Comhairle na nDochtúirí Leighis
Medical Council

Medical Council
Report on Accreditation Inspection of National University of Ireland, Galway's Undergraduate Medical Programme

5th and 6th October 2017

CONTENTS OF REPORT

VISITING TEAM

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A. Statement with regard to the Freedom of Information Act, 2014

The Medical Council currently makes information routinely available to the public in relation to its functions and activities and, in line with that practice, this report will be available on the Council's website, www.medicalcouncil.ie in due course.

The Freedom of Information Act is designed to allow public access to information held by public bodies which is not routinely available through other sources and access to this document may be sought in accordance with that Act. The Medical Council complies fully with the terms of the Freedom of Information Act. It should be noted that access to information under the Freedom of Information Act is subject to certain exemptions and one or more of those exemptions may apply in relation to some or all of this report.

B. THE DECISION OF THE MEDICAL COUNCIL IS THAT:

1. THE NATIONAL UNIVERSITY OF IRELAND, GALWAY'S UNDERGRADUATE MEDICAL PROGRAMME SHOULD BE APPROVED BY COUNCIL UNDER THE TERMS OF SECTION 88(2)(a)(i)(I) OF THE MEDICAL PRACTITIONERS ACT 2007. THIS RECOMMENDATION IS MADE ON THE GROUNDS OF THE MEDICAL COUNCIL TEAM'S FINDING THAT THE PROGRAMME ADHERES TO THE RULES, CRITERIA, GUIDELINES AND STANDARDS APPROVED BY COUNCIL, AS SPECIFIED IN SECTION 88(2)(a) AND 88(2)(d) OF THE MEDICAL PRACTITIONERS ACT 2007.

THIS APPROVAL SHOULD BE FOR AN INITIAL PERIOD OF FIVE YEARS FROM THE DATE OF APPROVAL BY COUNCIL.

2. THE NATIONAL UNIVERSITY OF IRELAND, GALWAY SHOULD BE APPROVED UNDER SECTION 88(2)(a)(II) OF THE MEDICAL PRACTITIONERS ACT 2007 AS THE BODY WHICH MAY DELIVER THAT PROGRAMME. THIS RECOMMENDATION IS MADE ON THE GROUNDS OF THE NATIONAL UNIVERSITY OF IRELAND, GALWAY'S ONGOING COMPLIANCE WITH THE RULES, CRITERIA, GUIDELINES AND STANDARDS APPROVED BY COUNCIL AS SPECIFIED IN SECTION 88(2)(a)(i)(II) AND 88(2)(e) OF THE MEDICAL PRACTITIONERS ACT 2007.

   THIS APPROVAL SHOULD BE FOR AN INITIAL PERIOD OF FIVE YEARS FROM THE DATE OF APPROVAL BY COUNCIL

C. PREFACE

1. Context of the visit

The National University of Ireland, Galway (NUIG) delivers a five or six year undergraduate medical programme leading to the award of an MB BAO BCh (GY501). It is at undergraduate level (basic level in World Federation for Medical Education terminology).

The Medical Council Accreditation Team visited on 5th & 6th October 2017. Its remit was to assess the programme and to formulate a recommendation on accreditation to the Medical Council's Education, Training and Professional Development Committee.

2. The Team

The Medical Council Assessor Team is listed on the title page of this Report. The Council very much appreciates the contribution of the Assessors to the accreditation process.

The Medical Council also thanks the NUIG Team, led by Ms Carmel Malone, Head of Medical School, for their co-operation and hospitality. The Team were particularly impressed by the high turnout of medical school staff and clinicians, and wish to thank Professor Gerard Flaherty and Ms Regina Doyle for the work involved in coordinating the visit. In addition, the Medical Council wishes to thank the students who met the Team, whose feedback is most helpful in formulating this Report.

3. Documentation

Prior to the visit, the Team reviewed the *Accreditation of Existing Medical Programmes – WFME Questionnaire*, dated August 2017. This questionnaire is based on the World Federation of Medical Education's *Global Standards for Quality improvement; Basic Medical Education.*

4. Schedule

The accreditation visit included an NUIG presentation by Ms Carmel Malone and Professor Gerard Flaherty; an in-depth discussion between the Medical Council Accreditation Team and representatives of the University; along with a private session with students representing all stages of the course. Under Section 88 (2)(f) of the Medical Practitioners Act 2007, an inspection of the facilities was also undertaken at the University Hospital Galway, Merlin Park University Hospital, Bon Secours Hospital Galway and The Galway Clinic.

5. The Report

The Medical Council's policy is to use the World Federation of Medical Education's Standards to assess medical programmes. The section headings used in part C of this report are therefore those of the World Federation of Medical Education's *'Global Standards for Quality improvement in Medical Education, 2015 revision*.

The observations, comments and recommendations contained in this Report are grouped under either the Basic or the Quality heading, and there are some statements by the Medical Council Accreditation Team about the level of NUIG's attainment.

