



PROGRAMME SPECIFICATION FOR TAUGHT PROGRAMMES AT ALL LEVELS

Name of Programme:		Pathways to Postgraduate Training in Medicine	
Final award (BSc, MA etc):		Master in Medicine (MMed) leading to a Professional Doctorate in clinical speciality (Prof Doc)	
Awarding institution/body:	University of Buckingham	Teaching institution:	University of Buckingham
School of Study:	Medicine	Parent Department: (the department responsible for the administration of the programme)	Postgraduate Medicine
Length of the programme: (please note any periods spent away from Buckingham, e.g placements)	MMed PLAB 1&2: 2 years. PLAB 1 only: 2 years 3 months No PLAB: 2 years 6 months	Method of study: Full-time/Part-time/Other	Full time
Framework for Higher Education Qualifications (FHEQ) Level (see Guidance notes, section D – External Reference Points)	MMed Level 7 Prof Doc Level 8	Relevant subject benchmark statement (SBS) (see Guidance notes, section D – External Reference Points)	Membership exams of Royal College (e.g. Physicians, Radiology)
Professional body accreditation (if applicable):	MMed part benchmarked to Royal College of Physicians membership outcomes		
Criteria for admission to the programme:	MMed : primary medical degree. IELTS of 6.5 (6.5 in each category) or OET C (C in each category) Prof Doc: MRCP/Clinical MD	Cohort(s) to which this programme specification is applicable: (e.g.from 2012 intake onwards)	2016
UCAS Code	Not Applicable		

Summary of Programme

This programme is designed to allow overseas doctors to take part in training analogous to the Core Medical Training offered by the Joint Royal College of Physicians Training Board. This forms the first stage of speciality training for most doctors training in physicianly specialties. The first stage of the Pathways to Medicine is the Masters in Medicine (MMed) which is benchmarked to the level of training required for Membership of the Royal College of Physicians (MRCP). Successful completion of the MMed and attainment of MRCP will allow progression to the Professional Doctorate (Prof Doc) in a chosen speciality which is benchmarked to the first three years of speciality training and will include clinical audit.

Some doctors holding a primary medical degree from a recognised medical school may not have GMC registration, such candidates may enter the pathways programme at a foundation level where they will receive English tuition in order to sit the Professional Language Assessment Board (PLAB). This must be achieved within 6 months in order to allow progression to the MMed.

There are three possible entry points: without GMC registration where students will be offered options depending on whether they have no English language qualification or PLAB 1, with GMC registration into MMed, with MRCP into the Professional Doctorate (See Figure 1). Initially we will accept students onto the Prof Doc graduating from the Clinical MD in General Internal Medicine (programme closed after November 2019) providing they have GMC registration and a minimum of MRCP part 1 and 2 and a date set for the final Practical Assessment of Clinical Examination Skills (PACES) exam that is within 6 months of the start date.

