Comhairle na nDochtúirí Leighis
Medical Council

Report on the Approval Accreditation of University of Limerick School of Medicine & Direct Entry to Medicine Programme

18 and 19 November 2025

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The Medical Council has a statutory role in protecting the public by promoting the highest professional standards amongst doctors practising. The Medical Council sets the standards for medical education and training in Ireland. It oversees lifelong learning and skills development throughout doctors' professional careers through its professional competence requirements. It is charged with promoting good medical practice. The Medical Council is also where the public may make a complaint against a doctor.

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Pre - Accreditation Report – University of Limerick (UL) School of Medicine

Date of Accreditation: Tuesday 18 and Wednesday 19 November 2025

Accreditation Team Details

Assessor Team:	Dr Anna Clarke (Chair) Prof Barry Lewis Ms Ger Feeney
Executive Support:	Ms Denise Carroll – Head of Education & Training Ms Debbie Chappat – Head of Undergraduate, Intern & Clinical Learning Environments Ms Aoise O'Reilly – Quality Assurance Manager - Undergraduate Ms Hannah McGrath – Quality Assurance Executive

Introduction

During the summer of 2025, the School submitted a completed *Accreditation of Existing Medical Programmes – WFME Questionnaire* for its new Direct Entry medical degree programme (DEM). This questionnaire, prepared by academic teaching staff and School management, is a self-assessment form on which the School of Medicine ranked its perceived compliance of its DEM programme with the WFME standards. The form was supported with accompanying documentation demonstrating compliance with the World Federation for Medical Education's Global Standards for Quality Improvement in Basic Medical Education.

In July 2025, the Education and Training Committee approved the appointment of an assessor team to review the proposed DEM programme. The team was mandated to evaluate the programme and make an accreditation recommendation to the Medical Council's Education and Training Committee.

The accreditation visit was conducted utilising a hybrid approach on 18 –19 November 2025 and included the following:

- A presentation by Professor Colum Dunne, Head of the UL School of Medicine (online) followed by a detailed discussions between the Medical Council Assessor Team and UL management representatives (online).
- A private session with academic staff (online); and
- An inspection of the UL School of Medicine facilities (on site visit).

No meetings with students were held and no teaching was observed, as the DEM programme commencement is subject to obtaining accreditation from the Medical Council.

The Medical Council would like to thank the University of Limerick Team, led by Professor Colum Dunne - Head of the School of Medicine, Ms Mary O'Kelly - School of Medicine Programmes Manager, and Teresa Kennedy - Executive Administrator for the work involved in coordinating the visit. The Medical Council would also like to thank the University of Limerick Acting President - Professor Shane Kilcommins, and the University of Limerick Provost and Vice President- Professor Ann Ledwith for their attendance at the opening meeting. In addition, the Medical

Council would like to thank academic staff who met with the Team, whose feedback was most helpful in formulating this Report.

Summary of Findings

Overview of Self – Evaluation / Supporting Documentation

The UL School of Medicine completed the WFME questionnaire, with substantial documentary evidence of its compliance with the WFME standards, a list of these is contained in the **appendices**.

Overview of Online Meeting with Management Team

The UL School of Medicine's presentation was informative and useful. The information contained in UL School of Medicine's submission was further supported by what was presented at the meetings with Management and Academic Staff.

Overview of Online Meeting with Academic Team

Academic staff at the meeting were enthusiastic, informed, and knowledgeable, representing a mixed background that included biomedical disciplines. They clarified the DEM programme assessment format and the course handbook and explained how they plan to build students' capacity in Problem Based Learning (PBL). They also confirmed that there was no involvement with patients when developing the DEM programme. Additionally, chemistry, organic chemistry, and mathamatics will be delivered as part of the wider University faculty to leverage existing expertise in current staffing.

Overview of Facilities Walk Through

A comprehensive inspection of UL campus facilities indicates that significantly more space is now available, with several key developments across teaching, study, and student support areas.

University Library: The library has undergone a significant extension and now offers a wide range of resources. Books required for the School of Medicine are available both on-site and online, including extensive biomedical materials. The library provides dedicated spaces for small-group meetings and has extended opening hours from early morning until midnight which is particularly beneficial as the examination period approaches.

New Student Building: A newly opened student building provides a wide range of recreational facilities to support student wellbeing and campus life.

Laboratory Spaces for DEM Students: Updated IT facilities, introduced in Summer 2025, have improved the delivery of demonstrations and practical teaching. Staff reported that accommodating an additional 30 students would present no issues.

School of Medicine Building: Additional tables and chairs have been installed on the ground floor to promote informal student gatherings and provide a space for coffee and study.

Anatomy Facilities: Three new Anatomage tables have replaced the older models, with a fourth planned for installation in the Irish Chamber Orchestra (ICO) building (currently out to tender). Additional rooms have been added for PBL teaching and tutor meetings. During the visit, the newly appointed teaching assistant was introduced.

Student Lockers: Lockers remain available for students, although historically they have not been fully utilised.

Lecture Theatre: There has been no progress on securing a larger lecture theatre.

