Comhairle na nDochtúirí Leighis
Medical Council

Driving Quality:

National Standards for Medical Education and Training

Contents

Acknowledgements

We give our sincere thanks to Cardiff University who were commissioned by the Medical Council to review and edit the standards and to develop the suite of guidelines. Our thanks also extends to the Project Team who generously gave their time and expertise in overseeing the development of the standards and guidelines, and to our wider national and international stakeholders who participated in the consultation process. The role of the Medical Council's Regulatory Standards and Professional Development functions in facilitating this project is also recognised.

About the Medical Council

Comhairle na nDochtúirí Leighis
Medical Council

The Medical Council is the independent body responsible for the regulation of registered medical practitioners in Ireland under the Medical Practitioner's Act 2007, as amended (the Act).

Our primary responsibility is the protection of the public and we have a range of functions that enable us to fulfil this responsibility:

- Setting, monitoring and maintaining the –
  - Standards for medical education and training in Ireland. This covers the approval of programmes, the bodies that deliver those programmes and the places where such education and training take place.
  - Standards for the maintenance of professional competence.
  - Standards of professional conduct for registered medical practitioners.
- Maintaining the register of registered medical practitioners, establishing procedures and criteria for registration and the issue of certificates of registration and renewal.
- Managing complaints made about doctors to ensure that the public is protected and that doctors are fit to practise.

Who is this document for?

This document is for Irish medical education and training providers (described in this document as 'providers'). By providers we mean organisations involved in the management and/or delivery of medical education or training.

These are usually universities, medical schools, clinical training sites, and postgraduate training bodies. These organisations must meet our quality standards for medical education and training.

Our regulatory role includes quality assuring medical education and training through setting and monitoring adherence to our standards. Quality assurance is a broad-based range of activity, under which quality management and quality control are included. Providers' responsibilities are outlined in figure 1.

