

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)
EAM1819-g001	Concern	All years	Theme 5 Developing and implementing curricula and assessments	Implementation of Quarantining for all OSCE assessments	01/12/2017	Two separate incidents reported of alleged cheating during an OSCE assessment These occurred on a background of recurrent student feedback that the OSCE assessments were unfair and the suggestion that there was widespread 'information sharing' occurring between students on the day of assessments, advantaging those undertaking the OSCE later in the day. Students had also reported being pressurised to participate in this practice. As well as limited evidence to suggest this did impact on student performance, there had been a number of logistical reasons, including resources that had been cited for not introducing quarantining previously.	N/A	A full investigation of the incidents was undertaken and individual students referred to UEA student disciplinary council and the Medical School fitness to practice process. With collaborative working between teams and across hospital Trusts (the OSCEs take place on two sites), the logistical issues were addressed and a successful case made for additional resources to support the immediate implementation of quarantining for all OSCE assessments from the second rotation. This has been met with overwhelming approval from students and has addressed the concerns relating to the sharing of information, as well as mitigating against further cheating. This initiative was also strongly supported by our external examiners.	Quarantining will continue to be undertaken for all OSCE assessments. We are currently reviewing our OSCE assessments as student numbers expand as there will be an increased requirement for resources to enable this practice to continue.	Resolved April 2018	Resolved	MB BS Course Director	N/A	
EAM1819-g002	Concern	All years	Outcomes 1 - Professional values and behaviours	Raising Concerns: Promotion of a positive and safe environment for all students and zero tolerance for discrimination, harassment or abuse	23/11/2016	Student feedback through a variety of routes including Staff Student Liaison Committee (SSLC) and MED Executive team raising concerns about a safe culture for all, with particular reference to racism and sexual harassment, but also including inappropriate language and behaviours and transgender issues	See MSAR 2017/18 Focus groups undertaken with students identifying themselves as from a BME background	1) We continue to promote a positive and safe experience for all students and have stated a zero tolerance for discrimination, harassment or abuse 2) Promotion of UEA campaigns Consent Matters and Never Ok 3) Reporting concerns - We have been looking into our process and policy for raising concerns by our students. We reviewed guidance from other medical schools and have updated and simplified our process for reporting concerns and the policy that goes with it. This means we will now have clear advice for students who wish to raise concerns about their learning environment, as well as patient safety and raising concerns about student professionalism. We have piloted a specific Speaking Up, Speaking Out form for recording concerns raised about the learning environment and this has been received very positively by individual students, with appropriate action taken by the School to address concerns raised. This has included direct discussion with individuals and referral to secondary care Trusts to manage through their internal processes. 4) Unconscious bias awareness raising through a number of routes including at the MED Away Day and other Faculty events. Unconscious bias training is now included within mandatory OSCE assessor training and a specific face-to-face workshop has been developed initially for roll out to those with senior leadership roles in the Medical School. We have also circulated a link to an on-line video resource to our Faculty, however we are reviewing this to ensure it is an effective resource for our target audience and we need to determine how we monitor compliance. On-line NHS Equality and Diversity Awareness is now mandatory for all staff and students. 5) Differential Attainment – this is a complex and deep rooted issue. We invited Kath Woolf from UCL to speak at our MED Away Day in September 2018 and are reviewing how best to share this with students in a supportive context. 6) Our MB BS Handbook and Equality and Diversity and Quality Policy have been updated to expand guidance on student behaviour, dress codes and dignity at work expectations from placement providers. 7) We now routinely collect E&D data from our assessors and interviewers in order to compare these groups with our student profile	1) Continue to promote zero tolerance message and actively address concerns raised by students 2) Working with MedSoc to promote a more inclusive environment for all students 3) Develop and appoint to new lead role for inclusivity and diversity to address diversity within the curriculum, promote faculty development and develop strategies to mitigate differential attainment, working closely with students	This will continue to be work in progress Aim for lead in inclusivity to be in place by July 2019	Plan in place	MB BS Course Director, Head of Medical Education, Associate Dean for Innovation and Engagement	N/A	
