Comhairle na nDochtúirí Leighis
Medical Council

Final Report on Accreditation Inspection of

Perdana University - Royal College of Surgeons in Ireland Medical School

Partner University:

Royal College of Surgeons in Ireland

20th & 21st January 2016

THE DECISION OF THE MEDICAL COUNCIL IS THAT:

1. **The programme which comprises five years spent at Perdana University - Royal College of Surgeons in Ireland (PU-RCSI), and which leads to the award by the National University of Ireland of an MB BAO BCh degree and of the Licentiate of the Royal College of Physicians of Ireland and Licentiate of the Royal College of Surgeons in Ireland, should be approved with two conditions for a maximum of two years, subject to monitoring as deemed appropriate under the terms of Section 88(2)(a)(i)(I) of the Medical Practitioners Act 2007.**

   The conditions are as follows:

   (a) The PU-RCSI programme successfully completes its full first cycle (due in June 2016)
   (b) That PU-RCSI continues to demonstrate due diligence in ensuring the financial sustainability of the continuance of the programme which must include risk assessment and contingency planning

2. **Perdana University - Royal College of Surgeons in Ireland should be approved with two conditions for a maximum of two years, subject to monitoring as deemed appropriate, under Section 88(2)(a)(II) of the Medical Practitioners Act 2007 as the body which may deliver that programme**

   The conditions are as above.

- The continuation of conditional approval is contingent upon these issues continuing to be addressed by PU-RCSI.

- Condition 1(a) above, which is a standard condition attached to new programmes, can be considered for removal once the programme successfully completes its first full cycle which is due in June 2016.

- Condition 1(b) above is consistent with the findings in Section B of this report under WFME Area 8 '*Governance and Administration*'.

- The duration of approval of two years at '1' and '2' above reflects the concerns expressed in Section B of this report under WFME Area 9 '*Continuous Renewal*'. Given the uncertainty surrounding government policy in this area, the Council understands that there is little RCSI can do at this point in time to address these concerns. Accordingly, a two year accreditation period is considered an appropriate measure.

A. Summary and General Assessment

1) The Decision of the Medical Council

The five-year programme is based on the existing programme delivered by the Royal College of Surgeons in Ireland at its campuses in Dublin and Bahrain. For the first time since the programme commenced in 2011, the Team was able to engage with students in all five years of the programme. Following previous inspections a number of conditions had been attached to the programme. Some of these conditions have since been removed, leading to the approval status confirmed at the start of this report.

The Team wishes to commend PU-RCSI on the obvious progress which has been made since the visit in March 2014, especially in implementing the recommendations then made by the Medical Council Team. This was particularly evident in the development of the clinical teaching programme and placements, and the teaching and learning opportunities now available at Hospital Kuala Lumpur, Hospital T.J. Seremban and Hospital Putrajaya. The Team had very positive engagements with the many students that it encountered during its recent visit. The Team makes a number of recommendations in this report and areas where PU-RCSI is commended are also included.

The decision of the Medical Council is that:

1. The programme which comprises five years spent at Perdana University - Royal College of Surgeons in Ireland, and which leads to the award by the National University of Ireland of an MB BAO BCh degree and of the Licentiate of the Royal College of Physicians of Ireland and Licentiate of the Royal College of Surgeons in Ireland, should be approved with two conditions for a maximum of two years, subject to monitoring as deemed appropriate under the terms of Section 88(2)(a)(i)(I) of the Medical Practitioners Act 2007.

   The conditions are as follows:

   (a) The PU-RCSI programme successfully completes its full first cycle (due in June 2016)
   (b) That PU-RCSI continues to demonstrate due diligence in ensuring the financial sustainability of the continuance of the programme which must include risk assessment and contingency planning

2. Perdana University - Royal College of Surgeons in Ireland should be approved with two conditions for a maximum of two years, subject to monitoring as deemed appropriate, under Section 88(2)(a)(II) of the Medical Practitioners Act 2007 as the body which may deliver that programme

   The conditions are as above.

