

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)
LIV1819-g001	Good practice	2,3,4,5	Theme 2 Educational governance and leadership	Development of a comprehensive student evaluation system for clinical placements. Evaluation is analysed using a Red Amber Green (RAG) system providing fast and accurate information as to which areas are going well and which require improvement by individual placement or by speciality. RAG reports are distributed to the Trusts after each rotation. A new format of RAG report has been developed by the Quality team, including student numbers, trend indicators, cumulative scores, and provides graphical representations of the data for comparison purposes. The development of a data dashboard has also improved the process so that senior staff members are able to easily approve the data prior to distribution to Trusts. Previously the data was sent in a number of separate reports, which was a time consuming and lengthy task, the dashboard allows all data to be quickly and efficiently viewed in a single document.	10/06/2016	Identified as a concern during routine University internal quality monitoring (periodic review of School)		Development and implementation of a Quality and Enhancement Framework and rolling the RAG reporting and early feedback out to clinical placements	The polleverywhere system will capture student feedback on lectures					
LIV1819-g002	Good practice	2,3,4,5	Theme 1 Learning environment and culture	The School of Medicine has worked collaboratively with HEE to foster enhanced placement specific supervision to 3 and 4 students on clinical placement. Health Education England North West (HEENW) has a Learning and Development Agreement (LDA) signed by all Local Education Providers which states: "The Provider will provide sufficient and appropriately trained tutors for delivery of the medical programme in the trust including Clinical Placement Supervision". In November 2017, a service level agreement addendum was introduced jointly from HEENW and School of Medicine specifying that there must be clear arrangements for clinical supervision at all times and that all students will have a named Educational Supervisor (ES), an experienced doctor in the speciality of the placement block, who is trained in educational supervision and familiar with the requirements of the University for the placement and the undergraduate e-portfolio.	2016/17 various dates	Identified as a concern during routine and triggered quality visits to hospital placements during 2016/17		Rolled the system out to all clinical placements and provided policy guidance and technical (eportfolio guidance) to support all placements to implement the system according to School of Medicine and HEEN requirements. Monitoring of delivery (through portfolio reports) shared with sites.						
LIV1819-g003	Good practice	1,2,3,4,5	Theme 1 Learning environment and culture	Project LIVE is a programme of significant investment in four key areas of the School of Medicine: People, Environment, Technology and Communication, fast-tracked to progress the key areas of the project, with a view to achieving substantial improvement in time for the start of the 2018/19 academic year. The project aims to provide a first class student experience in the school and the best possible start to the training for our future doctors, as well as an exceptional, leading-edge working environment for our staff.	25/01/2018	Teaching space and facilities identified as a concern through student feedback		New lecture theatre facilities have been identified. Planning permission, architects designs completed and building works to the medical school itself have commenced. Enhanced student communications and design and implementation of operational systems to support educational management are underway.						
LIV1819-g004	Good practice	1,2,3,4,5	Theme 1 Learning environment and culture	Curriculum consultation stakeholder events - the School participated in the Outcomes for Graduates consultation. There have been a series of stakeholder events including discussions re: a consistent approach to sharing learning outcomes with students.	Throughout 2017			Using the information collected at stakeholder events, a proposal for a revised year 3-5 curriculum has been developed and enhanced after further consultation with educators and students. Refinement of placement specific learning outcomes is in progress, mapped to OFG is underway and review and remapping of the full course outcomes and resources.						