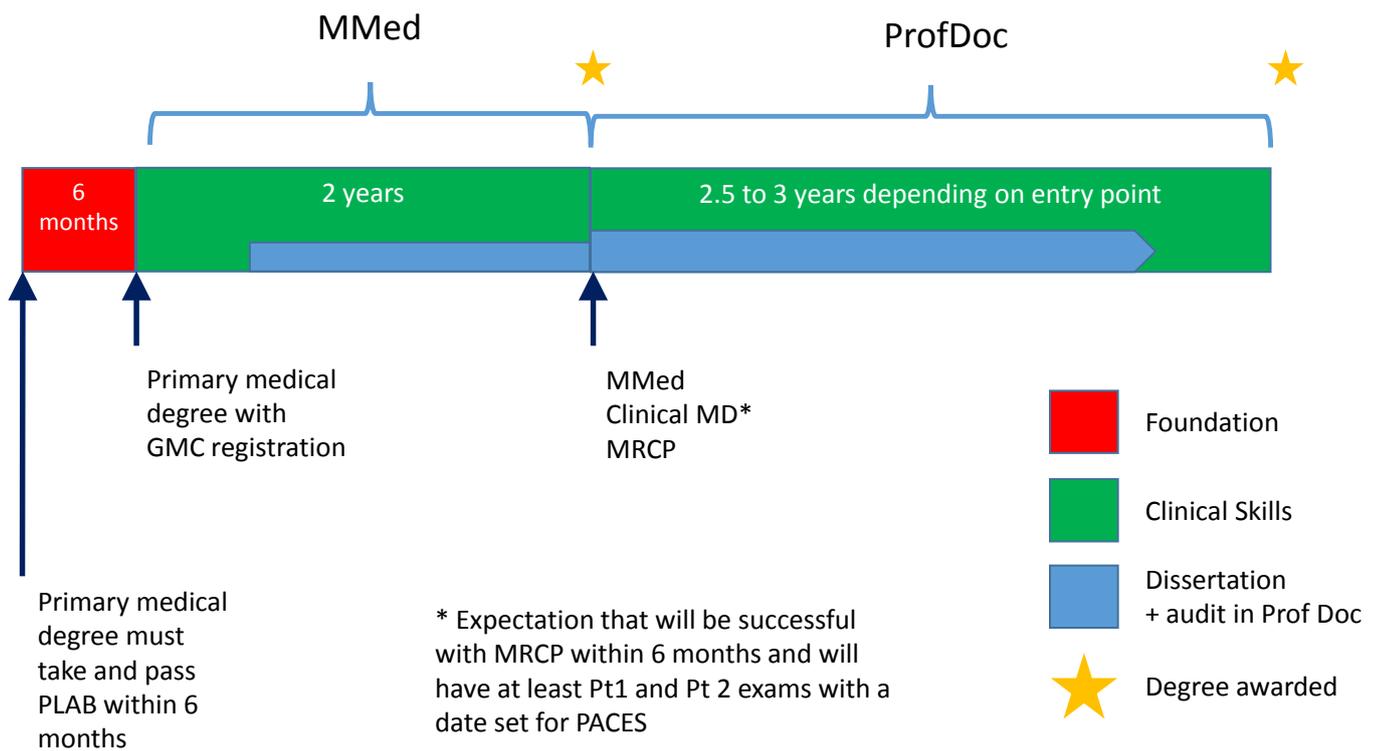


Figure 1 Scheme outlining structure of Pathways Programme in Medicine with entry points.

Educational Aims of the Programme

1) PLAB.

To attain the appropriate level of English in order to achieve GMC registration. This requirement is mandatory for progression in the Pathways Programme. Students without PLAB will still have the opportunity to enter the programme. Those without PLAB can attend the University to improve their English proficiency in the Foundation Department with additional coaching in the PLAB examinations (external), maximum time allowable 6 months. Those entering with PLAB part 1 can attend the University for intensive PLAB part 2 training (external), maximum time allowable 3 months. PLAB training will be offered on campus by an external provider contracted by the University.

1) Masters in Medicine (MMed)

The training pathway for achievement of MMed is generally two years. The programme is designed to deliver core training for specialty training by acquisition of knowledge and skills as assessed by the work place based assessments and the MRCP. The programme will be broad based consisting of four to six placements in medical specialties. These placements must include direct involvement in the acute medical take. Students completing the MMed and MRCP will have a solid platform from which to continue into Specialty Training via the Prof Doc. Attainment of MRCP will normally be required before entry into specialty training at ST3 equivalent.

The key features of the MMed are:

- **Student led** – we will use an ePortfolio to encourage a learner centred approach with the support of Educational Supervisors. The ePortfolio contains tools to identify educational needs, enables the setting of learning goals, reflective learning and personal development.
- **Competency based** – the curricula outline competencies that trainees must reach by the end of the programme. The curriculum is directly linked to the ePortfolio as it defines standards required for good medical practice and formal assessments including the MRCP exams.
- **Continuation of Good Medical Practice** – building on existing training the curriculum contains important emphasis on generic competencies necessary for practice as a physician
- **Supervision** – each student has a series of people with clearly defined roles and responsibilities overseeing their training including Clinical Supervisor, Educational Supervisor, University Tutor, Pathways to Postgraduate Training in Medicine Director, and Dean of Postgraduate Medicine
- **Appraisal meetings with Supervisor** – regular appraisal meetings and review of competence progression are set out in the ePortfolio.
- **Dissertation** – Literature review 4,000 words.
- **Workplace-based assessments** – regular workplace-based assessments are conducted throughout training. These include the Acute Care Assessment Tool (ACAT), Case Based Discussion (CbD), mini-Clinical Evaluation Exercise (mini-CEX) and multisource feedback (MSF) with additional assessment methods to assess Audit (AA).
- **MRCP examination** – the various parts of our curriculum have been mapped to the MRCP (UK) curriculum and this provides a knowledge base assessment.

2) Professional Doctorate

The Professional Doctorate has a greater emphasis on specialties. They will be able to undertake careers in the specialty chosen at point of entry and must acquire all the relevant competences for the component specialties.

The key features of the Professional Doctorate are:

- **Emphasis on key competencies** - Students will achieve the competencies described in the curriculum through a variety of learning methods. There will be a balance of different modes of learning from formal teaching programmes to experiential learning 'on the job'.
- **Learning with Peers** - There are many opportunities for students to learn with their peers in a hospital setting. Local postgraduate teaching opportunities should allow students and NHS trainees of varied levels of experience to come together for small group sessions.
- **Work-based Experiential Learning** - The content of work-based experiential learning is decided by the local faculty for education but includes active participation in: Medical clinics including specialty clinics, Specialty-specific takes, Post-take consultant ward-rounds, Personal ward rounds and provision of ongoing clinical care on specialist medical ward attachments, Consultant-led ward rounds, Multi-disciplinary team meetings.
- **Formal Postgraduate Teaching**
- **Independent Self-Directed Learning**
- **Dissertation** – In depth 8000 word literature review based on original investigation, e.g. audit.