Second School of Medicine Building Development: Planning for a second School of Medicine (SOM) building is progressing, with two options being explored. The first is a city-centre location already owned by the University, while the second relates to expansion of the current SOM footprint on campus. Considerable progress has been made, with support of the UL Executive. Initial decisions regarding the likely location are anticipated in Spring 2026.

Maternity Hospital Extension: The modular extension to the Maternity Hospital was not inspected, but it is scheduled to open in Summer 2026.

Irish Chamber Orchestra (ICO) Building – New Ground Floor Facilities: Newly available ground-floor space will house the fourth Anatomage table, along with rooms designated for PBL sessions.

Paramedics Building (Off campus): A large facility currently used by paramedic programmes was reviewed. It offers extensive space, additional PBL rooms, and opportunities for multidisciplinary teaching.

Future Campus Space: A bid has been submitted for an additional on-campus building expected to become vacant in the coming months. The Dean is optimistic that it may be secured for School of Medicine use.

Student Accommodation: Accommodation capacity remains a challenge; however, five places were made available this year for GEM scholarship students. Efforts are ongoing to secure accommodation options for incoming DEM students.

Summary of Findings and General Assessment

The Medical Council's recommendation is that:

a. **The University of Limerick Direct Entry to Medicine (DEM) medical programme should be approved by the Medical 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 a period of one year from the date of approval by the Education and Training Committee (see Recommended Further Action below).

   This approval is with a condition that the first cohort of students successfully complete and graduate the medical programme.

b. **The University of Limerick Medical School 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 University of Limerick'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 a period of one year from the date of approval by the Education and Training Committee (see Recommended Further Action below).

Evaluation of the Programme, based on the World Federation of Medical Education's Global Standards for Quality Improvement in Medical Education – 2015 Revision

The Medical Council's policy is to utilise the World Federation of Medical Education's 'Global Standards for Quality improvement in Medical Education, 2015 revision' to assess medical programmes.

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 Medical Council has identified the following levels of compliance:

Level of compliance	**WFME Global Revision 2015 – Overall Compliance**									
	1	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**Total**
NC										**0**
PC	**X**		**X**	**X**	**X**	**X**	**X**	**X**	**X**	**8**
FC		**X**								**1**

	WFME Global Revision 2015 Sub-Area Compliance							
1. Mission and Outcomes	**1.1**	**1.2**	**1.3**	**1.4**				
2. Educational Programme	**2.1**	**2.2**	**2.3**	**2.4**	**2.5**	**2.6**	**2.7**	**2.8**
3. Assessment of Students	**3.1**	**3.2**						
4. Students	**4.1**	**4.2**	**4.3**	**4.4**				
5. Academic Staff/Faculty	**5.1**	**5.2**						
6. Educational Resources	**6.1**	**6.2**	**6.3**	**6.4**	**6.5**	**6.6**		
7. Programme Evaluation	**7.1**	**7.2**	**7.3**	**7.4**				
8. Governance and Administration	**8.1**	**8.2**	**8.3**	**8.4**	**8.5**			
9. Continuous Renewal	**9.0**							

Based on the evidence provided by University of Limerick, and information from staff interviews, it is recommended that University of Limerick address the following:

The School of Medicine should provide the following:

B1. Mission and Outcomes	▪ Evidence of continual participation of stakeholders, including patient groups, in formulating the mission and intended future education outcomes in the DEM programme within 3 months of approval of the report.
B1. Mission and Outcomes	▪ The University strategy development already underway should allow the School of Medicine to incorporate and publish aspects related to the DEM programme by in line with programme commencement.
B3. Assessment of Students	▪ Finalise the Course Handbook and this provided to the Medical Council within 3 months of approval of the report
B3. Assessment of Students	▪ The HEAR and DARE access routes will increase the need for reasonable adjustments to be made. The UL School of Medicine should continue to monitor its reasonable adjustments process and develop a solution to the current issue of granting additional exam time by reducing students' break periods. This should be completed within 3 months of the approval of the report.
B5. Academic Staff/Faculty	▪ A staff recruitment update which includes any vacancies for academic staff left unfilled by in advance of the commencement of the programme in September 2026
B6. Educational Resources	▪ An update on the status of the Higher Education Authority embargo regarding expansion of buildings within 6 months of approval of the report. Planning for a second School of Medicine building is progressing, with two options being explored. The first is a city-centre location already owned by the University, while the second relates to expansion of the current SOM footprint on campus. Considerable progress has been made, with support of the UL Executive. Initial decisions regarding the likely location are anticipated in Spring 2026. The UL capital plans are shared with the HEA and progress occurs only with appropriate approvals.
B6. Educational Resources	▪ The School of Medicine should include a question in their survey regarding how integrated the Direct Entry students feel given their mobility early in their programme. This should be completed during the 2026/27 Academic Year.