LIV1819-g005	Good practice	3,4,5	Theme 2 Educational governance and leadership	The GP placement quality framework has been revised and improved. All placements will receive: a) A routine Quality Visit on a five-year rolling programme and b) An annual Quality Data Review, the outcome of which will determine if the placement receives a Triggered Quality Check, a Triggered Quality Visit or returns to annual Quality Data Monitoring	Throughout 2018	Internal review of quality framework		New process of GP quality visits now underway						
LIV1819-g006	Good practice	3,4,5		Theme 5: Developing and implementing curricula and assessments. The School has introduced a programme of enhanced simulation in both lectures and SIM experiences. A series of VR based lectures in year 3 allow students to work through clinical scenarios in a safe and supported environment. 2019 will also see the introduction of a SIM week in Year 5 where all students are given an opportunity to spend time working through a range of simulated clinical scenarios, with debrief on the same.	Ongoing curriculum development work	Identified as an area where local expertise could enhance student learning and experiences		The introduction of the VR technology into the curriculum has won both local Learning and Teaching Awards, and also been recognised nationally: the project has recently won an Association for the Study of Medical Education (ASME) Education Innovation Award. The project was also noted as excellent practice by the Royal Society of Medicine and filmed by ITN for sharing with medical audiences globally	We will continue development of the curriculum, and seek to disseminate the impact of this through further conference and event attendance.					
LIV1819-g007	Good practice	5		Theme 5: Developing and implementing curricula and assessments. New sessions have been introduced in Year 5 in relation to enhanced communication skills, covering areas that are likely to emerge as challenging scenarios in F1 year	Ongoing curriculum development work	Identified as an area of potential enhancement for the curriculum by Communication for Clinical Practice team		All year 5 students now have the enhanced communication skills training session as a mandatory course requirement: evaluation and review of content occurs annually						

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)
LIV0915-823 to 30 and 33	Concern	Liverpool Womens Hospital NHS Foundation Trust	Liverpool Womens Hospital		3, 4, 5	Theme 2 Educational governance and leadership	Requirements were made regarding educational governance, particularly around SIFT transparency job planning and developing a core educational team to support the Sub-Dean. There were also requirements made to quality assure timetabling, review facilities and induction processes and develop a clinical skills strategy.	25/09/2015	Quality Visit to Clinical Placement	The next standard cycle visit took place on 21.09.17. Teaching is excellent and there have been improvements to facilities and induction. Some areas of concern highlighted at the 2015 quality visit remained. Although there has been additional consultant fixed time to support the Sub-Dean, job planning and further developing a clearly defined team of educators were again specified as requirements. There remain concerns about timetabling accuracy and SIFT transparency and further monitoring of action relating to this is planned. Clinical skills have been better resourced over the last two years and there is now a drop-in facility. The clinical skills strategy has been shared with the University.	Some actions have been signed off as complete. Undergraduate Education is covered over 5 days a week by two members of the admin team, who can each cover for one another. The Medical Education Manager manages Undergraduate Education and ensures that there is sufficient cover available at all times. The Sub-Dean is supported by 4 Consultants who are given extra SPAs for this through their job plans. This will be enhanced by the allocation of Educational Supervisors for all students by the rest of the Consultant body. Some actions remain outstanding. The clinical sub-dean and DME met to discuss job planning and an update to this meeting has been sought. The Trust have been asked to provide evidence of a robust audit to review and update undergraduate timetables on an ongoing basis. Provision of student access to EPR is an ongoing project and this will be monitored.	Implementation of these requirements is being managed via the local clinical placement quality management system and the School of Medicine will continue to work with the placement and monitor progress. Please cross-reference to LIV1819-p016 below, which relates to the ongoing visit and management.	31/12/2018	Changes falling behind	Director of Clinical Quality	
