General Medical Council

Annual Quality Assurance Summary

This summary provides an overview of how an organisation is meeting our standards for medical education and training as detailed in *Promoting excellence: standards for medical education and training*. 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.

Course	Peninsula Medical School, University of Plymouth
Review period	Year 1: Dec 2025 - Nov 2026

Overview of findings

Overall findings statement
Peninsula Medical School (PMS) is in the first year of the biennial model and therefore did not submit an SAQ. From a review of the previous year's SAQ submission, and the clarification of some points during the engagement meeting, we consider that Peninsula Medical School (PMS) is meeting the standards set out in the GMC's *Promoting excellence: standards for medical education and training* The QA activity that we have carried out in this annual cycle has provided good opportunities to observe how Peninsula Medical School meets our standards in theme 1 (Learning environment and culture), theme 2 (Educational governance and leadership), theme 3 (Supporting learners), theme 4 (Supporting educators) and theme 5 (Developing and implementing curricula and assessments). We set requirements and recommendations where our standards are not being met.

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Quality Activity undertaken

	Activity	Date	Summary
1	Interim engagement meeting	23 September 2026	PMS have moved to the biennial model and are in their first non-SAQ year. This interim engagement meeting therefore offers the opportunity to catch up with the school on how the programme is going, and to share any issues they may have which require escalation to GMC for our support. This year there has been a change of GMC quality assurance team for the school and therefore this meeting provided an opportunity to gather some generic information about the programme. The areas below were explored in the meeting. • **QA process** The GMC team provided some information on the biennial SAQ quality assurance cycles and explained the purpose of the interim engagement meetings. The GMC team also explained that due to changes in the QA team this year, we had been unable to undertake any targeted quality activities and therefore updates from the interim engagement meeting were going to be reflected in the Annual Quality Assurance Summary (AQAS). • **SAQ updates** The GMC team reviewed the school's last SAQ submission and confirmed that apart from the curriculum and assessment changes (covered below), there are no outstanding areas in the SAQ. The school indicated that they prefer an annual SAQ submission and the GMC team explained that although the SAQ will not be submitted yearly, there will be opportunities to engage with the school and receive their updates. We reassured the school that we will ask for updates regularly in years when an SAQ is not due, so we don't miss out on any important development. • **Update on how the academic year has gone** We also heard from the various module leads on how their courses/programmes have progressed in the year and the updates were overall positive. The updates

			covered changes to the different modules, the work that the school has undertaken on assessing the use and impact of AI on written essays and the school's engagement with clinical placement providers. • **Curriculum and assessment changes** PMS is undertaking significant changes to its curriculum and assessments, and this has been the main focus of our engagement with the school this year. We were informed that a new curriculum started in September 2026 for stage 1 students and will be rolled out to all other cohorts in September 2027. The final assessments have been changed from an integrated structured clinical examination to an objective structured clinical examination. The final exam has also been moved from the penultimate to the final year. The school plans to run a formative OSCE for their penultimate year in the 26/27 academic and we asked for an update after the exam has taken place.

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	Peninsula Medical School has two (2) open items on the QRS. The school has been engaging well with the QRS system and continue to provide frequent and detailed updates. We are assured that our thresholds for reporting via the QRS are embedded and adhered to. The open QRS items codes are: - QA13635 - QA12535

Requirements

We set requirements where we have found that our standards are not being met. We will monitor each course's response and will expect evidence that progress is being made during the next QA cycle. We are pleased to say there are no open requirements for Peninsula Medical School.

Recommendations

We set recommendations where we have found areas for improvement related to our standards. They highlight areas a course should address to improve, in line with best practice. There are currently no recommendations for Peninsula Medical School.

Next steps
We will release the next SAQ in November 2026, and the school will have 4 weeks to complete it and return to the GMC. Upon receipt and review we will have a feedback meeting and then decide on Quality activities that we would like to undertake.

Course's response

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

Course's response
We thank the GMC quality assurance team for the Annual Quality Assurance Summary and the positive feedback provided. We remain committed to meeting the GMC's standards and look forward to continuing to work collaboratively with GMC staff through the next quality assurance cycle.