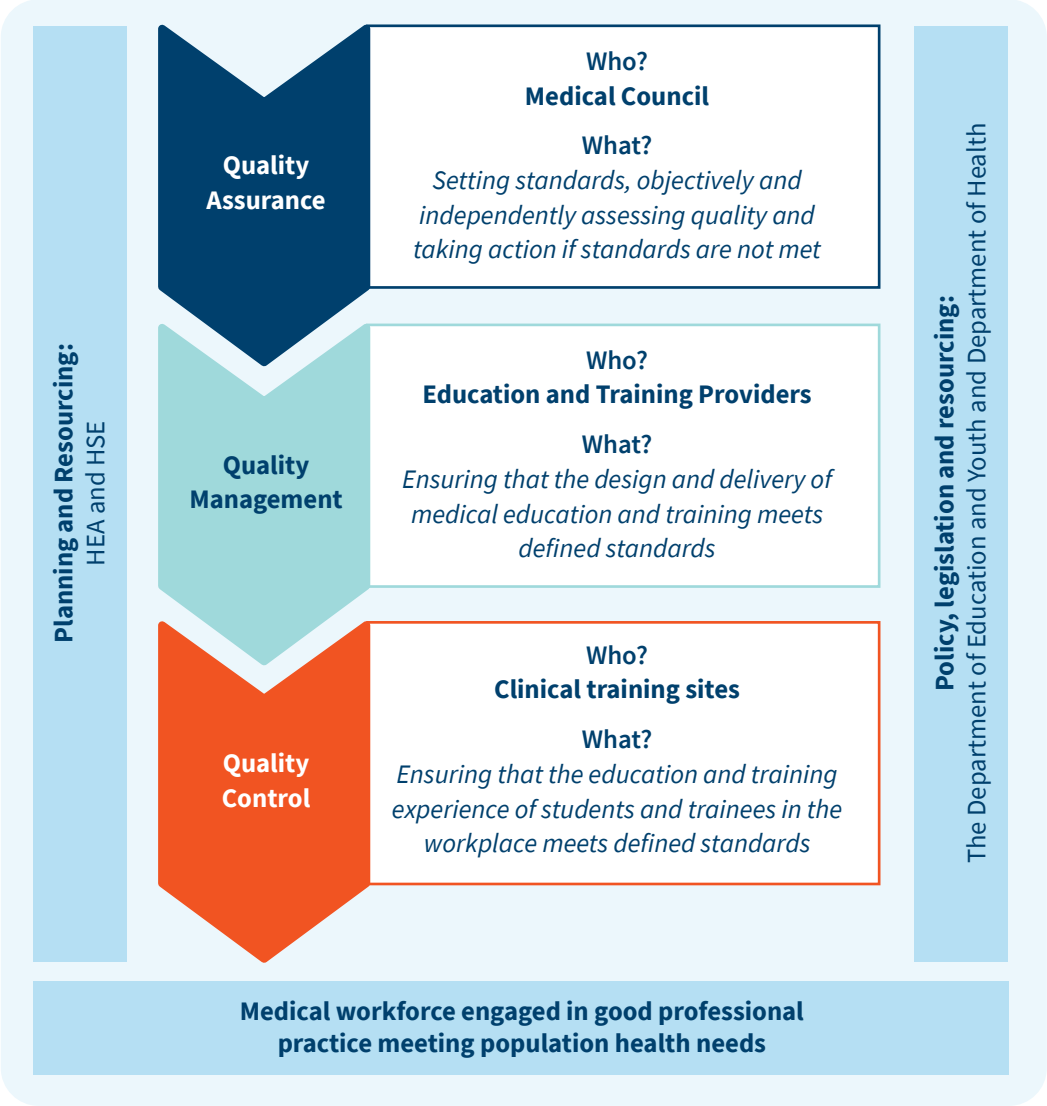


Figure 1 - Illustrates how quality is governed

A collegiate and collaborative approach is required by all providers involved in the delivery of medical education and training. Quality assurance relies on a partnership between providers where the sharing of data information is key to supporting safe and high-quality medical education and training.

Regulatory context

In an ever-evolving healthcare landscape, medical education and training must keep up pace and continue to diversify. This means that providers are tasked with the demands of delivering high-quality education and training to learners to produce a workforce that meets the needs of patients. We are conscious of this environment, the demands placed on providers, and we are committed to taking a proportionate and compassionate approach to regulation.

To be an effective, compassionate regulator, we constantly review our own activities and processes and their impact on the profession and the public. This is how we have come to develop our standards and criteria for medical education and training and the associated guidelines that support their interpretation and implementation.

The standards, criteria and guidelines have been carefully designed to enhance our quality assurance system. They allow us to take a holistic approach to quality assuring medical education and training and reinforce the necessity of an outcome-orientated and integrated approach across the continuum of learners' professional development. This more unified position allows for smoother and safer transitions between the different stages of training and supports a more joined up approach to the governance and delivery of medical education and training. It also enables providers to foster a culture of transparency and open communication, so that together we can all contribute to delivering high-quality medical education and training in Ireland.

As an organisation, we are continuing to adopt the principles of right-touch regulation to ensure that the actions we take are risk-based, robust and proportionate. In practice, this means that we are working with providers more closely to reduce the regulatory burden, to develop more positive and collaborative approaches to quality assurance, and importantly to create a culture of regulation that supports innovation, collegiality and quality improvement. The standards, criteria and guidelines are a key tool in achieving this. In addition to this document, we have developed a suite of guidelines to support the interpretation and implementation of our standards and criteria.

Whilst this brings about a change for providers, your dedication to deliver high-quality medical education and training will allow us to continue to promote pioneering examples of good practice in medical education and training and the tangible difference such innovations make to learners and patients.

Patient safety is a priority

Patient safety is at the core of our standards, criteria and guidelines. As a regulator, it is our responsibility to promote patient safety, uphold standards of care and take steps to ensure that the public is safe in their interactions with doctors. This involves setting, monitoring and maintaining the standards of medical education and training in Ireland and working in partnership with providers to uphold these standards.

The Guide to Professional Conduct and Ethics for Registered Medical Practitioners outlines the values and principles that underpin professionalism and good medical practice in the interests of patients and the broader population. It also specifies how these values and principles apply in various aspects of professional practice. A learner's ability to develop the appropriate professional values, knowledge and skills is influenced by the learning environment in which they are educated and trained.

Education and training must take place where patients are safe. Our standards, criteria and guidelines are the foundation to providing excellent education and training, developing high-quality, skilled, professional, and well-rounded doctors that are equipped to achieve the safest outcomes for patients.

