



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	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	Supporting documents (if required)
BUC1819-g001	Good practice	Year 3	Theme 5 Developing and implementing curricula and assessments	The Major Incident is a week long course culminating in a 'live role play' Major incident. This provides a graded exposure to interprofessional working and includes working with hospitals, Fire, Police and ambulance services. It is an opportunity to explore the impact of a major incident on the healthcare system as well as to the individual and provides a safe learning environment to develop clinical competence in emergency practical procedures in a safe and controlled method. It is a unique chance to experience the rapidly evolving nature both clinically and non clinically of a major incident scenario reflecting the importance of communication, teamwork and reflection.	19/09/2018	Quality Management teams identified Good Practice by analysing the quality data submitted through the quality processes and held within the shared evidence database: • Excellent Feedback from students taking part in event • Excellent Feedback from the LEPs and other professional services involved in the week long event. • 2018 report from Major incident week • Evidence that the Major incident SSC provides the student with a diverse clinical experience.		Over the last 12 months the team responsible for Major incident week has been reaching out to professional services to invite them to be involved in the next major incident event.	The 2019, Major Incident week will have input from all the secondary care education providers and a number of emergency services. Although aimed at students, the week is a multidisciplinary training event. It will also be designed to test, exercise and validate various elements of the Stoke Mandeville Trust's Incident Response plans and procedures with any lessons learnt converted to changes in planning, plans, and procedures • Following on from the week, the feedback and key findings are shared with all stakeholders as a group and then brought back to the appropriate groups within the LEPs. • The Major incident group will present the outcome to all stakeholders in the end of unit report and faculty presentation. • It is hoped that this initiative will be shared with a larger number of Medical Schools through Medical education conference events.			SSC Lead; Phase I Lead		
BUC1819-g002	Good practice	Year 1 & 2	Theme 5 Developing and implementing curricula and assessments	Using dedicated mind-mapping software the Medical School has created the Brain of Buckingham. Students are provided with starting 'shells' for core presentations, using the list of key/core conditions, indexing of the case studies and curriculum materials to build maps that link together topics as they progress through the course.	03/10/2018	Quality Management teams identified Good Practice by analysing the quality data submitted through the quality processes and held within the shared evidence database: • The strategy was presented at the MB ChB management group, the Programme Executive. • The development of it was monitored through reporting through the Phase I Quality Management group. • The final project was reported to the MB ChB Board of Studies via the Phase I Lead report.		• Introduced and consultation at the Phase I and Phase II management meeting with the Unit and Block leads • Introduction talk to the students • Dissemination of the principles to the LEPs • The Brain of Buckingham was presented to the Medical School's GMC accrediting team during an annual monitoring visit.	The Medical School believes that the Brain of Buckingham may be an important student tool to aid cognitive redevelopment. The School is currently analysing the educational impact of this tool. Once initial data is collected from students it is hoped that the Medical School can initially present the Brain of Buckingham and the qualitative data at an upcoming Medical Education Conference. With follow up publications on quantitative data.			GP Lead; Phase I Lead	Curriculum Mapping	
BUC1819-g003	Good practice	All years	Theme 4 Supporting educators	Over the last 12 months the UBMS Support Team has been conducting robust analysis of disability, referral and support requirement costs for individual students registered on the MB ChB programme. This includes the timing of a disclosure as well as the nature and support requirements of the disclosure. The results are being used to inform resource allocation and to optimise the support pathways.	28/11/2018	The Student Support Lead report to the MB ChB Board of Studies		• Sharing of Medical School support with the rest of the university is ongoing. • The Support Lead has recently collaborated with Warwick in a Community of Practice for supporting Medical Students • UBMS has contributed to a nation-wide survey on the prevalence of learning support conditions such as dyslexia in undergraduate medical education.	It is hoped that the Medical School will be able to present this data in a publication and conference later on in 2019.			Student Support Lead		
BUC1819-g004		All years	Theme 1 Learning environment and culture	A datix was raised regarding an UBMS Medical Student performing a venepuncture. The normal processes for notifying and following up with the Medical School was followed. The Quality Lead at the LEP then submitted the report of the incident to the UBMS Quality shared evidence database. The clinician investigating the datix felt that this was not a serious issue but requested that the UBMS simulation lead to review the teaching of the procedure and determine any differences in UBMS and hospital policies	07/12/2018	Following the submission of the investigating report by the LEP Quality lead to the UBMS Quality shared evidence. The Quality Lead raised an Educational Concern		An action group was put in place to investigate the educational concern. Analysis of the incident rates of venepuncture datix was calculated. The Phase II lead reviewed the UBMS Policy and teaching protocol. The Phase II lead agreed that they were of a suitable standard	The newly appointed Clinical Competency Theme lead will be taking a review of all the practical procedures alongside the implementation of the new GMC Practical outcomes for graduates.	01/08/2019	Plan in place	Clinical Competency Theme Lead;		