EAM1819-g003	Good practice	Foundation and Year 1 MB BS	Theme 1 Learning environment and culture	Health Care Assistant training course for Foundation year and Year 1 MB BS students	Piloted 2016/7, implemented 2017/18	Recognised need to provide opportunities to support the development of professional values, understand the contribution of others and working with patients as individuals. There was also an opportunity for participating students to join the HCA bank and contribute to the NHS while at Medical School	N/A	Linking to a number of key domains outlined in the GMC's Good Medical Practice (2013)14, such as respecting the contribution of others and treating patients as individuals and respecting their dignity, this initiative enables students to acquire confidence in and understanding of the professional values of future doctors working in the NHS. By carefully embedding this training into the taught curriculum, this innovative development also introduces students to the important concepts of safeguarding, information governance as well as extensive manual handling training. In 2016-17 we undertook a pilot project to run a Healthcare Assistant (HCA) training course for Medicine with a Foundation Year students with placements based in NHS community and mental health services. This programme received excellent feedback from both students and their mentors and from 2017/18 has been implemented for all students joining this course, as well for Year 1 MB BS students on an optional basis with training in a secondary care setting. Funding has been secured from UEA through widening participation to ensure the sustainability of this project.	Evaluation of programme and ongoing collaboration with placement providers. Need to identify increased placement provision to support student expansion. Qualitative research study being undertaken - 'An Exploration of the Lived Experience of Medical students at the University of East Anglia working as Healthcare Assistants and the perceived impact of this experience on medical students' values and future practice'. This study will approach students who have completed the HCA project and will use a combination of a survey, focus groups and individual interviews to explore the student experience.			Associate Dean Learning and Teaching and Lead for Inter-Professional Learning	N/A	
EAM1819-g004	Good practice	All years	Theme 3 Supporting learners	Mandatory Student Evaluation: Closing the feedback loop	Introduced academic year 2018/19	Increasing need for 'real-time' feedback to flag concerns at an early stage, where intervention is likely to be more effective. Feedback from the School to students has previously been optional and less formal, and there was a clear need to ensure a tighter process for quality management of the MB BS course	N/A	There has been the introduction of routine student evaluation at the end of each rotation which provides qualitative feedback two or three times per year with quantitative feedback at the end of each academic year. A structured template for module and theme Leads has been created to facilitate feedback to students. The Leads from all key components of the course (including assessment, PBL, consultation and clinical skills) are expected to use the template to provide a response to student feedback. It is now mandatory for Leads to complete and moving forward will form the basis of the summary feedback information for students in the form of a "You said, We did" document (2017-18 version attached as an example). The template directs Leads to identify areas for improvement and what additional actions they intend to take with future delivery of the theme. The template also offers the Leads an opportunity to highlight good practice. Completed samples of the above template have been uploaded with our submission.	Triangulation of quality data from different sources, including the NSS and GMC Training Survey, to inform course design, development and improvement and promote a positive experience for students. Evidence of impact of changes will be collated from student evaluation and feedback obtained from the Staff Student Liaison Committee (SSLC).			MB BS Course Director	N/A	EAM1819-g004 You said...we did 2017_Jan2018.pdf EAM1819-g004 - MED Response To MBBS Feedback_2018-19_ForBlackboard.pdf

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)	DDP/NSC 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	Status Concerns ONLY	Person responsible	Engagement with primary, HEE local offices or other	Supporting documents (if required)
EAM1215-	Concern	Queen Elizabeth Hospital, Kings Lynn (QEHL)			Year 4 (Module 9: Reproduction)	TD09 D2	Unacceptable instance of cancelled teaching and students being turned away from clinics (including community based). Score of zero for student satisfaction 14/15 (mean 1.67/5) for Module 9 (Reproduction (O&G)).	12/03/2015	Concerns reported by students 12.03.2015; followed up by Module lead and Secondary Care Coordinator, escalated to Head of Year 4 and Course Director to meet with Associate Medical Director: Annual Evaluation data 2014/15	Trust Report prepared for Quality Assurance Visit 13 March 2017 showed strong commitment to improve including new Module Lead who held a series of meetings with key stakeholders and counterparts in other trusts and redesigned module timetable. Support needed from other consultants and health professional colleagues e.g. to facilitate medical student access to labour ward. 2016/17 evaluation was 3.5 mean - lowest performing of all Trusts for this module: the numbers (eight) are not large enough to act as a basis of significant change. Numbers have been kept low (four students for rotations 2 and 3 of 2016/17 and 5 for each rotation in 2017/18, significantly fewer than are placed at Ipswich, JPUH and NNUH). Most recent evaluation data (rotation 1 of 2017/18) currently being analysed so scores not yet published; open comments indicate some positive teaching experiences, but concerns remain about adequate timetabling, access to clinics and staff capacity and preparedness to teach on the wards.	