

Quality Review of the Graduate Entry Medical School

The University of Limerick (UL), follows an established process for Quality Assurance (QA) and Quality Improvement (QI) in line with that originally developed jointly by the Irish Universities Association (IUA), as well as the Irish Universities Quality Board (IUQB, whose functions are now carried out by Quality and Qualifications Ireland; QQI). This involves a seven-year cycle during which all Departments work to improve the quality of their programmes and services, and undergo a rigorous self-evaluation prior to a quality review by internationally recognised experts in the field.

The process itself evolved as a result of the Universities Act, 1997 in which the responsibility for QA/QI was placed directly with the individual universities. The UL Quality Support Unit (QSU) web site provides an elaboration of this process.

Issued by QSU 24th June 2015

Review Dates 12th to 14th May 2015

Peer Review Group Appendix A

UL-QSU Web Site www.ul.ie/quality

Department Web Site http://www.ul.ie/gems/node/1

QQI Web Site <u>www.qqi.ie</u>

Copyright © – University of Limerick, June 2015

This report is the property of the University of Limerick and may be printed and distributed for personal use only. The document must not be redistributed or republished, in part or whole, without the express permission of the University of Limerick.

Table of Contents

1.0	Background	3
1.1	The Quality Review Process	
1.2	Management of Quality in the University	
2.0	The Graduate Entry Medical School	4
3.0	The Follow-up Process	5
4.0	Preliminary Comments of the Peer Review Group (PRG)	6
5.0	The Report of the Peer Review Group	7
5.1	Mission	
5.2	Design and Content of Curriculum	
5.3	Teaching, Learning and Assessment	9
5.4	Facilities and Learning Resources	
5.5	Staff	
5.6	Student Guidance & Support	
5.7	Research Activity	13
5.8	Department Organisation and Management	14
5.9	Quality Improvement Plan	15
Appendices		16
A	Membership of the Peer Review Group:	16
В	Membership of the GEMS Quality Team:	16
C	Contact	16

1.0 Background

1.1 The Quality Review Process

The common framework adopted by the Irish universities for their Quality Assurance/Quality Improvement systems is consistent with both legislative requirement and international good practice. The University of Limerick quality review process comprises the following stages:

- 1. Preparation of a self-assessment report by the unit under review, taking into account feedback from students and customers.
- 2. Quality (Peer) Review involving external experts, both national and international, who visit the Department, meet with stakeholders and review the Self-Assessment report.
- 3. Preparation of a Quality Review Report which is made publicly available via its publication at www.ul.ie/quality.
- 4. Promotion of continuing improvement through monitored implementation of the report recommendations within the resources available to the university.

1.2 Management of Quality in the University

The Vice President Academic and Registrar has overall responsibility for Quality Assurance/Quality Improvement policy. Implementation of departmental Quality Reviews is carried out by the Director of Quality. The planned schedule of Quality Review of both academic and support departments is available at www.ul.ie/guality.

Academic departments are reviewed against international standards as described in the document "A Guide to the Quality Review Process for Academic Departments", which is available on the UL website at www.ul.ie/quality.

2.0 The Graduate Entry Medical School

The Graduate Entry Medical School (GEMS) is one of six departments in the Faculty of Education and Health Sciences at the University of Limerick (UL). It is based in the award winning Graduate Entry Medical School Building, a new purpose built facility located on the university's north bank campus.

The publication of the Report of the Working Group on Undergraduate Medical Education and Training (the Fottrell Report) in 2006 signalled a new approach to the delivery of medical education in Ireland. Among the report's main recommendations was an incremental increase, from 305 to 725, in the annual intake of Irish and European Union (EU) students into medicine. As part of a strategy to widen access to medicine, the report further recommended that 40% of all places be in new graduate-entry programmes. The Irish Government responded to the Fottrell Report by issuing a tender for the establishment of a graduate-entry medical school in Ireland in 2007.

Following a competitive tendering process evaluated by an international panel, UL was awarded the tender to establish the Graduate Entry Medical School (GEMS) in 2007 in recognition of its innovative proposal. The GEMS is the first new medical school to be founded since the establishment of the Irish State, the first graduate-entry medical school in Ireland and the first to integrate problem-based learning techniques in its curriculum.

Currently, the GEMS has one undergraduate programme, the Bachelor of Medicine Bachelor of Surgery (BM BS) (LM101), which is a four-year, Level 8 medical degree open to graduates from any discipline who have obtained a second-class honours grade I degree. The BM BS has a highly innovative curriculum that is centred around a problem-based learning (PBL) approach. PBL is suitable for adult learners and graduate-entry students from any discipline. It is also believed to improve the retention of information by encouraging deep learning and to promote other skills and attributes, such as team working, professionalism and the acquisition of tools for life-long learning.