LIV1015-837 to 43	Concern	Countess of Chester Hospital NHS Trust	Countess of Chester Hospital		3, 4, 5	Theme 2 Educational governance and leadership	There were some concerns around educational facilities and clinical skills resources. There were also issues identified with SIFT transparency and job planning for clinical teachers and the involvement of students in education committees.	29/10/2015	Quality Visit to Clinical Placement	The next standard cycle visit took place on 08.11.17. It was noted that the visitors were pleased about the use of SIFT funding to improve clinical skills and simulation and the management opportunities available to students, and further requirements were made regarding SIFT transparency, job planning and education infrastructure.	Implementation of these requirements is being managed through the clinical placement quality management system of the School of Medicine. An update was received from the Trust in September 2018. Several requirements have been fully implemented, including the infrastructure issue. The placement continues to work on job planning and SPA allocation and a further update was requested in November 2018, which has not yet been received.	Implementation of these requirements is being managed via the local clinical placement quality management system and the School of Medicine will continue to work with the placement and monitor progress. Please cross-reference to lines LIV1819-p017 and LIV1819-p021 below.	31/12/2018	Changes falling behind	Director of Clinical Quality	
LIV1115-844 to 48	Concern	Wirral University Teaching Hospital NHS Trust	Arrowe Park Hospital		3, 4, 5	Theme 2 Educational governance and leadership	There were concerns around the clarity of educational governance structures, job planning and SIFT transparency. The Clinical Skills department is well organised and highly rated by students, but the visiting panel felt that a strategic overview was required in addition to a review of storage space.	20/11/2015	Quality Visit to Clinical Placement	The School of Medicine undertook an update check visit with the Trust on 26.07.2017 to review progress. There is now a robust education governance structure and an organogram will be provided. There are year leads with time in their Job Plans, although further work is required. There is a clinical skills IT technician in place, and work is underway to enhance sim, with sessions in years 3 and 4. There is a Strategic Plan for Clinical Skills and Simulation which will be shared with the University. SIFT transparency has not improved although it was recognised that a placement/University SLE will aid this and further monitoring of action relating to this is planned	A standard cycle quality visit took place on 20.11.18. The visiting team noted the positive culture with good relationships between students, education team and clinical teams. The visitors commended the new educational governance structure which is currently being integrated into wider Trust governance structures, documents and an organogram were provided. There is work underway to incorporate educational time within clinicians job plans and there has been investment in clinical skills and simulation. However, delivery of teaching is mainly covered through ward rounds with little bedside teaching. Timetables needs to be reviewed as they lack specificity and lack of planned experiential opportunities and educational supervision is not yet fully established.	Implementation of these requirements is being managed via the local clinical placement quality management system and the School of Medicine will continue to work with the placement and monitor progress. There will be a targeted re-visit in May 2019 to assess progress of implementation.	31/05/2019	Changes falling behind	Director of Clinical Quality	
LIV1016-02 to 16 and 47	Concern	Royal Liverpool and Broadgreen University Hospital Trust	Royal Liverpool and Broadgreen University Hospitals		2, 3, 4, 5	Theme 1 Learning environment and culture	A requirement was made to review the leadership and delivery of the UG programme and develop a QA process, in addition to developing a core educational team and reviewing job planning arrangements. Educational supervision, student induction and communication processes require improvement and the School requested development and implementation of strategies for facilities management and clinical skills.	28/01/2016	Quality Visit to Clinical Placement	The School of Medicine carried out a re-visit on 17.11.16, to monitor implementation of 2016 requirements and recommendations. There have been areas of progress with reorganisation of programmes, more structured local review processes, strengthening of the admin team, more clinicians organising the programme at Directorate level, a new Web Site, and more robust attendance recording. There are still areas to develop, particularly a more robust leadership structure. There have been improvements in induction and raising concerns processes for students, but the placement should ensure that delivery of the curriculum and scheduled events are systematically audited. Educational supervision remains an issue which was highlighted by the School of Medicine. The placement is also in discussions with Clinical Skills at the University to develop the service.	