The continuation of conditional approval is contingent upon these issues continuing to be addressed by PU-RCSI.

Condition 1(a) above, can be considered for removal once the programme successfully completes its first full cycle which is due in June 2016.

2) Amendment of previous conditions

The condition relating to financial sustainability which was applied following the previous inspection in March 2014 is amended as follows:

> *"That PU-RCSI continues to demonstrate due diligence in ensuring the financial sustainability of the continuance of the programme which must include risk assessment and contingency planning"*

3) Recommendations additional to the conditions above:

1. The Team recommends that PU-RCSI provide Risk Register and contingency planning updates to Council on an annual basis

2. Third year students should be better prepared in the earlier years for their clinical training in some areas – e.g. musculoskeletal medicine. The curriculum should be reviewed accordingly

3. The Team strongly recommends that PU-RCSI considers expanding the length of the academic year to allow for greater exposure to the disciplines of Obstetrics&Gynaecology/Paediatrics/Orthopaedics/Psychiatry/Family Medicine

4. PU-RCSI should monitor clinical placements to ensure that all students have the opportunity to develop and utilise appropriate skills in a clinical setting and have adequate advance notice of the scheduling of clinical placements

5. Career guidance should be enhanced and all fourth and fifth year students should be offered interview skills training

6. There should be increased and standardised involvement of clinicians in the affiliated hospitals in formal examinations and other student assessments

7. Student services should work more closely with the students in order to review student accommodation well in advance of clinical placements

8. Ideally, appropriate facilities at the main University campus should be provided close to the prayer room for female students who wish to perform ablutions before prayer

9. PU-RCSI should consider having additional administrative support at all of the site to accommodate longer opening hours of the hospital office. The team strongly recommends that the hospital office opening hours be changed to 9am-7pm, Monday to Thursday at Hospital T.J. Seremban

10. Commencement dates and induction plans for new staff appointees should be held well in advance of the next term start date, in order that the academic staff have sufficient time to settle into their new roles

11. A dedicated group for Fitness to Proceed/Health and Practice should be developed

12. PU-RCSI should ensure that the staff involved in programme delivery are encouraged to acquire formal qualifications in medical education

13. PU-RCSI should ensure that mentors continue to remain accessible to students during the clinical years of the programme

14. There should be an ongoing focus to maximise students integration into the clinical teams in training sites in order to enhance their learning experience and opportunities

15. The canteen at the Perdana campus, should remain stocked throughout the day to accommodate all students timetables

16. PU-RCSI should continue to promote extra-curricular activities and societies so as to enhance their overall experience

17. Incentives for teaching, including continuing professional development opportunities and access to library resources should be offered to the consultants at all clinical training sites

18. Consideration should be given to ensuring that joint University/Hospital Forums are available to all three teaching sites to reflect the importance of academic/clinician relationships, and to provide opportunities for consultants to contribute to curriculum development.

19. A quality assurance process which monitors student satisfaction, staff feedback and takes appropriate action where necessary should be continued

20. Health supports on site in Perdana, including Occupational Health, for students and staff should be fully provided and easily accessible

21. PU-RCSI should continue to ensure that the library and online facilities meet student requirements

22. PU-RCSI staff should be encouraged to remain clinically active and to obtain clinical privileges at relevant hospital sites. This is a problem experienced by all Universities with student cohorts at the hospital. The Team advise PU-RCSI to explore opportunities in this area.