We know that successful regulation is cultivated through providing guidance, support and working in partnership with those that we regulate. As patient safety is a priority of providers, we will continue to work collaboratively to promote a shared goal of patient safety, and to collectively help shape a future where every patient in Ireland receives safe, effective and compassionate care from our doctors.

About the standards and criteria

Background

We have reviewed our standards for medical education and training for undergraduate and postgraduate programmes, intern training and clinical training sites. The result of this is a single set of principle-based standards and criteria that adopt an outcomes-based approach across the continuum of medical education and training.
To support providers with the interpretation and implementation of the standards for medical education and training, we have also developed a suite of guidelines to reduce ambiguity and provide more detail on how our standards and criteria may be demonstrated in practice. Please refer to *"Guidelines to support National Standards for Medical Education and Training."*

Understanding the standards and criteria

The standards and criteria are divided into five main themes:

Theme 1: Clinical Learning Environment

Theme 2: Mission and Governance

Theme 3: Educators

Theme 4: Learners

Theme 5: Curriculum and Assessment

Under each theme there is a global statement, several standards and criteria. Understanding the language we use is key to knowing what is required.

- A global statement is a high-level *'why'* and thematic statement of **purpose.** It addresses why something must happen and who must do it.
- A standard is a collection of the minimum **requirements** necessary for safe, effective and regulatory compliant medical education and training and is relevant to all medical providers. Standards typically use the word *'must'*; this means there is an absolute requirement on providers to comply.
- Criteria are the **individual requirements** for compliance with the standard. They set out how providers *'will'* meet the standard and typically use the word 'are' or 'is'.

It is expected that providers read the standards, criteria and associated guidelines in their entirety, so it can be identified where roles and responsibilities coincide, and where providers should work together to continue to provide high standards of education and training in Ireland. Please refer to *"Guidelines to support National Standards for Medical Education and Training."*

