



Comhairle na nDochtúirí Leighis
Medical Council

Final Report on Accreditation Visit Perdana University - Royal College of Surgeons in Ireland Medical School

**Partner University:
Royal College of Surgeons in
Ireland**

16th February 2012

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 conditions 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 2016)**
 - (b) The PU-RCSI clinical placements are agreed nine months in advance of students' major clinical rotations, *via* the development and implementation of a comprehensive plan for the provision of the clinical teaching, with robust Memoranda of Understanding in place**
 - (c) The issue of insufficient capacity at the PU-RCSI campus is addressed by PU-RCSI in advance of the next intake of students**
 - (d) That clinical and budgetary independence be established at PU-RCSI with immediate effect, thus allowing autonomy from all other stakeholders.**
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- 2. The Perdana University - Royal College of Surgeons in Ireland should be approved with conditions for a period of one year 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 Medical Council should undertake a further monitoring visit of the PU-RCSI programme and the PU-RCSI as a body in 2013, to assess progress in addressing the conditions as outlined above.

A. Summary and General Assessment

1) Decision of 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. It is well-designed and effectively delivered to an impressive cohort of students who are generally very positive about their PU-RCSI experience so far. However, there are significant areas of concern to the Team which require review and revision by PU-RCSI. These issues warrant conditions being placed on the approval. The continuation of conditional approval is contingent upon these issues being addressed by PU-RCSI. Areas where PU-RCSI is commended are also highlighted.

The Decision of the Medical Council is that:

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- (c) The issue of insufficient capacity at the PU-RCSI campus is addressed by PU-RCSI in advance of the next intake of students
- (d) That clinical and budgetary independence be established at PU-RCSI with immediate effect, thus allowing autonomy from all other stakeholders.

- 2. The Perdana University - Royal College of Surgeons in Ireland should be approved with conditions for a period of one year 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 Medical Council should undertake a further monitoring visit of the PU-RCSI programme and the PU-RCSI as a body in 2013, to assess progress in addressing the conditions as outlined above.

2) Recommendations additional to the conditions above:

1. The governance structures between PU-RCSI and Johns Hopkins University should be clearly defined, with Memoranda of Understanding to be put in place; procedures for mediation and resolution of potential conflict are needed
2. A contingency plan should be drawn up to alleviate issues arising from any potential delays in the completion of the new campus and clinical training site
3. Recruitment and retention of the necessary staff must be vigorously pursued: the Team highlights in particular the current high proportion of temporary secondment arrangements of key personnel responsible for delivering the programme, and recruitment and succession planning is vital
4. PU-RCSI should ensure that defined learning outcomes are disseminated to students and staff, particularly staff on clinical training sites
5. A mechanism and forum for addressing staff issues and concerns should be implemented
6. The financial (and otherwise) support of extra-curricular societies and activities for students must be developed
7. Issues regarding student accommodation, student transport, library access and opening hours need to be addressed urgently, and additional study areas, cubicles, and power points in the library are advisable
8. PU-RCSI should ensure awareness among students of the following:
 - A. The Medical Council's *Eight Domains of Good Professional Practice*
 - B. 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
 - C. The revised *Children First: National Guidance for the Protection and Welfare of Children* guidelines in Ireland before students have attachments in paediatrics
 - D. The World Health Organisation *Patient Safety Guidelines*
9. PU-RCSI should ensure that the teaching environment incorporates high standards in hygiene and infection control
10. PU-RCSI should maximise streaming or recording of lectures for students and the development of IT technical support for staff

3) The Team commend PU-RCSI for:

1. The significant recruitment process undertaken to date and of the quality of staff appointed

2. The achievement and the commitment of the stakeholders thus far in commencing the programme
3. The quality of the teaching delivered
4. The support for any students who are struggling

4) The Team request the following information /clarification from PU-RCSI:

1. Up-to-date information regarding the status of the relevant building work, which both staff and students remarked appeared to have stalled.
2. A Gantt chart of anticipated placements is requested
3. Confirmation that PU-RCSI is recognised by the relevant national and international medical education authorities and competent bodies, such as the Malaysian Qualifications Agency, the Avicenna Directory and the International Medical Education Directory (IMED) of the Foundation for Advancement of International Medical Education and Research (FAIMER).