Recommendations that the Medical Council makes to all medical schools:

23. PU-RCSI should continue to ensure awareness among students of the following:

    - The Medical Council's *Eight Domains of Good Professional Practice*
    - The Medical Council's *Guidelines for Medical Schools on Ethical Standards and Behaviour appropriate for Medical Students*, particularly on affiliated sites and in general practices used for teaching
    - The revised *Children First: National Guidance for the Protection and Welfare of Children* guidelines in Ireland before students have attachments in paediatrics
    - The World Health Organisation *Patient Safety Guidelines*

24. PU-RCSI should continue to ensure that the teaching environment incorporates high standards in hygiene and infection control, including ensuring that students are trained in hand-washing techniques and have access to the necessary facilities

4) The Team commends PU-RCSI for:

WFME Area 1 Mission and Objectives

- *None specific*

WFME Area 2 Education Programme

- Its delivery of a finely-structured programme that is well received by students
- The successful delivery of this programme across PU-RCSI campus, three clinical sites and a large number of community clinics
- The ongoing high profile given to professionalism within the curriculum
- The provision of explicit learning outcomes throughout the programme
- The responsiveness of the programme to local needs
- Variety in the use of appropriate educational strategies throughout the programme
- Increased exposure to community health clinics
- Ongoing development of sub-internship opportunities for senior students

WFME Area 3 Assessment

- The provision of appropriate, transparent, reliable and valid assessment systems
- A reasonable balance between formative and summative assessments
- An active, fair and robust approach to dealing with underperforming students

WFME Area 4 Students

- The appointment of extra Student Counsellors and the overall provision of pastoral support to students
- The mentorship programme and other robust academic supports
- Its ability to attract knowledgeable, motivated, skilled and professional students
- Its well managed introduction of support staff

WFME Area 5 Academic Staff

- The high calibre of staff who are approachable and enthusiastic
- The high level of support from RCSI colleagues in Dublin

WFME Area 6 Education Resources

- The successful inclusion of Hospital Putrajaya as a clinical training site
- Its consolidation of the use of Hospital T.J. Seremban and Hospital Kuala Lumpur as clinical training sites
- The calibre of its clinical staff who continue to be enthusiastic and motivated
- An emerging culture of research

WFME Area 7 Programme Evaluation

- The high level of support from RCSI-Dublin with programme evaluation
- The benchmarking by RCSI of performance across three sites (RCSI Dublin, Bahrain and Perdana University)
- The commitment of PU-RCSI to the use of student feedback
- Evidence of responsiveness to feedback

WFME Area 8 Governance

- Its strong governance structures which are well supported locally and by RCSI centrally

WFME Area 9 Continuous Renewal

- Evidence of commitment to continuous renewal

5) The Team requests the following information/clarification from PU-RCSI:

1. The Team requests sight of any existing risk register entries relating directly to the PU-RCSI programme and to whatever contingency planning is currently in place
2. Minutes of the meeting of the Student Progress Committee

6) Acknowledgement

The Team would like to thank the staff and all the students we met, for their extremely positive engagement in the accreditation process. In particular, the Team would like to thank Niamh Coady, Head of Administration at RCSI-PU for her assistance in attending to the scheduling and providing additional documentation.

The Medical Council would like to thank the accreditation team, Ms Anne Carrigy (Chair), Ms Katharine Bulbulia, Prof Paul Finucane, Prof Hisham Khalil and Dr Anna Clarke, who gave so generously of their time to travel to Malaysia for the visit.

B. Evaluation of the programme based on WFME standards

WFME AREA 1
Mission and Objectives

The five-year programme is based on the existing programme delivered by the Royal College of Surgeons in Ireland at its campuses in Dublin and Bahrain. The mission and objectives of the programme continue to be reflected in achievements and remain in line with the Royal College of Surgeons in Ireland's noble purpose to enhance human health through endeavour, innovation and collaboration in education, research and service.

WFME AREA 2
Educational programme

There is an emphasis on case-based teaching in commonly-encountered clinical problems, which enables students to participate in self-directed learning, to learn from other clinical disciplines to integrate their clinical skills teaching. The Team believes that third year students could be better prepared in the earlier years for their clinical training in some areas; e.g. musculoskeletal medicine. The curriculum should be reviewed accordingly.