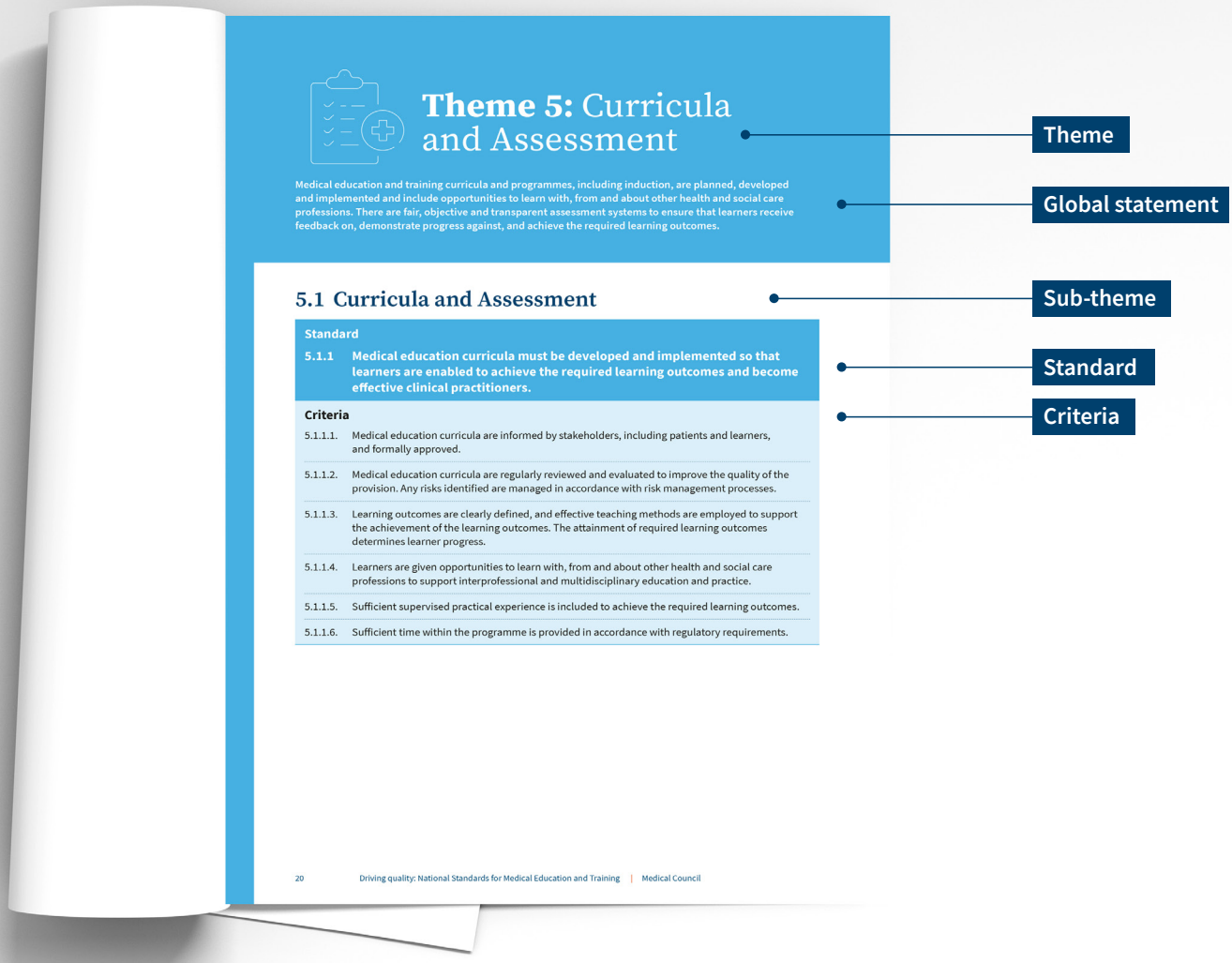


Figure 2 - is a labelled illustration of a theme, the global statement and criteria.

Please note this is an example only. Please see theme 5 for the full standards and criteria.

Overview of the standards

Theme 1:
Clinical Learning Environment

1.1	Care, Safety and Learning
1.2	Learner Support and Supervision
1.3	Staffing and Resources

Theme 2:
Mission and Governance

2.1	Educational Governance and Leadership
2.2	Programme Management
2.3	Quality and Safety

Theme 3:
Educators

3.1	Recruitment and Appointment
3.2	Educator Training, Support and Evaluation

Theme 4:
Learners

4.1	Learner Admission, Induction and Progression
4.2	Learner Health, Wellbeing and Support
4.3	Learner Feedback

Theme 5:
Curricula and Assessment

5.1	Curricula and Assessment

Theme 1: Clinical Learning Environment

The focus of this theme is the Clinical Learning Environment but matters of care, safety and learning, learner support and supervision and staff and resources apply to all learning environments where medical education and training takes place. The learning environment is safe for patients and provides a good standard of patient-centred care. The learning environment and organisational culture value and support education and training so that learners are safely and effectively supervised and supported to achieve the learning outcomes required by their curriculum.

1.1 Care, Safety and Learning

Standard

1.1.1 The clinical learning environment must reflect a culture of safety, while providing effective patient-centred care.

Criteria

1.1.1.1. A good standard of care for patients, carers and families is provided and the physical, emotional, and psychological safety of patients is protected in line with national safeguarding standards.

1.1.1.2. A culture of patient safety and wellbeing is promoted, and risks related to learners in the clinical environment are managed.

1.1.1.3. The physical, psychological, and professional safety of the learners is protected.

1.1.1.4. Professional attitudes and behaviours of all staff and learners are promoted.

1.1.1.5. Opportunities to learn with, from and about other health and social care professionals and patients are provided to support collaborative practice.

Standard

1.1.2 To support the provision of learner education, the clinical learning environment must reflect a culture of good governance.

Criteria

1.1.2.1. An effective quality and safety management system is implemented and facilitated through effective, timely reporting mechanisms and feedback.

1.1.2.2. The clinical learning environment supports a culture of candour and open disclosure that: encourages reflection and learning from mistakes; supports learners to raise patient safety concerns openly and without detriment; and effectively investigates and learns from adverse events, incidents and near misses.

1.1.2.3. Where the learner is present during, or participates in the provision of care, this is made known to the patient or their representative and consent obtained as appropriate.

1.2 Learner Support and Supervision

Standard

1.2.1 The clinical learning environment must reflect a culture that values learning and supports learners to achieve the required learning outcomes.

Criteria

1.2.1.1. Learners are adequately prepared for their clinical placement within the clinical learning environment through effective induction and orientation ensuring familiarity with key staff, systems and processes in that environment.

1.2.1.2. The clinical learning environment maximises the learning opportunities to facilitate the development of the learner as required by the medical education programme curriculum.

