop health promotion and disease prevention skills	N/A	The Medical School developed and delivered a module which ran in 17/18 and was presented to colleagues from other medical schools in the North West at the ASME North West Conference in May 2018.	Feedback from students and HEE was extremely positive and further engagement from schools is confirmed from January 2019.	N/A	N/A	Deputy Director of Primary Care	The project was funded by HEE for 2 years in the first instance. Positive feedback from HEE has indicated further funding is available.	
LAN1819-g002	Good practice	2	Theme 5 Developing and implementing curricula and assessments	Health Inequalities Module	2017/18	Identified as gap in learning which would develop students' sociological skills around health inequalities	N/A	The Medical School developed and delivered a six week health inequalities module drawing on the expertise of colleagues across sociology, primary care, psychology and data science. Teaching was situated within a social justice framework. Students were asked to design a community profile to address the design brief of planning to establish a GP Practice in a local area.	Student feedback was very positive and developments to the module, based on that feedback, are planned.	N/A	N/A	Director of Year 3		
LAN1819-g003	Good practice	5	Theme 5 Developing and implementing curricula and assessments	Community Placement	2017/18	Identified as gap in learning which would develop students' wider experience of the breadth of work that occurs in the community	N/A	The Medical school revised the Community Placement module in year 5 to include an extra day per week placed within a variety of community services. Students now spend 2 days in GP, 1 day University teaching, 1 day in various community settings and 1 day self study.	Feedback from students was overwhelmingly positive for the new format and students have been appreciative of the wider community experience.	N/A	N/A	Deputy Director of Primary Care	Additional funding provided from HEEN for placements	
LAN1819-g004	Good practice	1	Theme 3 Supporting learners	Study Skills Module 1 (formerly Special Study Module 1)	2017/18	Many students are arriving at university with fewer skills for independent study, particularly around academic writing and critical appraisal of resources. For medical students, though they are a high-achieving cohort, this has been a particular issue as many students have undertaken science-based A-levels with no coursework and may not have had assessed written work since GCSE level	N/A	The Medical School re-designed Special Study Module 1 (SSM1) to provide students with the skills they needed for written coursework as well as including other vital study and well-being related skills. Directly addressing the issue of assessment and feedback, the SSM weeks are themed, with workshops focused on finding and understanding relevant information, developing writing skills and putting writing skills into practice. Our aim was to improve the provision of students' independent study skills training and to enhance their learning experience	The Director of SSMS has reviewed the success of this revised module and will be implementing further enhancements, possibly to include some self-directed learning, to ensure the module runs smoothly with our additional student numbers.	N/A	N/A	Director of Special Study Modules		

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/NES 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)
LANC0516-01	Concern	University Hospitals of Morecambe Bay NHS Foundation Trust	Furness General Hospital and Royal Lancaster Infirmary	RTXB	All years	Theme 1 Learning environment and culture	During a Quality Monitoring Visit to UHMBFT on 14 April 2016, it was reported by students of undermining by clinical staff, mostly at consultant level in certain specialities.	14/04/2016		Issued resolved in conjunction with visit from Deanery, Deanery, School and LEP all worked together to address the concern. Continue to be monitored to ensure bullying/undermining does not return to the workplace.	Quality Manager has ensured the inclusion of questions in each survey to students regarding bullying/undermining and monitors responses. Should any issues be identified, the Quality Manager contacts the student to ask for further information. The Quality Manager is the only person who knows the identity of the student. Anonymity is maintained at all times unless specific permission has been given by the student. Issues identified are highlighted to the year lead who liaises with the LEP to resolve the issue. The log is closed by the year lead in the relevant You Said We Listened bulletin.	Continual monitoring via student surveys and student feedback as standard. Students involved in quality monitoring visits will continue to be asked about this issue at our visits and we will report to the LEPs.	17/18 Academic Year	Request for closure	Head of Lancaster Medical School		
LANC0515-01	Concern	University Hospitals of Morecambe Bay NHS Foundation Trust	Furness General Hospital	RTXB	year 2	Theme 3 Supporting learners	During a Quality Monitoring Visit to UHMBFT on 1 May 2015, it was reported by both clinicians and students that consultant cover was sometimes a problem at FGH due to gaps in substantive posts, and the smaller number of posts overall at the hospital. This was mainly a problem for year 2 sessions, and more so in Medicine than in Surgery. The clinical skills team ensures that the an alternative session is offered if a consultant's session is cancelled, but the impact is more to do with the fact that students need to be able to find consultants to present their cases to for signing off.	01/05/2015		We have amended the student logbook so that senior grades as well as consultants can sign off student cases. In summer 2016 two Consultant appointments were made as Clinical Skills leads. One is working mainly with Year 2 and the other with Years 3 - 5. Students have been encouraged to go to these Consultants to present cases as well as developing clinical skills. New staff have been employed in response to the concern identified, and senior grades can also sign off student cases now. Agree with the School the success and sustainability of these actions needs monitoring.	We continue to monitor the signing off of cases via student surveys and feedback from student representatives at the Staff/Student Liaison meetings. We have amended the student logbooks to include ST3 or above to help with signing off of cases. Students have found both of the Clinical Skills leads to be invaluable. Staffing at FGH, particularly in Paediatrics has been problematic in the past. However, the Trust is actively recruiting to appoint replacement posts to ensure no gaps.	Following recent feedback from the staff/student liaison committee, logbooks will be further changed to enable FY2 trainees to sign off some cases. Students should still ensure the majority of cases are signed off by ST3 or above where possible.	17/18 Academic Year	Request for closure	Quality Lead		
LANC0516-07	Concern	Blackpool Teaching Hospitals NHS Foundation Trust	Blackpool Victoria Hospital	RWSGJ	All years	Theme 3 Supporting learners	Whistleblowing, safeguarding and undermining and bullying should be included in student inductions.	09/05/2016		The School has liaised with BVH to ensure the content of the inductions includes whistleblowing, safeguarding, undermining and bullying. We have also included a question on this in our mandatory surveys to students. Steps have now been taken to improve the induction and this is being monitored through visits and student surveys. Please provide further feedback in the next MSAR.	At a quality monitoring visit in 2018, students were specifically asked about the inclusion of whistleblowing, safeguarding, undermining and bullying at BVH and whether this was part of their induction. The students confirmed this was part of their induction and were very aware how to report such issues. BVH sent a copy of their induction document to the medical school.	Continue to monitor via student surveys and student feedback as part of normal cycle. Students involved in quality monitoring visits will continue to be asked about this issue at our visits and we will report back to the LEP.	17/18 Academic Year	Request for closure	Quality Lead		