

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)
	GMC visit requirement	Theme 2 Educational governance and leadership	The BM(EU) management team must clarify to students what information is held on their personal files, who has access to it and which information is confidential.	16/05/2018	2017/18 QIF Southampton Faculty of Medicine- Kassel School of Medicine		Discussed informally with faculty student administration lead and Faculty Academic Registrar in Southampton. We see this as part of a wider bit of work in which we need to consider the student files in their entirety including access, appropriate information and clarity to students. The study counsellor at KSM has already established good relations with the senior tutors at Southampton and guidance on how to use the shared student files agreed.	Meeting planned with appropriate staff in Southampton with a view to establishing clear process for the use of the student files. This will include advice about the implications of the GDPR regulations. Once established this will be shared with students in Southampton and Kassel.	10/03/2019	Progress being monitored	BM(EU) Programme Lead. Faculty Academic Registrar.	
QA8305	GMC visit recommendation	Theme 2 Educational governance and leadership	The faculty should relay clear messages to students about the importance of the German Medical Practice module and how they will benefit from the learning outcomes.	03/03/2016	2015/16 QIF Southampton Faculty of Medicine - Kassel School of Medicine		The GMP module has been improved over the last couple of years but there is still work to be done to further engage students in its aims. KSM provided us with a report on the GMP. They hope to implement more changes for the 18/19 academic year in order to make the intended module learning outcomes clearer.	Seek opinions of FY1 doctors and their educational supervisors as to anything they feel BM(EU) students need to have learnt in year 3 to help them to function as doctors in Germany (having followed a UK curriculum). Work with FY1 education team to streamline which topics should be covered in year 3 and which in FY1. The previous module leader has now left so the new module lead will review the evaluations, the format and the resources of the GMP sessions with a view to making the module even more interactive and relevant. Rethink the introductory session to ensure the students fully understand the aims and learning outcomes of the module. Involve the newly appointed education manager who has worked clinically (as a midwife) in the UK and Germany.	10/09/2019	Progress being monitored	BM(EU) Programme Lead. KSM Education Managers. FY1 Team	
	GMC visit recommendation	Theme 1 Learning environment and culture	The BM(EU) management team should reinstate the 'you said, we did' sessions and emails.	16/05/2018	2017/18 QIF Southampton Faculty of Medicine- Kassel School of Medicine		Regular feedback sessions are scheduled with each year group. After the session a summary is sent to students and used at the next session to show what has been done. 'You said, we did' section in annual report completed and will be made available to students.	The ACSD of KSM will meet student representatives of each year group on a monthly basis. We will use the format 'you said, we did' in the feedback sessions and post updates on Blackboard to ensure that students are aware of how the programme has been changed in accordance with their feedback	10/09/2019	Progress being monitored	KSM Education Managers. BM(EU) Programme Lead. Irina Berger (ACSD).	
	GMC visit recommendation	Theme 1 Learning environment and culture	The KSM management team should improve access to Wi-Fi and computers.	16/05/2018	2017/18 QIF Southampton Faculty of Medicine- Kassel School of Medicine		KSM have been in touch with the GNH IT department to look at the options.	KSM will hold discussions with module coordinators and departmental heads to see if students can gain better access to the ward computers usually used by doctors. KSM will continue to work with GNH to improve internet access for students.	10/09/2019	Progress being monitored	Amelie Becher and KSM/GNH Management Marion Rothbart	
	GMC visit recommendation	Theme 5 Developing and implementing curricula and assessments	The visiting team noted positive changes to the GMP module but found further areas that could still be improved, including educator input. The school should make the intended module learning outcomes clearer.	16/05/2018	2017/18 QIF Southampton Faculty of Medicine- Kassel School of Medicine		See open recommendation above.	See open recommendation above.	10/09/2019	Progress being monitored	KSM Education Managers. BM(EU) Programme Lead.	
