

Update on Lancaster Medical School

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It gives me great pleasure to write this feature updating you on what has been going on in the medical school and plans for the coming years. The first big change is that I am in post. The previous Head of Lancaster Medical School (LMS), Colin Melville, moved on to a new job at the General Medical Council (GMC) in December and I was delighted to take up the post in February this year. Even though I was only away for 18 months, it already feels like I never left and I am very grateful for the warm welcome back and the support of colleagues.

It has been a very busy time up on the hill! In April 2017, we received final confirmation from the GMC that we may award primary medical qualifications. This fantastic news is testament to the hard work of all those involved with the medical school and particularly those working directly within LMS. Our first cohort of Lancaster doctors will therefore graduate in July 2017 and we look forward to welcoming many of you to the celebrations. As a result of our recent successful completion of the GMC process, we are now offering “peer support” to colleagues at the University of Surrey as they begin the process of setting up a medical school.

No sooner had we completed this 6-year period of intense scrutiny and inspection from the GMC, than Lancaster University undertook its first “Periodic Quality Review” (PQR) of the whole department in May. I am delighted to report that we passed this too, receiving the highest rating awarded by the University. Hopefully that’s us done for the next 4 years when it will be our turn for PQR again!

LMS is also going through a period of expansion as we increase medical student numbers, increase the number of members of staff working wholly or partly for the school, continue to build on our research strengths, and broaden our portfolio of programmes through the addition of 2 more degree award-bearing courses.

Although we are not likely to know the exact extent of our increase in student numbers for several months, we will see the intake of home students increase from 50 to 65 in 2018/19 (a decision about overseas numbers, currently capped at 7.5%, is to be confirmed after the general election). Further increases are likely to be the result of a bidding process, details of which have yet to be announced but will be rooted in the outcome of the Department of Health consultation that closed in early June (<https://www.gov.uk/government/consultations/expanding-undergraduate-medical-education>), as well as influenced by the results of the election.

Alongside the expansion in medical student numbers is an associated increase in staffing numbers. Details of this expansion will emerge over the coming months, but will be designed to support the local health economy as well as addressing the needs of the undergraduate medical course. As part of this, I am working closely with Health Education England, local trusts, and the National Institute for Health Research (NIHR) to strengthen the Lancaster integrated academic training programme, with a view to “joining up” the local and regional elements of the programme. The intention is that, over time, this approach will improve the quality of trainees’ experiences,

but also have a positive impact on local clinical academic retention rates and build stronger relationships between the NHS and the University.

Led by Jo Knight, Reader in Applied Data Science and Director of Research, our research programmes are expanding within LMS. Recent activities have included an away day for staff and students, a peer review system for grant submissions, and ongoing work to increase and strengthen the research links between the department and local NHS trusts.

Within LMS’ teaching portfolio we are delighted that the Centre for Health Informatics, Computing, and Statistics (CHICAS) is launching a new MRes in Global Health in autumn 2017, in collaboration with the Liverpool School of Tropical Medicine. The 2018/19 academic year will see the first intake of students to the new BSc(Hons) course, Sports and Exercise Science – one of only a small number of UK sports science courses offered by a medical school.

Other exciting developments within the University that will have a positive impact on the medical school include the Health Innovation Campus (see Neil Johnson in the Spring 2017 edition of this journal), due to open in 2019.

Nationally there are some pretty big changes going on as well. In addition to the increase in student numbers, there are likely to be changes to the way in which students’ clinical placements are funded, although again, we are not likely to have further detail on this for several months yet.

Perhaps the biggest change on the horizon nationally is the possible introduction of a national “exit exam” – the Medical Licensing Assessment (MLA). The results of the recent GMC consultation are currently being analysed, but the feeling is that the MLA will be introduced, in one shape or another, at some stage in the next five to ten years (<http://www.gmc-uk.org/education/29000.asp>).

So, there is plenty going on in the medical school at the moment and I hope that this piece has given you a bit of an overview. The chance to share these developments with you also provides me with the ideal opportunity to say thank you to everyone for their involvement in our activities – we couldn’t do it without your support and enthusiasm.

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