A triggered quality visit took place on 01.02.18. The panel noted the positive tone from management and the potential of the site but continued to have significant concerns about the delivery of the programme. Requirements were made re redesign of placement induction, identifying educational opportunities, developing a quality strategy and conducting a review of programme delivery including timetabling, the firm approach, planned teaching, supporting education leads, improving resources and job planning. An early check re-visit was carried out on 14.06.18. The visiting panel were encouraged by early progress including improved student and educator feedback, development of a firm structure, support to educational leads and a job planning review. However changes impacting on job planning and educational supervision had not yet been implemented and it was agreed that a further targeted re-visit was necessary. A targeted revisit was carried out on 14.11.18. Educational delivery had improved and a positive culture shift was noted but some key requirements had yet to be achieved. The site was discussed with the GMC Manchester Office and HEE. As part of a fuller report, a set of urgent actions were specified including a common room, IT training, addressing issues in cardiology and clinical pharmacology placements and identifying the time needed to deliver the University's teaching and supervision requirements to job-plan time. A further revisit, intended to involve HEE and GMC representation, will be scheduled for the Spring.	The Dean of School of Medicine has discussed the placement with GMC and HEE and a targeted re-visit will be carried out in spring 2019. A set of urgent actions have been identified ahead of the full visit report, for implementation by 31.12.18.	15/07/2019	Changes falling behind	Director of Clinical Quality	Dean of School to discuss placement with HEE and GMC
LIV0316-16 to 24	Concern	Southport and Ormskirk Hospitals NHS Trust	Southport and Ormskirk Hospital		4 and 5	Theme 1 Learning environment and culture	Requirements were made regarding Job Plans for consultants identified as UG teachers and review the function of the core educational team. Strategies for facilities and clinical skills provision are required and there should be more transparency in the use of SIFT funding. Timetabling should be reviewed along with the provision of vascular and breast teaching.	11/03/2016	Quality Visit to Clinical Placement	The School of Medicine visited the Trust on 24.08.2017 for an update on the implementation of the 2016 requirements. Job plans were under review but at the time of the update this was still a work in progress. The School were advised that a Clinical Skills Strategy had been written and were awaiting a copy of this. There had been some improvement regarding breast medicine teaching with the introduction of small group sessions but there remained an issue about how these specialities can be incorporated into smaller Trusts.	A triggered quality visit took place on 25.04.18, during which the outstanding requirements were discussed and some additional requirements specified. The positive tone from management and its recognition of the current challenges (including several changes in the executive team) was welcomed by the School. However, it was noted that the new job planning processes are yet to be embedded and time was not allocated for educational supervision. Clinical skills teaching and sim was considered good, but the scope of delivery was limited by the number of staff and the space available.	There has been significant change in the senior team at the Trust and an informal visit will be carried out on 13th March 2019 during which progress will be discussed.	30/04/2019	Progress being monitored	Director of Clinical Quality	
LIV0416-25 to 33		Aintree University Hospitals NHS Foundation Trust	Aintree University Hospital		2, 3, 4, 5	Theme 1 Learning environment and culture	Requirements were made regarding Job Plans for consultants identified as undergraduate teachers and review the function of the core educational team. Strategies for facilities and clinical skills provision are required and there should be more transparency in the use of SIFT funding. Induction and the multi-professional elements of the programme should be further developed.	22/04/2016	Quality Visit to Clinical Placement	The School of Medicine visited the Trust on 31.07.17 for an update on the implementation of the requirements. It was reported that most teachers have some SPA time in job descriptions although this is easily swallowed up by other things. The Zircadian IT system is used to monitor job plans, although it can be difficult for the educational team to access data in any degree of granularity. A new University placement contract was felt to be an important way of addressing this issue. Since the visit there had been a reorganisation in medical education in the Trust, although this has not affected UG education. There is a move to align UG and PG, and this will provide resilience in both areas, although at the time of the update this had not been fully implemented. A quality manager has been appointed although this has impacted more on PG. There are now year leads in place that have time within their Job Plans	Progress of implementation has been monitored. Inductions are now delivered in line with University guidelines. Practice Education Facilitators are involved in delivering the curriculum at the placement and a new clinical lead for year 3 has been appointed. The surgical programme has been updated. Work is ongoing regarding job planning. An Integrated Planning Team is responsible for planning for facilities going forward due to the merger. Outstanding issues regarding job planning and facilities will be picked up during the standard cycle quality visit	A standard cycle quality visit has been arranged for 26th February 2019	26/02/2019	Progress being monitored	Director of Clinical Quality	