1.2.1.3. An effective system of clinical supervision is in place to ensure safe involvement of learners in clinical practice.

1.2.1.4. An effective system is in place to identify the learner's stage of education and to ensure that learners have appropriate educational opportunities but do not work beyond their competence, unless supervised.

1.2.1.5. Reasonable adjustments are made during clinical placement to support the needs of learners and protect their human rights.

1.3 Staffing and Resources

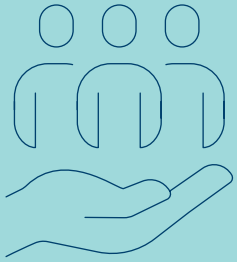
Standard

1.3.1 The capacity, facilities and resources must be sufficient in the clinical learning environment to provide learners with the clinical experience required by the medical education programme.

Criteria

1.3.1.1. The clinical learning environment is appropriately staffed and rostered to support the safety of patients and learners and learners' achievement of required learning outcomes.

1.3.1.2. The number of learners in the clinical learning environment does not exceed the number appropriate to the human and structural resources of that site.



Theme 2: Mission and Governance

Effective systems of educational governance and leadership, informed by a clearly stated mission and ethos, are in place to manage, assure and improve the quality of medical education and training. Such systems are adequately resourced, fairly and transparently implemented, regularly reviewed and clearly communicated to stakeholders, including learners. Organisations providing medical education and training share information and collaborate with other bodies that have educational governance responsibilities to improve quality.

2.1 Educational Governance and Leadership

Standard

2.1.1 Mission must be embedded and reflected throughout the medical education programme.

Criteria

2.1.1.1. The medical education mission is developed, communicated and reviewed with key stakeholders, including learners, educators and patients.

2.1.1.2. Strategic objectives for the achievement of the medical education programme are established.

Standard

2.1.2 The governance and management framework must be defined, transparent, accessible and regularly monitored.

Criteria

2.1.2.1. The governance and management framework defines the authorities, accountability and responsibilities required to support the provision of a high-quality medical education programme.

2.1.2.2. Those with overall responsibility and accountability for the provision of the medical education programme are appropriately supported and qualified and provide educational leadership.

2.2 Programme Management

Standard

2.2.1 The medical education programme must be provided in line with the mission and learning outcomes.

Criteria

2.2.1.1. The learning outcomes for the medical education programme are defined, approved, communicated and regularly reviewed.

2.2.1.2. The learning outcomes for the medical education programme comply with all relevant Medical Council requirements.

2.2.1.3. Equality, diversity and inclusion are actively supported throughout the medical education programme.

2.2.1.4. Agreements are reached and documented that define the roles and responsibilities of all the organisations involved in the delivery of a medical education and training programme. There is ongoing collaboration between these organisations.

2.2.1.5. Effective processes are in place to manage changes to the medical education programme in line with statutory requirements.

Standard

2.2.2 Adequate funding and resources must be in place to provide the medical education programme in line with the mission and learning outcomes.

Criteria

2.2.2.1. Adequate funding is in place together with the financial management capacity to effectively plan for the allocation of resources to develop, deliver, maintain and continuously improve the medical education programme.

2.2.2.2. The human and physical resources required to implement the medical education programme in line with the mission and learning outcomes are in place.

2.3 Quality and Safety

Standard

2.3.1 A management system that supports the quality and safety of the medical education programme must be developed, implemented and regularly reviewed.

Criteria

2.3.1.1. An open and transparent culture that reflects and learns from mistakes is actively fostered.

2.3.1.2. A framework for the effective management of organisational, educational and clinical risks related to the provision of the medical education programme is developed and implemented.

2.3.1.3. Programme data are collected, analysed, shared and utilised, in compliance with legislation, to plan and deliver the medical education programme.

2.3.1.4. Learners and educators are supported in their duty to raise concerns openly and without detriment, there is a defined process for the investigation and management of concerns, and a culture of learning from adverse events and mistakes.

Theme 3: Educators

Educators include clinical supervisors, non-medically qualified educators and patients and all those responsible for, or contributing to, the delivery, management or support of medical education and training programmes. Educators are appropriately recruited and have the necessary knowledge and skills for their education and training responsibilities, and receive adequate support, time and resources to fulfil their defined roles and responsibilities.