The Team strongly recommends that PU-RCSI considers expanding the length of the academic year to allow greater exposure to the disciplines of Obstetrics & Gynaecology / Paediatrics / Orthopaedic / Psychiatry / Family Medicine. This recommendation is consistent with feedback already provided to the College from the Malaysian Medical Council. It was also an issue consistently raised by students in the clinical years during this visit. Such students feel disadvantaged when compared to students of other Malaysian medical schools due to a perceived lack of adequate clinical exposure in these specialties.

While clinical placements are generally satisfactory, the Team was given to understand that students sometimes lack opportunities to develop and utilise their clinical skills in the appropriate clinical settings. Furthermore, students sometimes failed to receive adequate advance notice of the scheduling of their clinical placements. The Team recommends that PU-RCSI strives to ensure that all students have the opportunity to develop and utilise appropriate skills in a clinical setting and to have adequate advance notice of scheduling of clinical placements.

The Team recommends that career guidance be enhanced and that all fourth and fifth year students be offered interview skills training.

WFME AREA 3
Assessment of Students

The Team notes that standards are benchmarked across RCSI campuses in Dublin, Bahrain and Perdana and also notes that there are external examiners and guest examiners for clinical assessments. The Team strongly recommends increased and standardised involvement of the clinicians in the affiliated hospitals in formal examinations and other student assessments.

WFME AREA 4
Students

The Team commends PU-RCSI on the appointment of additional Student Counsellors and the introduction of a Personal Mentoring Programme designed to support students. The Team notes that the Student Counsellors are reported to be very proactive in organising workshops focussing on self-esteem, team building and motivation.

The Team recommends that student services work more closely with the students in order to review student accommodation especially for those on clinical placements. The Team commends PU-RCSI on the improvement of the quality of food available in the canteen on the University campus, but strongly recommends that the canteen remains stocked throughout the day to accommodate all students' timetables.

The Team strongly recommends that appropriate facilities, closer to the prayer room at the University campus be provided for female students who wish to perform ablutions before prayer.

The Team commends PU-RCSI on the development of the Student Progress Committee which assists students who fail more than two modules in any given year. The Team urges PU-RCSI to consider Malaysian language support classes for those who require it. As the programme is delivered entirely in English, it is important that students can also convey their knowledge and expertise in the Malaysian language.

The Team urges PU-RCSI to consider having additional administrative support at all of the sites to accommodate longer opening hours of the hospital office. The team strongly recommends that the hospital office opening hours be changed to 9am-7pm Monday to Thursday at Hospital T.J. Seremban.

The Team notes that PU-RCSI engages in a number of marketing activities to recruit students, such as through fairs, visiting schools and medical school open days.

The Team recommends that PU-RCSI continues to promote extra-curricular activities and societies so as to enhance the student experience, particularly the awareness of funding available to students.

Finally, the Team is concerned about the lack of access to Occupational Health, including a Student Health Service, and recommends access to a Student Health Service, to include Occupational Health, on site in Perdana for students and staff.

Students from Year One

The Team met with twenty five students from Year One, who were assured of confidentiality and advised of the Medical Council's role. The students all confirmed that they had volunteered to meet with the Medical Council Team.

The students confirmed that they were having a very positive experience to date on the programme, and that they felt motivated and well-supported. They confirmed that every student was encouraged to fully participate in team and class discussions. The students appreciated the number of opportunities provided for clinical contact, including their participation in GP visits. Patient interaction in these scenarios is very structured and the requirement for patient consent to such interactions is reinforced on an ongoing basis.

The students felt that while there was a formal induction and orientation to the school, there were opportunities to strengthen and enliven these arrangements.

The students were very conscious that there is no dedicated campus for the medical school and accordingly there are limited recreational options available to them at the moment. The students also confirmed that support to establish a series of societies would help to enrich the overall student experience.

The Team were informed that it was not uncommon for the canteen facilities to run out of daily supplies before mid-afternoon, and that this placed some additional and unnecessary pressure on students to arrange to bring their own supplies on a daily basis. Students also noted the cost of student accommodation which was perceived as being quite expensive and a challenging distance from the medical school.