B7. Programme Evaluation	▪ Confirmation on whether the School of Medicine will conduct research on the integration, progress, and outcomes of the DEM programme students as they journey through their medical studies, and whether the School of Medicine will conduct this research or whether it will rely on a university student survey. Confirmation is to be provided within 3 months of approval of the report.
B8. Governance and Administration	▪ An update on the recruitment of administrative and management staff including positions in either area that remain unfilled before the programme begins in September 20206

Recommendations that the Medical Council makes to all medical schools.

The University of Limerick should 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***

The University of Limerick 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.

The Medical Council commends the University of Limerick for:

- The state-of-the-art library facilities on campus. The dedicated study spaces, access to both online and physical literature and the access to library staff is commendable.

Area 1: Missions and Outcomes

Overall Level of Compliance	**PC**
Criteria	
1.1 Mission	**FC**
1.2 Institutional Autonomy and Academic Freedom	**FC**
1.3 Educational Outcomes	**FC**
1.4 Participation in Formulation of Mission and Outcomes	**PC**
Description of documentary evidence of compliance with this standard provided by University of Limerick:	

- WFME completed questionnaire
- 12 additional documents were provided as evidence of compliance with this standard. They can be found in **Appendix 1.**
- The School of Medicine defined the intended educational outcomes that students should exhibit upon graduation in the following documents: Appendix 1.3.4 UL BMBS Graduate Attributes Document, and Appendix 1.3.9 Learning Outcomes Blue Print
- The University of Limerick's mission is available at the following link: https://www.ul.ie/ehs/medicine/about/strategy-vision-and-mission.

Comments:

Direct Entry Medical (DEM) Programme Strategy
The DEM initiative was established in response to a government request to expand medical education capacity and address regional and national workforce needs. The DEM programme reflects a strategic, collaborative, and future-focused approach to medical education, one that prioritises community engagement, student success, and the healthcare needs of Ireland and its regions. The current institutional strategy prioritises research, staffing, community engagement, and healthcare. A new University strategy is due to launch in 2026. Development of the DEM programme is embedded within the School of Medicine overarching strategy. The School has produced a DEM-specific implementation plan.

Establishing the DEM programme involved the School broadening collaborations across the University leading to considerable leveraging of existing expertise in other relevant departments and Schools. In addition, learnings and synergies were identified with the SOM's Biomedical Sciences and Paramedic programmes. The SOM further strengthened its national networks beyond the Mid-West region. Additional academic and pastoral supports, as well as future infrastructure planning, were also necessary.

The DEM programme is considered an important contributor to strengthening healthcare capacity in the Mid-West. The University is attentive to regional deprivation indicators (38 percent deprivation index) and actively works to increase participation from lower socioeconomic groups.

Stakeholder Engagement
The School of Medicine consulted widely with faculty, students, clinical partners, and health agencies to design the DEM programme, drawing on lessons from GEM and other Irish medical schools. The focus is on fully integrating DEM students into the medical school with tailored support for their needs. Patients were not formally engaged in the process.

All academic staff in the School of Medicine were involved in planning the implementation of the DEM programme. Staff from other faculties also brought useful experience in working with similar student groups. The School recognises that DEM students will be younger and may have different needs, and they have used lessons learned from the GEM programme and its other undergraduate programmes such as BSc Paramedic Studies and BSc Biomedical Science to address potential challenges in advance.

The School did not speak directly with external stakeholders, but they reviewed other medical programmes for guidance. Some staff previously worked in other Irish medical schools and were able to share their experience.

Recommendations:

- The UL School of Medicine should provide evidence of continual participation of stakeholders, in particular patient groups, in formulating the mission and intended future education outcomes in the DEM programme within 3 months of approval of the report.
- The University strategy development already underway should allow the School of Medicine to incorporate and publish aspects related to the DEM programme by in line with programme commencement.

Commendations:

- No commendations were made.

Area 2: Educational Programme

Overall Level of Compliance	**FC**
Criteria	
2.1 Framework of the Programme	**FC**
2.2 Scientific Method	**FC**
2.3 Basic Biomedical Sciences	**FC**
2.4 Behavioural and Social Sciences, Medical Ethics and Jurisprudence	**FC**
2.5 Clinical Sciences and Skills	**FC**
2.6 Programme Structure, Composition and Durations	**FC**
2.7 Programme Management	**FC**
2.8 Linkage with Medical Practice and the Health Sector	**FC**

Description of documentary evidence of compliance with this standard provided by University of Limerick:

- WFME completed questionnaire
- 23 additional documents were provided as evidence of compliance with this standard. They can be found in **Appendix 2**.

Comments:

The DEM programme is presented as a comprehensive six-year curriculum, distinct from traditional "2+4" pre-medical models. Stage 1 integrates foundational biological sciences with early clinical exposure, patient engagement, and preparation for problem-based learning (PBL). Stages 2 and 3 align with the existing, well-established Graduate Entry Medicine (GEM) curriculum, leading into full clinical practice. For the first two years, DEM students are taught independently from GEM students, concentrating on foundational science and pre-medical studies. Integration with the GEM cohort occurs in the third year of the programme.

