General Medical Council

Review of our education framework – Equality, diversity and inclusion

This document summarises the equality, diversity and inclusion (ED&I) content within the standards included in our review of the education framework.

This includes the standards that shape the design, development, management and delivery of education and training for doctors, anaesthesia associates (AAs) and physician associates (PAs), which we refer to in this survey as the organisational standards:

- *Promoting excellence: standards for medical education and training*
- *Excellence by design: standards for postgraduate curricula*
- Annex B and Annex C of *Assuring readiness for practice: A framework for the MLA*
- *Standards for the delivery of PA and AA pre-qualification education*
- *Standards for PA and AA curricula*

The review also includes our standards that specify the knowledge, skills and behaviours learners must develop and demonstrate during their education and training. We refer to these as learning outcomes:

- *Outcomes for graduates* and *Practical skills and procedures*
- *Generic professional capabilities framework*
- *PA and AA generic and shared learning outcomes*

You can read a summary of the organisational standards documents here and the learning outcomes documents here.

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Organisational standards

1. *Promoting excellence: standards for medical education and training*

Promoting excellence: standards for medical education and training requires organisations responsible for the delivery and management of education and training to:

- Have educational governance systems which make sure that education and training is fair and based on principles of equality and diversity. (S2.3)
- Evaluate information about learners' performance, progression and outcomes – such as the results of exams and assessments – by collecting, analysing and using data on quality and on equality and diversity. (R2.5)
- Make sure that recruitment, selection and appointment of learners and educators are open, fair, and transparent. (2.20)
- Make reasonable adjustments for disabled learners in line with the Equality Act 2010 and that learners have access to information about reasonable adjustments, with a named contact. (R3.4)
- Make reasonable adjustments to help disabled learners meet standards of competence in line with the Equality Act 2010, although the standards of competence themselves cannot be changed. Reasonable adjustments may be made to the way that the standards are assessed or performed (except where the method of performance is part of the competence to be attained), and to how curricula and clinical placements are delivered. (R5.12)

2. *Excellence by design: standards for postgraduate curricula*

Excellence by design: standards for postgraduate curricula requires organisations responsible for the design and development of postgraduate curricula to:

- Demonstrate they meet their legal obligations under equality legislation and have considered equality, diversity and fairness in the development of the curriculum and programme of assessmen.t (CS2.3, CR2.6)
- Describe how input and involvement was sought from relevant groups, including patients, employers and learners. This includes learners, with specific input from doctors who share protected characteristics. (CR2.5)
- Provide guidance on where those involved in assessing learners require professional development related to ED&I and fair decision-making. (CR4.13)
- Set out how the impact of the learning outcomes on the progression of different groups of doctors will be evaluated, including on those who share protected characteristics. (CR5.13)

3. Annex B and Annex C of *Assuring readiness for practice: A framework for the MLA*

We ensure ED&I is embedded in the processes through which the MLA exams and assessments are designed, developed and delivered by MLA assessment providers.

We do this through the applied knowledge test (AKT) requirements (Annex B) and the clinical and professional skills assessment (CPSA) requirements (Annex C) in the MLA framework.

We expect MLA assessment providers to demonstrate ED&I principles have been properly considered when they provide evidence of compliance with a range of the requirements, including requirements which do not explicitly reference ED&I.

We require the provider of an AKT to demonstrate:

- Policies and procedures for conduct and administration which embed fairness and ED&I principles, to ensure a fair and consistent approach to all candidates sitting the AKT. This includes reasonable adjustments, mitigating circumstances, and appeals policies and procedures. (R11)
- They deliver the AKT in a suitable environment for a high-stakes assessment for all candidates (including ensuring it is accessible for all candidates and reasonable adjustments can be made where appropriate). (R12)
- How they will evaluate test performance and outcomes through psychometric analysis, including how the analyses feed into decision-making and quality improvement. (R19)
- Governance structures which embed legal requirements, principles and good practice of ED&I in development, delivery, monitoring and review of the AKT to ensure a fair and comparable test experience for candidates. This includes how ED&I considerations are applied across processes and decision-making. (R20-22)

We require the provider of a CPSA to demonstrate:

- How examiners are recruited, trained, briefed and calibrated, including details of their equality, diversity and inclusion training. (R11)
- How simulated/real patients involved in the CPSA are recruited, trained, briefed and calibrated (R12).
- That there are policies and procedures in place to deal with all aspects of the CPSA, such as reasonable adjustments or mitigating circumstances policies. (R15)
- How assessment data are analysed and how it feeds into post-CPSA review, evaluation and decision-making, including how it is used to improve station quality and inform the development of the CPSA. (R19)

4. Standards for the delivery of PA and AA pre-qualification education

In *Standards for the delivery of PA and AA pre-qualification education* we require organisations responsible for the management and delivery of PA and AA courses:

- Have educational governance systems which make sure that education and training is fair and based on principles of equality and diversity. (S2.3)
- Evaluate information about learners' performance, progression, and outcomes – such as the results of exams and assessments – by collecting, analysing and using data on quality and on equality and diversity. (R2.5)
- Make reasonable adjustments for disabled learners, in line with the Equality Act 2010. Organisations must make sure learners have access to information about reasonable adjustments, with named contacts. (R3.4)
- Make reasonable adjustments to help disabled learners meet the standards of competence in line with the Equality Act 2010, although the standards of competence themselves cannot be changed. Reasonable adjustments may be made to the way that the standards are assessed or performed (except where the method of performance is part of the competence to be attained), and to how curricula and clinical placements are delivered. (R5.8)
- Ensure educators are trained and calibrated in the assessments they are required to conduct. They must also be trained to understand the equality and diversity issues that are relevant to their role as assessors and fair decision-making. (R5.6)

