To consider

**New UK medical schools application process**

**Issue**

1. At its meeting on 22 July 2014, the Board considered a report on the need for a new process for universities to make applications to the GMC to open a new medical school.

2. We have now developed the outline of a new process which identifies the structure and main tests of a new school application at each stage within the process. We are now in a position to carry out the detailed design of each stage and its supporting materials, and the implementation of the process. The new process makes increased demands on organisations to demonstrate their capacity to establish a new programme before we commit to rolling quality assurance and before students start the course, at which point risk increases considerably.

3. It is proposed that any new organisations submitting proposals to establish new UK medical schools are subject to this process.

**Recommendations**

4. The Strategy and Policy Board is asked to:
   
   a. Agree to the implementation of the new UK medical schools application process.

   b. Identify any further points for consideration in implementation.
New UK medical schools application process

Issue

5 We have developed a multi stage process for assessing applications made by organisations wishing to establish new UK medical schools. The process aims to expand on the strengths of the existing process, such as breadth of coverage, and to address the issues previously identified to the Board at its meeting on 22 July 2014. This aims to particularly ensure that organisations approaching the GMC with the intention of establishing a new medical school demonstrate the organisational capacity to design and/or deliver a programme that meets our standards before students start the course, and that we commit to quality assure the programme through visits.

6 Inevitably the process involves a number of hurdles for applicants. Whilst we do not wish to make the process unduly burdensome, our experience has shown that we do need to put in place a rigorous regulatory process to ensure that only those institutions with the capability to deliver a primary medical qualification are quality assured by us, and ultimately added to the list of institutions held by the GMC.

7 The process involves incremental testing of an application over a minimum period of two years, but can be extended depending on performance in testing. A range of tests for each stage of the process have been identified and mapped to the current form for reviewing new school applications, and our standards for undergraduate training (Tomorrow’s Doctors 2009). The next steps are the detailed development of the tests and setting of thresholds at each stage. Successful completion of the process by a university would lead to a decision to commit resources to rolling quality assurance visits and the first cohort of students starting their programme of study. No changes are proposed to the quality assurance visits to new schools themselves.

Structure of the process

8 The process is structured into stages, each with escalating evidence requirements. Additional evidence requests can be included depending on judgement of the evidence at some stages. A diagram of the process is at Annex A. Key features include:

a Escalating the evidence required and complexity of the tests at each stage.

b Utilising external evidence (i.e. financial and regulatory audit).

c Basic screening tests to identify high risk applications efficiently and quickly.

9 The proposes stages are:

a Screening of initial application.
b Financial audit - decision to be made by GMC staff on basis of auditor judgement.

c Two stages of document review with decisions on progression by expert review team of GMC associates.

d Initial visit - decision to be made by expert reviewers and GMC staff.

e Decision to commit resources to rolling quality assurance by the Chief Operating Officer.

Evidence and decision making within the process

10 The screening stage of the process is designed to use existing regulatory and audit evidence to identify high risk proposals, as well as gather basic information about the programme. Organisations will then be asked to submit an independent financial audit to determine the viability of the proposal in terms of resourcing and planning.

11 Document analysis stages will involve the submission of a mix of narrative description by the organisation of how it will meet the detailed requirements of our standards and supporting ‘real’ documentation demonstrating practical arrangements for doing so. The submissions will also include scrutiny of project management arrangements and documentation. It is intended the balance will shift from organisations articulating how they intend to meet the standards to producing evidence demonstrating that systems have been designed and implemented as the process progresses. A limited visit will then be made to triangulate the impression given by the documentation with those tasked with managing and delivering the programme.

12 The process offers a limited range of judgements and decisions at each stage:

a Criteria met - proceed to next stage.

b Criteria unmet - recommend resubmission on time based or criteria grounds.

13 Throughout the process, decision making is intended to ensure that those reviewing a proposal are able to choose a proportionate response from the range of options. As we are required to engage with all applications from bodies with UK degree awarding powers, the options are limited to resubmission. A recommendation to withdraw an application is likely only if a recommendation to resubmit following a delay is ignored.

Next steps and further details

14 A detailed account of the proposed process has been developed and can be provided. Consideration will still be required of the threshold for individual tests, within which stage they should be administered and how they should be delivered. The next planned steps are:
a Development of individual stages and tests to identify the detailed content of each stage and thresholds for completion.

b Engagement with external partners (e.g. Medical Schools Council).

c Development of guidance and supporting materials for each stage.

15 We propose that the process is in place to consider all entirely new applications from the academic year 2015/2016 (1 September 2015). Discussion within the Education and Standards Directorate will determine the exact cut-off date so as to capture all entirely new applications.
**Supporting information**

**How this issue relates to the corporate strategy and business plan**

16 This supports strategic aim 2: help raise standards in medical education and practice.

**How the action will be evaluated**

17 The process will be piloted for an application and evaluated. The methodology is likely to be a continuous improvement record maintained throughout the process, and feedback from the school completing the process to identify improvements.

**What engagement approach has been used to inform the work (and what further communication and engagement is needed)**

18 Feedback on the proposal from a subject matter expert who is also a GMC associate has been received. We have also received preliminary in house legal advice which took a positive view of the process, but suggested confirmation with counsel.

**How the issues differ across the four UK countries**

19 Our role in the setting and assuring standards of medical education does not vary across the UK. However, it should be noted that the four countries vary in relation to:

a Political context under which new schools might be established (e.g. new schools to date have been in England and Wales, we believe the Scottish government are unlikely to support new medical schools there)

b Relevant governmental and healthcare organisations (e.g. funding bodies).

20 The different political, governmental and healthcare bodies around the UK may have an impact on the context in which a new school is established, and the bodies with which it should engage. Similarly, the different contexts in the different parts of the UK may raise specific issues which will need to be accounted for during the document analysis stage of the process, and in producing supporting documents and guidance.

**What equality and diversity considerations relate to this issue**

21 Equality and diversity considerations about selection into, and delivery of, medical education are part of our standards and will continue to be reflected in this process. The possibility of some funding models for new medical schools raising issues in terms of widening access to the profession have been noted, but the GMC takes no view on the funding model of medical schools, only whether are standard are met.

If you have any questions about this paper please contact: Martin Hart, Assistant Director for Undergraduate Education; mhart@gmc-uk.org, 020 7189 5408; or Simon Roer, Policy Manager, sroer@gmc-uk.org, 0207 189 5428
Process diagram
New medical school proposed

Minimum (5) months before academic year start

School submits basic form

School meets basic criteria

School submits business plan for independent financial audit

Auditor provides view on viability

Basic criteria unmet

School submits additional form

Business plan submitted

School revises documents

Documentation does not meet criteria

Appoint review team

Additional info unsatisfactory

Application flagged as 'High Risk'; school submits additional info re: adverse regulatory reporting

Basic criteria met

School revises documents

Documentation meets criteria

Review team considers doc req against categories and sets date for next submission

Year 1

Year 2, or later

School submits doc req I

Carry out visit

Documentation meets criteria

Does visit confirm readiness?

Year 3 or later

CEO/COO Decision on readiness

Recommendation to CEO/COO

Additional documents required?

Enter rolling QA visits following academic year

Year 3 or later

Notes

1. Academic year assumed to run September-September
2. Dates based on independent financial audit - rota chosen at which applications can proceed or be asked to resubmit
3. End point for this process is the start of the rolling QA visit process