In **Year 1,** students will study foundational medical sciences (chemistry, biology, mathematics), professional and clinical values, and integrated human structure and function. In **Year 2,** these foundations are to be developed further: scientific learning is linked more directly to clinical applications, and students deepen their understanding of human structure and function in preparation for the clinical and anatomical skills training that begins in Years 3 and 4.

Lecture based programme versus Problem Based Learning

The School of Medicine has opted to begin the DEM programme with a primarily lecture-based approach, while gradually introducing PBL to help students develop clinical reasoning and

independent learning skills. Because the 2026 DEM intake (starting 2026) will be a younger student cohort that the existing GEM programme intake, PBL will be phased in: a light introduction in Year 1 using legal and ethical scenarios, expanded PBL in Year 2 using physiotherapy and speech-and-language-therapy cases, and full integration with GEM students for standard PBL in Year 3. Throughout this period, DEM students will also draw on teaching from Science and Engineering and the Biomedical programme to support their scientific foundation.

Academic staff will monitor the DEM cohort closely and tailor teaching to their needs, recognising the differences between DEM and GEM students. Small group sizes, a new lab-skills module, and consistent delivery of the PBL curriculum will support student confidence and early engagement. DEM students will take large chemistry, organic chemistry, and mathematics classes with other disciplines in Years 1 and 2, while studying biomedical sciences separately, ensuring they receive both the broad scientific grounding and the structured PBL preparation needed for successful integration with the GEM students in later years.

DEM and GEM Students Integration
DEM and GEM student learning will be integrated where appropriate. The initial DEM intake in 2026 will be 30 students. If academic performance suggests that learning integration between the DEM and GEM cohorts is not supporting their progress, the School of Medicine retains the option to separate the student groups. Given the small group size for DEM students, monitoring student progress will be manageable. Monitoring student progress will be imperative, and plans should be put in place to manage struggling students to progress.

The Physiotherapy department in UL has prior knowledge and experience in this area; the School of Medicine is leveraging this experience in planning to ensure that DEM and GEM students will be integrated for their mutual benefit. The SOM academic staff will continuously monitor this progression. Should they feel the DEM students are not progressing sufficiently well, there is contingency in place make necessary changes to the delivery of teaching so to ensure students achieve their goals.

Anatomy teaching
In order to ensure that anatomy teaching works for the DEM student cohort, anatomy teaching will occur in two phases:

- **Phase 1 (Years 1–2):** DEM students will receive a tailored introduction to foundational anatomy. This phase will be delivered separately from GEM students to ensure DEM students develop the required baseline knowledge.
- **Phase 2:** DEM students will join GEM students for case-based anatomy learning.

GEM students enter the School of Medicine from diverse academic backgrounds, including some without prior science education. The anatomy curriculum is therefore being deliberately structured to ensure DEM students are well prepared to integrate with GEM cohorts in Phase 2.

Early Patient Contact
Early patient contact will be introduced gradually, beginning in Year 1 with a focus on patient advocacy through on-campus visits from patients, and expanding in Year 2 to primary care visits in pairs or small groups once foundational learning is complete. Early multi-disciplinary patient contact which will be key to communication and professionalism teaching which will

be delivered in the Primary Care setting. The academic staff confirmed that clinics have the capacity to accommodate 30 incoming DEM students.
Recommendations: ▪ No recommendations were made
Commendations: ▪ No commendations were made.

Area 3: Assessment of Students

Overall Level of Compliance	**PC**
Criteria	
3.1 Assessment Methods	**FC**
3.2 Relation between Assessment and Learning	**PC**
Description of documentary evidence of compliance with this standard provided by University of Limerick: ▪ WFME completed questionnaire ▪ 13 additional documents were provided as evidence of compliance with this standard. They can be found in **Appendix 3**.	
Comments: The School of Medicine has several ways to identify students who may be struggling in the DEM programme, including both formative and summative assessments. In Years 1 and 2, students will complete continuous assessments and quizzes, which help highlight any difficulties early. Students who are struggling are met one-to-one for support. A similar system is already in place for GEM students, and the School of Medicine also meets with any student who does not pass formative assessments. Although the School aims to minimise attrition, an exit pathway is available for students who decide that medicine is not the right fit for them. The exit routes as approved by Academic Council are as follows. 1. Higher Certificate in Medical Sciences - Major Award (level 6) [=120 ECTS <180 ECTS] - After successful completion of Year 2 of the programme 2. BSc in Medical Sciences: Major Award (level 7) [=180 and <240 ECTS] - After successful completion of Year 3 of the programme BSc (Hons) in Medical Sciences: Major Award (level 8) [=240 ECTS – After successful completion of Year 4 of the programme There is a strong emphasis on supporting DEM students, particularly in Years 1 and 2, to help them integrate into the School of Medicine community and succeed academically. A course handbook is currently being developed, and a draft has been provided with the additional documentation requested during the visit. Academic staff explained that for assessments in Years 1 and 2, the School of Medicine places strong emphasis on both formative and summative evaluation. Students will typically complete in-class exams around weeks 6–7 (midterm) and week 14 (end-of-year) in both semesters. The School of Medicine uses reliable assessment software and Academic Staff meet students one-to-one after midterms to discuss any difficulties. There is a strong focus on preparing students	

for end-of-year exams and, later, for OSCEs. In the biological sciences modules, students will complete reports, Multiple Choice Questions, and both midterm and end-of-year exams. Academic staff report that students are expected to achieve a grade of C3 or above to pass. If students don't achieve this mark, there is an opportunity to repeat the exam in the autumn.