D. SUMMARY AND GENERAL ASSESSMENT

1) Conclusion and main recommendations of Medical Council

The programme is well-designed and effectively delivered to an impressive cohort of students who are generally very positive about their NUIG experience. There are areas where review and revision is advised but none of the issues identified warrant conditions being placed on the approval. Areas where NUIG is commended are also highlighted. It is apparent that NUIG have been very active in addressing the issues previously identified by Council.

The Team's main recommendations are that:

1. The National University of Ireland, Galway's undergraduate medical programme should be approved by Council under the terms of Section 88(2)(a)(i)(I) of the Medical Practitioners Act 2007. This recommendation is made on the grounds of the Medical Council Team's finding that the programme adheres to the rules, criteria, guidelines and standards approved by Council, as specified in Section 88(2)(a) and 88(2)(d) of the Medical Practitioners Act 2007.

This approval should be for an initial period of five years from the date of approval by Council (see Recommended Further Action below).

2. The National University of Ireland, Galway should be approved under Section 88(2)(a)(II) of the Medical Practitioners Act 2007 as the body which may deliver that programme. This recommendation is made on the grounds of the National University of Ireland, Galway's ongoing compliance with the rules, criteria, guidelines and standards approved by Council as specified in Section 88(2)(a)(i)(II) and 88(2)(e) of the Medical Practitioners Act 2007.

This approval should be for an initial period of five years from the date of approval by Council (see Recommended Further Action below).

2) Major findings of Council Team

Based on the evidence provided by NUIG and the information provided by the students interviewed, the Team make one priority recommendation for NUIG:

1. Some MCQ assessments do not comply with current best practice and the Team strongly recommend a review of MCQ assessments should take place. This should include a review of

the types of MCQ's used to ensure that both the format and the question type complies with current best practice and the use of negative marking should be discontinued.

3) Recommendations additional to the major findings, based on the evidence provided by NUIG and the information provided by the students interviewed:

1. NUIG should have stakeholder, community and patient involvement in the preparation of their Mission Statement, therefore, a review to include additional clarity around encompassing the health needs of the community and formal mechanisms for stakeholder engagement should be conducted.

2. The Team noted the lack of horizontal and vertical integration in the science based modules in the first year of the Direct Entry Programme and recommend that this be reviewed.

3. Consideration should be given to the distribution of Early Patient Contact throughout years one to three to ensure balance.

4. NUIG should review the function and weighting of the case reports completed by students at the end of clinical placements. Consideration should be given to offering assessors training in the marking of cases to minimise variability.

5. A review of the mentor programme should be completed for optimisation.

6. The Team recommends the establishment of a staff/students committee or, alternatively, invite students to attend Programme Board meetings for discussion of non-reserved items of business.

7. Elements of current best practice in assessments have been introduced, for example, standard setting and blueprinting. The Team recommends that blueprinting be extended to all modules.

8. The Team recommends that the School consider mechanisms to provide students with feedback following summative assessments. For written assessments potential examples include feedback to the cohort about areas where students generally performed well, common errors and areas of concerns. For in-course assignments, including Special Study Modules, students should receive individualised feedback. The development of a feedback pro-forma would reduce the variability in the quantity and quality of feedback offered to students

9. It is recommended that the relationship between the criteria for student selection and the School's mission be clearly defined in the Mission Statement.

10. The Team were informed that the staff regularly attend internal medical education conferences and workshops. The School should consider introducing a forum for dissemination of good practice identified at these events.

11. The Medical School should review the educational opportunities offered to students undertaking internship preparation at the Galway Clinic. The range of learning experiences are limited, while they are appropriate as part of final year teaching experience, they are not sufficiently varied for internship preparation.

12. In Merlin Park, students do not have a designated study area or resource room which they can use for self-directed study. The Team recommends that this be reviewed.

4) Recommendations that the Medical Council makes to all medical schools:

1. NUIG should continue to ensure awareness among students of the following:

   - The Medical Council's *Eight Domains of Good Professional Practice*
   - The Medical Council's *Three Pillars of Professionalism*
   - 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 the specialty area of paediatrics
   - The World Health Organisation *Patient Safety Guidelines*

2. NUIG 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

5) The Team commends NUIG for:

1. The Team commend NUIG on the excellent and enthusiastic leadership of Professor Timothy O'Brien, Ms Carmel Malone and Professor Gerard Flaherty and the commitment and dedication of the teaching staff;

2. The range of Special Study Modules available to the students inclusive of the summer research project;

3. The clear policies and criteria in place for student admission;

4. Doubling the number of support staff employed by the School over the past five years. There has also been an increase in the number of personal professors appointed;

5. The investment in the new state of the art Human Biology Building, the simulation centre and clinical skills lab and the investment in the Academies, all of which enhance the delivery of your programme; and

