



**Comhairle na nDochtúirí Leighis
Medical Council**

**REPORT ON MONITORING VISIT
ROYAL COLLEGE OF SURGEONS IN IRELAND
GRADUATE ENTRY PROGRAMME (RCSI GEP)**

9TH – 11TH NOVEMBER 2011

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1. MEDICAL COUNCIL DECISION

1. The Royal College of Surgeons in Ireland's Graduate Entry Programme is approved under the terms of Section 88(2)(a)(i)(I) of the Medical Practitioners Act 2007 for a period of five years (i.e. until January 2017). This decision is made on the grounds 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.
2. The Royal College of Surgeons in Ireland is approved for a period of five years (i.e. until January 2017) under Section 88(2)(a)(II) of the Medical Practitioners Act 2007 as the body which may deliver that programme. This decision is made on the grounds of the RCSI'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.
3. In line with Council policy for all medical schools, an annual return on the GEP should be completed by RCSI in 2012, and details of this will be notified to RCSI in due course.

2. CONTEXT OF THE VISIT

The Royal College of Surgeons in Ireland has established a four year programme leading to the award of MB BCH BAO. It is at undergraduate (basic in World Federation for Medical Education terminology) level with an exclusively graduate entry. RCSI currently also delivers a direct entry medical programme of six years duration for school-leavers (direct) entry and where students may be exempt from the Foundation Year, depending on prior learning, which leads to the award of the same degree. The two “streams” merge for the final two years of both programmes.

The RCSI GEP was the first graduate entry programme in Ireland. The programme was initially provisionally accredited by the Medical Council following a visit in November 2005 and the programme admitted its first students in September 2006.

3. ACCREDITATION SITUATION AT THE TIME OF THE VISIT

The RCSI GEP was approved by Council on 15th April 2010, following an accreditation visit held on 8th and 9th February 2010. Council determined that this approval should be for an initial period of three years, i.e. until the class of 2013 have graduated. The November 2011 visit was a “periodic monitoring visit” required by Council.

A Medical Council Accreditation Team undertook an evaluation of the direct entry programme on 9th, 10th, and 11th November 2011, and combined it with this monitoring visit to the four year graduate entry programme.

4. BASIS OF THE REPORT

Many of the findings and recommendations contained in the main report on the direct entry programme also apply to the RCSI GEP; they have implications for both programmes, and should be viewed by RCSI in this light.

This brief report therefore concentrates on issues specific to the GEP programme.

5. THE TEAM

The Medical Council Accreditation Team is listed on the title page of the main report. The Council particularly appreciates the contribution of external assessors. The Medical Council also thanks the Royal College of Surgeons in Ireland Team, and the GEP students who met the Team: students’ feedback is most helpful in formulating this Report.

6. OVERALL CONCLUSION

Council endorsed the Team’s findings that the programme in general is well-designed and effectively delivered to an impressive cohort of students who are generally positive about their RCSI experience and about the enthusiasm and motivation of RCSI staff. There are areas where review and revision is advised but none of the issues identified warrant any conditions being placed on the programme or the body.

7. ISSUES FOR NOTING

- a) The general satisfaction of the GEP students with the programme, subject to some caveats contained in this report and in the report relating to the five year programme
- b) The focus, initiative and motivation of the GEP students
- c) The consensus (among teaching staff and GEP students themselves) that GEP students – whether from a science background or otherwise - are well prepared to embark on the final two years of the programme, and perform in the predominantly clinical years of the programme at least as well as students on the direct entry programme
- d) The RCSI uses clinical training opportunities in the private sector (and the Team visited the Beacon Clinic) as well as in peripheral sites (the Team inspected Cavan General Hospital and Our Lady of Lourdes Hospital Drogheda) and community psychiatry facilities (the Team visited the Virginia Clinic in Virginia, Co. Cavan)
- e) The forthcoming curriculum review (impacting on both programmes) in 2012/13
- f) The GEP students' eagerness to receive feedback, and students' perception that they receive more feedback than students on the direct entry programme, due to the smaller classes in GEP years one and two.
- g) The GEP students had some concerns about capacity, given the demands on RCSI and clinical training site resources from their own cohort, from students on the five year programme, and from RCSI's academic activities in Malaysia
- h) RCSI's assurance that the programme continues to meet the provisions of EU Article 24 (2) on the 5,500 hours duration of basic medical education and training (as stipulated in EU Directive 2005/36/EC).

8. RECOMMENDATIONS

The Team recommend that RCSI note the above, and continue to implement / monitor the issues raised in the previous report on the RCSI GEP, including that RCSI:

- a) The RCSI should continue to monitor student numbers on both the direct entry and the GEP to ensure that they are commensurate with the available resources, particularly clinical training opportunities, and do not result in unacceptable pressure on major teaching hospitals.
- b) The RCSI should maximise use of suitable peripheral sites and community and primary care facilities.
- c) The RCSI should work to ensure effective IT links between peripheral sites, major teaching hospitals, and campus-based teaching and learning.

9. ADDITIONAL INFORMATION REQUIRED

The Team request access to an analysis of the final year GEP examination results when these are available.

End of report