	GMC visit recommendation	Theme 5 Developing and implementing curricula and assessments	We encourage BM(EU) management team to consider reviewing teaching of the PSA. Some students suggested starting teaching for PSA in the earlier years.	16/05/2018	2017/18 QIF Southampton Faculty of Medicine- Kassel School of Medicine		Face to face teaching in Kassel from the education lead UHS pharmacist has already been scheduled for years 3, 4 and 5 during the 18-19 academic year. Students are sign-posted to appropriate SCRIPT Safe Prescriber Toolkit modules for each academic year. This is monitored and students who do not complete them are contacted by the Southampton prescribing leads. The time allocated to face to face final year prescribing teaching has been doubled from one day to two days	The BM(EU) team will monitor how the changes instigated this year are received by students and continue to adjust prescribing teaching in the curriculum as needed. We note that the PSA 2018 outcomes in BM(EU) are as good as those of our other final year students.	10/09/2019	Progress being monitored	BM(EU) Management Team	
	GMC visit recommendation	Theme 5 Developing and implementing curricula and assessments	The BM(EU) management team must address the problems with the ethics approval and supervision of the research project.	16/05/2018	2017/18 QIF Southampton Faculty of Medicine- Kassel School of Medicine		A new module coordinator in Kassel has been recruited for 2018/19 – Prof Dr Julian Bosel - an experienced researcher and clinician who will be able to support students and supervisors locally. An additional education manager has been recruited by KSM and will take charge of Y3 administration including the research project. The approvals process for the BM(EU) project is reviewed annually by the University's Research Governance Office and the Faculty Ethics Committee. In 17-18 four BM(EU) specific events complemented the general preparatory provision about research governance, Faculty requirements and processes: Nov 17 - Drop-in session regarding choosing a project, the transition to Kassel, etc. Feb 2018 - Interactive lunchtime session "Ethics approval Q&A: LAEKH & FOMECE" - March 2018: Lecture "Obtaining research ethics for your study: practical run through (German ethics)" - June 2018 - work-shop entitled: "Completing your application for ethics approval from FOMECE (via ERGO)" - Blackboard resources were updated, re-worked and re-structured. Additional examples of LAEKH ethics approvals applications were provided. All BM(EU) students and their supervisors received feedback specific to the research project proposals ahead of the LAEKH applications. Staff development is provided annually for project supervisors (compulsory for new supervisors), delivered by the BM(EU) deputy lead in Kassel. Experienced supervisors are beginning to informally mentor and support new supervisors and this is being actively encouraged. The new ACSD in Kassel has experience of the research project and is committed to helping improve the student experience in this module.	Anja Timm (Deputy Programme Lead) will support Prof Bosel in his new role and will continue to run the research conference, the staff training and oversee the BM(EU) project marking this academic year. The new education manager for year 3 alongside the ACSD will visit Southampton in October 18 to complement and enhance the introduction to the project year 2 students receive in Southampton. Prof Bosel will visit Southampton in February 19 to help support the year 2 students understand the German ethics approval process. The 2018 approvals process for the BM(EU) cohort will be reviewed and the BM(EU) specific timelines will be coordinated with the various teams. Throughout the academic year 2018/19 Anja Timm will further develop and continue to run the student-facing sessions in Southampton for Y2 and these developments will be mirrored in the virtual learning environment. In response to student feedback it is planned that in future years the project will be introduced to students earlier in year 2 with choices decided in November. This will perhaps give it greater status and encourage year 2 students to attend the year 3 research conference (which should help them understand the learning outcomes and what they are trying to achieve). A greater understanding and more time devoted to the project preparation is likely to improve engagement with the ethics process by students.	10/09/2019	Plan in place	Anja Timm (BM-EU) deputy programme lead. Julian Bosel. Irina Berger. KSM Education Managers.	BM(EU) Action Plan

	GMC visit recommendation	Theme 5 Developing and implementing curricula and assessments	We encourage KSM and the surgical module leads to reconsider the amount of time students spend in theatre, especially around exam time. Students feel unable to leave the wards at the scheduled time for leaving due to pressure from Consultants to stay and so have less time for self-study and preparation.	16/05/2018	2017/18 QIF Southampton Faculty of Medicine- Kassel School of Medicine		Attendance at clinical placements is compulsory and students need to be there to be exposed to the learning opportunities open to them. However clinical teachers are encouraged to allow students some flexibility in hours and have been reassured that as long as students meet all the learning outcomes actual hours are not a Southampton stipulation. KSM and module coordinator for final year surgery have agreed that core hours are 8am to 2 pm. After this time no pressure will be put on students to stay in theatre or on the wards but they are welcome to do so if they choose.	KSM will seek feedback from students and module coordinators to learn if this guidance has been implemented. If students are still reporting problems the module coordinator will be asked to speak directly with individuals or departments to ensure students are treated fairly with an emphasis on students meeting the learning outcomes rather than just time spent.	10/09/2019	Progress being monitored	KSM Education Managers. Module Coordinators.	
