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* and *Assuring readiness for practice: a framework for the MLA*. 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	University of Southampton ('Southampton')
Review period	June 2025 – June 2026 (Year 2 of second cycle)

Overview of findings

Overall findings statement
From the SAQ submission, and the clarification of some points during the SAQ meeting, we consider that Southampton is meeting the standards set out in the GMC's Promoting excellence: standards for medical education and training. The QA activities that we have carried out in this annual cycle have provided opportunities to observe how Southampton meets our standards in theme 4 (supporting educators) of Promoting excellence and demonstrates continued compliance with Assuring readiness for practice: a framework for the MLA (the 'MLA Framework'). In 2025 we decided that medical schools and postgraduate training organisations that had completed an initial cycle of four self-assessment questionnaires could move to a biennial submission, following an assessment of their previous submissions. As a result of this assessment Southampton has now moved to a biennial model so does not submit a self-assessment questionnaire (SAQ) in 2026. The next date of submission is June 2027.

The GMC is a charity registered in England and Wales (1089278) and Scotland (SC037750)

Quality activity undertaken

	Activity	Date	Summary
1	SAQ submission	30 June 2025	The SAQ was submitted on time and covered all five themes of *Promoting Excellence.* The submission included a list of planned Southampton activities that we could observe for quality assurance purposes. We are satisfied that where further information and/or clarification is still required that this can be provided in the next SAQ submission.
2	SAQ feedback meeting	September 2025	This meeting was held to provide feedback to Southampton on its 2024/25 SAQ submission, and to seek clarification and additional information on the submission where required. We also discussed potential QA activities we could undertake in this annual cycle. These activities were selected to improve our understanding of Southampton's processes. We did not identify areas of risk during the SAQ meeting. Following this meeting, Southampton was provided with written feedback on the SAQ submission.
3	GMC led Q&A session with Clinical Educators	14 April 2026	This activity was listed on the SAQ by Southampton against theme 4 (supporting educators). We take the opportunity to meet with students and educators once every two years without the presence of the medical school. The information shared by educators helps us triangulate findings from the school's SAQ submission and other quality activities. It provides educators with a forum to share their experiences, provide feedback on a variety of topics and discuss any issues.

			Attendees included educators from the university and local education provider settings, covering different clinical specialties. During the session, we explored educator support, communication with the medical school, curriculum development, assessment processes, feedback mechanisms, student support, Equality, Diversity, and Inclusion (EDI), capacity pressures and the impact of planned curriculum changes. The discussion also considered how educators are involved with quality management and how issues are escalated or addressed across clinical centres.
4	Document review of MLA-CPSA Standard operating procedure - Station selection & blueprinting	June 2026	This activity was listed on the SAQ by Southampton against MLA requirement CPSA R15: Policies and procedures. We undertook this activity to check that the organisation continues to comply with the MLA requirements. We asked the school to send us documentation mapped to MLA CPSA R15: Policies and procedures and requested for any updated procedures covering the CPSA. The school submitted a 'Standard Operating procedure (SOP) - Station selection & blueprinting' document for review in response to our request. We found that the document provided to us outlined a structured approach to blueprinting, internal review and external scrutiny of CPSA assessments, and aims to demonstrate alignment with the MLA content map, a transparent governance process and robust quality assurance.

Quality Reporting System (QRS)

We use the QRS to monitor concerns raised by Southampton 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. We also use the QRS to monitor requirements and recommendations set by the GMC.

Activity	Date	Summary
Quality Reporting System (QRS)	Ongoing	Southampton have 2 open items on the QRS. Southampton is engaged 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.

Next steps

The GMC's written feedback on the SAQ submitted in 2025 lists any areas that we require an update on in the next SAQ submission. These include:

Theme one – Plans to enhance role play scenarios by providing AI simulated patients, simulated real life opportunities for years 1 to 3 and a pilot for GP consultations where a video link will allow students and their facilitator to interact with consultations of real patient (LEC1-05).

Theme five – Updates on any issues arising from elements of the MLA being completed in the penultimate year, such as arrangements for two-year groups taking the assessments within the same year during the transition. In addition, we would also like an update on how the school will ensure that students who pause learning in the final year are still able to demonstrate the required level of competencies (DCA2-01).

In addition to these updates, we also require updates on areas we highlighted in quality activity feedback forms. These include:

- How the school is monitoring and mitigating risks associated with Year 3 and Year 5 cohort overlap;
- Further work undertaken to improve student engagement with feedback processes; and
- Progress towards developing a more integrated approach to student tracking.

Organisation's response

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

Organisation's response