Student evaluation during 2016-17 demonstrated an improvement in this module, with 63% of students completely satisfied and 13% moderately satisfied. This was a significant improvement on the previous score (0%). For 2017-18 there was again a significant downward trend in student satisfaction, with only 13% of students very or completely satisfied, and a mean score of 2.4 out of 5 for student satisfaction. The COC placed the Trust in special measures in September 2018, and specific and serious concerns were raised about maternity care. Further to discussion with the undergraduate lead, the Medical Director and the UG lead for O&G at QEHL, and also with the Postgraduate Dean and Clinical Dean at the University of Cambridge, a decision was taken to suspend student placement in O&G due to concerns about the learning environment.	The Medical School is working in close collaboration with the Trust to review the changes being implemented in O&G and how these may impact on the learning environment. O&G has been placed in enhanced monitoring by the GMC and there are joint visits being undertaken to the Trust by HE and the GMC. The outcomes of these visits are informing future decisions over student placement in O&G. A joint decision has been reached not to place Norwich Medical School students at QEHL for the second rotation, and this will be reviewed prior to the third rotation, working together with the Trust, recognising the significant changes in leadership that are occurring.	31/07/2019	Changes falling behind	MB BS Course Director, Head of year 4, Module 9 lead	We are fully engaged with HEE (East) as to the situation at QEHL. The COC has placed QEHL in special measures. The GMC has placed O&G training under enhanced monitoring.	
EAM1215-	Concern	Norfolk and Norwich University Trust Hospital (NNUH)			Year 5	TD09 D2	Poor feedback from students about placement quality resulting in a mean score of 2.9/5 for Module 13 (Accident and Emergency)	31/07/2015	2014/15 Annual Evaluation data	Continued to monitor. 2016/17 Annual Evaluation data remains a concern: although mean rating of 3.5/5, within this only 57% Completely / Very satisfied with A&E at this Trust compared to 73% for acute medicine at same trust, and compared to equivalent scores for A&E of 88% JPUH and 78% QEHL. From the latter half of 2015, a Clinical Lead for medicals students was appointed for the A&E at NNUH. This has resulted in gradual re-organisation of the clinical placement, and closer supervision. To avoid over-crowding of students and competition for clinical cases, students are now allocated to different areas in A&E, such as Resus, Minor, and Majors.	The 2017-18 annual evaluation demonstrates sustained improvement, with overall satisfaction for module 13 at 66% of students completely /very satisfied and a mean score of 3.9/5, which is comparable to the data from 2016-17. However there was a very marked increase in satisfaction in Module 13 in A&E which has risen to 81%.M13 for anaesthetics and perioperative medicine continues to be highly rated at 83% overall satisfaction, however it is noted that there has been a slight decline in satisfaction for acute medicine from 73% to 57% satisfaction The NNUH is currently in special measures as required by the COC, currently this has not had an adverse effect on this concern, the NMS is continuing to monitor the situation through student feedback and the Staff Student Liaison Committee (SSLC).	The gradual re-organisation of Module 13 and A&E placement at NNUH seems to have been effective in delivering a sustained increase in student satisfaction, and monitoring will continue in 2018-19.		Resolved	MB BS Course Director, Module 13 lead	Engagement with HEE (East) regarding COC requirement for special measures is ongoing.	
EAM2018-01	Concern	Queen Elizabeth Hospital, Kings Lynn (QEHL)			Year 4 (Module 10: Growth and Development)	Theme 2 Educational governance and leadership	2015/16 Annual Evaluation scores for Overall Satisfaction with Placement at QEHL were only 24% completely/very satisfied (compared to 96% JPUH and 94% NNUH) and the mean score is now rated Red (2.5/5 in 2015-16, dropping from just over 3.25/5 (amber) in both 2013-14 and 2014-15	09/09/2016	Annual Evaluation report	Raised at QA Visit March 2017 - Trust confirmed timetable clashes with Cambridge students had been addressed. Placement numbers remained consistent for remainder of 2016/17 (six and four in rotations 2 and 3 respectively). Marginal increase (in line with other placement locations) in 2017/18 (six, nine, nine for the three rotations) 2016/17 mean score for Module 10 at QEHL was 3.25/5 so some signs of improvement but requires continued monitoring as it performing poorly in comparison to other trusts (all above 4/5 mean score). Trust replaced Module Lead and new Lead devised complex action plan including intention to solicit feedback from students in the context of the scope of opportunity, e.g. recognising that complex level 3 neonatal intensive care cases are referred to NNUH not QEHL. A new team was put in place in QEHL with significant support from the Medical School and the other secondary care teams. Content during the secondary care placement was standardised between all hospitals giving the unit clear and definite learning outcomes. This made up part of the larger picture of bringing the Module 10 curriculum into line with the RCPCH undergraduate curriculum.	The responses from the student evaluation during 2017-18 demonstrate that there has been further improvement in student satisfaction which has risen to 77%. QEHL has been placed in special measures by the COC and the NMS is continuing to monitor the situation to ensure effective placements for the MB BS Students.	NMS is continuing to monitor the module, to ensure that adequate cover is in place and the improvement is sustained. There has been a new module lead for Module 10 who is consolidating the work of their predecessor.		Resolved	MB BS Course Director, Module 10 Lead	Engagement with HEE (East) regarding COC requirement for special measures is ongoing.	