	GMC visit recommendation	Theme 5 Developing and implementing curricula and assessments	We encourage the BM(EU) management team to provide detailed guidance over what needs to be covered in the hospital inductions as it would help with consistency. Several students suggested including a description of a typical patient journey on the wards.	16/05/2018	2017/18 QIF Southampton Faculty of Medicine- Kassel School of Medicine		KSM has done some work with departments to modify their inductions. An additional general induction was introduced to year 4 (most student placements at Klinikum Kassel)	Education managers plan to work with hospitals and departments to improve their inductions, this will include attending some induction sessions so specific feedback can be given. KSM will review the student evaluations and gather additional feedback from students to help inform improvements in the induction process. Clare Polack will provide some examples of excellent student inductions from Wessex placement providers.	10/09/2019		KSM Education Managers. BM(EU) Programme Lead. Module Coordinators.	
	GMC visit recommendation	Theme 1 Learning environment and culture	The medical school should increase awareness of induction procedures at LEP level.	01/10/2018	2018 Regional Review of Wessex (8 March 2018)		The Faculty sends out an annual request to all LEPs to return details on key areas including information on their student placement inductions and updates on requirements and recommendations from their previous placement visit by the medical school (LEPs are routinely visited every 3 years, and more frequently if required)	Specific letter from AD (Education) to go to all clinical placement leads (ACSDs) in Autumn 2018 thanking them for engagement with the Review and requesting assurance that induction procedure is followed at all individual placements. Faculty will specifically note student feedback on induction provided by LEPs as part of the yearly quality assurance process.			Associate Dean (Education); BM4 Programme Lead (Ben Chadwick)	GMC Wessex Regional Review - Southampton Action Plan.
	GMC visit recommendation	Theme 2 Educational governance and leadership	The medical school should improve their quality management processes, in particular provide clarity on how triggered visits are initiated, monitored and communicated.		2018 Regional Review of Wessex		There has been discussion between senior faculty staff regarding clarifying this process. This will be actioned at the first Quality Monitoring Group meeting following the Review.	Specific process to be discussed by Quality Monitoring Group (Sept 2018), developed and finalised before end Oct 2018 and sent to all ACSDs in Nov 2018			Ben Chadwick	GMC Wessex Regional Review - Southampton Action Plan.
	GMC visit recommendation	Theme 3 Supporting learners	The school should explore opportunities to develop a greater diversity of lay/patient influence within the medical school.		2018 Regional Review of Wessex		We have appointed an experienced member of our education team to lead on developing the Patient and Public Involvement (PPI) in our programmes. We have mapped where patient involvement activity currently occurs in our curriculum, our assessments and in student selection. The new PPI Lead and our Diversity Lead attended a GMC/MSD Patient Involvement day on 03.09.2018 and reported back on examples of good practice from other medical schools.	Arrange time within job plan for PPI Lead. In working to embed PPI further throughout our programmes suggestions for early adoption include: increase involvement of Sim patients in curriculum development; include a lay representative in our Student Progress and Fitness to Practise processes; involve the hospital Patient Advice and Liaison Services in student medicine placements; encourage all Primary Care placements to invite students to their patient participation groups; involve University PPI Hub in the Year 3 student project conference. Contact other areas in local healthcare education (e.g. School of Health Sciences, local CCGs) where PPI works well, to seek best practice and advice on how to implement further.			Deborah Rose / Pritti Aggarwal	GMC Wessex Regional Review - Southampton Action Plan.