Medical School Annual Return - Section D

Quality of placements

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	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	Supporting documents (if required)
BUC1819-p001	Concern	Leighton Road Surgery		E81044	Year 3	Theme 1 Learning environment and culture	Student feedback from the Clinical Methods Block based at Leighton Road surgery raised concerns that the availability of educational supervision was effecting the educational experience of the students. During a follow up discussion with the Quality Lead a student suggested that the Educational supervisor had left the building to attend a meeting off site during their Student based Clinic	27/07/2018	The concern was identified following feedback a student gave during a Quality Student forum.		The Quality Team approached the rest of the cohort for additional feedback around the potential issues identified. The Quality Lead met with the student to discuss the experiences in greater depth. A Quality Management Visit to the LEP was arranged in response to the concern. The visit confirmed that the Educational supervisor did not leave the premises. All patient safety concerns were resolved. It was noted that the practice was undergoing a turnover in staff which had put additional pressures on the delivery of the sessions. In order to ease the short term pressures the surgery was assigned to be the fallow surgery, without any students, for the next block rotation. An action plan was put in place to monitor the situation	Leighton Road surgery is currently under the management of CQC and no Buckingham Medical Students are on placement within practice.		Resolved	Quality Lead		
BUC1819-p002	Concern	Danes Camps		K83610	Year 3	Theme 1 Learning environment and culture	Analysis of the Quality data from the students of all cohorts based at Danes Camp has raised concerns that there is a perception that the tutor is disengaged from teaching and that the student experience within this practice is not to the same standard as other placements.	21/10/2018	The concern was identified following collation and analysis of information from the Medical School feedback systems. Students had provided feedback in end of block feedback and at forum sessions, Unit lead discussed informal feedback from students and a student contacted the Quality team directly. The Quality team then sought additional information from the students.		The Following actions were undertaken: <ul style="list-style-type: none"> <li>A Quality Management visit was made to the practice in response to the Quality Concern raised.</li> <li>It was identified that the educator was trying to promote a high degree of self-directed learning.</li> <li>It was agreed that an individual learner's competence, confidence and experience may vary and that at times the support and teaching style must be adjusted in line with the student.</li> <li>The Quality visit team shared some examples of good practice from other GP surgeries that are used to manage the student expectations of curriculum delivery.</li> </ul>	The Following actions will be undertaken: <ul style="list-style-type: none"> <li>Continue with Quality Management processes: Monitor the student end of block feedback and seek feedback from students in student forum.</li> <li>Follow up with Educational supervisor</li> </ul>		Progress being monitored	Quality Lead		
BUC1819-p003	Concern	Warwick Hospital		RJC	Year 3	Theme 2 Educational governance and leadership	Feedback from the two Phase II students at the end of the Perioperative Block based at Warwick raised concerns that one of the Educational Supervisors displayed unprofessional behaviour including bullying, inappropriate language and racist behaviours.	16/07/2018	A student feedback to the Quality team during a Quality forum; the Quality team raised the concern		The Following actions were undertaken: <ul style="list-style-type: none"> <li>Phase II lead spoke to students involved. The students were informed that the university was going to look into this.</li> <li>The Medical School contacted the Associate Medical Director; the medical school requested that the matter was reported onto the Responsible officer in SWFT to allow them to review this concern alongside any other evidence within the SWFT about his behaviours and investigate as appropriate.</li> <li>The Trust Medical Director and Responsible Officer reviewed the complaint and considered evidence from a number of staff.</li> <li>The hospital reassured that the Medical School that no pattern of bullying behaviour had been identified; however advice was given to reflect on the manner of communication with students in future.</li> <li>Equality and Diversity training was up to date.</li> </ul>	The Following actions will be undertaken: <ul style="list-style-type: none"> <li>Routine monitoring of the student feedback</li> <li>Open routes of feedback to allow the students to raise any concerns with the University</li> </ul>		Resolved	Quality Lead		