

Annual Quality Assurance Summary

This summary forms part of our annual quality assurance to review how an organisation is meeting our standards for medical education and training as detailed in [Promoting excellence](#). It provides an overview of the QA activities undertaken over the course of a year and an overview of findings including any areas of notable practice or requirements and recommendations we have set. The summary is published.

Organisation	Swansea University Medical School
Review period	February 2021 – February 2022 (Year 3)

Overview of findings

Overall findings statement

From the SAQ submission, and the clarification of some points during the SAQ meeting, we consider that Swansea University Medical School is meeting the standards set out in the GMC's *Promoting excellence*.

Following the SAQ meeting, two potential quality activities were identified. These were document reviews covering Equality, Diversity and Inclusivity (ED&I) and multi-professional learning. A number of documents were therefore requested for further scrutiny. Circumstances outside of the school's control led to some delays and difficulties in providing information, but we did receive the following:

A written update providing details of how ED&I had been embedded across the programme. This confirmed that:

- Active Bystander and Unconscious Bias Training had been provided for the faculty, and Year 1 students had also received the Active Bystander module in their pre-course material; and
- Trans Health and Learning Difficulties had been embedded into the curriculum.

The written update also provided information about multi-professional learning in Graduate Entry Medicine (GEM).

Upon reviewing the documentation provided, we did not believe it was possible to complete a full document review, so it was agreed that this was something to be revisited in the next cycle.

Quality Activity undertaken

	Activity	Date	Summary
1	SAQ submission	8 April 2021	The SAQ was submitted on time and covered all five themes of <i>Promoting excellence</i> . The submission included a list of planned activities that we could observe for quality assurance purposes.
2	SAQ feedback meeting	09/06/2021	<p>This meeting was held to provide summarised feedback to Swansea on its 2021/22 SAQ submission, and to seek clarity and additional information on certain responses - as identified by the GMC following an analysis.</p> <p>The meeting also provided an opportunity to discuss potential QA activities to undertake in this annual cycle. The activities were not selected because of any specific risks identified through the SAQ. We are satisfied that where further information and/or clarification is still required that this can be provided in the next SAQ submission.</p> <p>Following this meeting, Swansea was provided with written feedback on the SAQ submission.</p>

Quality Reporting System (QRS)

We use the QRS to monitor concerns raised by organisation when they identify that our standards are not being met in a training environment. Concerns are managed locally by the responsible organisation until resolution.

Activity	Date	Summary
Quality Reporting System (QRS)	Ongoing	The school has one current open item on the QRS. We have assurance that there are effective local quality management processes in place, but we

		encourage the school to continue assessing these concerns against the threshold for reporting to the GMC via the QRS.
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Requirements and recommendations

We set requirements and recommendations where we have found that our standards are not being met or where we have found areas for improvement relating to our standards. We are pleased to confirm that no requirements or recommendations have been set during this annual QA cycle.

Next steps

Overall findings statement

The GMC's responses to the information submitted in the SAQ gives feedback on each theme to help Swansea Medical School complete the updates to the questionnaire in the next annual cycle. Further to this, we would like to learn more about the following:

Theme 1: Roll-out of the new multi-professional placement.

Theme 2: The work being undertaken to streamline responses to the student evaluation, making it easier to audit responses and outcomes.

Theme 3: The student peer-to-peer mentoring programme and the appointment of a deputy to the Student Support Lead.

Theme 4: Tracking the distribution of the SIFT funding to ensure this supports undergraduate medical education.

As it has not been possible to complete the quality activities (document reviews), in the next cycle we would like to learn more about the work undertaken to embed the principles of ED&I across the programme. We would also like to find out more about how the focus on ED&I will influence the medical school curriculum. We would also like to improve our understanding of how the school approaches multi-professional learning for students.

In the next annual cycle, we would also like to meet with students to hear their perspectives on the programme, and to triangulate any findings from our quality activities.

Organisation response

The organisation has the right to reply to the AQAS; if they have responded it will be included below.

Organisation response