6. The iJump programme and the preparation of students for the transition into clinical practice.

E. EVALUATION OF THE PROGRAMME, BASED ON WORLD FEDERATION FOR MEDICAL EDUCATION (WFME) GLOBAL STANDARDS FOR QUALITY IMPROVEMENT IN MEDICAL EDUCATION – 2015 REVISION

Compliance level rating

The levels of compliance are categorised as follows:

Non- compliance (NC)	**Partial compliance (PC)**	**Full compliance (FC)**
No compliance with required criteria	Partial compliance with required criteria	Full compliance with required criteria

The Team has identified the following levels of compliance:

Level of compliance	WFME Global Revision 2015									
	1	2	3	4	5	6	7	8	9	Total
NC										0
PC			P	P		P				3
FC	P	P			P		P	P	P	6

Area 1: Mission and Outcomes

MISSION AND OBJECTIVES	Level of compliance:	FC

Description of documentary evidence of compliance with this standard provided by NUIG:

NUIG provided the Team with the following documentary evidence of compliance with this standard: Undergraduate Programme Vision Statement, The School of Medicine Operational Plan and the Programme Syllabus.

Description of evidence of compliance with this standard found during the inspection visit:

The Team is satisfied that the medical education programme run by National University of Ireland, Galway (NUIG) provides a high quality medical programme with a focus on early patient contact.

Compliance

The Team found that NUIG is fully compliant with this standard.

Observation(s) & Recommendation(s)

The Team makes the following recommendations:

- A review to include additional clarity around encompassing the health needs of the community and formal mechanisms for stakeholder engagement should be conducted.
- It is recommended that the relationship between the criteria for student selection and the School's mission be clearly defined in the Mission Statement

Commendation(s)

No commendations made.

Area 2: Educational programme

EDUCATIONAL PROGRAMME	Level of compliance:	FC

Description of documentary evidence of compliance with this standard provided by NUIG:

NUIG provided the Team with the following documentary evidence of compliance with this standard: the Programme Overview, Curriculum Map, Professionalism Syllabus, 1MB3 Special Study Module List, Medical Humanities, Foundation Year Handbook, 1MB3 Handbook, 5.1 Cardiovascular Logbook, 5.1 Respiratory Perioperative and Critical Care Logbook, 5.1 Geriatrics and Stroke Medicine Logbook and 5.1 General Medicine and Surgery Logbook.

Description of evidence of compliance with this standard during the inspection visit

The Team found that the programme syllabus provides a comprehensive overview of the programme, however, the wording of some of the learning outcomes should be reviewed.

The newly established Programme Board has overall responsibility for the curriculum management. While there are regular meetings between the Chair of the Programme Board and student representatives, a more formal mechanism for harnessing the student voice should be considered.

The Team note that there are good working relationships with staff in affiliated teaching hospitals and NUIG and was informed about regular meetings with teachers from these hospitals and the Academies to review student feedback on teaching and other aspects of the curriculum delivery.

Compliance

The Team found that NUIG is fully compliant with this standard.

Observation(s) & Recommendation(s)

The Team makes the following recommendations:

- The wording of some of the learning outcomes in the programme syllabus should be reviewed.
- NUIG should continue to keep the horizontal and vertical alignment of subjects under review with a particular focus on continuing to enhance this aspect of curriculum design.
- NUIG should establish a staff/students committee or alternatively, invite students to attend Programme Board meetings for discussion of non-reserved items of business.

Commendation(s)

- The Team commend NUIG on the range of Special Study Modules available to the students inclusive of the summer research project.
- The iJump programme and the preparation of students for the transition into clinical practice

Area 3: Assessment of students

ASSESSMENT OF STUDENTS	Level of compliance:	PC

Description of documentary evidence of compliance with this standard provided by NUIG:

NUIG provided the Team with the following documentary evidence of compliance with this standard: the Assessment Matrix and the Mapping of Assessments with the Eight Domains of Good Professional Practice.

Description of evidence of compliance with this standard found during the inspection visit:

The Team found that there are a range of assessment methods used throughout the curriculum. The School's assessment strategy is aligned to the NUIG Assessment Strategy including use of grade boundaries.

Students reported receiving information about assessment weightings and methods at the beginning of the academic year. However, it was indicated that full details of assessments are not always made available at the beginning of the academic year, for example, the number of OSCE stations in each exam.

Elements of current best practice in assessments have been introduced, for example, standard setting and blueprinting.

The Team note that MCQ assessments do not comply with current best practice. For example, regarding the format and question type, the exam papers made available to the Team did not have the response options in alphabetical order.

Students reported variations in marking and the feedback provided regarding the case reports completed by them at the end of clinical attachments. This is a concern since some subjects, for example General Practice, attach significant proportions of the final assessment mark to the case report.