LIV1116-42 to 45	Concern	Abercromby Medical Centre, Liverpool	Abercromby Medical Centre, Liverpool		3, 4	Theme 5 Developing and implementing curricula and assessments	It was agreed that the placement should review and monitor the reporting and supervisory arrangements for students to ensure that a timetable is provided with the required tutorials and clinical sessions and that this timetable is audited to ensure the teaching is delivered as stated. Induction information should include guidance for students to raise concerns about educational issues and patient safety.	07/11/2016	Quality Visit to Clinical Placement	Re-visit scheduled for February 2018	The placement was visited on 13th April 2018. Induction information had been reviewed and supplemented to include guidance around raising concerns. A formal timetable has been developed for the first week of the placement, and for the following three weeks, a more flexible timetable is in place and discussed with the students at the start of each week. The placement were asked to monitor this and the quality team will review student feedback to ensure that this arrangement continues to be suitable. Supervisory arrangements have been reviewed and tightened up. All 3 GP Partners are GP Trainers and a salaried GP is the Year 4 Director at the School of Medicine. Cover arrangements are organised carefully by the PM and GPs liaise to discuss and plan students issues via formal and informal meetings.	The placement will be revisited in April 2019 to ensure that the timetabling and supervision arrangements continue to be suitable.	30/04/2019	Progress being monitored	Director of Clinical Quality	
LIV0916-48 to 54		Blackpool Teaching Hospitals NHS Foundation Trust	Blackpool Hospital		3, 4, 5	Theme 1 Learning environment and culture	Requirements were made regarding facilities, particularly wifi and student access to patient records. Timetabling and induction processes are to be reviewed and educational governance structures to be clarified. There were discussions around educational supervision.	29/09/2016	Quality Visit to Clinical Placement	Implementation of these requirements and recommendations are being managed via the clinical placement quality management system in the School of Medicine.	Wifi was upgraded in April 2017 and the Trust have audited student access to records and introduced a system to monitor this going forward (information and signposting at induction, communication and reminders). The governance structure was clarified. Improved induction processes were introduced for the September 2017 cohort. The Trust have reviewed their timetables to provide a balance between longer placements and rapid progression through specialities. In medicine, Diabetes and Endocrinology have been removed from the programme allowing for a 2 week placement in another sub-specialty, namely Cardiology. In Surgery, the Blackpool curriculum offers a 6 week placement, providing continuity.	Implementation of these requirements is being managed via the local clinical placement quality management system and the School of Medicine will continue to work with the placement and monitor progress. A standard cycle quality visit will be arranged for the 2019 calendar year	30/04/2019	Changes sustained	Director of Clinical Quality	
LIV1116-55		North West Boroughs Healthcare NHS Foundation Trust	Hollins Park		3, 4	Theme 2 Educational governance and leadership	Requirements were made around induction and MDT involvement. The placement will develop a quality strategy and there will be a review of job planning for consultants identified as UG teachers. There should be more transparency around the use of SIFT funding and the placement will work with the University to review how mental health teaching is developed and delivered	10/11/2016	Quality Visit to Clinical Placement	Implementation of these requirements and recommendations are being managed via the clinical placement quality management system in the School of Medicine, and the University will continue to work with the placement and monitor progress around mental health teaching.	The induction has been improved and now includes details of how students should raise concerns. Education is included in the job plans of all consultants identified as undergraduate teachers. More MDT opportunities are available to year 4 students. Work is ongoing to facilitate work between the Trust and University regarding mental health teaching.	Implementation of these requirements is being managed via the local clinical placement quality management system and the School of Medicine will continue to work with the placement and monitor progress.	30/04/2019	Progress being monitored	Director of Clinical Quality	