A Level 8 BSc Paramedic Studies (Practitioner Entry) commenced in January 2015. Subject to agreement with the National Ambulance College and Service and to UL approval, the school is planning to introduce an undergraduate Level 8 BSc Paramedic Studies for entry through the Central Applications Office.

The establishment of the GEMS at UL was the catalyst to develop a significant medical research programme within the university. Combining a multidisciplinary approach (linking health science researchers with technology-focussed researchers), the GEMS now creates an effective platform for research collaboration and productivity. The GEMS research platform links the research and innovation activity of UL with clinical practice and direct improvements in patient care.

3.0 The Follow-up Process

The recommendations made by the peer review group form the basis of a quality improvement plan prepared by the quality support unit for the department under review. The department immediately sets about evaluating and implementing the recommendations, as appropriate.

The Head of Department provides a summary overview of progress to the University's Governing Authority Strategic Planning and Quality Assurance sub-committee (GASPQA) approximately 4 months later. GASPQA members are afforded the opportunity to discuss and evaluate progress.

The Head of Dept, Dean, Vice President Academic & Registrar and Director of Quality meet approximately 12 months post review site visit to formally review progress, and agree on any remaining actions to be taken.

4.0 Preliminary Comments of the Peer Review Group (PRG)

The Peer Review Group (PRG) received a clearly written, reflective self-assessment report (SAR) prepared by a quality team comprising academic and administrative staff from within the school. This assessment had identified a number of areas for action, and these form the basis of a quality improvement plan (QIP). The quality team, other staff, and present and past students who met with the PRG engaged in frank and open discussion with the peers and demonstrated enthusiasm for the school and its potential.

The GEMS was established in 2007 as a new and innovative medical school with an entirely graduate entry, offering a four-year, problem-based learning (PBL) programme in medical education, which was a pioneering approach in Ireland. The school has grown rapidly from an initial entry of 32 to about 140 per year in steady state. It also recruits a significant contingent of international students, primarily from Canada.

The PRG learned that graduates now working as interns in University Hospital Limerick (UHL) and its affiliates are seen as confident, patient-centred and knowledgeable, able to solve problems and with excellent clinical skills. They were described as being at least as good as, and in some respects better than, those from more traditional programmes. Students have been matched to North American residencies in competition with graduates of North American and other international medical programmes. The PRG views this as evidence of success in establishing the programme, achieved by the hard work and commitment of all staff and students.

The GEMS is supported by a committed administrative and technical team which works with academic and clinical teachers and is essential to providing an efficient, well-managed programme. The PRG noted that this team had put in place a quality management system aligned with that used by the service divisions in the university. This was found to be valuable in defining and managing the range of processes used by the team.

The GEMS is now maturing and must make the transition from growth to a sustainable steady state. Ring-fenced funding ceases in 2017 and further thought now needs to be given to maintaining and building on success. The early years have inevitably involved all, particularly senior staff, in a certain amount of 'firefighting'. The PRG believes it is important that room be created within the workloads of the GEMS executive group to allow for strategic development, horizon scanning and anticipation of future scenarios.

The GEMS is on track to be viable, sustainable in the long term and likely to secure an international profile through scholarly endeavours in education and research.

5.0 The Report of the Peer Review Group

5.1 Mission

Commendations

The PRG commends the following:

5.1.1 The mission, which reflects local and national needs, 21st century medical practice and the development of skills which are transferrable to any healthcare setting.

Recommendations

- 5.1.2 Define the strategic direction and priorities for the GEMS, aligning these with the new University of Limerick strategic plan (2015-2018) which is due to be launched later this year.
- 5.1.3 Identify the key metrics that will define progress towards the strategic goals and can be incorporated into the strategic plan and actions.
- 5.1.4 Identify and confirm the unique selling points (USPs) of the GEMS in a competitive and changing Irish and international medical education environment.

5.2 Design and Content of Curriculum

Commendations

The PRG commends the following:

- 5.2.1 The success of the blended PBL approach to learning, which encourages integration of knowledge and skills, and develops among the students an ethos of responsibility for their own learning.
- 5.2.2 The emphasis on primary care within the curriculum, which allows students to focus on the 'patient journey', especially during the longitudinal placement in primary care in year 3.
- 5.2.3 The responsiveness within the GEMS to student feedback and to evidence of student performance, such as in the McMaster Personal Progress Index (PPI), to ensure the ongoing development of the programme.
- 5.2.4 The steps that the GEMS has taken in customising the PBL curriculum to make it relevant to the Irish setting.