Final Report Approved by April Council

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 remain in line with the existing programme and 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.

However, due to the multiplicity of stakeholders in the development of this venture, the Team urge that clinical and budgetary autonomy are established with immediate effect and the Team believe that this be made a condition of Medical Council approval of the programme. The Team appreciate that the Perdana University Graduate School of Medicine (PUGSOM) is a separate entity, but require evidence that the co-location of RCSI and PUGSOM will not adversely impact on RCSI, given that PUGSOM is going to be the sole investor in the new campus. It is crucial that the 'parity of esteem' referenced by PU-RCSI is translated into reality.

The Team welcomed the opportunity to liaise with members of the Malaysian Medical Council and are reassured that the programme is quality assured by them.

WFME AREA 2 Educational programme

The Team note that there are currently Curriculum and Assessment Working Groups and that the delivery and design of the educational programme is supported by the Project Office, based in the Royal College of Surgeons in Ireland in Dublin, through regular video-conferencing.

Due to the fact that the programme, as delivered in Malaysia, is new, the Team have concerns regarding the availability and access to teaching at the clinical training sites, which PU-RCSI acknowledged could not be confirmed in detail at this time. The Team was advised that due to existing pressures on clinical duties at Putrajaya General Hospital, for example, the clinicians did not foresee how they would have the capacity to deliver teaching to additional students. The Team is aware that due to the contractual arrangements of clinical staff with the Ministry of Health in Malaysia, there is little opportunity for leverage for the PU-RCSI, should a situation arise whereby the clinical teaching is not satisfactory.

The Team is sufficiently concerned about arrangements for clinical placements to include them in the recommended conditions, and urge that comprehensive Memoranda of Understanding with clinical training sites be devised as soon as possible.

The Team commend PU-RCSI on the inclusion of professionalism and ethics in the programme. The Team recommend that awareness be raised among students of the Medical Council's *Eight Domains of Good Professional Practice* and 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 Team also recommend that PU-RCSI ensure that the teaching environment incorporates high standards in hygiene and infection control. While the fabric of some of the clinical training sites may present challenges in this area, PU-RCSI should do everything that it can to support best practice.

The Team commend the PU-RCSI for the opportunities being developed for ten summer research electives of eight week's duration. The Team recognise that PU-RCSI aim to develop their research profile in early course.

In addition, the Team recommend that the PU-RCSI ensure awareness of the revised *Children First: National Guidance for the Protection and Welfare of Children guidelines* in Ireland before students have attachments in paediatrics, along with the World Health Organisation *Patient Safety Guidelines*.

The students that the Team met on the day requested more anatomy teaching and would like access to cadavers and opportunities for dissection, as they currently only use models.

WFME AREA 3 Assessment of Students

The Team was presented with data showing that students of PU-RCSI compare favourably in examinations when compared with students who are undertaking the programme at the Dublin and Bahrain sites. The Team found that students get pre-examination briefings and that the process is transparent. The Team commend PU-RCSI on the inclusion of professionalism and ethics in examinations.

The Team wish to commend the PU-RCSI on their Student Progress Committee, which monitors students who have not performed well in examinations. Students appeared to be satisfied with assessment processes.

WFME AREA 4

Students

The Team note that students are represented on various academic committees and have some input into the curriculum.

The Team commend PU-RCSI on their mental health strategy along with the appointment of a student counsellor and assignment of student support tutors, and their support for students who are struggling.

The students met raised significant concerns regarding their accommodation, with the presence of a fungus at their accommodation block being cited as a particular issue.

The transport arrangements between the campus and the student accommodation appear to be limited and negatively impacts upon students' ability to access the library, where the opening hours are also limited.

The Team advise that these issues regarding student accommodation, student transport and library access opening hours be addressed urgently. Whilst recognising that today many educational materials are accessed online, the Team noted that the library was poorly stocked with textbooks and recommend that this be addressed.

The students commented on the fact that the student common area on campus, while not outstanding, is adequate for the present, but will not facilitate an increase in student numbers as the programme rolls out. Issues including poor lighting, no access to vending machines, newspapers or journals should be addressed. Students were concerned that current cafeteria facilities are inadequate in terms of size and capacity, and this would be exacerbated by increasing numbers.