Students from Year Two

The Team met with nineteen students from Year Two, who were assured of confidentiality and advised of the Medical Council's role.

The students praised the mentoring and student support programmes and the appointment of additional counsellors and believed that there was a confidential environment for discussion, if necessary.

The students would be happy to recommend PU-RCSI to prospective other students. They reported that the lecturers are very good, very involved in education, very personable and very approachable. One repeat student reported seeing an improvement in lectures. The students reported, however, that simulated lectures in the local Malaysian language would be extremely beneficial to their communication skills.

The students reported that there was a strong emphasis on professionalism, presentation and behaviour.

The students stated that the library is adequate, however, more copies of books are needed. The students reported that lectures were made available on the electronic learning environment, Moodle, in as timely a fashion as possible.

Students from Year Two praised the feedback that they receive after assessments.

Students stated that from time to time, the workload can become quite intense, with some students stating that they would prefer a longer academic year. Students also felt that more revision time is required before exams (it was noted that this time has been shortened to one week).

The students that are on the Student Representation Committee believed their voice was heard. In common with the first year students, students also felt that there was not enough emphasis on clubs and societies and they are left to arrange their own activities. Some students were unaware of financial support provided by PU-RCSI for extra-curricular activities.

The students all agree that the accommodation provided on campus is adequate.

The students said that the canteen had been expanded recently and that there was a better variety of food, however, food still runs out prior to the end of lunch service.

Students from Year Three

The Team met with thirteen students in PU-RCSI and twenty-two students in Hospital Kuala Lumpur who were assured of confidentiality and advised of the Medical Council's role.

These students were now in the clinically focussed part of the programme. The students in Hospital Kuala Lumpur reported that they were enjoying their rotations. The students on campus felt they were well prepared to start their clinical rotations, however, more of clinical skills development in PU-RCSI would be beneficial.

Mentors have been allocated to the students but the students on clinical rotations felt that it was comparatively difficult to meet with them as they are mostly off-site. They were, however, aware of the Counselling services if required.

The students on clinical rotations said that they do not have time to use the library facilities but now have easy access to an application on their phones. However, it was noted that student do not always have Wi-Fi access and are incurring additional charges on their personal phones to research.

During clinical training site placements, the students reported that they had to take the initiative in integrating themselves as part of a team and that their experience was variable, depending on the doctors on their team. Students noted that the outpatients department in Hospital Kuala Lumpur was very welcoming, and it was noted that there was an orientation period of one week.

The students reported that consultants always ask the patient for their consent before beginning student and patient interactions. The students were commendably aware of the importance of professionalism and were keen to emulate appropriate role models.

The students reported that the commute to the clinical placements is extremely long and those who wish to stay in accommodation closer to the clinical site were obliged to seek additional accommodation and accordingly pay additional rent.

The Team recommends that there be clarity around the integration of students into the clinical training site teams in order to enhance their learning experience and opportunities.

Students from Year Four

The Team met with twelve students from Year Four, who were assured of confidentiality and advised of the Medical Council's role.

The students confirmed that overall they are having a positive experience, including in the hospital-based stages of the programme. Their experience of the training hospitals is that they are made to feel welcome, although the onus can rest with the students to make themselves known to their clinical teams. Based on their experiences in Hospital Kuala Lumpur, the students' perception was that they are more professional, and perceived as such, than student cohorts from other medical schools.

The students noted that the PU-RCSI academic year is shorter than some other Malaysian medical schools, and in certain specialties such as Obstetrics & Gynaecology, the students would appreciate greater exposure. The students also confirmed their perceptions of being at somewhat of a disadvantage to students from medical schools with their own dedicated teaching hospital(s).

During discussion of the formal opportunities for students to raise issues or concerns with the medical school, students noted that the student council is formed entirely by colleagues from the pre-clinical years of the programme. This can make it challenging for the student council to fully empathise with the challenges faced by students in later years of the programme.

The students shared with the Team their view that increased streamlining of the syllabus to reflect the Malaysian health system would benefit the students, and the local health system.