Compliance

The Team found that NUIG is partially compliant with this standard

Observation(s) & Recommendation(s)

The Team makes the following recommendations:

- The Team recommends that blueprinting be extended to all modules.
- The Team strongly recommends that the use of negative marking be discontinued.
- The School should review the type of MCQs used and ensure that both the format and question type complies with current best practice.
- The School should review the function and weighting of the case reports completed by the students at the end of clinical attachments.
- Consideration should be given to offering assessors training in the marking of cases to minimise variability.

- The School should consider mechanisms to provide students with feedback following summative assessments. For written assessments potential examples include feedback to the cohort about areas where students generally performed well, common errors and areas of concerns. For in-course assignments including SSMs students should receive individualised feedback.
- NUIG should develop a feedback pro-forma to reduce the variability in the quantity and quality of feedback offered.
- Consideration should be given to using a digital OSCE assessment tool for provision of electronic feedback to students.

Commendation(s)

The Team commend NUIG on the range of Special Study Modules available to the students inclusive of the summer research project.

Area 4: Students

STUDENTS	Level of compliance:	PC

Description of documentary evidence of compliance with this standard provided by NUIG:

NUIG provided the Team with the following documentary evidence of compliance with this standard: International Student Brochure, Gender Analysis of Undergraduate Student Admission and Performance Data, Health Screening of NUIG Medical Students, Regulations document for Medical Students, Instructions to Mentors, Monitoring of Academically Struggling Students, 2011, Student Health and Wellbeing, Academic and Personal Supports to Students and Student Services Booklet.

Description of evidence of compliance with this standard found during the inspection visit:

The majority of international students interviewed felt they were already competent in the subjects covered by foundation year.

It is recommended that the relationship between the selection criteria and the School's mission be clearly defined in the Mission Statement.

The Team is satisfied that there are good student supports in place, however, it was unclear to some students interviewed that such supports are available.

The Team found some evidence of student engagement, the Chair of the Programme Board meets with student representatives and students are very appreciative of this opportunity for engagement, however, there was very little evidence of student representation on School committees or opportunities for consultation with students about proposed changes to the programme.

Students from Foundation Year and Year One

The Team met with students from Foundation Year and Year One. They 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 were having a positive experience to date. They felt that the Early Patient Contact module was a great experience and enjoyed taking case histories and seeing patients. The feedback on the Chemistry module was also positive.

Ethics and professionalism are evidently being taught.

Some students mentioned that the foundation year was of great benefit to them. If they didn't do foundation level, they would have found it difficult to transition to year one, however, the students who completed foundation year felt that there was a big leap when going into year one. A more integrated structure and clinically relevant content is recommended.

The students who completed foundation year also felt that some subjects seemed unnecessary, for example, the biology module was shared with all science students and the students interviewed felt it would be more beneficial if it was tailored for medical students.

The students found that there was not enough emphasis on anatomy in Foundation Year. In year one they felt the exposure was better, however, it was felt that there was not enough exposure to the dissection room.

The students also found that there was an inconsistency in the feedback they receive. In some modules they received good feedback on assessments, however, the MCQ results were given with no feedback.

The students found that Blackboard worked well, their lectures were always of good quality and lecturers were always willing to stay back and answer any questions they might have. They were complimentary of the Medical Student Council and their Class Reps.

The international students have an International Coordinator, which they found helpful and the overall student supports that are in place are working well.

Students from Year Two

The Team met with students currently in Year Two, They 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 overall have a good experience in year two. They felt that it is a much more organised year with a clearly outlined syllabus. They also felt that year two was much more relevant to medicine.

They were very complimentary of the lectures and confirmed that the lecture notes are always available early. Students also complimented the "WhatsApp" group that has been set up to provide quick feedback or changes in timetables or lectures being cancelled.

The students experienced practical exposure in the Anatomy Department and the first patient contact, which were both of great benefit to them, however, students felt that there was not enough information given to them ahead of choosing their clinical placements and information on the specialty and location would better equip them in their decision.

The students felt that there was inconsistency with the style of exams and the negative marking assessments were not a fair form of assessment. They also felt that the feedback received after exams was varied. No feedback was given unless it was sought.

The students complimented the variety of special study modules available to them.

It was highlighted during our meeting with the students that there was no career guidance available to the students and they felt that it would be of benefit to them.

The students also complimented Professor Flaherty on his involvement with the students and his regular interactions with the Student Reps, who in turn feed back to the students.

Students from Year Three

The Team met with students currently in year three. They 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. Overall, the students appeared to be having a positive experience.

When asked about the support services available to them, there was variety in the feedback received in relation to the mentorship programme. Some students reported never meeting their mentor and others were aware of their mentor but had not had any direct dealings with them.

The students also gave the Team some feedback on the DREEM survey. It was felt that, although it was a good form of feeding back into the programme and changes have been made, the timing of the distribution of the survey was wrong, in their view. It was issued to them at the end of the calendar year, rather than the end of the academic year. This in turn did not give students the opportunity to feed back on the entire year.

