## Agenda item: M8

**Report title:** Amending the list of bodies entitled to award UK Primary Medical Qualifications

**Report by:** Lucy Llewellyn, Education Quality Analyst, Education & Standards, lucy.llewellyn@gmc-uk.org, 020 7189 5112

**Action:** To consider

### Executive summary
Medical students at the University of Lancaster have received primary medical qualifications from the University of Liverpool since 2006. However, after discussions with both universities, we received an application from Lancaster Medical School (the School) in December 2011 which set out their plans to decouple. Since this date, the GMC has been quality assuring the development of the new medical school in line with our new schools application process. Over the course of this quality assurance, the education quality team overseeing the process has raised various concerns and has set various requirements and recommendations. The School has responded positively to these, and the GMC visiting team is satisfied that Lancaster Medical School has met our standards for education and training, and should be added to the GMC’s list of awarding bodies.

### Recommendation
Council is asked to agree that Lancaster University should be added to the GMC’s list of bodies that can award UK primary medical qualifications.
Introduction

1 Strategic aim 2 in the *Corporate Strategy 2014-17* and *Business Plan 2017* is to ‘help raise standards in medical education and practice’. Maintaining the list of bodies entitled to award primary medical qualifications (PMQs) is a key component of our regulation of undergraduate medical education. The current list of bodies and combinations of bodies entitled to award UK PMQs is published on our website at: [http://www.gmc-uk.org/education/undergraduate/awarding_bodies.asp](http://www.gmc-uk.org/education/undergraduate/awarding_bodies.asp)

2 The standard of proficiency is currently set out in *Promoting excellence: standards for medical education (2016)* and training and compliance with the standard is demonstrated through the Quality Assurance Framework, which includes annual returns from medical schools and a programme of visits.

3 As per the Schedule of Authority of the Governance Handbook, Council is required to maintain and amend, as required, a list of bodies and combinations of bodies entitled to hold examinations for the purpose of granting one or more primary UK qualifications.

About Lancaster Medical School

4 Lancaster Medical School (the School) offers a five year degree programme (MBChB) which leads to a primary medical qualification, with approximately 50 students per year. Recently, the School has also become responsible for the Foundation Year in Medicine and Surgery, which, on successful completion, is a direct route to the MBChB. The first Lancaster registered students commenced their studies in the 2013/14 academic year; this cohort is now in the fifth and final year of the programme. No students at the School are now registered with the University of Liverpool.

5 Between June 2012 and June 2017, the education quality team have undertaken visits to the School each academic year, speaking to students and School staff; visits to local Trusts and School assessment observations have also taken place. This visit activity, alongside paper based reviews of policies and processes, is a core part of the quality assurance process for all new schools or programmes. The main concerns highlighted through this review have related to succession planning, clinical placements and the ‘concern form’ system (the process by which incidents which raised concerns about a student/s actions are identified and resolved).

Addressing concerns

6 The School initially struggled to recruit a new Head of School after the announcement of the current post holder’s upcoming retirement in 2015, and the education quality
team visiting the School did not feel that adequate succession planning was in place. However, the School was successful in recruiting a new Head of School, who joined the senior management team in 2015. Following the announcement of further changes to the senior management team in 2016, the visiting team were satisfied that the succession planning was in this instance well planned and appropriate. The School has now appointed a Head of School, who started in post in February 2017.

7 Concerns regarding the clinical experience that students were receiving on their placements arose after the education quality team's visit in 2012. This was initially linked to the visiting team's concerns about the University Hospitals of Morecambe Bay NHS Foundation Trust's capacity to provide high quality education. As a result, the visiting team set a recommendation for the School to explore partnerships with other Trusts in the area. We also heard from students that they had difficulty meeting their key clinical experiences due to a lack of patient exposure, particularly at Furness General Hospital. Linked to this was a feeling that the School did not allocate placements fairly across sites. As a result, we set a requirement for the School to review its placements in order to assure itself that students were able to meet the needs of the curriculum in order to cover the outcomes for graduates. We also set a requirement that the School reviewed its allocation system for placing students in placement settings. The School has now developed relationships with additional Trusts, increasing student exposure to a range of sites and specialties. We heard during our visit in January 2017 that students were satisfied that all their placements enabled them to meet their needs of the curriculum, and that they were broadly satisfied that placement allocation was fair.

8 The School revised the yellow card system that was used by Liverpool Medical School to create the ‘concern form’ system. This process aims to identify professionalism or patient safety concerns, as well as potential student wellbeing needs, through highlighting inappropriate student action. However, we heard multiple and growing concerns from the students that the system was punitive, unfair and poorly managed. We set a requirement in May 2016 for the School to urgently review this area after improvements were not made. Immediate action was taken by the School to review the process with significant changes made to the thresholds and the ways in which School communicates with students. On our most recent visit, the new system had not yet been fully implemented, but improvements were noted by students, School staff and supervisors based at various Trusts.

9 Lancaster Medical School has responded well to our requirements and recommendations over the course of our quality assurance cycles. All open requirements have been closed, with only a very small number of recommendations still open. These include how the School communicates with students, which the School is aware it must work on. It has shown commitment to the development of the School and providing a high quality experience for students. The GMC visiting team is satisfied that Lancaster should be added to the list of awarding bodies.