

U.S. Department of Education

Staff Analysis
of the Report Submitted by

United Kingdom

Prepared July 2004

Background

The National Committee on Foreign Medical Education and Accreditation (NCFMEA) first determined that the standards of accreditation used by the United Kingdom (UK) to accredit medical schools offering programs leading to the M.D. (or equivalent) degree were comparable to standards of accreditation applied to M.D. programs in the United States at its February 1995 meeting.

Periodically, the NCFMEA redetermines the comparability of a country's standards of accreditation, and NCFMEA requested that the UK provide information for redetermination for the February 2001 meeting. At this meeting, the NCFMEA deferred a decision as to whether the United Kingdom's accreditation process continued to be comparable to that used in the United States until further information could be gathered. The Committee requested a site visit to the UK to meet with representatives of the General Medical Council (GMC) to discuss, more fully, the GMC's role in the evaluation of medical schools in the United Kingdom. The additional information and documents provided by the GMC at the July 2001 meeting in London between GMC staff, Dr. William Deal (a former member of NCFMEA), and Department staff enabled the Committee, at its September 2001 meeting, to determine that the United Kingdom's accreditation process continues to be comparable to the system of accreditation used in the United States to evaluate medical education. As part of its decision, the NCFMEA requested that the GMC submit annual reports of its activities regarding its accreditation of medical schools in the United Kingdom. This is the third annual report submitted by the GMC.

Summary of Findings

Based on its review of the report submitted by the United Kingdom, Department staff concludes that the Council has provided all of the information requested by the NCFMEA and that its actions during the past year appear to be consistent with the NCFMEA guidelines.

Staff Analysis

Current Status of Medical Schools

GMC has fully accredited 24 medical schools. Four newly established schools (Brighton Sussex Medical School, Hull York Medical School, Peninsula Medical School, and the University of East Anglia School of Medicine) are currently being assessed for accredited status.

Overview of accreditation activities

Since its 2003 NCFMEA report, the Education Committee (EC), GMC's body responsible for assessing the quality of medical education, conducted and completed assessments of new graduate entry courses at five schools (Bristol Medical School, Glasgow Medical School, Oxford Medical School, Sheffield School of Medicine, and Southampton School of Medicine). Three additional assessments at Aberdeen Medical School, Birmingham Medical School, and Liverpool School of Medicine began and will be completed in summer 2004. Assessments for the four newly established schools (mentioned above) began in 2002 and will continue in 2005.

Other accreditation activities included a two-day training in January 2004 for all site visitors. Also, the Education Committee agreed to establish a research board to integrate research into medical education. Although specific projects have not begun, GMC reports that it hopes to do so in the near future.

Laws and regulations

There have been no changes in UK laws that effect the accreditation of its medical schools.

Current Standards

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While there have been no changes in the standards, the GMC has begun engaging the medical schools regarding changes in standards that will be expected in the future. The GMC has established a program entitled *Reflecting Contemporary Society* to provide structure to this work. It will look at (1) patient centeredness, (2) learner centeredness, (3) promoting equality and valuing diversity, (4) inter-professional practice, (5) and the permanence of change.

Processes and procedures

In 2003 and 2004, the GMC introduced a new process for the quality assurance of basic medical education (QABME). Key components of the new program include annual reporting on changes in curricula, assessments, or staffing levels; formalizing and strengthening the site visitors recruitment, selection, and training requirements; and changes in the site visit process, which lasts about 12 months. These changes resulted in the use of standard forms, processes, and procedures in carrying out the requirements in *Tomorrow's Doctors*, the guidebook that the EC uses in assessing

its schools' compliance with the EC's standards. The information below discusses these changes in more detail.

Site Visits: The QABME requires site visitors and schools being assessed to now use standard templates, forms, timelines, and guidance throughout the assessment period. Additionally, the QABME requires that the visitors identify best practices during the site visit and that their reports be evidence-based. Another change that is expected to support a more standardized process is the establishment of a Web site that should be available by fall 2004. The Web site provides access to documentation, forms, and information for UK medical schools, visitors, and selected guests.

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Another result that the new QABME process has incorporated to ensure standardization is a 360-degree appraisal program. Site visitors assess fellow team members and the administrative support staff. The team administrator appraises the site visitors. Officials from the school being reviewed appraise the site visitors and the site review process. Another mechanism is that site visitors are encouraged to be observers on a "cross-visit" (a site visit conducted by another team) for the purposes of cross-fertilization and sharing best practices.

Qualified On-Site Evaluators, Decision-Makers, and Policy-Makers: The new QABME process has also strengthened and standardized its site visitors' selection process. Site visitors are now selected through a stringent and methodical process.¹ All site visitors must now have participated in training to go on a site visit.

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Controls against Conflicts of Interest & Inconsistent Application of Standards: The EC's conflict-of-interest policies and its policies to ensure against the inconsistent application of accreditation standards have been strengthened through the changes that the QAMBE process uses in standardizing the assessment processes discussed above. As the result, the EC expects to more efficiently manage and evaluate these policies and standards.

Accrediting/Approval Decision: In April 2002, the EC began a review of the Pre-Registration House Officer (PRHO)² training and requirements in *The New Doctor*, the guidebook that includes recommendations for the PRHO training. The current statutory framework for the PRHO training is experience-based. The PRHO training in the revised draft of *The New Doctor* is outcomes-based and includes specific outcomes that the PRHOs must demonstrate before being granted full registration.

In February 2004, GMC began conducting an in-depth, formal consultation of the draft revision of *The New Doctor* referred to as *Modernising The New Doctor: GMC Consultation on the Review of PRHO Training*. The document--which included the key strategic issues, the GMC's principles for legislative change, and the revised draft of *The New Doctor*--was sent for feedback to consumer bodies, patient organizations, higher education institutions, postgraduate deans, NHS employers,

¹ Site visitors were previously invited to participate in a site visit rather than selected through a standard and uniform selection process.

² The PRHO year is the year following graduation and prior to full registration. PRHOs must participate in a minimum of 12 months of training in a resident medical post that is approved by their university. At least three months must be spent in medicine and at least three months in surgery.

the Academy of Medical Royal College, UK Health Department, and other professional bodies. GMC expects that the new version will be published in fall 2004.

Schedule of upcoming accreditation activities

The EC is currently developing a fall 2004 site visitors' training session, which will include a review of its assessment procedures. The training is designed to ensure that the site visitors are knowledgeable about quality assurance and to provide them with an opportunity to develop and practice their interactive skills. Also, the session will conduct a training and induction program for new staff.

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GMC reports that it plans to appoint an external quality assurance body to ensure the quality of its program. This body will provide external confirmation to the EC that the quality assurance program is meeting its statutory responsibilities and is cost effective. GMC expects that this external quality assurance body will achieve this through an annual formative report to the EC on the programmatic and financial effectiveness of the quality assurance activities and a formal summative report at the conclusion of the first (five-year) cycle. Bids are currently being invited to establish and operate this body for the first five years.

As mentioned in the "Overview of Accrediting Activities" section, assessments of the four new schools will continue in 2005. Also, it will conduct four additional assessments at Leeds Medical School, Newcastle Faculty of Medical Sciences, Queen's University Belfast School of Medicine, and Royal Free and University College Medical School.