Students from Year Four

The Team met with students from Year Four. They 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.

On speaking to the students they were positive of their experience to date. They were highly complementary of the Pathology component of the Health and Disease modules in Year Two and Three. They did however, indicate that their Histology teaching in the previous years did not prepare them for Pathology. Students noted that they had never seen normal histology, it was only ever abnormal.

The students interviewed felt that the planning of lectures could be improved. They reported that lecture slides were uploaded to Blackboard on the morning of exams and this in turn resulted in lack of preparation.

The international students felt that the exam schedule was uploaded too late, which caused additional expenses travelling over the Christmas period, as flights could not be booked earlier when they are cheaper. More notice of exam schedules would hugely benefit these students.

When probing the students on assessments, they highlighted that feedback was not being provided unless requested. Particularly for the students who had to repeat exams, there was no feedback given on where they went wrong.

The students also felt that the MCQ's focused more on obscure things rather than everyday illnesses and felt that more relevant material would be of benefit.

The students who were on placements in the Academies were highly complementary of the experience. The only downfall was that the GP care and counselling services were no longer available in Letterkenny and students on placements there had to travel to Galway if they wanted to avail of these services.

Students on placements in rural areas felt that there was no consideration given to the additional expenses incurred by them in relation to accommodation and travel. They also felt the selection process was unfair. Examples were given of students on placements in rural areas who spent more than one rotation in a rural setting and students on placements in Galway who didn't have any rural placements.

Students from Year Five

The Team met with students from Year Five. They 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 currently in year five gave positive feedback about the programme. They felt that the clinical exposure was very good, commending the teaching being provided and wide access to Consultants and patients.

The students who attended the Academies in Letterkenny and Sligo praised the learning experience, however, it was noted that the students felt there was disparity between the Academies. The students attending the Academy in Mayo didn't feel they had as good an experience as those attending Letterkenny and Sligo.

The students felt that, out of the six strands they are examined on, they only get exposure to four strands, with lectures running right up to the end of the year. This resulted in 1/3 of students not getting the full exposure to all strands ahead of exams.

On speaking to the students in relation to assessments, the Year Five students had the same issues with feedback as previous years. They felt that there was inconsistency around the feedback given, whereby in some cases there was no feedback given and other cases there was very little. They did, however, feel there are improvements being made each year in relation to the support available to them ahead of exams. The international students commended the International Co-Ordinator for the continuous support provided to them.

There are extra tutorials throughout the summer for students who need to repeat exams, however, the students felt that the results were delayed in being released and therefore there was not sufficient time given to study.

The students were looking forward to their junior internship starting in January next year and, going on feedback received from previous students, it gave them a good sense of preparedness for their transition into internship training.

Compliance

The Team found that NUIG is partially compliant with this standard

Observation(s) and Recommendation(s)

The Team makes the following recommendations:

- More clarity is needed relating to the requirement for foundation year for international students.
- Some consideration be given to the supports in place for students who are taking re-sit exams
- A more integrated structure and clinically relevant content to be incorporated into the Foundation Year.
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Commendation(s)

- The Team commends NUIG for the clear policies and criteria in place for student admission, which was detailed in the questionnaire.
- The international students commended the International Co-Ordinator for the continuous support provided to them

Area 5: Academic staff / faculty

ACADEMIC STAFF/FACULTY	Level of compliance	FC

Description of documentary evidence of compliance with this standard provided by NUIG:

NUIG provided the Team with no documentary evidence of compliance with this standard.

Description of evidence of compliance with this standard found during the inspection visit:

The Team learned through their meetings with Senior Management, Educators and Trainers and students that, over the past five years, the number of support staff employed by the School has doubled. There has also been an increase in the number of personal professors appointed.

NUIG has a number of staff development opportunities available to the staff including formal qualification (Postgraduate Certificate, Diploma and Masters programmes in Clinical Education). In addition, both University and Academy staff have an opportunity to participate in generic training events offered by the Centre of Excellence in Learning and Teaching (CELT). This provides a very good opportunity for exchange of ideas and networking across Higher Education disciplines. NUIG should keep this aspect of provision under review to ensure that staff are receiving appropriate training to deliver aspects of teaching and assessment unique to healthcare education, for example OSCE-based assessment.

The Team were informed that the staff regularly attend internal medical education conferences and workshops. The School should consider introducing a forum for dissemination of good practice identified at these events.