Reasonable adjustments and/or accommodations are provided for students with a disability, the School of Medicine provided examples of some reasonable adjustments that are made, for example, additional time given in exams and some students are also given an individual holding space before OSCEs. The issue of the additional time provided for an exam having a negative impact on the break before starting the next exam was raised.

Recommendations:

- The UL School of Medicine should finalise the Course Handbook and this provided to the Medical Council within 3 months of approval of the report.
- The HEAR and DARE access routes will increase the need for reasonable adjustments to be made. The UL School of Medicine should continue to monitor its reasonable adjustments process and develop a solution to the current issue of granting additional exam time by reducing students' break periods. This should be completed within 3 months of the approval of the report.

Commendations:

- No commendations were made.

Area 4: Students

Overall Level of Compliance	**PC**
Criteria	
4.1 Admission Policy and Selection	**FC**
4.2 Student Intake	**PC**
4.3 Student Counselling and Support	**FC**
4.4 Student Representation	**FC**

Description of documentary evidence of compliance with this standard provided by University of Limerick:

- WFME completed questionnaire
- 6 additional documents were provided as evidence of compliance with this standard. They can be found in **Appendix 4**.

Comments:

Student Intake

The Higher Education Authority has approved 30 DEM places per year for the 2026–2028 intakes, and the School of Medicine will reduce the GEM intake accordingly to accommodate this change. Student numbers will be closely monitored, with any future DEM expansion requiring approval. The 2026 intake will be supported by a 9:1 staff-to-student ratio consistent with international best practice with strong academic, mentorship, and counselling supports, and careful management of transitions between programme stages to ensure students are fully supported. Quality assurance is built into all components of the programme, informed by external review, student feedback, and peer observation.

As DEM students integrate with GEM students from 2028 onward, GEM numbers will be reduced primarily among North American entrants, and any increases in DEM intake will

depend on attrition and HEA approval. The School has no plans to transition to a DEM-only model.
Admissions to the DEM programme are managed through the CAO and are open to Irish, EU, and EEA applicants, with a particular focus on attracting students from the Mid-West region. The School anticipates strong local interest, supported by outreach initiatives such as the Teddy Bear Hospital and efforts to recruit local staff. Broader university targets include accommodating 7 per cent Higher Education Access Route (HEAR) and 5 per cent Disability Access Route to Education (DARE) students and 15 per cent for mature students. Rental pressures since COVID have also increased local applications, and while the School cannot control who applies, it hopes that Mid-West students will enter the programme and ultimately remain in the region to practise medicine.

Given the small group size for DEM students, monitoring student progress will be manageable. Monitoring student progress will be imperative, and plans should be put in place to manage struggling students to progress.

Supports
The School of Medicine recognises that the incoming DEM cohort (starting 2026) will be younger and entering directly from Leaving Certificate. The School plans to monitor this cohort closely to ensure they transition smoothly. The School of Medicine confirmed that supports are in place for 1st year students with opportunities for students to engage and provide feedback. The Faculty of Education and Health Sciences also has a student engagement officer who liaises with students on supports. For DEM students, the School of Medicine will introduce Year Leads for Years 1 and 2.

Students will have access to academic and pastoral support, including transition mentors who are more senior students and who will assist as students move from lectures into PBL and later into clinical learning, designative tutor hours, and university counselling. Student feedback will be reviewed internally and communicated back. The Disability Service ensures individual needs are flagged and supported and the School is exploring additional supports for neurodivergent students.

To identify students who may be coping academically but struggling with wellbeing, academic supervisors track attendance and performance. A mentoring system provides additional oversight. The current biomedical science modules also have a good history of tracking student performance, particularly at end-of-year examinations. For GEM students, a clinical development assessment process runs alongside university exams. DEM students will enter this process in Phases 2 and 3. Exam outcomes are overseen by the Exam Board, chaired by the Year Leads, and each year group will have elected student representatives who sit on course Boards and help communicate concerns and feedback.

Attendance
The School of Medicine has confirmed that it has the capacity to monitor student attendance. Attendance is already mandatory and monitored for bioscience modules and lab sessions. Lecture materials are available online if students miss a session. Teaching assistants and Module Leads track attendance and report concerns. The School introduced the Qwickly app in academic year 2024/25 to monitor attendance in the GEM programmes and plans to use it for DEM students. The QWICKLY app is a customizable attendance solution for schools needing to collect attendance data for regulatory compliance. With such a small DEM cohort, non-attendance will be noticed rapidly.