LIV0117-56		St Helens and Knowsley Teaching Hospitals NHS Trust	Whiston Hospital		2, 3, 4, 5	Theme 5 Developing and implementing curricula and assessments	The Trust will review and improve student induction. There will be a review of the delivery of the programme to ensure there is consistency between the St Helens and Whiston sites and between obstetric, medicine and surgery placements. It was required that the Trust makes UG teaching a core responsibility of consultants identified as UG Teachers within job plans and a review of PA allocation.	20/01/2017	Quality Visit to Clinical Placement	Implementation of these requirements and recommendations are being managed via the clinical placement quality management system in the School of Medicine, and the University will continue to work with the placement and monitor progress.	An update in February 2018 demonstrated that induction has been improved and following a year 5 student experience visit in October 2018, work will be undertaken to minimise duplication of induction content. Following a review, education is now recognised in the job plans of those consultants identified as undergraduate teachers. Work is underway to ensure consistency of delivery between sites and placements but an update on this has not been received since February 2018.	Implementation of these requirements is being managed via the local clinical placement quality management system and the School of Medicine will continue to work with the placement and monitor progress.	30/04/2019	Changes falling behind	Director of Clinical Quality	
LIV0517-57		The Walton Centre NHS Foundation Trust	Walton Centre		1, 2, 3	Theme 2 Educational governance and leadership	There is work to be done to improve communication between the Educational Team and the wider hospital placements and ensure that clinical teachers are engaged with the curriculum. Further work in the areas of job planning and SIFT transparency was agreed. The placement will work with the School of Medicine to see how the neurology clinical placement can change within the constraints of the overall curriculum	10/05/2017	Quality Visit to Clinical Placement	Implementation of these requirements and recommendations are being managed via the clinical placement quality management system in the School of Medicine, and the University will continue to work with the placement and monitor progress.	Measures have been put in place to improve communication, the success of which has been supported by recent student evaluation. Work is ongoing to improve job planning, teacher engagement and work with the School to develop the curriculum.	Implementation of these requirements is being managed via the local clinical placement quality management system and the School of Medicine will continue to work with the placement and monitor progress.	30/04/2018	Progress being monitored	Director of Clinical Quality	
LIV0217-58		Warrington and Halton Hospitals NHS Foundation Trust	Warrington Hospital		4, 5	Theme 2 Educational governance and leadership	The Trust will review and develop induction processes and the clinical skills services on the Warrington site and make UG teaching a core responsibility of consultants identified as UG Teachers by including this within Job Plans and Appraisals. SIFT transparency should be improved and the educational governance structures clarified. MDT opportunities will be more fully developed.	16/02/2017	Quality Visit to Clinical Placement	We note the positive actions being taken but the need for further work to complete our requirements. Additionally we have noted some negative student feedback.	Governance arrangements have been clarified and the Trust will supply an organogram for future reference. There have been developments regarding Clinical Skills and the possibility of a permanent clinical skills room at the main site is being monitored and discussed with the site. Further clarification is required regarding assurance of the consistency of local and rotational induction. A scoping exercise for job planning has been undertaken and an update on this has been sought. Further work is needed to review and collate the MDT opportunities available.	Implementation of these requirements is being managed via the local clinical placement quality management system and the School of Medicine will continue to work with the placement and monitor progress. A standard cycle quality visit will be arranged for the 2018/19 academic year.	31/12/2018	Progress being monitored	Director of Clinical Quality	
LIV0517-59		Alder Hey Children's Hospital NHS Foundation Trust	Alder Hey		3, 4	Theme 2 Educational governance and leadership	It was agreed that formal educational governance structures would be further developed and that the use of SIFT funding would be made more transparent. Requirements were made around student access to IT systems and resilience in the UG team.	05/05/2017	Quality Visit to Clinical Placement	Implementation of these requirements and recommendations are being managed via the clinical placement quality management system in the School of Medicine, and the University will continue to work with the placement and monitor progress. There is a piece of work being undertaken by the School of Medicine in relation to core/site induction	Educational Governance structures have been clarified and strengthened and an additional staff member and a review of working practices has seen an improvement in team resilience. Work is underway to identify funding streams and align budget lines. Year 3 IT access has now been resolved and the Trust are working to strengthen year 4 access.	Implementation of these requirements is being managed via the local clinical placement quality management system and the School of Medicine will continue to work with the placement and monitor progress.	30/04/2019	Progress being monitored	Director of Clinical Quality	