Compliance

The Team found that NUIG is fully compliant with this standard

Observation(s) and Recommendation(s)

The Team makes the following recommendations:

- The School should consider introducing a forum for dissemination of good practice

Commendations

- The Team commends NUIG for this investment in the programme.
- The Team commend NUIG on the excellent and enthusiastic leadership of Professor Timothy O'Brien, Ms Carmel Malone and Professor Gerard Flaherty and the commitment and dedication of the teaching staff
- Doubling the number of support staff employed by the School over the past five years. There has also been an increase in the number of personal professors appointed;

Area 6: Educational Resources

EDUCATIONAL RESOURCES	Level of Compliance	PC

Description of documentary evidence of compliance with this standard provided by NUIG:

NUIG provided the Team with the following documentary evidence of compliance with this standard: the Postgraduate Medical Case Conference Programme.

Description of evidence of compliance with this standard found during the inspection visit

Physical Facilities:

The Team visited the facilities at NUIG and was pleased to note that there has been considerable investment recently in the medical school. The new Human Biology Building has a state-of-the-art Anatomy Dissection Suite and laboratory for practical classes, as well as lecture theatres and small group teaching rooms. Currently the School has well-resourced simulation teaching facilities both on the NUIG campus and at University Hospital Galway. The proposal to build a new Clinical Skills Education Centre adjacent to the existing Clinical Science Institute and University Hospital Galway will further enhance the resources and facilities available to the students.

The facilities for student teaching at University Hospital Galway, the Galway Clinic and Bon Secours Hospital were visited by the Team and found to be appropriate for student and teaching requirements.

The facilities in Merlin Park Hospital were also visited by the Team and found to be fit for purpose, with one exception. Students do not have a designated study area or resource room which they can use for self-directed study.

Clinical Training Resources:

The clinical training resources observed by the Team, both on campus and at NUIG, were found to be fit for purpose.

The range of learning experiences in the Galway Clinic are appropriate as part of final year learning experience but they are not currently sufficiently varied for internship preparation.

Information Technology:

The Medical School uses Blackboard as the electronic platform for student learning. While it is acknowledged that there are limitations associated with this platform, it will continue to be the main Visual Learning Environment. Students did not identify any major issues with this platform and can access it from the Clinical Teaching Sites and Academies.

Medical Research and Scholarship:

Students have an opportunity to engage in research programmes through the Intercalated Degree Programme, the MB-PhD Programme and Summer Studentships. The latter offer opportunities for students to engage with researchers and learn about some of the ongoing research in the Medical School.

Review of the module content reflects a research- and evidence-based medicine theme throughout the programme. Training in evidence-based medicine is embedded in the Medical Informatics component of the Medical Professionalism modules in Years One to Three.

Educational Expertise:

The Medical School runs a very successful Postgraduate Education Programme which is open to all staff. Staff are encouraged to undertake educational research and several members of staff have presented their research findings at local and national meetings.

Educational Exchange:

The Medical School has an Erasmus Programme which allows students to complete some of their studies in another EU country. On speaking with students who had taken part in the Erasmus Programme, they spoke highly of the experience and felt it did not have any negative impact on their current studies.

Compliance

The Team found that NUIG is partially compliant with this standard

Observation(s) and Recommendation(s)

The Team makes the following recommendations:

- In Merlin Park, students do not have a designated study area or resource room which they can use for self-directed study. The Team recommends that this be reviewed.

- The Medical School should review the educational opportunities offered to students undertaking internship preparation at the Galway Clinic

Commendation(s)
The investment in the new state of the art Human Biology Building, the simulation centre and clinical skills lab and the investment in the Academies, all of which enhance the delivery of your programme

Area 7: Programme evaluation

PROGRAMME EVALUATION	**Level of compliance**	**FC**

Description of documentary evidence of compliance with this standard provided by NUIG:

NUIG provided the Team with the following documentary evidence of compliance with this standard: University policies and procedures for Programme Boards for Taught Programmes, CMNHS new programme development form, CMNHS Reviewer feedback form, CMNHS substantial programme changes form, Policies and procedures for the review of Taught Programmes at NUIG, Modified version of the Manchester Clinical Placement Index, DREEM Survey, Year One DREEM Report and Actions, Module Feedback, NUIG guidelines for nomination of External Examiners – Taught Programmes, Sample Exam Modelling Tool generated data and NUIG Dr Henry Hutchinson Stewart Medical Scholarship and Prizes, 2016.

Description of evidence of compliance with this standard found during the inspection visit:

Mechanisms for Programme Monitoring and Evaluation:

The Medical School adheres to the University Programme Monitoring schedule. The use of the DREEM Evaluation tool demonstrates good practice in evaluation of the student experience.

Teacher and Student Feedback:

The Team was informed that students complete evaluation questionnaires on completion of each module. The Chair of the Programme Board meets regularly with elected student representatives to get additional qualitative feedback.

The Team was also informed that teachers in the Academies and other teaching hospitals get a copy of the student feedback; and staff from the Medical School meet with hospital staff every three weeks to discuss the student feedback.

Stakeholder Involvement

The importance of the patient voice in the curriculum was explored by the Team, who feel that although NUIG's Strategic Plan (2015-2020) indicated the importance of stakeholder involvement in the curriculum development, there is insufficient patient advocacy and insufficient representation of the patient and there is no community representative involvement.

