General Medical Council

Annual Quality Assurance Summary for new schools and programmes

This summary provides an overview of how an organisation is progressing towards meeting our standards as detailed in *Promoting excellence: standards for medical education and training* and *Assuring readiness for practice: a framework for the MLA*.. It outlines the quality assurance activities we undertook and a summary of our findings.

Organisation	Chester Medical School
Review period	(Academic Year 2025 – 2026)

Overview of findings

Overall findings statement
Chester Medical School (the school) received their first intake of students to their Graduate Entry Medicine Programme (GEM) in September 2024. The school are in their second year of the cycle. This summary covers the 2025/2026 cycle of our new school approval process. SAQ & document submissions The cycle began with the school's submission of an updated Self-Assessment Questionnaire (SAQ) and supporting documentation on 24 October 2025. This submission covered updates on the school's development since the last cycle and progress against open requirements and recommendations. A panel of GMC staff and associates scrutinised the SAQ and supporting documentation. On 22 November 2025, feedback was provided on the open requirements and recommendations, and further documents were requested where additional information was required. Additional documents were submitted by the school on 16 January 2026 and reviewed ahead of the February 2026 visit. MLA submission The school provided a first submission on 24 October 2025. A panel of GMC staff and associates scrutinised the MLA compliance documents, and feedback was provided on 22 January 2026. A

further submission and supporting documentation were requested, and this was provided on 26 March 2026. Following review of the submission it was agreed that a new MLA submission should be provided in January 2027.

Visit

An in-person visit took place between 04 and 12 February 2026. The visit was used to triangulate the detail provided within the SAQ, requirements and recommendations submissions. The visit focussed on areas where we needed further assurance of the school's progress towards meeting our standards in delivering year one and two of the programme and preparations for years three and four.

On the visits, the panel identified areas that were progressing well as well as areas where there were continued and new concerns, over the school's progress towards meeting the standards. As a result, the panel requested the school to submit a developed action plan by 01 June 2026.

Action Plan and supporting documents

An action plan was received on 01 June 2026. We requested supplementary documents to support the plan, and these were subsequently provided on 15 July 2026.

Promoting Excellence

	Activity	Date	Summary
1	SAQ submission	24 October 2025	The SAQ was submitted on time and covered all five themes of *Promoting excellence*. It provided an overview of how the school plans to meet our standards in line with its planned timelines. This was scrutinised by the GMC team including our education associates.
2	Document submission	24 October 2025	Documents were submitted alongside the SAQ Submission.
3	Feedback provided on requirements and recommendations	22 November 2025	The GMC provided feedback on the school's open requirements and recommendations that were opened in the previous cycle. All requirements remained open, and one recommendation became a requirement.
4	Second document submission	16 January 2026	Documents submitted ahead of the in person visit to the school.

5	In person visit to LEPs and the school	04 February to 12 February 2026	The visit focused on areas of the SAQ, requirements and recommendations that required further clarification and exploration to provide assurance around the school's progress towards meeting our standards. The sessions we conducted comprised of: • Placement staff • Academic and clinical educators • The Senior Management Team • Quality Management & Placements • Assessment team • Curriculum team • Student support and fitness to practice. • Academic staff • GP and PIVO placement providers • Year one and year two students • Contingency school representatives We met with a range of staff and representatives from Chester Medical School; Warwick Medical School, who are the contingency partner; and placement providers: Countess of Chester NHS Foundation Trust, The Robert Jones and Agnes Hunt Orthopaedic Hospital, NHS Foundation Trust and North Cheshire and Mersey, NHSE Foundation Trust and Primary Care providers. We also met with a group of year one students on campus and year two students at LEPs. At the end of the visit day, we provided verbal feedback.
6	Initial feedback proforma	02 March 2026	A document was sent to the school outlining key feedback following the visit. This included updates on the progress of open requirements and recommendations, which remained open following the visit. Five new requirements were also opened following the visit.

7	SAQ written feedback	25 March 2026	The GMC's line-by-line feedback in response to the school's SAQ submission. This details our review of progression against each of our standards and details additional information sought at the next submission inclusive of additional supporting documentary evidence required.
8	Action plan linked to all open requirements and recommendations.	01 June 2026	An action plan with a supporting narrative was submitted, providing an update on requirements and recommendations.
9	Additional documents linked to action plan	15 July 2026	The school submitted documents which we requested in support of the action plan.

MLA Framework

	Activity	Date	Summary
1	MLA compliance submission	24 October 2025	The compliance submission was submitted on time and covered all AKT and CPSA requirements. It provided a good overview of how the school plans to meet our standards in line with its planned timelines. This was scrutinised by the GMC team, including our education associates.
2	Document submission	24 October 2025	Documents submitted alongside the MLA compliance form.
3	Initial feedback	22 January 2026	Initial feedback on MLA compliance submission, additional documentation was requested to provide assurance over the plans for the delivery of MLA and for triangulation at the visit.
4	Re-submission of MLA compliance documents	26 March 2026	Additional submission received with supporting documents. Following the review of the MLA submission it was agreed that a full new submission should be provided in January 2027.

Areas progressing well

Number	Theme	Areas progressing well
1	N/A	Clinical placements; the educators we met with at the LEPs we visited felt supported in their roles, were committed and engaged in medical education, and reported an effective relationship with the Dean; the students we met with were positive about placement staff and valued the patient exposure they received.
2	N/A	We heard of effective two-way engagement between the school and Private, Independent and Voluntary Organisations (PIVOs), which helped them to deliver educational experiences.