	GMC visit recommendation	Theme 5 Developing and implementing curricula and assessments	The school should provide better calibration amongst consultant trainers for the ACC assessments. The school should also increase their level of awareness regarding the level and calibration of trainers		2018 Regional Review of Wessex		We already have in place a tiered structure of training and have arranged future workshops (tier 3 - which includes calibration) starting this autumn, which we will take out to regional centres. We have continued to promote our online training which also includes a calibration exercise (tier 2). We are involving our ACSDs (placement leads) to promote and increase tier 2 & 3 completion rates	We are developing new material for clinical assessment examiner training to support future workshops and facilitate training away from the centre. We have scheduled further workshops specifically for ACC training and are involving our clinical centres to encourage participation in these. We will consider how to further encourage examiners to progress onto higher tiers of training, whilst maintaining the high levels of participation. We will request that all placements accurately record and feed back to the faculty details of local ACC examiner training and calibration, and will disseminate examples of good practice across our centres.			Director of Assessments / BMS Programme Lead.	GMC Wessex Regional Review - Southampton Action Plan.

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)
SOT1819-g001	Good practice		Theme 3 Supporting learners	Student feedback leading to improvements in clinical module evaluation surveys.				Clinical year leads have acted on student feedback and vastly shortened the length of post-placement student evaluation surveys, making them significantly more concise and meaningful. This was developed to ensure no loss of KPI data for QA purposes. The new survey additionally encourages more free text student comments (see template in supporting docs).						2018-19 Clinical Years Feedback Template.
SOT1819-g002	Good practice		Theme 5 Developing and implementing curricula and assessments	Increased profile of Professionalism throughout the course				We have continued to work at embedding teaching and learning of Professionalism in a contextual way through the programmes. This Autumn we have piloted a new workshop for all our first year students "Look after your mate" which has been run by facilitators from student services. The aim is to help provide students with skills to recognise and appropriately respond to their colleagues experiencing mental health difficulties. We have strengthened the emphasis of the digital story-telling task in year 2 in which students produce a graphic and written piece to illustrate what they discovered about professionalism on their placement as an HCSW. They are encouraged to reflect in a tutorial following the placement on how their views of professionalism may have changed from those they expressed in a pre-arrival task prior to starting year 1. There appears a strong move of students to recognise the importance of teamwork and communication after their HCSW experience, which speaks volumes for the value of this module. Since the last MSAR we have completed the first roll-out of our new Personal Professional Development module in Final Year which students engaged well with and rated highly. The module focuses on the domains of duties of a doctor from different perspectives: individual (patient/doctor/others), teams, organisations & society. We have created a blended learning environment which focuses on the intersection between students' lived clinical experience & GMC rules/ guidelines. This is supported by clinical staff and uses peer feedback to provide space for meaningful discussion. One of the requirements at the end of the module is for students to produce a graphic with accompanying prose to illustrate professionalism, with an emphasis on "trust" (see supporting doc).						Professionalism 'Trust' document
SOT1819-g003	Good practice		Theme 5 Developing and implementing curricula and assessments	Student engagement with revalidation of Programme				Review of our previous programme revalidation showed fairly limited and late student involvement. We have remedied this in our current revalidation process by involving students with both our general feedback/discussion groups concerning revalidation and in specific groups focused on particular issues e.g. student research project, critical appraisal, assessment strategy, Years 1 & 2 curriculum, Years 3-5 curriculum (timing and space constraints).						