EAM2018-02	Concern	Queen Elizabeth Hospital, Kings Lynn (QEHL)			Year 2 (Module 5: Respiration)	Theme 2 Educational governance and leadership	2015/16 Annual Evaluation scores for Overall Satisfaction with Placement at QEHL were only 25% completely/very satisfied (compared to 97% JPUH and 52% NNUH) and the mean score is now rated Red (2.5/5 in 2015-16, dropping from just under 3.25/5 (amber) in 2014-15 and just over 4.5/5 in 2013-14	09/09/2016	Annual Evaluation report	Continue to monitor through evaluations. This module is still performing badly (2.5/5 mean in 2016/17 compared to between 3.5 and 4 / 5 mean for other Trusts) Trust had pledged to recruit more respiratory physicians, educational academic fellows and other allied health professions to stabilise provision of teaching (report for QA visit March 2017) New Secondary Care Module Lead Noted that contingency planning for staff shortage or absence is very dependent on the success of the planned recruitment drive and staff retention School receives regular updates from Clinical UG Lead at the Trust. With the further decline in satisfaction in 2016/17, combined with the staffing shortages, the concerns raised about the quality and reliability of module 5 at the QEHL led to the school taking the decision to remove students from the QEHL for Module 5.	The main initiative for the Trust for 2017/18 was to recruit and retain clinical staff. Currently the Respiratory module is not being taught at the QEHL as the Trust has been unable to recruit staff. The Trust has sought to appoint a Respiratory consultant, and staff in the Respiratory Team are keen to restart teaching undergraduate students as soon as they have sufficient clinical staff in post. However, there continue to be concerns raised about the sustainability of teaching until the workforce is more stable. NMS has implemented additional placement capacity at Ipswich hospital. QEHL has been placed in special measures by the COC and the NMS is continuing to monitor the situation to ensure effective placements for the MB BS Students.	Norwich Medical School is continuing to monitor the situation and have dialogue with the trust with a view to reinstating students to the respiratory module placement at the earliest appropriate opportunity. Monitoring will include the formal QA visit by the Medical School to the Trust in May/June as well as less formal updates with the undergraduate lead at QEHL. We continue to explore options to further expand placement capacity at Ipswich and Colchester hospitals.	31/07/2020	Changes falling behind	MB BS Course Director, Module 5 lead	Engagement with HEE (East) regarding COC requirement for special measures is ongoing.	
EAM2018-03	Concern	Norfolk and Suffolk NHS Foundation Trust (NSFT)			Year 4 (Module 11: The Mind and Body)	Theme 2 Educational governance and leadership	Continuance of low evaluation scores resulting in new placement providers being identified for 2016/17	09/09/2016	Annual Evaluation report	NSFT is currently undergoing a challenging time, and the Medical School has had ongoing discussions with the Trust to ensure placements for students remain effective and that student satisfaction increases. In October 2017, all students were written to and in November 2017 an action plan was agreed with NSFT subsequent to their October 2017 COC rating of inadequate. We are continuing to hold meetings with NSFT in light of a number of changes to post holders in Trust management, and are committed to continuing to work with them to ensure placement quality and safety. Expansion of career progression into shortage specialities such as psychiatry (along with Primary Care) was a key feature of the Norwich Medical School bid to expand our student numbers submitted November 2017. The Trust agreed to host Physician Associate students on placement at the 2016/17 Quality Assurance Visit. Deputy module lead appointed to ensure we have enough contact with Trust leads in each site	Areas where the Trust have made progress is with a new electronic Job planning toolkit to assist in identifying clinical staff time for teaching MB BS students. Job plans are reviewed annually by managers and has increased expectations of both staff and management. In addition to the Job planning the Trust has developed an induction and welcome for students, the Clinical Lead for Undergraduate Teaching has been encouraging uptake of this induction in all areas. Students are also able to access the Trust IT system, and all efforts are being made to ensure students have adequate access while on placement. Since the previous evaluation visit, the administrative support has changed, and there was a period where there was no administrative support, which impacted on the students, this has now been resolved. Of concern, the lead for UG education has been on extended leave and the Trust has found it difficult to fully support a replacement lead with appropriate time to undertake the role. Despite this, student evaluation from the most recent rotation in December 2018 demonstrates many students are having a positive experience on placement, and there is a reduction in comments about students not feeling welcome. The COC confirmed in November 2018 that the Trust will remain in special measures and further communication was sent to students.	The Medical School have expanded placement capacity in Essex and Northampton, which has reduced the burden of student placement on NSFT. We have also sought assurances from the Trust that there will be adequate clinical and administrative support in place. We are continuing to monitor the effectiveness of placements and work closely with the Trust in building on improvements	31/07/2019	Progress being monitored	MB BS Course Director and Module 11 lead	Engagement with HEE (East) regarding COC requirement for special measures is ongoing.	
