General Medical Council

Regulating doctors Ensuring good medical practice

Action Plan for St George's, University of London

Requirements

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Report Ref	Due Date	Description	Action taken by medical school/ deanery to date	Further action planned by the medical school/deanery	Timeline for action (month/ year)	Medical school/ deanery lead
1	Next scheduled report to the GMC	Improve the timeliness and relevance of feedback on assessment	1.An additional member of staff has been recruited and additional budget identified for the Examinations Office to develop and implement new initiatives to improve feedback to students	1.Development and implementation of e-assessment packages is in process	1.E-assessment packages will be live in time for: end of year written exams for T & P Year students in July 2013 MBBS4 Yr1 and F Year in academic year 2013/14	Kathy Boursicot
			2.Timeliness of SSC feedback is being specifically addressed through Assessment Review and Periodic Review		OSCE feedback package expected for academic year 2013/14	

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			3. It has been agreed that students are to receive feedback within 28 days (with possible changes to SSC assessment processes to enable this) 4. Exams and Programmes teams have incorporated a feedback schedule into the year timetables to provide a visual ata-glance reference for students	2 &3 Feedback Policy - Institutional feedback policy outlining principles and minimum standards for feedback (includes MBBS) 3. Implementation of 20 minute online training programme for all academic staff involved in providing feedback to students	Academic year 2013/14 Training is planned to take place during the Summer 2013	
2	Next scheduled report to the GMC	Ensure that students are aware of their immunity status	Communications around the existing OH Process are currently under review to ensure better clarity for students and to explore opportunities to enhance the service	1. Communication is to be sent to students outlining current process and informing them of recent changes to roles of occupational health staff 2. Process review to include developments to ensure that students are provided with proof of immunity status in the 1 st year of study. They will then be responsible for maintaining and updating this record which should be valid for the duration of their studies / programme	1.Email to all students to be sent by May 2013 2. OH process, to include proof of immunity status, to be reviewed in time for communications with new intake students for academic year 2013/2014 and will be monitored thereafter on an ongoing basis	Sara Doherty

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Hospital sc report re	lext icheduled eport to he GMC	Review the capacity for clinical placements to ensure that students receive hands on experience in all specialties	1. SGH is in liaison with SGUL regarding the format, length and timing of all clinical placements to address overcrowding issues. Revised clinical placement timetables (to include early-years clinical attachments) are currently being discussed and developed as part of the Periodic Review. This process involves clinical representation from SGH	1. Agreement of revised timetables as part of and following Periodic Review (May 2013). An implementation strategy will then be developed to ensure appropriate changes are in place in time and that changes are communicated to both staff and students effectively 2. Student feedback will be regularly reviewed and the number of students in an area at any one time will be monitored. Results of feedback and student numbers will be reported and discussed at the Joint Undergraduate Committee	Implementation plan will work towards a timeline for the new timetables to be in place from academic year 2014/2015 onwards April 2013	David Oliveira

Recommendations

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1	Next scheduled report to the GMC	Improve communication with students	1.Involvement of SU and student reps in the consultation process as part of the Periodic Review 2. Work is currently being undertaken with administrative staff to address communication methods and styles in order to reinforce a consistent, approachable, professional service to students at all times 3. Prompt communication to cohorts with explanation, if there is a delay in issuing information expected by students. 4. Principal's Open Meeting with students held and notes and actions circulated to all students	1. A Portal site is in development for generic MBBS information relevant to all MBBS cohorts providing consistent and clear information across all years. This is to include contact information for Programme administrators as well as address common and frequently asked queries or concerns 2. Standard communication templates are currently being developed for use by all administrators e.g. for attendance and sickness 3. An increased number of face-to-face cohort briefings with administrative staff and lead academic staff will be timetabled to provide regular and better contact with students	August 2013 August 2013 13/14 Academic Year	Sophie Bowen