The Team recommends that career guidance and interview skills training be provided for fourth year students in preparation for their final year of medical school.

Students from Year Five

The Team met with twenty-six SC2 students in Hospital T.J. Seremban and sixteen SC2 students in Hospital Kuala Lumpur who were assured of confidentiality and advised of the Medical Council's role

The students reported that the sub-internship and shadowing programme in Seremban were extremely beneficial; however, they also reported that more involvement from the clinical leads in the final year is needed and feedback is slow in being provided.

The students are enjoying their clinical rotation and feel there is good interaction with the clinical staff in both hospitals and feel part of the team.

The students reported that, with more students in clinical placements the canteen facilities and the academic centre are over-crowded and more space should be provided.

The Team recommends that career guidance and interview skills training be provided for fifth year students in advance of applying for an internship post.

WFME AREA 5
Academic Staff/Faculty

The Team noted the high turn-over of staff which is challenging; however, the Team were advised by students that this is not affecting their learning. The Team strongly recommends that any commencement dates and induction plans for new appointees are held well in advance of the next term start date, in order that the academic staff have sufficient time to settle into their new roles.

On reviewing the academic staffs' profiles, the Team noted that not all leads have formal qualifications in medical education. The Team strongly recommends that staff involved in programme delivery are encouraged to acquire formal qualifications in medical education.

The collaboration and collegiality of the academic staff were apparent to the Medical Council Team.

Finally, on a personal note, the Team wishes to extend best wishes to PU-RCSI's colleague, Professor Mary Cafferkey for a speedy recovery.

WFME AREA 6
Educational Resources

The Team notes that the Academic Medical Centre (AMC), the parent entity of Perdana University, update PU-RCSI on a regular basis on the development plans and that the project is very high profile. However, the Team have noted that there has been no progress in developing beyond the planning stage of the new academic teaching hospital

The Team commends PU-RCSI on arranging clinical training site access to three clinical training sites, particularly the consolidation of Hospital Kuala Lumpur and T.J. Seremban.

WFME AREA 7
Programme evaluation

The Team commends PU-RCSI for undertaking its own student satisfaction survey at the end of each semester. The Team notes, also, that feedback is obtained from students for every module. The Team recommends that a quality assurance process, which monitors student satisfaction and takes appropriate action, where necessary, should be continued.

WFME AREA 8
Governance and Administration

The Team continues to hold the view that there are well established governance structures in place. However, the Team noted opportunities to increase student participation in these structures.

The Team appreciated the attendance of Professor Cathal Kelly (Chief Executive Officer and Registrar), Professor Hannah McGee (Dean of Faculty of Medicine and Health Sciences) and Ms. Julie Creedon (Programme Manager, Dublin Programme Office) and the time they took to address the Team's queries.

The Team recommends that a dedicated group for Fitness to Proceed/Health in Practice be developed.

The Team were assured that PU-RCSI would demonstrate appropriate due diligence in ensuring the financial sustainability of the continuance of the programme which would include risk assessment and contingency planning.

WFME AREA 9
Continuous Renewal

The Team is aware of changes in Malaysian government policy in relation to medical education, and noted that the current moratorium capping numbers for both public and private medical students was likely to be extended by five years. This policy will have implications for the development of medical education in Malaysia. These concerns were discussed with senior staff in RCSI.

The Team were sufficiently concerned by the potential impact of the moratorium on student numbers and, by extension, on the long-term viability of the programme itself, that it was agreed to recommend to Council a period of approval of two years. This will therefore prompt a re-inspection of the programme in early 2018.

Inspection of Clinical Training Sites

Meeting with consultants at Hospital T.J. Seremban

The Team appreciated the presentation made by hospital staff which confirmed the full scope of practice at the hospital, and the hospitals' involvement with education and training.

Hospital staff confirmed that PU-RCSI students compare favourably with cohorts from other medical schools. Students are considered to be energetic, motivated, self-disciplined and eager to learn.