Student Accommodation
The UL School of Medicine will issue an annual survey to gather accommodation information for their existing accommodation database. These listings will be updated and shared with students via the Virtual Learning Environment (VLE). GP tutors and clinical site staff also feed into the accommodation database by recommending local houses/apartments for rent by students. The School will continue to make available an updated accommodation database annually to all students the semester before they commence clinical placement. This database currently lists approximately 100 properties throughout Ireland where UL School of Medicine students are placed. All accommodation options available on this list are contacted each year and they are confirmed to be available to take students. This academic year when Clonmel was introduced as a new clinical site for OBGYN students the School assigned students who either lived close by to the location, or who when invited, expressed interest in attending that site and agreed to travel to it. Travel costs to this site were also covered. Additionally, UL School of Medicine are aware of the issues around accommodation at the clinical sites, provides students with accommodation in Limerick during the examination period, the cost of which is covered entirely by the School of Medicine.

Observation:
Plans should be put in place to manage struggling students to assist them in progressing in their studies. These plans should include assigning a person(s) to be responsible for monitoring students who may be struggling.

Commendations:
- No commendations were made.

Area 5: Academic Staff/Faculty

Overall Level of Compliance	**PC**
Criteria	
5.1 Recruitment and Selection Policy	**PC**
5.2 Staff Activity and Staff Development	**FC**

Description of documentary evidence of compliance with this standard provided by University of Limerick:
- WFME completed questionnaire
- 9 additional documents were provided as evidence of compliance with this standard. They can be found in **Appendix 5**.

Comments:

To support the 30 DEM students beginning in 2026, the School of Medicine is actively recruiting additional staff. Whilst all vacancies in approved posts have, not yet, been filled there is a plan for existing staff to cover these gaps to provide continuity.

The School will draw on wider university expertise for Year 1 teaching in subjects such as chemistry and mathematics. From Year 2 onward, teaching will increasingly rely on the School of Medicine's own expertise, particularly that developed through the GEM programme.

Teaching for Stage 1 of the programme will be delivered by early-career academic staff. All academic staff in the School of Medicine are required to engage in research activity to ensure their teaching is informed by current evidence. All tutors at the School of Medicine have medical qualifications and bring relevant experience and expertise to their teaching.

The School acknowledged previous pressures on administrative teams during exam periods, which contributed to staff turnover. The School of Medicine is working to reduce turnover and are currently recruiting additional administrative and technical staff to strengthen support.

A new dedicated administrative support role is being recruited to support the DEM programme with additional administrative support planned for the Year 2 intake. The School of Medicine expects the post to be filled with a start date of January 2026. The School emphasises that staffing changes will not affect students, as the curriculum is flexible and can be adjusted based on cohort needs. The School of Medicine has also increased assessment support for Years 1-4 of the GEM programme with dedicated assessment support for each year.

Although medical issues affected some administrative staff in the past year, the team has worked to strengthen administrative processes. Since September 2025, administration has become much more stable. The School of Medicine will notify Medical Council once all vacancies have been filled prior to the September 2026 intake.

Recommendation:

- The UL School of Medicine should provide a staff recruitment update which includes any vacancies for academic staff left unfilled in advance of the commencement of the programme in September 2026.

Commendations:

- No commendations were made.

Area 6: Educational Resources

Overall Level of Compliance	**PC**
Criteria	
6.1 Physical Facilities	**FC**
6.2 Clinical Training Resources	**PC**
6.3 Information Technology	**FC**
6.4 Medical Research and Scholarship	**FC**
6.5 Educational Expertise	**PC**
6.6 Education Exchanges	**FC**

Description of documentary evidence of compliance with this standard provided by University of Limerick:

- WFME completed questionnaire
- 12 additional documents were provided as evidence of compliance with this standard. They can be found in **Appendix 6**.

Comments:

Physical teaching space

The School of Medicine confirmed that appropriate supports will be in place for DEM students in terms of physical infrastructure. Park Point (the Paramedic Training Centre) has already been secured for the School of Medicine, and additional teaching space has been released in the ICO building for medical education.

DEM students will initially be taught by the Science and Engineering Faculty within their existing facilities, as well as within the School of Medicine. During Phase 1 of the programme DEM

students will attend lectures in the School of Medicine building for all School of Medicine led lectures and in the main campus for S&E led lectures. This will assist in integrating DEM students into university life. DEM students will also have the opportunity to attend lectures in the Clinical Education and Research Centre (CERC).

Significant investment underpins the programme's launch. Major infrastructure projects are underway, including a new School of Medicine building at the Maternity Hospital site and expansion of the Clinical Education and Research Centre. The School has also invested in advanced teaching technologies, such as three new Anatomage tables, to enhance the learning environment.

The programme's design builds on the School's established strengths. Existing modules, laboratory infrastructure, educational expertise, and teaching materials have been repurposed and enhanced.

The University is supporting the School of Medicine with the necessary IT and physical infrastructure investments to deliver the DEM programme.

The ICO building will provide extra space for anatomy teaching, including electronic dissection.

Accommodation
Accommodation for students on placement remains a challenge, particularly because many placements are short-term. However, DEM students will not begin placements at clinical sites outside of Limerick city for another four years, giving the School time to address the issue.