3.1 Recruitment and Appointment

Standard

3.1.1 The recruitment, approval and appointment process for educators must be transparent and equitable and comply with national legislation.

Criteria

3.1.1.1. Educators are recruited or approved against a clearly defined professional profile that details the qualifications and specific attributes required to fulfil the educator roles and responsibilities within the medical education programme.

3.1.1.2. The recruiter maintains a secure personnel file for each educator.

3.2 Educator Training, Support and Evaluation

Standard

3.2.1 Educators must know their roles, rights and responsibilities in relation to the provision of the medical education programme.

Criteria

3.2.1.1. Orientation and induction are provided to educators to assist in their understanding of the medical education programme and the terms and conditions of their educator role.

Standard

3.2.2 Educators must be supported in their roles relating to the provision of the medical education programme.

Criteria

3.2.2.1. Educators are provided with protected time within their contracted work schedules to meet their educational roles and responsibilities.

Standard

3.2.3 All educators must engage in continuing professional development to support their role in the medical education programme and maintain or advance their career progression as educators.

Criteria

3.2.3.1. Educators are provided with protected time and resources to participate in training for their educator role.

3.2.3.2. Professional development and training for the educator role is regularly reviewed and evaluated for quality and relevance.

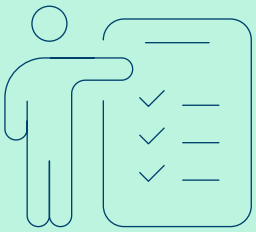
Standard

3.2.4 Educator performance must be regularly evaluated and reviewed.

Criteria

3.2.4.1. There is a defined and documented process for the routine and fair evaluation of the performance of all educators against their roles and responsibilities.

3.2.4.2. There is a clear pathway for learners and others to raise concerns in confidence regarding an educator's performance and effective mechanisms for dealing with concerns.



Theme 4: Learners

Learners are appropriately and fairly selected for admission to education and training programmes. Learners receive effective and appropriate educational and wellbeing support to achieve the learning outcomes required by their programmes of learning.

4.1 Learner Admission, Induction and Progression

Standard

4.1.1 A defined admission process that includes a clear statement on the process of selection of learners must be developed, implemented, reviewed and published.

Criteria

4.1.1.1. The intake of learners to the medical education programme corresponds with the available resources, with targets for various applicant populations defined and reviewed.

4.1.1.2. The admission process is objective, transparent, valid, reliable and feasible.

4.1.1.3. The admission process supports diversity and avoids unfair discrimination and bias.

4.1.1.4. Only applicants who meet the specified and published selection criteria are admitted to the medical education programme.

4.1.1.5. There is an effective, defined and fair appeals process for admission decisions with provision of feedback to unsuccessful applicants where requested. Details of feedback and appeals processes are outlined to applicants prior to selection.

Standard

4.1.2 Key transition points in the learners' medical education experience must be identified and managed effectively.

Criteria

4.1.2.1. Learners are supported through educational transitions.

4.1.2.2. Learners are appropriately inducted to the course or programme and, where applicable, the organisation they are joining.

4.1.2.3. The process of transfer between programmes and institutions is fair, transparent, clearly defined and published.

4.2 Learner Health, Wellbeing and Support

Standard

4.2.1 Learner health and wellbeing must be supported throughout the medical education programme and support systems publicised to learners.

Criteria

4.2.1.1. At each institution or organisation there is a named senior member of staff responsible for overseeing learner health and wellbeing.

4.2.1.2. Preventative strategies, initiatives, services and systems to support learner health, safety and wellbeing, are provided, promoted, monitored and reviewed.

4.2.1.3. There is an adequately resourced process for the provision of accredited, timely and confidential personal support services to learners experiencing difficulties during the medical education programme. Such support services are free from conflicts of interest and regularly reviewed.

4.2.1.4. There is provision for escalation of serious concerns regarding learner wellbeing.

Standard

4.2.2 Learners must be treated with dignity and respect throughout their studies.

Criteria

4.2.2.1. A defined and effective process for promoting learners' dignity and respect is implemented and communicated to all relevant stakeholders.

4.2.2.2. Behaviour that undermines learners' professional confidence, performance or self-esteem is dealt with promptly, impartially and confidentially.