EAM2018-04	Concern	All sites			All	Theme 1 Learning environment and culture	Student concerns over unacceptable language and behaviour, in relation to areas such as gender, race, transgender issues and sexual assault.	23/11/2016	Raised at the first Staff Student Liaison Committee (SSLC) of 2016/17 and has been kept on each agenda since then, as well as a closed focus group with students self-identifying as BME.	Gathered student concerns Head of School and Course Director written to all students to outline actions in response and state a zero tolerance approach to these issues. The Head of School and Course Director have written to all LEPs and Primary Care to reiterate this message. Repeated messages have also been delivered at School Committee meetings, the Away Day and on the Course Director Update lectures to each cohort. We are also working with UEA Student Union on campaigns and consulting students on best practice. We are revising lecture and seminar content e.g. Consultation skills, revising the dress code guidance and expanding the Equality and Diversity policy to include dignity at work content for placements. The revised professionalism handbook and lectures better help students deal with inappropriate behaviour from patients (see MSAR response to question 7) and we have created a new one-stop information point on Blackboard to help students access support and encourage them to come forward with concerns. We have introduced an on-line NHS E&D training for all students and unconscious bias training for OSCE assessors and have commenced robust equality monitoring of assessors. Finally, we have expanded the membership of Staff Student Liaison Committee (SSLC) to include new MedSoc E&D officer role and BMA Reps	In addition to the last update Norwich Medical School has introduced a revised Speaking Up Policy: Procedures for reporting and investigating concerns. This is available to students, and is referred to on Blackboard. The issues have been discussed at the SSLC and updates given to student representatives.	The Medical School will continue to monitor this issue through feedback and SSLC. The detail of further actions is now provided in Section C of the MSAR reflecting the need to address these concerns across the whole learning environment and not just on clinical placement.	31/07/2019	Plan in place	Head of Department of Medical Education, Associate Dean for Enterprise and Engagement, MB BS Course Director		

EAM2018-05	Concern	Norfolk and Norwich University Trust Hospital (NNUH) & Queen Elizabeth Hospital, Kings Lynn (GEHKL)			Year 3 (Module 8 Gastro medical and surgical)	Theme 2 Educational governance and leadership	<p>Declining quality of gastro teaching resulting in decline in student evaluation scores as follows for NNUH:</p> <p>2014/15 Medicine – Mean 3.88/5 and 76% completely satisfied Surgery – Mean 3.98/5 and 76% completely satisfied</p> <p>2015/16 Medicine – Mean 3.84/5 and 66% completely satisfied Surgery – Mean 3.77/5 and 64% completely satisfied</p> <p>2016/17 Medicine – Mean 3.25/5 and 36% completely satisfied Surgery – Mean 3.47/5 and 56% completely satisfied</p> <p>In addition, GEHKL has moved from being a strong performing module to one of the worst performing. Scores as follows for GEHKL:</p> <p>2015/16 Surgery Mean 4.13/5 and 87% completely satisfied Medicine mean 4.07/5 and 80% completely satisfied</p> <p>2016/17 Surgery – Mean 2.89/5 and 39% completely satisfied Medicine – Mean 2.94/5 and 41% completely satisfied</p>	12/07/2017	Formal presentation of evaluation data at Curriculum Design and Delivery group 2017/18 Rotation 1 open comments have also highlighted negative feedback about Case Presentation sessions	<p>A formal appointment of new Secondary Care Module Lead at NNUH is in progress and a plan is now in place to review the timetable with NNUH Undergraduate Clinical Lead and Administrative Manager for Clinical Skills area at NNUH.</p> <p>Interventions in the timetabling and teaching quality by Secondary Care Module lead at GEHKL are now in place and this is reflected in improved feedback as reported by the Module lead January 2018</p>	<p>The Medical School appointed a new module Lead for Module 8 early in 2017 who has sought to introduce changes to the timetable and module content over the past 12 months. They have now stepped down from this role.