Regional hospitals are keen to host students and maintain strong relationships with the School. Since total student numbers will remain at 198, accommodation pressures will not immediately increase. Having DEM students from the area may also reduce demand for accommodation.

The School maintains good relationships with local landlords, provides exam accommodation in hotels when needed, and maintains annually updated accommodation databases informed by student surveys. Travel expenses are paid for students travelling to GP practices.

Clinical placement capacity
The School of Medicine is working to expand clinical placement capacity, including through non-traditional placement sites.

It was noted that the School of Medicine is in the process of securing two additional GP hubs, both proposed sites are not within the existing geographical area. However, School of Medicine confirmed that student numbers are not being increased at this time and that current hubs are operating within existing capacity.

Recommendations:

- Planning for a second School of Medicine building is progressing, with two options being explored. The first is a city-centre location already owned by the University, while the second relates to expansion of the current SOM footprint on campus. Considerable progress has been made, with support of the UL Executive. Initial decisions regarding the likely location are anticipated in Spring 2026. The UL capital plans are shared with the HEA and progress occurs only with appropriate approvals. However, an update on the status of the Higher Education Authority embargo regarding expansion of buildings within 6 months of approval of the report.

▪ The School of Medicine should include a question in their survey regarding how integrated the Direct Entry students feel given their mobility early in their programme. This should be completed during the 2026/27 Academic Year.
Commendations: The state-of-the-art library facilities on campus. The dedicated study spaces, access to both online and physical literature and the access to library staff is commendable.

Area 7: Programme Evaluation

Overall Level of Compliance	**PC**
Criteria	
7.1 Mechanisms for Programme Monitoring and Evaluation	**FC**
7.2 Teacher and Student Feedback	**FC**
7.3 Performance of Students and Graduates	**FC**
7.4 Involvement of Stakeholders	**PC**
Description of documentary evidence of compliance with this standard provided by University of Limerick: ▪ WFME completed questionnaire ▪ 4 additional documents were provided as evidence of compliance with this standard. They can be found in **Appendix 7**	
Comments: Performance of DEM students in relation to curriculum will be tracked. As indicated under Area 2, if academic performance suggests that learning integration between the DEM and GEM cohorts is not supporting their progress, the School of Medicine retains the option to separate the student groups. As the number of DEM students is small, monitoring student progress is expected to be manageable. The School of Medicine already monitors its GEM students.	
Recommendations: ▪ Confirmation on whether the School of Medicine will conduct research on the integration, progress, and outcomes of the DEM programme students as they journey through their medical studies, and whether the School of Medicine will conduct this research or whether it will rely on a university student survey. Confirmation to be provided within 3 months of approval of the report.	
Commendations: ▪ No commendations were made.	

Area 8: Governance and Administration

Overall Level of Compliance	**PC**
Criteria	
8.1 Governance	**FC**
8.2 Academic Leadership	**FC**
8.3 Educational Budget and Resource Allocation	**FC**
8.4 Administration and Management	**PC**
8.5 Interaction with Health Sector	**FC**

Description of documentary evidence of compliance with this standard provided by University of Limerick: ▪ WFME completed questionnaire ▪ 7 additional documents were provided as evidence of compliance with this standard. They can be found in **Appendix 8**.
Comments: The School of Medicine indicated that they have the resources and finance to accommodate the introduction of the DEM programme. The School of Medicine is currently recruiting administrative and management staff for the DEM programme.
Recommendations: ▪ The School of Medicine should provide an update on the recruitment of administrative and management staff including positions in either area that remain unfilled before the programme begins in September 2026.
Commendations: ▪ No commendations were made.

Area 9: Continuous Renewal

Overall Level of Compliance	**PC**
Criteria	
The medical school must as a dynamic and socially accountable institution	**PC**
Description of documentary evidence of compliance with this standard provided by University of Limerick: ▪ WFME completed questionnaire ▪ No additional documents were provided as evidence of compliance with this standard.	
Comments: The School of Medicine has provided assurances that ongoing review of the DEM programme will be conducted while progressing each year.	
Condition: ▪ This approval is with a condition that the first cohort of students successfully complete and graduate the medical programme. The DEM Programme will need to be evaluated and inspected annually, until the first cohort graduates.	
Commendations: ▪ No commendations were made.	

END.

Appendices

Appendix 1

1. Appendix 1.2.1 APRC policy
2. Appendix 1.3.1 Educational Outcomes for Years 5 and 6
3. Appendix 1.3.2 Year 5 & 6 Module Outlines
4. Appendix 1.3.3 Fitness to Practise Standards
5. Appendix 1.3.4 UL BMBS Graduate Attributes Document
6. Appendix 1.3.5 Public Health Learning Outcomes
7. Appendix 1.3.6 Research Learning Outcomes
8. Appendix 1.3.7 Mid-West Intern Handbook
9. Appendix 1.3.8 Paediatrics Learning Outcomes
10. Appendix 1.3.9 Learning Outcomes Blue Print
11. Appendix 1.4.1 Advisory Committee Terms of Reference
12. Appendix 1.4.2 Medicine Advisory Committee Terms of Reference