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				4. Student access to administrative staff via the student centre will provide better contact, direct and relevant programme and assessment related advice to be provided and a more open environment to enhance student feedback opportunities	13/14 Academic Year	
2	Next scheduled report to the GMC	Review the organisation of clinical placements	1. Revised clinical placement timetables are currently being discussed and developed as part of the Periodic Review. This process involves clinical representation from SGH as well as staff involved in curriculum development and senior administration and assessment 2. Student views have been canvassed again on our current allocation process with an invitation to suggest alternative processes 3. Review of current communication styles to adopt a more approachable manner	1. Agreement of revised timetables as part of and following Periodic Review (May 2013). An implementation strategy will then be developed to ensure appropriate changes are in place in time and that changes are communicated to both staff and students effectively 2. Improved referencing by clinical year administrators to try to minimise duplication of specialty experiences where possible 3. Investigation into electronic software that can be implemented to	1.Implementation plan will work work towards a timeline for the new timetables to be in place from academic year 2014/2015 onwards 2. Placement allocation processes to be changed for summer 2013 for placements running in academic year 2013/14 3. Demonstrative visits are being planned for summer 2013. Any future investment will be factored into the 13/14 financial year if appropriate Placement allocation processes to be changed	David Oliveira / Pippa Tostevin

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				enhance allocation processes is taking place 4. Improved referencing by clinical year administrators to try to minimise duplication of specialty experiences where possible	for summer 2013 for placements running in academic year 2014/15	
3	Next scheduled report to the GMC	Improve the relationship between students and administration	1.Involvement of SU and student reps in the consultation process as part of the Periodic Review Work is currently being undertaken with administrative staff to address communication methods and styles in order to reinforce a consistent, approachable, professional service to students at all times	1. A Portal site is in development for generic MBBS information relevant to all MBBS cohorts providing consistent and clear information across all years. This is to include contact information for Programme administrators as well as address common and frequently asked queries or concerns	August 2013	Sophie Bowen
			2. Prompt communication to cohorts with explanation, if there is a delay in issuing information expected by students	2. Standard communication templates are currently being developed for use by all administrators e.g. for attendance and sickness	August 2013	

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			3. Principal's Open Meeting with students held and notes and actions circulated to all students	3. An increased number of face-to-face cohort briefings with administrative staff and lead academic staff will be timetabled to provide regular and better contact with students	13/14 Academic Year	
St George's Hospital report 1.	Next scheduled report to the GMC	Give students access to NHS clinical IT systems before they start placements	 Computing Services are working closely with the Undergraduate Co-ordinator to ensure the timely distribution of clinical IT accounts to students for the remainder of 12/13 Developmental meetings between key individuals and teams from the Trust Registration Authority, Information Governance, Computing Services and SGUL Registry are scheduled 	1 & 2 Feedback from students and Clinical Leads for student attachments will demonstrate how the processes are working and will help improve and inform the process for future years. This will be reported and discussed at the Joint Undergraduate Committee	April 2013	Sophie Bowen
Croydon University Hospital report	Next scheduled report to the GMC	Education leaders to take every opportunity to engage with the medical schools to maintain a collaborative relationship	1. Sub-Dean meetings co- ordinated by SGUL are held three to four times per year with representatives from each LEP. The representatives will disseminate the areas of good practice to their Trusts	The Director of Medical Education and Clinical Sub-Dean at CUH will raise and discuss the importance of collaborative relationships with medical schools at the next local education board meeting SGUL representatives	CUH to confirm	David Oliveira

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				will encourage sharing of best practice and continue to develop collaborative relationships through medical education meetings such as the Sub-Dean meetings and individual site meetings	September 2013	
Croydon University Hospital report	Next scheduled report to the GMC	Review the potential to expand placements into the Trust's existing community clinics	CUH are already working towards the development of community placements within their F1 foundation programme	Further discussions will take place through the Sub-Dean meetings and site visits with CUH to ascertain what could be achieved at undergraduate level	Academic year 2013/2014	David Oliveira

Good practice

Report Ref	Due Date	Description	Details of dissemination (across LEPs within the deanery or outside the deanery)	Any further developments planned to enhance the area of good practice	Timeline for action (month/ year)	Medical school/ deanery lead
1	Next scheduled report to the GMC	Use of simulated and expert patients, particularly those with long term conditions and those with learning difficulties, in teaching and assessment	Recently presented at UK Council of Clinical Communication Diversity Conference (Manchester 2013) Currently advise Cambridge (Medical School) and about to advise Barts (Medical School)	Part of a symposium in 2014 (Ottowa)	Symposium – 2014	Jo Brown