Programme Outcomes	
<p><u>Knowledge and understanding of:</u></p> <p>PLAB Demonstrate English proficiency and clinical knowledge equivalent to a UK Foundation Doctor.</p> <p>MMed: Clinical Practice</p> <p>a) Demonstrate a comprehensive clinical knowledge within the medical specialism.</p> <p>b) Maintain a wider medical knowledge in order to understand the requirements of patients with complex disease status.</p> <p>c) Demonstrate a detailed and critical understanding and interpretation of diagnostic procedures and outputs within the medical specialism.</p> <p>d) Demonstrate ability to conduct a high quality clinical audit, articulating the gap between standards and performance, designing interventions to close that gap and re-auditing to close the audit loop.</p>	<p>→</p>
	<p><u>Teaching/Learning Strategy</u> <i>Explain the teaching and learning methods and strategies used to help students achieve each part of the knowledge and understanding</i></p> <p>English proficiency in Foundation Department and PLAB training by external provider.</p> <p>1. The principle methodology will be bedside teaching. Each student will be assigned to a clinical team and will be supervised by a consultant. The student will see patients at speciality clinics and on the ward together with the supervisor. The student will also undertake medical ward duties and outpatients as defined by the hospital. There will also be on-call duties.</p> <p>2. Students will be required to undertake self-directed reading of medical journals based on their clinical specialism in order to build up an understanding of the leading edge medical practice.</p> <p>3. Students will be required to maintain an e-portfolio detailing their clinical experience and they will need to show reflection on that experience. The e-portfolio will be monitored by the supervisor to ensure that it meets requisite standards.</p>

	→	<p><u>Assessment Strategy:</u> <i>Explain the strategies used to assess the achievement of each part of the knowledge and understanding</i></p> <ol style="list-style-type: none"> 1. PLAB is examined externally at PLAB centres. 2. The key assessment output is the e-portfolio which will be audited annually by a NHS appointed auditor (who will have an honorary University contract). 3. Case Based Discussion 4. OSCE 5. Dissertation defended in a traditional viva voce examination. 6. MRCP Parts 1 and 2 + PACES.
<p><u>Cognitive (thinking) skills:</u></p> <p>a) Ability to use appropriate diagnostic skills in the assessment of the patient disease status and initiate appropriate treatment.</p> <p>b) Critically evaluate the effectiveness of an on-going patient treatment and care.</p> <p>c) Make informed judgement on complex or urgent clinical issues, often in absence of incomplete data</p>	→	<p><u>Teaching/Learning Strategy:</u> <i>Explain the teaching and learning methods and strategies used to help students achieve each part of the cognitive skills</i></p> <ol style="list-style-type: none"> 1. Bed-side teaching 2. Clinical consultations 3. Grand Round 4. Hospital seminars 5. Current literature
<p><u>Practical/Transferable skills (able to):</u></p> <p>a) Attainment of core competencies appropriate to level of training as defined by the Joint Royal College of Physicians Training Board.</p> <p>b) Adopt a systematic approach to collecting and analysing clinical data Effective communication with patient and medical colleagues.</p> <p>c) Develop an ability to work quickly under pressure moving from one clinical scenario to another.</p>	→	<p><u>Assessment Strategy:</u> <i>Explain the strategies used to assess the achievement of each part of the cognitive skills</i></p> <ol style="list-style-type: none"> 1. Peer reviewed case presentations 2. e-portfolio 3. Clinical Audit
		<p><u>Teaching/Learning Strategy:</u> <i>Explain the teaching and learning methods and strategies used to help students achieve each part of the practical/transferable skills</i></p> <ol style="list-style-type: none"> 1. Bed-side teaching 2. Clinical consultations 3. Grand Round 4. Hospital seminars 5. Current literature 6. Simulation
		<p><u>Assessment Strategy:</u> <i>Explain the strategies used to assess the achievement of each part of the practical/transferable skills</i></p> <ol style="list-style-type: none"> 1. Acute Care Assessment Tool 2. Case-Based Discussion 3. Mini Clinical Evaluation Tool 4. Multi Source Feedback 5. Clinical Audit

External Reference Points

The following reference points were used in designing the programme

- Framework for Higher Education Qualifications (<http://www.qaa.ac.uk/Publications/InformationAndGuidance/Pages/quality-code-A1.aspx>);
 - Relevant Subject Benchmark Statement(s) (<http://www.qaa.ac.uk/Publications/InformationAndGuidance/Pages/quality-code-A2.aspx>);
- General Medical Council PLAB [overview](https://www.gmc-uk.org/registration-and-licensing/join-the-register/plab) (<https://www.gmc-uk.org/registration-and-licensing/join-the-register/plab>)
- Joint Royal College of Physicians Training Board Core Medical Training and General Internal Medicine (<http://www.jrcptb.org.uk/specialties/core-medical-training-and-acute-care-common-stem-medicine>)

Please note: This specification provides a concise summary of the main features of the programme and the learning outcomes that a typical student might reasonably be expected to achieve and demonstrate if he/she takes full advantage of the learning opportunities that are provided. More detailed information on the learning outcomes, content and teaching, learning and assessment methods of each course unit/module can be found in the departmental or programme handbook. The accuracy of the information contained in this document is reviewed annually by the University of Buckingham and may be checked by the Quality Assurance Agency.

Programme Director(s) Name(s):	Professor John C. Clapham Professor Douglas McWhinnie
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