Compliance
The Team found that NUIG is fully compliant with this standard

Observation(s) and Recommendation(s)
The Team makes the following recommendations:

- Stakeholder involvement in the curriculum development be explored.

Commendation(s)
No commendations made.

Area 8: Governance and Administration

GOVERNANCE AND ADMINISTRATION	Level of compliance	FC

Description of documentary evidence of compliance with this standard provided by NUIG:

NUIG provided the Team with the following documentary evidence of compliance with this standard: Role of the Head of School.

Description of evidence of compliance with this standard found during the inspection visit

Governance and Administration
The Team note the academic leadership arrangements on NUIG's School Board and recently-formed Programme Board. The Team recommends that the adequacy of these arrangements should be reviewed annually by the Programme Board through the assessment of student feedback and External Assessor reports.

Educational Budget:

The School of Medicine highlighted the financial constraints they have faced in recent years. The Team notes that Government funding has decreased radically since 2008 with a 35% decrease in funding from the HEA, which means the School is now heavily reliant on non-EU student fees to subsidise the delivery of the medical programme.

Interaction with the Health Sector:

The Team note the Medical School's regular interactions with the Health Service Executive (HSE), the significant development of the Western Academic Health Network (WAHN) which is a closely-collaborative joint governance network to formalise and deliver improvements in the health services, research and education across the region.

The Team also note the formation of the Saolta University Healthcare Group, which cements the relationship of the central School of Medicine in Galway with its affiliated Academies. The appointment of the Group Chief Academic Officer promotes a regional approach to education and training delivery in the undergraduate setting.

Compliance
The Team found that NUIG is fully compliant with this standard

Observation(s) and Recommendation(s)
The Team makes the following recommendations:

- The Team note the academic leadership arrangements on NUIG's School Board and recently-formed Programme Board. The Team recommends that the adequacy of these arrangements should be reviewed annually by the Programme Board through the assessment of student feedback and External Assessor reports.

Commendation(s)
No commendations made.

Area 9: Continuous Renewal

CONTINUOUS RENEWAL	Level of compliance	FC

Description of documentary evidence of compliance with this standard provided by NUIG:

NUIG provided the Team with the following documentary evidence of compliance with this standard: the College of Medicine, Nursing and Health Sciences Strategic Plan, 2015-2020.

Description of evidence of compliance with this standard found during the inspection visit

The Team were impressed by the developments that have taken place in NUIG over the last number of years and are particularly gratified to see that recommendations from the previous Medical Council visits have been implemented, such as the development of an integrated systems-based curriculum, which emphasises the horizontal and vertical integration of biomedical sciences and clinical practice through the recently-established Programme Board.

The Team believe that the medical school at NUIG is committed to a process of continuous improvement and renewal, as evidenced by externally-chaired quality reviews of content, assessment, educational environment, and organisation, which are critically examined and benchmarked to best external examples. The Team endorse the developments undertaken so far and look forward to monitoring developments in the future.

Compliance
The Team found that NUIG is fully compliant with this standard

Observation(s) and Recommendation(s)
The Team makes no recommendations:

Commendation(s)
No commendations made

F. INSPECTION OF CLINICAL TRAINING SITES

University Hospital Galway

The Team met with the Clinical Staff and Management of University Hospital Galway (UHG) and appreciate the time the staff took to meet with them and give them insight into the full scope of practice at the hospital and the hospital's involvement with education and training.

The Team were informed of the effort being put into the careers nights and the transition for students into postgraduate training to encourage students to stay in the region to complete their training.

Professor Anthony O'Regan spoke highly of the collaboration with the Medical School and the Saolta Healthcare Group and acts as an interface with the University. Professor O'Regan is on the School Board and has monthly meetings with the medical school to discuss and promote an increased academic setting.

The Team were advised that there are 63 tutors / fixed-term lecturers who are matched by their contract. It was also noted that fixed-term lecturers take a keen interest in student wellbeing and are aware of how to deliver pastoral support.

The Clinicians also commended the Medical School's development of the Academy structure, which has led to the upgrade of technology supports and the students have strong robust exposure to patients. The local Clinicians have taken on lecture posts which is enhancing their own skills and brought them together as a team. There is also opportunity for the Clinicians to feed back into the programme through the Programme Board.

There is continuous development in UHG with the sub-internship being re-introduced and the development of disciplinary learning, team-work and cross-disciplinary learning in order to prepare the students for internship. Students from Year 5, Semester 2 (5.2), who do their sub-internship in UHG, are paired with an intern. On speaking to the Interns who are currently on rotation in UHG, they praised the high standard of training in preparedness for practice received in NUIG and felt the sub-internship gives students good clinical exposure.