Standard

4.2.3 Reasonable adjustments and effective support must be provided to learners.

Criteria

4.2.3.1. A defined process for the support of individual learners with a disability to access and participate in the medical education programme, where their disability would not prevent the applicant from meeting the learning outcomes, is developed, implemented and communicated.

4.2.3.2. Learners have access to information about reasonable adjustments, including flexible training, with named contacts.

Standard

4.2.4 Learners taking interruptions of study for any reason must be effectively supported to either return to their studies or exit the programme.

Criteria

4.2.4.1. There is a fair, transparent, defined process that specifies how interruptions, either planned or unplanned, to the medical education programme are managed.

4.2.4.2. Learners have guidance and support to assist their return to or exit from the programme.

4.3 Learner Feedback

Standard

4.3.1 The views and experiences of learners must be sought, considered and acted on.

Criteria

4.3.1.1. There is an appropriate, defined process to systematically seek, analyse and respond to informal and formal learner feedback on the medical education programme in a timely manner.

4.3.1.2. Feedback results are used for monitoring and continuous improvement of the medical education programme.

4.3.1.3. Learners are provided with opportunities to be involved in decision-making processes in relation to their medical education programme.

Theme 5: Curricula and Assessment

Medical education and training curricula and programmes, including induction, are planned, developed and implemented and include opportunities to learn with, from and about other health and social care professions. There are fair, objective and transparent assessment systems to ensure that learners receive feedback on, demonstrate progress against, and achieve the required learning outcomes.

5.1 Curricula and Assessment

Standard

5.1.1 Medical education curricula must be developed and implemented so that learners are enabled to achieve the required learning outcomes and become effective clinical practitioners.

Criteria

5.1.1.1.	Medical education curricula are informed by stakeholders, including patients and learners, and formally approved.
5.1.1.2.	Medical education curricula are regularly reviewed and evaluated to improve the quality of the provision. Any risks identified are managed in accordance with risk management processes.
5.1.1.3.	Learning outcomes are clearly defined, and effective teaching methods are employed to support the achievement of the learning outcomes. The attainment of required learning outcomes determines learner progress.
5.1.1.4.	Learners are given opportunities to learn with, from and about other health and social care professions to support interprofessional and multidisciplinary education and practice.
5.1.1.5.	Sufficient supervised practical experience is included to achieve the required learning outcomes.
5.1.1.6.	Sufficient time within the programme is provided in accordance with regulatory requirements.

Standard

5.1.2 Ongoing assessment of learners' progression and their achievement of learning outcomes must be an objective, fair, appropriate and transparent process.

Criteria

5.1.2.1. Effective assessment processes and methods are employed to support learning and progression, and assessment data are regularly reviewed.

5.1.2.2. Effective assessment includes valid determination of learners' attainment of programme outcomes.

5.1.2.3. Learners are provided with adequate time and resources to complete the assessments required by the curriculum.

5.1.2.4. Learners are provided with regular, timely, fair, constructive and meaningful feedback regarding their educational progress, development and status within the medical education programme and guidance on next steps and career advice.

5.1.2.5. A fair and timely remediation process is implemented to address concerns about learners' knowledge, skills, performance, attitude or behaviour that may affect their ability to meet learning outcomes, their fitness to practise medicine or their ability to interact safely with patients.

5.1.2.6. Learners who have not attained the required programme outcomes or who are not fit to practise are not allowed to progress through programmes leading to graduation and certification.

5.1.2.7. Assessment data and information regarding issues of safety, wellbeing or professionalism concerns about a learner are held securely and appropriately shared with relevant organisations.

Appendix: Glossary of Terms

Assessment

Assessment is the measurement or judgement of learner attainment. It involves gathering information about an individual learner's level of performance or achievement of learning objectives.

Clinical supervisor

A clinical supervisor is responsible for overseeing a specific learner's clinical work during a placement in a clinical or medical environment and is appropriately qualified and trained to do so. Clinical supervisors provide formal supervision, guidance and expertise. Some clinical supervisors also have responsibility for the completion of supervisor reports, which are crucial for decisions on the training progress of the learner; these supervisors may also be known as educational supervisors.

Clinical governance

Clinical governance is the system through which healthcare organisations are accountable for continuously monitoring and improving the quality of their care and services, and for safeguarding the high standard of care and services.