The Team advocate that the financial (and otherwise) support of extra-curricular societies and activities for students must be developed in order to enhance the student experience and foster communication skills, team working and leadership qualities in students along with interaction of PU-RCSI students with students from other universities. Perdana students were apparently not eligible to participate in some inter-University competitions because of an outstanding administrative task that PU-RCSI had not yet completed, and this should be remedied.

The students also suggested that PU-RCSI might wish to consider issuing certificates to them for taking posts of responsibility in the organisation or on committees.

WFME AREA 5

Academic Staff/Faculty

The Team commend the PU-RCSI for the significant recruitment process undertaken to date and of the quality of staff appointed. The Team was impressed by the achievement and the commitment of the stakeholders thus far in initiating the programme. These efforts are reflected in the general complimentary views of the students.

However, recruiting and retaining key staff will be crucial to the longer-term success of the programme. The Team urge that comprehensive and robust staff retention and succession planning policies should be put in place, particularly given the high number of temporary secondment arrangements of key personnel responsible for delivering the programme.

In addition, the Team note that an 'Employee Welfare Committee' has not met as yet. The Team recommend that a mechanism and forum for addressing staff issues and concerns should be implemented, in order to prevent any potential negative impact upon staff turnover and ultimately continuity of teaching for students.

WFME AREA 6

Educational Resources

The availability and access to teaching at the clinical training sites has been referenced in Area 2 of this report and the Team underlines the importance of the issue.

The issue of capacity at the PU-RCSI campus needs to be urgently addressed in advance of the next intake of students. The impending capacity pressures in the current campus were evident to the Team and to the students. The Team is particularly concerned that plans to build the new PU-RCSI campus may not progress in time for the clinical training site to be opened by 2013 and the Team urge that this be addressed and a contingency plan put in place for any potential delays in the completion of the new campus and clinical training site.

The students that the Team met suggested they would like streaming or recording of lectures so that they may replay the lecture later, and that IT technical support for staff should be developed. The Team was informed that a Virtual Learning Environment technician is to be recruited and an update on this appointment would be welcomed in due course.

The facilities issues raised with the Team in student feedback sessions are highlighted in WFME Area 4 of this report.

The Team recommend that PU-RCSI ensure that the teaching environment incorporates high standards in hygiene and infection control. While the fabric of some of the clinical training sites may present challenges in this area, PU-RCSI should do everything that it can to support best practice.

WFME AREA 7

Programme evaluation

The Medical Council welcome the fact that the programme is also to be monitored by the Malaysian Medical Council and the Malaysian Qualifications Agency.

WFME AREA 8

Governance and Administration

As mentioned under WFME Area 1, the Team acknowledge the multiplicity of stakeholders in the development of this venture and, in addition to establishing clinical and budgetary autonomy, the Team urge that the governance structures between Perdana University, Royal College of Surgeons in Ireland and Johns Hopkins University be clearly defined, with Memoranda of Understanding established with immediate effect.

WFME AREA 9

Continuous Renewal

The Team acknowledge that the programme is already well-established and currently delivered on sites in Ireland and Bahrain, and will be subject to the Royal College of Surgeons in Ireland's quality assurance and quality improvement initiatives.

To ensure the continuity of the programme, the Team again emphasise that retention of staff succession planning policies previously referenced.

Visit to Clinical Training Site

Meeting with consultants at Putrajaya General Hospital

The Team met a number of representatives at the Putrajaya General Hospital. The Team was impressed by the presentation. It is anticipated that students will complete rotations in obstetrics and gynaecology, anaesthesia, orthopaedics and endocrinology. However, the Team was advised that due to existing pressures on clinical duties, the clinicians did not foresee how they would have the capacity to deliver teaching to additional students. In addition, there appears to be a distinction between 'first class patients', to whom the students would have no access and 'third class patients' to whom the students would have access. The Team is concerned that this may negatively impact upon the student experience during clinical placements. The Team believe that the educational resources at Putrajaya General Hospital were inadequate to accommodate additional students.

It was apparent to the Team that considerable additional negotiation is required between PU-RCSI and Putrajaya General Hospital to affect the desired outcomes.

The Team also believe that there may be significant challenges in PU-RCSI students being placed in other hospitals such as Hospital Tuanku Ja'afar, Seremban, where other medical schools already have a strong presence and branding.

End of report