</p> <p>NNUH: With a change in leadership for medicine there has been a marked improvement in satisfaction, which has increased to a mean of 3.76/5 with 68% completely satisfied. There has also been improvement in surgery with a mean of 3.74/5 and 63% completely satisfied.</p> <p>GEHKL: The student evaluation for 2017/18 confirmed the very significant improvement in medicine, with a mean satisfaction score of 4.29/5 and 89% completely satisfied. This reflects the changes that have been implemented and improved leadership of the module within the Trust and reinstates the gastro medicine module as one of the top performing modules in secondary care across all Trusts.</p> <p>There has also been a marked improvement in surgery with a mean score of 3.86/5 and 68% completely satisfied.</p> <p>Both the GEHKL and NNUH are currently in special measures by the COC and the situation is being monitored by the Medical School.</p>	<p>We are continuing to monitor the module at both NNUH and GEHKL, to ensure that the improvement is sustained.</p> <p>There will be new module Leads in place for Module 8, with joint leadership from both medicine and surgery.</p>	Resolved	MB BS Course Director, Module 8 Lead, Secondary Care Leads at NNUH and GEHKL	Engagement with HEE (East) regarding COC requirement for special measures is ongoing.	
EAM2018-06	Concern	Queen Elizabeth Hospital, Kings Lynn (GEHKL) & James Paget University Hospital (JPUH)			Year 2 (Module 3 Haematology)	Theme 2 Educational governance and leadership	<p>Staffing shortages were impacting on placement delivery. It was reported at Module 3 meeting August 2017 that the JPUH haematology department had recently lost two consultants: recruitment window estimated at 12 months.</p> <p>There were no students in Haem at JPUH for rotation 1 2017/18 (long term sickness and relocation of staff). All students placed at the NNUH, Colchester and Ipswich were scoped for capacity but were unable to help.</p>	01/03/2017	Evaluation data, contact with Trust Module Team meeting	<p>GEHKL Student numbers withdrawn after Rotation 2 in 2016/17 with no current plans to reinstate. This remains a focus for Module team, e.g. 09/01/2017 meeting confirmed previous consultant at GEHKL has moved on leaving the hospital unable to take any haematology students.</p> <p>JPUH and NNUH are taking the bulk of additional students, with +2 to JP and +3 to NNUH in 2017/18. This situation will not change this year but there is concern that if Ipswich and Colchester are unable to support, 2017/18 cohort will be too large to be accommodated by current arrangements.</p> <p>JPUH student numbers reinstated for Rotation 2 2017/18.</p>	<p>GEHKL: Haematology, still no plans to re-introduce students to Haematology at GEHKL.</p> <p>JPUH: There was a slight decrease in satisfaction (88%) 2016-17 compared with (92%) in 2015-16 this could be reflected as the JPUH increased student numbers due to GEHKL being unable to take students for module 3.</p> <p>In 2017/18 the satisfaction decreased to 63% and JPUH were unable to accommodate students in rotation 2, placing further pressure on NNUH.</p> <p>The Medical School has sought to identify additional placement capacity in the region.</p>	<p>We have been successful in negotiating some additional placement capacity at Ipswich from rotation 2 in 2018/19. If this is successful it may be possible to expand this further.</p> <p>It now seems very unlikely that students will return to GEHKL, and there are recurrent concerns that have re-emerged for JPUH who are again unable to take students for haematology due to staffing issues.</p> <p>There is now an expectation that the majority of students will require placement experience at NNUH. The Medical School has held a very constructive meeting in January 2019 with the module 3 team to explore options to support this need, including the use of teaching fellows, expansion of clinic opportunities and changes to timetabling. These will be introduced progressively from the next academic year.</p>	31/07/2020	New concern identified	MB BS Course Director, Module 4 Lead	Engagement with HEE (East) regarding COC requirement for special measures at GEHKL is ongoing.