Requirements for cycle 2025/26

We set requirements where we have found that our standards are not being met. We set six requirements in this cycle. An update on reach requirement was provided on 01 June 2026.

Number	Theme	Requirements
QA14160	S1.1	The school must improve relationships with students in Year 2, which we heard was challenging. The school must also work with Year 1 students to prevent a similar communication breakdown.
QA14161	R2.1	The school must develop and implement a quality management strategy as an example for the quality management of clinical placements.
QA14162	R2.16	The school must adopt appropriate systems and process to identify, support and manage learners in respect of professionalism, health or conduct.
QA14163	R5.1, 5.7	The school must develop and deliver a curriculum and assessment map for the programme in its entirety, in addition to maps for each year.
QA14164	R3.7	The school must ensure that any changes to polices and processes are shared with students and staff in a timely manner, and that any documentation or guidance is updated to reflect any changes.
QA14092	R2.20	The school must ensure students have access to adequate occupational health services and have effective mechanisms in place to monitor the vaccination status of students

Recommendations for cycle 2025/26

We set recommendations where we have found areas for improvement related to our standards. They highlight areas an organisation should address to improve, in line with best practice.

Recommendations
No new recommendations were opened during this cycle.

Updates on open requirements and recommendations across all standards

An update on reach requirement was provided on 01 June 2026.

Requirements

Number	Theme	Requirements
QA13845 Requirement set as part of new school process. Cycle 2024/25	R1.7	The school must ensure there are enough staff members, who are suitably qualified to deliver both Year 1 and 2 of the programme. This includes University, placement staff as well as visiting lecturers. We will continue to monitor this item, and the requirement will remain open and continue to be reviewed during the next cycle of quality assurance.
QA13846 Requirement set as part of new school process. Cycle 2024/25	R4.1	The school must ensure that educators are appropriately trained to deliver Year 2 of the programme. We will continue to monitor this item, and the requirement will remain open and continue to be reviewed during the next cycle of quality assurance.
QA13847 Requirement set as part of new school process. Cycle 2024/25	Theme 2: Educational governance and leadership	The school must have a closer degree of coordination and alignment with their contingency school to maintain the contingency arrangement. We will continue to monitor this item, and the requirement will remain open and continue to be reviewed during the next cycle of quality assurance.
QA13848 Requirement set as part of new school process. Cycle 2024/25	R5.3	The school must ensure that learners experience a range of specialties, in different settings, with the diversity of patient groups that they would see when working as a doctor. In particular mental health, women's health, paediatrics and O&G. We will continue to monitor this item, and the requirement will remain open and continue to be reviewed during the next cycle of quality assurance.

QA13849 Requirement set as part of new school process. Cycle 2024/25	R2.6	The school must ensure that they have agreements in place with LEPs to provide education and training to meet the standards. This is of particular concern for Y2 placements. We will continue to monitor this item, and the requirement will remain open and continue to be reviewed during the next cycle of quality assurance.
QA14066 Recommendation set as part of new school process. Cycle 2024/25 and became a requirement in 2025/26	Theme 5: Developing and delivering curricula and assessments	The school needs to rapidly build upon the expertise they have, to ensure there is enough dedicated assessment capacity and expertise as the school grows. We will continue to monitor this item, and the requirement will remain open and continue to be reviewed during the next cycle of quality assurance.

Recommendations

Number	Theme	Recommendation
QA14067 Recommendation set as part of new school process. Cycle 2024/25	Theme 2: Educational governance and leadership. R2.1, R2.2	The school needs to invest in the new team to provide stability to the programme. The school must support and develop both senior leadership and academic educators and should specifically consider the enhancement of medical education expertise. We will continue to monitor this item, and the recommendation will remain open and continue to be reviewed during the next cycle of quality assurance.

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 an education and training environment. Concerns are managed locally by the responsible organisation until resolution.

Activity	Date	Summary
Quality Reporting System (QRS)	Ongoing	Chester Medical School has one open item on the QRS. An update on this item is due to be provided by the school of 30 July 2026. We will continue to work with Chester Medical School to ensure our thresholds for reporting via the QRS are embedded and adhered to.

Next steps

The school has been provided with areas within the line-by-line SAQ feedback that require additional information or focus for the school to continue to progress. In addition, key areas for development to ensure progression have been highlighted in this document. We also expect any relevant updates across all SAQ items or MLA requirements to be provided.

Our next quality assurance activity will be on 07 September 2026 to triangulate information provided in the action plan.

The school should review the feedback provided, and submit the next SAQ no later than 15 October 2026, alongside any supporting documentation. The next MLA compliance submission should be submitted no later than 15 January 2027.

Following the SAQ submission in October 2026 we will work to review this and organise our next quality assurance activity in April 2027.

Organisation's response

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

Organisation's response

Chester Medical School welcomes the Annual Quality Assurance Summary and appreciates the constructive engagement of the GMC team throughout the 2025/26 quality assurance cycle.

We are pleased that the report recognises positive progress in the development of the programme, particularly in relation to clinical placements, educator engagement, and partnerships with placement providers.

The School acknowledges the requirements and recommendation that remain open and has established clear work programmes to address these areas. We have engaged fully with the quality assurance process and have provided comprehensive action plan supporting evidence to demonstrate ongoing progress.

The School considers this summary to be a fair and accurate reflection of the quality assurance activity undertaken during this cycle and looks forward to continuing its engagement with the GMC as the programme progresses.