5. *Standards for PA and AA curricula*

In *Standards for PA and AA curricula* we require organisations responsible for the design and development of PA and AA curricula to:

- Make sure education and training is fair and is based on principles of diversity and equality. (CS2.3)
- Describe how input and involvement was sought from relevant groups including patients, employers and learners. This includes specific input from learners who share protected characteristics. (CR2.5)
- Demonstrate that they meet their legal obligations under equality legislation and that they have considered equality, diversity, and fairness in the development of the curriculum. (CR2.6)
- Set out how the impact of the learning outcomes on the progression of different groups of learners will be evaluated, including on those who share protected characteristics. (R4.2)

Learning outcomes

The learning outcomes we set specify knowledge, skills and behaviours we require learners to demonstrate through their education and training, to provide safe, holistic and professional patient-centred care to any patient.

Some of these learning outcomes explicitly relate to the care of patients at specific life stages – children, young people, adults, older people, or people approaching the end of life. And some explicitly relate to the care of patients with long-term conditions, such as learning disabilities, or physical or mental health conditions. This is indicative of the ways in which the outcomes differentiate between types of patients.

The learning outcomes do not include explicit outcomes relevant to the healthcare needs of particular groups of patients within the UK population for which there is evidence of health inequality – for example, women, LGBTQ+ people or people from ethnic minority groups.

Some of the learning outcomes may still be particularly relevant to certain patients. For example, the requirement that learners can communicate effectively with people who communicate differently may be especially relevant when caring for patients with certain disabilities, or patients whose first language is not English.

We highlight below the learning outcomes that explicitly reference ED&I principles.

6. *Outcomes for graduates* and *Practical skills and procedures*

Outcomes for graduates, includes the following learning outcomes that explicitly reference ED&I principles:

- In the 'Professional and ethical responsibilities' section we say newly qualified doctors must behave according to ethical and professional principles. The list includes being able to:
    - raise and escalate concerns through informal communication with colleagues and through formal clinical governance and monitoring systems about:
        - patient safety and quality of care
        - bullying, harassment and undermining. (2.o)
    - act appropriately, with an inclusive approach, towards patients and colleagues. (2.m)
- In the 'Safeguarding vulnerable patients' section we say newly qualified doctors must be able to recognise and identify factors that suggest patient vulnerability and take action in response. This includes being able to describe the principles of equality legislation in the context of patient care. (7i)
- In 'Applying social science principles' section we say newly qualified doctors must be able to apply social science principles, methods and knowledge to medical practice and integrate these into patient care. This includes being able to recognise sociological factors that contribute to illness, the course of the disease and the success of treatment and

apply these to the care of patients – including issues relating to health inequalities and the social determinants of health, the links between occupation and health, and the effects of poverty and affluence. (24, d)

7. Generic professional capabilities framework

The *Generic professional capabilities framework* includes the following learning outcomes that explicitly reference ED&I principles:

- 'Domain 1: Professional values and behaviours' includes 'working within appropriate equality and diversity legislation.' (page 9)

- 'Domain 3: Knowledge' includes 'equality and diversity, including legally protected characteristics' under 'National legislative requirements.' (page 18)

- 'Domain 4: Capabilities in health promotion and illness prevention' includes 'the factors affecting health inequalities and the social determinants of health.' (page 19)

- 'Domain 7: Capabilities in safeguarding vulnerable groups' includes 'apply appropriate equality and diversity legislation, including disability discrimination requirements, in the context of patient care.' (page 23)

- 'Domain 8: Capabilities in education and training' includes 'assess objectively and fairly the performance of learners and other doctors in training.' (page 24)

8. PA and AA generic and shared learning outcomes

The PA and AA generic and shared learning outcomes includes the following learning outcomes that explicitly reference ED&I principles:

- 'Theme 1 – Professional behaviour and trust' includes a section titled 'Professional duties and responsibilities' which says newly qualified PAs and AAs must behave according to ethical and professional principles. The list includes being able to:
    - raise and escalate concerns through informal communication with colleagues and through formal clinical and governance monitoring systems about:
    i. Patients safety and quality of care
    ii. Bullying, harassment and undermining
    iii. Bias and discrimination leading to inequality of care for patients or inequitable opportunities for colleagues. (1, f)

- 'Theme 2 – Professional capabilities' includes a section titled 'Holistic and integrated care' which says newly qualified PAs and AAs must understand principles and values of integrated care and demonstrate when managing and preventing diseases that they have considered the care of the complete person. The list includes being able to:

- understand and recognise factors that contribute to illness, the course of the disease and the success of treatment and apply these to the care of patients. This includes:
    i. issues relating to health inequalities and the social determinants of health, the links between occupation and health, and the effects of poverty and affluence
    ii. recognising the prolonged and historical trauma that some groups are subject to – racism, misogyny, homophobia, transphobia, and other discrimination in population health – and how this affects their trust in the medical professions
    iii. awareness of the existence of biases within the health care system which could affect health inequalities
    iv. having the clinical skills necessary to recognise conditions as they present in different population groups. (12, d)

- 'Theme 2 – Professional capabilities' includes a section titled 'Health promotion and illness prevention' which says newly qualified PAs and AAs must be able to apply the principles, methods and knowledge of population health, and the improvement of health and sustainable healthcare to medical practice. This includes:
    - evaluate the social determinants of health and disease and variations in healthcare delivery and medical practice and the impact this may have on local health and wellbeing, and be aware of health services being accessible to a diverse range of patients in hard-to-reach communities. (13, a)