LIV0317-65	Concern	GP placements	Various GP placement sites in the North West and North Wales		3, 4	Theme 2 Educational governance and leadership	Requirements were made to: Theme 1 - ensure students are aware of how to raise concerns about patient safety; Theme 2: review and formalise the process for quality assuring the placement and improve job planning and resilience in educational teams; Theme 4 - ensure GP Tutors attend University training sessions; Theme 5 - ensure students receive protected tutorial time and reviewing placement arrangements to ensure that students can continue to see the expected >12 patients a week.	November 2016 to August 2017	Quality Visit to Clinical Placement	Implementation of these requirements and recommendations are being managed via the clinical placement quality management system in the School of Medicine.	Of the 65 requirements relating to this period, 92% are fully completed or have moved significantly towards completion (68% completed, 24% underway) and we are awaiting updates from the remaining 5 placements.	Implementation of these requirements is being managed via the local clinical placement quality management system and the School of Medicine will continue to work with the placement and monitor progress.	Various	Changes sustained	Deputy Director of Quality (GP)	
LIV1217-67	Concern	Commonfield Road Surgery	Wirral		3	Theme 5 Developing and implementing curricula and assessments	Several students on placement at Commonfield Road during 2017 reported that they are not afforded sufficient opportunity to lead consultations with patients.	21/12/2017	Review of student evaluation	An update was received that this had taken place and it had been agreed within the placement that GP should leave the room and work elsewhere during student-led appointments, returning at the end of the consultation for review. The comments received via student evaluation indicate that these changes may not have been sustained.	A targeted re-visit was carried out on 23.02.18. It was noted that although the GPs and Primary Care Health Team have an active role in medical education, student evaluation is still mixed with some students reporting a positive experience and some continuing to comment on the lack of opportunities for independent consultation and formal teaching received. A dedicated GP Tutor has been made available to review these issues and come up with solutions on a project basis. Requirements were made for the practice to review the organisation of the placement and consider further how they can manage student expectations around local delivery of the programme. A targeted re-visit will be carried out in February 2019.	Implementation of these requirements is being managed via the local clinical placement quality management system and the School of Medicine will continue to work with the placement and monitor progress. A targeted revisit will take place in February 2019.	28/02/2019	Progress being monitored	Deputy Director of Quality (GP)	

LIV1819-p016	Concern	Liverpool Womens Hospital NHS Foundation Trust	Liverpool Womens Hospital		3,4,5	Theme 1 Learning environment and culture	Timetabling remains a cause for concern. Problems include cancellations, students not being expected or being turned away from clinical experiences and teachers not knowing which students are going to attend their clinics. The placement were asked to review timetabling and provide evidence of robust quality assurance, ensuring that teaching occurs as stated and cancelled sessions are rescheduled. The lack of a robust system for educational supervision for years 3 and 4 was identified and a requirement was made to develop a framework for educational supervision complying to University and HEE standards. The placement also need to develop clear arrangements for Clinical Supervision and undertake further work on job planning and access to the ePR.	21/09/2017	Quality Visit to Clinical Placement	The clinical sub-dean and DME have met to discuss job planning and an update to this meeting has been sought but not yet received. The Trust have been asked to provide evidence of a robust audit to review and update undergraduate timetables on an ongoing basis, this has not yet been received. Provision of student access to EPR is an ongoing project	Implementation of these requirements is being managed via the local clinical placement quality management system and the School of Medicine will continue to work with the placement and monitor progress.	A targeted revisit will take place in 2019.	31/12/2018	Changes falling behind			
LIV1819-p017	Concern	Countess of Chester Hospital NHS Trust	Countess of Chester Hospital		3,4,5	Theme 2 Educational governance and leadership	It was agreed that further work was needed to include educational responsibility in job plans and to implement educational supervision arrangements as per University and HEE requirements. An infrastructure strategy is required and the clinical skills offer requires improvement.	08/11/2017	Quality Visit to Clinical Placement	Several requirements have been fully implemented, including the infrastructure issue. The placement continues to work on job planning and SPA allocation. The Trust was asked to provide assurance that undergraduate teaching has been made a core responsibility of all teachers as specified in the requirement, and that this is included within job plans and appraisals. The Trust advised that this course of action has been recommended to the Board by the DME. Evidence is available that educational supervision is being well delivered	Implementation of these requirements is being managed through the clinical placement quality management system and School of Medicine will continue to work with the placement and monitor progress.	Implementation of these requirements is being managed via the local clinical placement quality management system and the School of Medicine will continue to work with the placement and monitor progress.	28/02/2019	Progress being monitored			