PU-RCSI works in collaboration with hospital consultants to ensure that teaching opportunities are developed in tandem with the consultant timetable. The team noted that there is collaboration across many aspects of the programme with the hospital and this is supported by the operation of a joint implementation committee.

The Team noted that PU-RCSI were seeking to further incentivise hospital staff through the offer of research opportunities and professional development courses. In terms of curriculum development, staff confirmed that PU-RCSI are very receptive to suggestions.

The consultants confirmed their willingness and expectation to become involved in the formative assessment of students.

The Team were advised that PU-RCSI academic staff do not currently enjoy practice privileges at the hospital. This is a problem experienced by all Universities with student cohorts at the hospital. The Team believes that PU-RCSI staff should be encouraged to remain clinically active and to obtain clinical privileges at relevant hospital sites. The Team advises PU-RCSI to explore possibilities in this area.

Meeting with consultants at Hospital Kuala Lumpur

The Team met with representatives of Hospital Kuala Lumpur, led by Dr Shamsul Annuar bin Kamarudin, Hospital Kuala Lumpur Deputy Director. Dr Kamarudin gave an overview of the impressive work undertaken in Hospital Kuala Lumpur, Malaysia's largest hospital, treating a catchment area of 1.5 million people on a 150 acre site.

Students spend rotations of six weeks in medicine and surgery at the hospital, and, as the hospital also facilitates nursing students and occupational therapy students, there is an emphasis on inter-disciplinary learning. At any given time, there are 65 students from PU-RCSI, occupying rotations in medicine, surgery and research. The consultants in Hospital Kuala Lumpur involve the students in history taking and basic clinical examinations and each student has an assessment form for completion following their rotations.

The Team was impressed with the degree of enthusiasm displayed by the consultants at Hospital Kuala Lumpur and it is apparent that the consultants are very engaged with the education and training of medical students. The consultants reported that capacity is not an issue and that the additional students will be absorbed into the education and training system with no difficulty as effective scheduling would ensure optimum use of available capacity. The Team was reassured that the PU-RCSI administration liaised with the hospital administration to organise an orientation programme for the students.

Formal letters of appointment for teaching have been issued to all consultants from PU-RCSI. However, it was noted that the consultants would like to be involved in the discussions around curriculum development to try to help achieve standards. Teaching staff at the hospital reported that they would appreciate access to specific CME opportunities with PU-RCSI to complement their existing library access.

Hospital staff confirmed that PU-RCSI students were pleasant, well prepared and motivated; in this regard, they compared very favourably to student cohorts to other medical school students.

The consultants confirmed their view that a formal and regular engagement with PU-RCSI clinical staff would strengthen the contribution to the programme to the hospital.

The consultants at HKL would very much benefit from involvement in exams. This would allow the consultants to have the opportunity to assess their own teaching skills and the team would strongly recommend that this be considered by PU-RCSI.

The Team were advised that PU-RCSI staff do not currently enjoy practice privileges at the hospital. This is a problem experienced by all Universities with student cohorts at the hospital. The Team would like to advise PU-RCSI to explore opportunities in this area.

The consultants shared the view that the PU-RCSI student selection criteria were commendably high as the PU-RCSI cohort consisted of well rounded, capable and personable individuals.

Clinical Staff at Hospital Putrajaya

The Team appreciated the presentation made by hospital staff which confirmed the full scope of practice at the hospital, and the hospital's involvement with education and training.

The hospital has been receiving students since September 2015 and their experiences to date have been entirely positive. Students have been, without exception, well prepared and enthusiastic.

It was the view of the Team that there were opportunities to formalise and strengthen the role of hospital staff in curriculum development, delivery and assessment. The Team felt that it was crucial that hospital staff receive the feedback provided by students on their teaching. The Team was advised that the hospital had agreed to having two formal meetings with PU-RCSI per year in order to advance the above, and to confirm PU-RCSI's expectations of the hospital.

End of report