Educational supervisor

An educational supervisor is a more experienced or qualified professional who provides guidance, feedback, and mentorship to a learner through a structured and supportive relationship within a clinical or healthcare setting. This process is designed to support the learner's professional development, ensure safe and effective practice, and enhance the quality of care provided to patients or clients.

Clinical training site

A clinical training site is a healthcare or clinical facility (such as a hospital, primary care or community health centre, or long-term care centre) where learners gain hands-on experience of medical practice and apply their theoretical knowledge in real-world patient care settings.

Curriculum

A curriculum can be defined as a managerial, ideological and planning document that should:

- Tell the learner exactly what to expect including entry requirements, length and organisation of the programme and its flexibilities, the assessment system and methods of learner support.
- Provide guidance for educators on how to effectively impart knowledge and facilitate learners in their journey of individual and professional growth.
- Help the institution to set appropriate assessments of individuals' learning and implement relevant evaluations of the educational provision.
- Inform society about how the educational establishment is fulfilling its duty to competently train future generations of medical professionals.

Disability

Disability is widely defined as a substantial restriction in the capacity of the person to carry on a profession, business or occupation in the State or to participate in social or cultural life in the State by reason of an enduring physical, sensory, mental health or intellectual impairment.

Doctor in training/trainee

A doctor in training is any doctor participating in an approved intern training programme or an approved postgraduate training programme.

Educational governance

Educational governance refers to the frameworks, standards and systems that organisations use to manage their educational activities, ensuring accountability and fostering ongoing enhancement of educational quality.

Educational programme

An educational programme is a broad term for any coherent set of educational activities that is planned and organised to meet specific learning goals over a set period. In an educational programme, these activities can be divided into parts such as 'courses', 'modules', 'units', or 'subjects', depending on the context. Additionally, an educational programme may include other major elements such as electives, special study components, placements and other types of experiential or self-directed learning, and research projects which are not always considered part of courses or modules.

Educators

Individuals with a role in teaching, training, assessing and/or supervising learners. This includes:

1. Individuals who have specific responsibilities within their workload for aspects of learner learning and progression.
2. Other doctors or healthcare professionals involved in education and training as part of their routine clinical or medical practice.
3. Academic staff from a range of disciplines with a role in education and training.

Educators may also include patients, members of the public involved in medical teaching or training, and other individuals whose knowledge, experience, or expertise contributes to educational processes.

Education/training provider (see Organisations)

Entrustable professional activities (EPAs)

An EPA is defined as a unit of professional practice that a learner can be trusted to perform without direct supervision, once sufficient competence has been demonstrated.

Evaluation

Evaluation is the review of the conduct, delivery and outcomes of an educational activity such as a module, course or programme.

Learners

Learners are all those studying to improve their medical practice or obtain qualifications. They may be medical students receiving education leading to a basic medical degree, interns and specialty doctors in postgraduate training.

Learning outcomes

The competences that a learner must acquire and be able to demonstrate by the end of a period or programme of education or training.

Organisations

Refers to organisations that manage or deliver medical education or training to learners, usually medical schools, clinical training sites, community care centres, colleges, and postgraduate training bodies. These organisations must meet Medical Council standards for medical education and training. Organisations may handle various aspects of education, such as teaching, training, curriculum delivery, or assessment under agreements with other organisations or bodies.

Patient

Typically used to describe a person who is seeking or receiving medical care and treatment. In this document the term is used broadly to mean any recipient of healthcare services that are performed by a healthcare professional; this may include people who would prefer to be known as clients, service users, outpatients, persons receiving care or other synonyms. In some circumstances, it may also encompass family members, carers and patient representatives.

Placement

A structured period of practical training and education within a particular specialty or field of practice in a clinical or social care setting.

Basic medical degree

A first medical degree awarded by a body or combination of bodies that is recognised by the Medical Council for this purpose.

Student

A medical student is an individual who is pursuing an undergraduate medical degree, even if they already have a prior non-medical degree. These students are not registered with the Medical Council and are not authorised to perform activities legally restricted to registered medical practitioners.

Supervisor (see clinical/educational supervisor)

Training programme/Medical training programme

A formal and structured rotation of posts or courses that together comprise a programme of postgraduate training in a specific medical specialty. The term may also refer to an undergraduate medical education programme leading to a basic medical degree. A training programme may deliver the entire curriculum or focus on specific components, depending on the structure and goals of the programme.

Training provider (see organisations)

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