SOT1819-g004	Good practice		Theme 5 Developing and implementing curricula and assessments	Introduction of Sequential OSCE to Final Year assessments				This has increased the reliability of the final year OSCE while simultaneously reducing the burden of assessment on the majority of students and the amount of staff resource required. This has also allowed us to increase the time length of each station, allowing us to deploy a wider range of stations testing a greater number of LOs and so also raising the validity of the assessment.				Director of Assessments		
SOT1819-g005	Good practice		Theme 5 Developing and implementing curricula and assessments	Introduction of methods for standard setting across all OSCEs, including a method of using confidence intervals which maximises both the sensitivity and specificity, of value in identifying students ready to progress, or in need of further remediation and attempts before progressing.				All OSCEs are now standard set either using the borderline regression method or in the case of one small cohort OSCE (BM4 Year1) the objective borderline method (both published methods). In addition we have developed a method of using confidence intervals which maximises both the sensitivity and specificity of the OSCEs when used as summative assessments to identify students ready to progress (or in need of further remediation and attempts before progressing). This method has been published (supporting doc: ASME poster) and been adopted by other medical schools and OSCE software providers.				Director of Assessments		ASME Poster
SOT1819-g006	Good practice		Theme 5 Developing and implementing curricula and assessments	OSCE 'Champions' introduced for all OSCEs.				All examiners on the same station meet just before each iteration of the OSCE examination for a brief discussion with an experienced examiner, 'the champion', to benchmark standards of marking. Received very positive comments from external examiners						
SOT1819-g007	Good practice		Theme 5 Developing and implementing curricula and assessments	New Clinical Summary Exam introduced in 2018 – extensive positive feedback from external examiners				This exam assesses the student's ability firstly to observe then to interpret and synthesise a wide range of different data types (e.g patient notes, results and observations, videoed consultations, professional conversations) and then recommunicate essential information in a written format, which includes writing patient notes, handover notes, discharge summaries or referral letters. All the tasks are valid 'real world' tasks that a foundation year doctor is expected to be able to undertake, blueprinted across a wide range of the curriculum. It complements the assessments of clinical performance in the OSCE.						

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)
SOT1217-02	Concern	Isle of Wight Trust	Isle of Wight Trust		Year 4 Students undertaking O&G placements	Theme 1 Learning environment and culture	Students reported a negative atmosphere caused by unprofessional staff behaviour during their placement which was impacting upon their learning experience.	14/12/2017	Routine Quality Monitoring Visit	No further students will be placed in this Trust for O&G placements until we are satisfied the learning environment is appropriate.	One of our quality monitoring requirements of this Trust is that they must put in place a plan to improve the atmosphere in the O&G department. We have informed both the Trust Chief Executive and HEE of our findings and actions.	A 'triggered visit' to the Isle of Wight Trust has been scheduled for Feb 2019. In preparation for this a visit to the placements there has already taken place (Nov 2018), to meet students and gather their feedback prior to the Feb 2019 visit.	01/03/2019		Quality Monitoring Group - Jane to draft response		
SOT1117-04	Concern				Year 5	Theme 5 Developing and implementing curricula and assessments	The first iteration of the 'new' curriculum year 5 is being implemented in 2017/18. One of the teething problems has been introducing this new curriculum alongside a group of students who are on the original curriculum. While most clashes have been avoided and aspects of the curriculum planning undertaken well in advance, the provision of ILS training was overlooked in some Trusts and slots which should have been for new curriculum students were already booked by original curriculum students for whom it was not urgent.	01/11/2017	Student emails		The matter was resolved quickly once identified. Existing training was prioritised to those students for whom it was most urgent, the faculty apologised to students who had been affected, and in future the training will be organised much earlier. In 2018-19 all students on the original curriculum (6 remaining) booked their ILS sessions to take place during a 3 week period. All other students on the new curriculum undertook ILS during their Medicine or Surgery placement, provided by the LEP.	No further actions required.			Frances to draft changes implemented for this year. I've added a bit in red to describe what the process for this year. Although we said no further action required.		
SOT0717-05	Concern				Years 3-5	Theme 4 Supporting educators	We rely on carbon copy assessment forms for recording and reporting on placement based assessments which is costly and timeconsuming	01/07/2017	Faculty Programmes Committee		A case has been made to the university to purchase appropriate hardware and software to enable electronic entry of assessment data whilst on placement. This is progressing through the university procurement process at present.	Continues to progress through University procurement processes. Soft market testing has been undertaken and a full business case will be submitted to the University early in 2019 for approval to secure funding and resource for the project to proceed to a full procurement phase.	01/07/2020		Director of UG Assessments and Faculty Solutions Lead Bruce/Frances		