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2	Next scheduled report to the GMC	Equality and Diversity training for staff	A strategy for dissemination across LEPs to be discussed at Equality and Diversity Committee	1. Introduction of E&D training for all students 2. An in depth review and update of current training programme, to include more challenging scenarios based on anecdotal examples given during feedback 3. Further development of DASH (Domestic, Abuse,	Student E&D training – pilot in academic year 2014/15 E&D scenario review – academic year 2013/14 Ongoing	Kea Horvers
3	Next scheduled report to the GMC	Regular review of assessment strategy to ensure that it is in line with current best practice	Our dissemination strategy takes a number of approaches: 1. Liaison via the BME and the BSE at St George's Trust, as well as via the Clinical Education Group 2. Liaison via the Associate Deans meetings, which includes all the Associate Teaching Hospitals 3. All details of our MBBS Assessment Strategy, Schemes of Assessment etc are posted on SGUL Assessment pages, the	1. The Assessment Strategy will continue to be reviewed in the light of published research and best practice advice from the GMC 2. Regular comprehensive psychometric analysis of all assessments to ensure the validity of our decisions in relation to progression and graduation 3. Introduction of an	1.The timeline for this is an annual review, held in October/ November every year 2.Timeline dependent on Institutional Periodic Review and agreement to appointment of appropriate personnel 3. Institutional strategy already approved by QAEC. MBBS specific framework currently	Kathy Boursicot

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		intranet and on Moodle 4. When major changes such as the use of WBAs on clinical placements are introduced, a team of academics visits every Associate Teaching Hospital to brief the clinical teachers, using videos and an online resource to assist with understanding of implementation 5. Our dissemination of good practice more widely includes presentations at national and international conferences as well as submission of papers for publication in medical education journals	institutional strategy for feedback to students, and an MBBS Course specific framework for all assessments, which will include strict timelines and guidelines for the quality of the feedback 4. Implementation of an e-assessment package to manage our assessment items into an electronic database, with every item tagged with blueprint coordinates mapped to TDs and GMP. This will enable accurate, informative and timely feedback for the students 5. Introduction of an e-portfolio for all students on the MBBS course. This will be usable as an App on any mobile platform as well as on a computer. All WBAs and Professionalism	being finalised and will be instituted from the beginning of the next academic year 4. Implementation in next academic year 5. Pre-pilot in the next 4 months, Pilot in T and P years in academic year 2013-2014 Full implementation in academic year2015	

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				assessments as well as end of placement reports will be scored and recorded in the e-portfolio as well as being uploaded centrally. Results of all examinations and the accompanying feedback will be sent directly to each student's e-portfolio. This unitary portfolio will enable tracking of students by individualised records - for themselves and for the institution		
St George's Hospital report	Next scheduled report to the GMC	The trust is building effective working relationships with other trusts and primary care in South London	Sub-Dean meetings co-ordinated by SGUL are held three to four times per year with representatives from each LEP	SGUL will continue to keep abreast of developments and review regularly through medical education meetings and boards to ascertain additional benefits	Academic year 2013/2014 onwards	

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St George's Hospital report 2.	Next scheduled report to the GMC	High quality simulation facilities offer excellent training opportunities to students	Membership of the South West London Academic Health Science Network	The Trust has been awarded funding by the London Deanery for enhanced training facilities to F2 dentists and CDP trainees. Arrangements are being made for the 16 phantom head workstations that will deliver the training to be installed in the medical school	Summer 2013	Trust representative / David Oliveira
Croydon University Hospital report 1.	Next scheduled report to the GMC	High quality simulation facilities offer excellent training opportunities to students	Sub-Dean meetings co-ordinated by SGUL are held three to four times per year with representatives from each LEP. The representatives will disseminate the areas of good practice to their Trusts	SGUL will continue to keep abreast of developments and review regularly through medical education meetings and boards to ascertain additional benefits	Academic year 2013/2014 onwards	Trust representative / David Oliveira