Recommendations

- 5.2.5 Develop robust systems for mapping curricular outcomes across all years of the programme to ensure effective coverage of all core curricular elements and to satisfy the requirements of regulatory bodies.
- 5.2.6 Continue to develop the curricular theme of multicultural healthcare in all years of the programme to better prepare students to be the doctors of the future.
- 5.2.7 Incorporate more current basic science content in the curriculum to prepare students both for their careers and professional examinations.
- 5.2.8 Consider developing a curricular theme on healthcare systems improvement in collaboration with local academic and service partners; this could be a USP for the programme.
- 5.2.9 Consider enhancing the student feedback system by organising feedback meetings in which students outnumber staff.

5.3 Teaching, Learning and Assessment

Commendations

The PRG commends the following:

- 5.3.1 The highly appropriate range of teaching and assessment modalities at all stages of the programme.
- 5.3.2 The processes in place for the provision of feedback to students on their academic/professional performance in years 1 and 2 of the programme, and the linkage with academic and pastoral support.
- 5.3.3 The peer mentoring programme that has been developed by students and staff to enhance pastoral and academic support.

Recommendations

- 5.3.4 In liaison with central services at UL, develop a more consistent and sustainable mechanism whereby the school receives, reflects upon and responds to external examiners' reports across all years of the programme.
- 5.3.5 Liaise with other departments in the Faculty of Education and Health Sciences (EHS) to consider the establishment of a faculty-wide fitness to practise procedure for students enrolled on healthcare-related programmes.
- 5.3.6 Improve mechanisms for providing feedback to students on their academic and clinical performance in years 3 and 4 of the programme.
- 5.3.7 Continue to monitor the rate of student retention/academic failure and benchmark against similar programmes.
- 5.3.8 Remain responsive to student requests for more flexible use of the excellent GEMS building, for example in relation to hours of access.

5.4 Facilities and Learning Resources

Commendations

The PRG commends the following:

- 5.4.1 The outstanding new GEMS building with its superb teaching and support facilities.
- 5.4.2 The well-resourced library, which students have complimented, and the plans to extend library space in September 2015.
- 5.4.3 The impressive input, expertise, commitment and responsiveness of the dedicated EHS librarian and the IT support staff.
- 5.4.4 The new Clinical Education and Research Centre (CERC) on the University Hospital Limerick (UHL) campus, scheduled to open in July 2016, which will alleviate the current problem of constrained space for the school on that campus.
- 5.4.5 The very proactive and collaborative approach of the school in addressing problems in affiliate sites, such as the installation of broadband in Portiuncula to ensure video conferencing capabilities are fit for purpose.

Recommendations

- 5.4.6 Develop a plan to address the increasing demand for office space which does not compromise learning space in the GEMS building.
- 5.4.7 Develop a contingency plan to address the possibility that the opening of the CERC building may be delayed beyond July 2016.

5.5 Staff

Commendations

The PRG commends the following:

- 5.5.1 The commitment of the staff to the delivery of the GEMS mission.
- 5.5.2 The engagement by the administrative and technical staff in the Performance and Development Review System (PDRS).
- 5.5.3 The funding by the GEMS for the continuing professional development (CPD) of all staff.
- 5.5.4 The contribution by the GEMS in conjunction with the Intern Network Mid-West to the excellent support and training of interns in the region.

Recommendations

- 5.5.5 Require the participation of all academic staff in the PDRS process.
- 5.5.6 Fill vacant teaching and administrative posts as a matter of priority.
- 5.5.7 Define and express the student:staff ratio to include the total FTE teacher complement and seek to benchmark this against cognate providers.
- 5.5.8 Provide teacher development much earlier in the academic year.

5.6 Student Guidance & Support

Commendations

The PRG commends the following:

- 5.6.1 The engagement of staff with students and their prioritisation of, and timely response to, students' concerns.
- 5.6.2 The establishment of the medical student community with an organised peer- and faculty-supported orientation programme in year 1, with subsequent orientation sessions during clinical rotations.
- 5.6.3 The promotion of student resilience and coping skills through the creation of the Human Doctor programme with mandatory participation in junior years.
- 5.6.4 The effective liaison between the GEMS and the university's counselling team to ensure support for students in affiliate sites.

Recommendations

- 5.6.5 Improve longitudinal support of medical students by establishing a continuous mentorship programme with professional relationship building between a student and tutor, thereby eliminating frequent 'handovers' of students.
- 5.6.6 Develop a focused preparatory programme for senior students applying for postgraduate training positions, to include suggestions for written applications and the development of practical interview skills with constructive feedback.
- 5.6.7 Develop a fitness to practise monitoring system that provides students with support, including opportunities for remediation, in developing and maintaining a high level of professionalism.