Appendix 2

1. Appendix 2.1.1 Course Outlines Years 1 and 2
2. Appendix 2.1.2 PBL Cases
3. Appendix 2.1.3: Years 3 & 4 Learning Objectives by PBL Case
4. Appendix 2.1.4: Module Outlines Years 3 and 4
5. Appendix 2.1.5 References
6. Appendix 2.1.6 Medicine Curriculum Themes and Learning Outcomes
7. Appendix 2.1.7 Integrated Preparedness for Practice Unit (IPPU) Portfolio
8. Appendix 2.1.8 Mini Clinical Evaluation Exercise (Mini-CEX)
9. Appendix 2.1.9 Prescribing Safely Curriculum
10. Appendix 2.1.10 Teaching, Learning and Assessment in Anatomy
11. Appendix 2.1.11 UL's Equality and Diversity Policy
12. Appendix 2.4.1 Professional Competencies Curriculum in Year 3 & 4
13. Appendix 2.5.1 Typical Teaching Week
14. Appendix 2.5.2 BMBS Professional Competencies Learning Objectives
15. Appendix 2.5.3 Rural General Practice Advocacy Update
16. Appendix 2.6.1 2025/26 Academic Calendar
17. Appendix 2.6.2 Clinical Skills Taught in Years 3 and 4
18. Appendix 2.6.3 Rheumatology Learning Outcomes Version 1.0
19. Appendix 2.6.4 Links with Universities Overseas
20. Appendix 2.7.1 School Governance Structure
21. Appendix 2.7.2 Terms of Reference for School Structures
22. Appendix 2.8.1 Governance Structure of the Mid-West Intern Network
23. Appendix 2.8.2 National Intern Learning Outcomes Programme

Appendix 3

1. Appendix 3.1.1 Year 1 Course Handbook
2. Appendix 3.1.2 Year 2 Course Handbook
3. Appendix 3.1.3 Year 3 Course Handbook
4. Appendix 3.1.4 Year 4 Course Handbook

5. Appendix 3.1.5 UL Student Handbook
6. Appendix 3.1.6 UL Handbook of Academic Regulations and Procedures
7. Appendix 3.1.7 UL's Degree Distinction Criteria
8. Appendix 3.1.8 Personal Progress Index GEMS and McMaster 2011-2019
9. Appendix 3.1.9 UL External Examiner Policy
10. Appendix 3.2.1 Formative Feedback Example
11. Appendix 3.2.2 RISR Feedback Example
12. Appendix 3.2.3 OSCE Marking Example
13. Appendix 3.2.4 Example Assessment Schedule

Appendix 4

1. Appendix 4.2.1 Year 5 and 6 Clinical Placement Rotations
2. Appendix 4.3.1 Links to Support Services
3. Appendix 4.3.2 Peer Mentoring
4. Appendix 4.3.3 Mindfulness Programme
5. Appendix 4.3.4 Med Well programme
6. Appendix 4.3.5 'Getting Help '

Appendix 5

1. Appendix 5.1.1 UL Recruitment Policy
2. Appendix 5.1.2 SoM Staff Numbers and Planned Recruitment
3. Appendix 5.1.3 Academic Role Descriptors
4. Appendix 5.2.1 UL WAM
5. Appendix 5.2.2 Education Strategy Committee ToR
6. Appendix 5.2.3 Education Research Writing Group ToR
7. Appendix 5.2.4 SoM CPD Scheme
8. Appendix 5.2.5 PBL Quality Assurance Form
9. Appendix 5.2.6 UL Promotion Policy

Appendix 6

1. Appendix 6.2.1 Supervision and Support Available at each Clinical Site
2. Appendix 6.2.2 Clinical Order of Placement Rotations
3. Appendix 6.2.3 Week-by-week Attachments
4. Appendix 6.2.4 Map of GP Practices
5. Appendix 6.3.1 Handbook on Mobile Devices
6. Appendix 6.3.2 UL's Data Protection Policy
7. Appendix 6.5.1 School of Medicine Current and UL Approved Academic Positions
8. Appendix 6.5.2 Module and Programme Workflow Diagrams
9. Appendix 6.6.1 UHL Electives Handbook
10. Appendix 6.6.2 UL Sabbatical Policy

Appendix 7

1. Appendix 7.1.1 Equity and Outreach Activities
2. Appendix 7.1.2 DREEM and MCPI Results
3. Appendix 7.3.1 Graduate Destinations
4. Appendix 7.4.1 Graduate Survey

Appendix 8

1. Appendix 8.1.1 EHS Faculty Structure
2. Appendix 8.2.1 Organisation Structure of the Academic Team
3. Appendix 8.2.2 Academic Role profile of Course Director
4. Appendix 8.4.1 Organisational Structure of the Admin team
5. Appendix 8.4.2 Organisational Structure of the Technical Team
6. Appendix 8.5.1 MoUs with Clinical Sites
7. Appendix 8.5.2 MOA Midlands Hospital Tullamore