LIV1819-p018	Concern	Southport and Ormskirk Hospitals NHS Trust	Southport and Ormskirk Hospital		3,4,5	Theme 5 Developing and implementing curricula and assessments	The Trust will redesign site and placement level induction to ensure consistency and highlight the process for raising concerns and would conduct a full internal review of the delivery of the programme, focusing on timetabling and the provision of teaching, both formal and experiential. A clinical skills and simulation strategy will be produced and UG educational commitments will be reflected in job plans	25/04/2018	Quality Visit to Clinical Placement	The Clinical Education Leads will work with the College Tutor for Clinical Skills and Simulation to develop a business case and strategy aimed at improving scope of delivery, resources and staffing to achieve excellence in medical education provision, with a target date for production of February 2019. Core induction has been redesigned to include key requirements including raising concerns. Regarding departmental inductions, all areas required to produce standardised induction handbooks and programmes to ensure consistency and continuity and providing information regarding raising concerns, patient / student safety, working arrangements and contact information. An initial review of the programme has been conducted with all Specialty leads provided with a copy of the University curriculum. The newly appointed Clinical Education Lead for Undergrad Medical Education is working with specialty leads to ensure consistency and effectiveness of formal teaching, identifying best practice for dissemination across all areas and identifying areas for improvement. The CEL will also look into possibilities for expansion of experiential opportunities including increased clinical skills sessions on the Ormskirk site. Educational and clinical supervisors have recognised time in their job plans, and work is ongoing to address SPA time for all consultants identified as clinical teachers.	Implementation of these requirements is being managed via the local clinical placement quality management system and the School of Medicine will continue to work with the placement and monitor progress.	A targeted re-visit will be carried out by School of Medicine to the placement on 13th March 2019	25/04/2019	Progress being monitored			
LIV1819-p019	Concern	GP placements	Various GP placement sites in the North West and North Wales		3 and 4	Theme 2 Educational governance and leadership	In some placements with good engagement of the wider team of GPs and the primary care health team, requirements were made to monitor educational governance processes, ensuring that the Lead GP Tutor retained accountability for the provision of education and that the curriculum is delivered in a consistent manner. Induction and timetabling processes were required to be thorough and consistent and improved engagement with GP Tutor training and update events is required of several placements	September 2017 to July 2018	Quality Visit to Clinical Placement	Implementation updates are obtained via local clinical placement quality management system and the progress of implementation will be monitored throughout 2019.	Implementation of these requirements is being managed via the local clinical placement quality management system and the School of Medicine will continue to work with the placement and monitor progress.	The GP placement quality framework has been revised and improved. All placements will receive: a) A routine Quality Visit on a five-year rolling programme and b) An annual Quality Data Review, the outcome of which will determine if the placement receives a Triggered Quality Check, a Triggered Quality Visit or returns to annual Quality Data Monitoring. Action plans will be monitored via a bespoke action tracking system.	30/04/2019	Progress being monitored			
LIV1819-p021	Good practice	Countess of Chester Hospital NHS Trust	Countess of Chester Hospital		3,4,5	Theme 1 Learning environment and culture	The placement has a forward-thinking approach to education - management opportunities are available to undergraduates, such as sitting on interview panels and exposure to Trust leadership and there is a new F1 on-call simulation event for students. A learning agreement is signed by all students and there is a high level of consultant input with structured timetables.	08/11/2017	Quality Visit to Clinical Placement								
LIV1819-p022	Good practice	Southport and Ormskirk Hospitals NHS Trust	Southport and Ormskirk Hospital				The Trust is a significant partner of the School of Medicine and, despite the challenges of the last few years regarding senior team resilience, has potential to become a premier placement. The visiting panel noted that the Trust will pay up to 75% for senior clinicians to undertake specific educational qualifications. This was noted as good practice by the clinical teachers present at the visit.	25/04/2018	Quality Visit to Clinical Placement								