5.7 Research Activity

Commendations

The PRG commends the following:

- 5.7.1 The highly commendable research outputs achieved by the GEMS staff.
- 5.7.2 The involvement of the GEMS in strong, emerging international, national and regional research networks.
- 5.7.3 The strong culture of support for research-active individuals within the school.

Recommendations

- 5.7.4 Commission an external review of current and emerging research strengths to assist the GEMS to focus its research endeavours.
- 5.7.5 Develop a realistic high-level research strategy which identifies and focuses investment and effort in a small number of areas in which the GEMS can excel.
- 5.7.6 Create institutional and peer support for postgraduate students by establishing links with cognate disciplines, for example through research seminars, journal clubs and peer group support.
- 5.7.7 Require research groups to develop strong website presences to promote the research groups, their work and the GEMS.

5.8 Department Organisation and Management

Commendations

The PRG commends the following:

- 5.8.1 The commitment of the Head of School and the GEMS Executive to the delivery of the GEMS mission.
- 5.8.2 The development by the administrative and technical team of a quality management system and associated quality manual.
- 5.8.3 The dedication of the administrative and technical team, for example in undertaking the additional work involved in delivering the systematic review and documentation of processes despite staff vacancies.
- 5.8.4 The site visits to affiliated hospitals, from both the administrative and technical and the education leadership teams.

Recommendations

- 5.8.5 Develop leadership and change management capacity through targeted staff development.
- 5.8.6 Investigate a more distributed academic leadership model in order to allow senior staff more time for reflection and the development of strategy.
- 5.8.7 Pursue a robust and accountable time allocation model for clinical academics to cover teaching, research and leadership responsibilities.
- 5.8.8 Explore new communication strategies to engage with sessional teachers, researchers and staff in affiliated sites.
- 5.8.9 Maintain the current, necessary level of administrative and technical support and fill outstanding vacancies.

5.9 Quality Improvement Plan

Commendations

The PRG commends the following:

- 5.9.1 The very comprehensive quality improvement plan, which captures all the improvements identified throughout the SAR and assigns accountabilities, responsibilities and timelines.
- 5.9.2 The very thorough supporting documents accompanying the SAR.
- 5.9.3 The school's ambition to excel and its willingness to be self-critical to achieve this goal.

Recommendations

- 5.9.4 Prioritise the areas identified in the SAR for action/implementation and, where possible, identify metrics that will provide assurance that progress is being achieved.
- 5.9.5 Develop a school-level risk register that complements the faculty and the UL registers, and ensure that this is reviewed, discussed and actioned at least quarterly at executive meetings.
- 5.9.6 Identify metrics that can be used to benchmark the GEMS against national and international peers.
- 5.9.7 Establish a monthly review by the GEMS Executive of progress against the quality improvement plan.

Appendices

A Membership of the Peer Review Group:

Dr Carolyne Lemieux Post-Graduate Resident, Anatomical Pathology, McMaster University

Prof. Jean McEwan Vice Dean Education, University of Exeter Medical School

Prof. Robert McKinley Professor of Education in General Practice, Keele University School of

Medicine

Prof. Danny McLaughlin Academic Director of Undergraduate Medicine, Durham University

Ms Ailish O'Farrell Recording Secretary

Prof. Gaynor Taylor (Chair) Quality consultant, formerly Deputy VC, Leeds Metropolitan University, UK

Dr David Vaughan Executive Director Quality & Safety, Hamad Medical Corporation, Qatar

B Membership of the GEMS Quality Team:

Professor Kieran McDermott (Quality Team Leader)

Head of Teaching and Research in Anatomy

Prof. Calvin Coffey Professor of Surgery

Dr. Louise Crowley Senior Lecturer in Medical Education and Year 2 Clinical Skills Co-ordinator

Prof. Ailish Hannigan Associate Professor of Biostatistics

Dr. Sarah Hyde Lecturer in Medical Education (Quality and Research)

Ms. Róisín Monaghan Executive Administrator, Clinical Academic Liaison Office

Dr. Andrew O'Regan Senior Lecturer in General Practice

C Contact

The Peer Review Group was given the opportunity over three days to talk to the GEMS Quality Team both formally and informally. Meetings with staff, postgraduate & undergraduate students and others were scheduled as group sessions. The Review Group was given the opportunity to meet staff during a visit to the facilities of the school and this was most helpful.

All the meetings provided extremely useful additional information to support the SAR.