Comhairle na nDochtúirí Leighis
Medical Council

REPORT ON MONITORING VISIT
UNIVERSITY COLLEGE DUBLIN'S
GRADUATE ENTRY TO MEDICINE (UCD GEM) PROGRAMME

2ND – 4TH NOVEMBER 2011

CONTENTS OF REPORT

1. MAIN RECOMMENDATIONS

THE TEAM'S MAIN RECOMMENDATIONS TO THE MEDICAL COUNCIL'S PROFESSIONAL DEVELOPMENT COMMITTEE ARE THAT:

1. **The University College Dublin's Graduate Entry to Medical Programme should be approved with one condition under the terms of Section 88(2)(a)(i)(I) of the Medical Practitioners Act 2007. This recommendation 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. The condition is that the programme successfully completes its full first cycle (due in 2012).**

2. **The University College Dublin 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 University College Dublin'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. The condition is that University College Dublin successfully delivers the first full cycle of the programme (due in 2012).**

2. CONTEXT OF THE VISIT

University College Dublin has established a four year programme leading to the award of an MB BCh BAO. It is at undergraduate (basic in World Federation for Medical Education terminology) level with an exclusively graduate entry. UCD currently also delivers a direct entry medical programme of six years duration which leads to the award of the same degree. The two "streams" merge for the final two years of both programmes.

A Medical Council Accreditation Team undertook an evaluation of the six year programme on 2nd, 3rd and 4th November 2011, and combined it with a monitoring visit to the four year programme. The visit was undertaken following the recommendation approved by Council that prior to the further accreditation visit in Spring 2012, a monitoring visit should be held in Autumn 2011.

3. CURRENT SITUATION

The Council's policy is that the accreditation of all new programmes is provisional until one full cycle of the programme has been completed. In terms of the Medical Practitioners Act 2007, this means that *at least one condition* has to be attached to approval before that time. The sole *mandatory* condition is that the programme successfully completes its first full cycle (in 2012 in the case of the UCD GEM), this success to include evidence of its longer-term sustainability. Approval without conditions was therefore not an option for the UCD GEM at this stage, and this is reflected in the main recommendations.

4. BASIS OF THE REPORT

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

This brief report therefore concentrates on issues specific to the GEM 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 University College Dublin Team, and the GEM students who met the Team: students' feedback is most helpful in formulating this Report.

6. OVERALL CONCLUSION

The Team reiterates the findings of previous Teams that the programme in general is well-designed and effectively delivered to an impressive cohort of students who are generally positive about their UCD experience. There are areas where review and revision is advised but none of the issues identified warrant any additional conditions being placed on the existing conditional approval.

7. ISSUES FOR NOTING

a) The general satisfaction of the students with the programme, subject to some caveats contained in this report and in the report relating to the six year programme

b) The consensus among teaching staff and GEM students themselves that GEM students are well prepared to embark on the predominantly clinical years of the programme

c) The consensus among teaching staff that GEM students cope with the predominantly clinical years of the programme at least as well as students on the six year programme

d) The consensus among teaching staff that GEM students are particularly self–motivated, reflective and focused on their career path

e) The consensus among teaching staff that GEM students have a positive influence on the students on the longer programmes in terms of d) above

f) The consensus among teaching staff and GEM students themselves that GEM students show a distinct readiness to engage with staff in discussion about the programme, their performance, and any suggestions for improvement / concerns

g) The GEM students' eagerness to receive feedback

h) The GEM students' high expectation both of themselves and of UCD

i) The GEM students had some concerns about capacity, given the demands on resources from their own cohort and from students on the six year programme

j) UCD'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)

k) The *Children First: National Guidance for the Protection and Welfare of Children* guidelines should be incorporated into the educational outcomes for students especially at the peripheral sites.

8. RECOMMENDATIONS

The Team recommend that UCD note the above, and continue to implement / monitor the issues raised in the previous report on the UCD GEM, i.e. that UCD

a) Consider the involvement of allied health professionals and inter-professional education in the delivery of the programme

b) Consider blueprinting and standard-setting for high stake examinations

c) Ensure that students in clinical training sites are adequately informed of lectures and tutorials

d) Continue to guard against the potential for the students to be on permanent 'exam footing' and for teachers to be overburdened with assessment

e) Do everything possible to expedite examination results and to give timely feedback following the examinations

f) Progress satisfactory provision of IT facilities in smaller hospitals

g) Ensure timely provision of lectures notes on Blackboard.

h) The Team recommend greater access to the clinical skills laboratories.

End of report