Merlin Park University Hospital

The Team met with the Clinical Staff and Management of Merlin Park University Hospital (MPUH) and appreciate the time the staff took to meet with them and give them insight into the full scope of practice at the hospital, and the hospitals' involvement with education and training.

Merlin Park University hospital is affiliated with University Hospital Galway and the Clinicians share their time between MPH and UHG. They advised of the seamless integration between both hospitals with SLA's in place. The Clinicians also take on elective placements for research projects and international student placements.

The core subjects covered in MPUH are Nephrology and Rheumatology and Orthopaedics, all students spend two weeks on placement here. The Team were informed of the excellent clinical exposure students get with direct learning with Consultants.

The Clinicians involved in the training in MPUH are involved in exam development and module development and have regular meetings with the Programme Board to provide and review feedback from the students on their time in MPUH.

All surgery has temporarily moved to UHG and there is a short-term plan proposed for a modular building for elective surgery in MPUH.

On inspection of the facilities, it was noted that students do not have a designated study area or resource room which they can use for self-directed study. There is also no college WiFi to connect to, which limits access to study, and no intranet available. In combination with this, if broadcasting was available, it would be possible to be attached to MPH like one of the Academies rather than travelling between sites.

Students reported an atmosphere that was not as rushed as that in larger teaching hospitals, with fewer students present. They attend Merlin Park with a specific goal rather than attending in a floating role and report feeling a stronger sense of purpose and role. However, it was reported that clarifying learning outcomes would be useful as students reported that they were unsure of what to take from their time in MPH and that this could be further clarified to enhance their experience.

There was a perceived higher quality of experience here reported by students in patient interaction due to the smaller group teaching available and more time available to students and trainers. Students reported that this site provided excellent opportunity for history taking and would provide a good opportunity to learn and practice clinical skills such as cannulations and setting up lines. This, along with providing more formal study space, would take pressure off larger teaching hospital sites that can be very busy. Protected time for teaching for tutors was also noted as a "win-win for all".

The Galway Clinic

The Team met with the Clinical Staff and Management of The Galway Clinic and appreciate the time the staff took to meet with them and give them insight into the full scope of practice at the clinic, and the clinic's involvement with education and training.

On discussion with the Management and Clinical Staff of the Galway Clinic, the Team were advised of the Memorandum of Understanding that is currently in place between NUIG and the Galway Clinic. There are currently four four-week placements per year for junior internship and students get exposure to surgery.

There has been positive feedback on "quality of care' and "end of life" teaching with regular meetings to discuss cases.

On starting a rotation in the Galway Clinic, all students take part in an orientation which includes hand hygiene.

On inspecting the facilities, the Team felt that there are appropriate resources for student self-directed learning and good technology in place for video-link tutorials.

Bon Secours Hospital, Galway

The Team met with the Clinical Staff and Management of The Bon Secours Hospital, Galway and appreciate the time the staff took to meet with them and give them insight into the full scope of practice at the hospital, and the hospital's involvement with education and training.

On discussion with the Management and Clinical Staff of the Bon Secours Hospital, it was clear that the hospital is keen to continue and perhaps expand its teaching and training arrangement with NUI Galway. There is a Memorandum of Agreement between the Bon Secours Hospital and NUIG.

Students come to the Bon Secours Hospital briefly in the First Semester of Year 2 (2.1) for one morning when they benefit from early patient contact; and later in the programme, for a three-week rotation in the Second Semester of Year 5 (5.2), at the end of which they present a case from their experience at the hospital. In Year 5, students are informed of hospital policies and receive on-site support. There is also an internship rotation at the hospital. Students are encouraged to provide feedback and as a result the programme is continuously improving.

The Bon Secours Hospital is a Level 2 hospital. Students (and interns) benefit from one-to-one experience with a Consultant and there are opportunities for students to experience theatre and learn some technical skills, such as putting up lines and intubating. Hospital management informed the Team that there are greater opportunities for experiencing elective surgical procedures in the Bon Secours Hospital than perhaps in public hospital settings. They have an open policy and encourage students to experience as many opportunities as possible. Students are invited to examine patients (with their consent) and are to scrub up, if an opportunity in theatre arises. Students and interns experience working in multi-disciplinary teams on a daily basis, especially with nursing, pharmacy and physiotherapy staff.

The Team noted that there are no opportunities for experiencing Trauma or Nuclear Medicine cases, as these are all managed at Galway University Hospital. Interns and students are encouraged to attend GUH education and group sessions to compliment training.

The Team met with two Year 2 students who had attended the hospital recently for early patient contact, when they experienced history taking and case reporting. The students were very positive about their experience at the hospital and described the environment as encouraging and welcoming. They also felt the timing of the early patient contact was right – they needed the foundations of Year 1 to prepare them and the contact helped them put what they had studied into context.

On inspecting the facilities, the Team found that students and interns have a designated study room with internet access. However, there is currently no weblink to Grand Rounds available.

End of report