

Lincoln Medical School

Universities of Nottingham and Lincoln

Professor Danny McLaughlin
Associate Dean of Medicine
University of Lincoln

dmclaughlin@lincoln.ac.uk

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Agenda Item 8



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- Aims of the partnership
- Standards and outcomes for undergraduate medicine
- The setting (Lincolnshire) →
- The curriculum
- Student numbers
- *An independent Lincoln Medical School*



Aims of LMS

- Provide the skilled workforce that the NHS within Lincolnshire needs
- Address chronic specialist shortages in Lincolnshire – particularly primary care and mental health
- Drive support for general practice to allow the NHS to meet patient need in Lincolnshire
- Unlock the potential of the Lincolnshire to create a workforce that is from the community, for the community – through an innovative and ambitious widening participation programme
- Drive innovation, transform education and industrial partnership in medical education – transforming not just the people but the whole health system and wider economic benefits

The ten standards

THEME 1

Learning environment and culture

- S1.1** The learning environment is safe for patients and supportive for learners and educators. The culture is caring, compassionate and provides a good standard of care and experience for patients, carers and families.
- S1.2** The learning environment and organisational culture value and support education and training so that learners are able to demonstrate what is expected in *Good medical practice* and to achieve the learning outcomes required by their curriculum.*

THEME 5

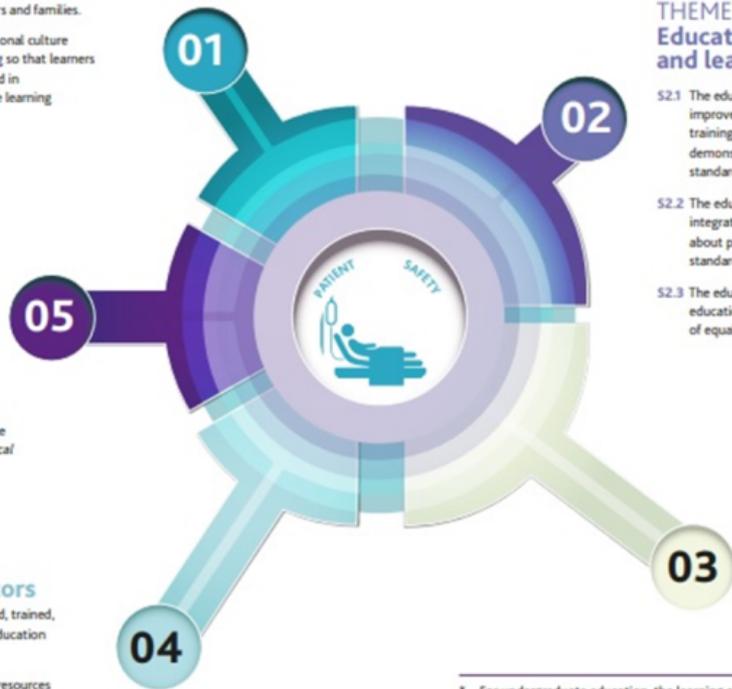
Developing and implementing curricula and assessments

- S5.1** Medical school curricula and assessments are developed and implemented so that medical students are able to achieve the learning outcomes required for graduates.
- S5.2** Postgraduate curricula and assessments are implemented so that doctors in training are able to demonstrate what is expected in *Good medical practice* and to achieve the learning outcomes required by their curriculum.

THEME 4

Supporting educators

- S4.1** Educators are selected, inducted, trained, and appraised to reflect their education and training responsibilities.
- S4.2** Educators receive the support, resources and time to meet their education and training responsibilities.



THEME 2

Educational governance and leadership

- S2.1** The educational governance system continuously improves the quality and outcomes of education and training by measuring performance against the standards, demonstrating accountability, and responding when standards are not being met.
- S2.2** The educational and clinical governance systems are integrated, allowing organisations to address concerns about patient safety, the standard of care, and the standard of education and training.
- S2.3** The educational governance system makes sure that education and training is fair and is based on principles of equality and diversity.

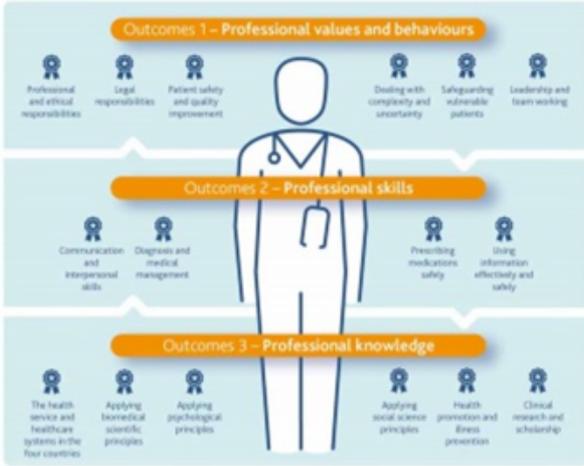
THEME 3

Supporting learners

- S3.1** Learners receive educational and pastoral support to be able to demonstrate what is expected in *Good medical practice* and to achieve the learning outcomes required by their curriculum.

* For undergraduate education, the learning outcomes for graduates (*Tomorrow's Doctors*)² and for postgraduate training, the curriculum approved by the General Medical Council.

Structure of the outcomes



Each section includes outcomes in a number of areas.

This document will be supplemented by a list of practical procedures – a minimum set of practical skills that newly qualified doctors must have when they start work for the first time so they can practise safely. The list will be published in spring 2019.

This diagram shows the interdependence of the domains of the *Generic professional capabilities framework*.



Distinguishing features and “Lincolnshire flavour”

- Smaller cohort (80 students versus 250+)
- Prosection rather than full body dissection
- Focus on developing a collegial culture from the start
- ‘Wellbeing’ initiatives
- Faculty – strong in Mental Health and General Practice
- Student selected modules:
 - Early years
 - BMedSci Projects
 - Clinical phases

The Early Years and BMedSci

A18L entry point →

Year 0

- Foundation Year

A10L entry point →

Years 1-2

- Basic medical sciences
- Early Clinical Professional Development
- Clinical Skills
- GP and hospital visits
- Public Health, Behavioural Sciences
- Optional module in semester 4 (year 2)

UoL delivers,
UoN quality assures

Year 3a

- Evidence-Based Medicine
- Advanced Medical Sciences modules
- BMedSci project
- Early Primary Care
- Clinical Pharmacology & Therapeutics

Clinical Phases leading to BMBS

Year
3b

Foundation for Practice

Modules: Junior Medicine; Junior Surgery & Musculoskeletal Disorders; Mental Health; Skills; Special Study Assistantship

Our first cohort of students are currently here

Year
4

Advanced Practice I

Modules: Child Health; Obstetrics & Gynaecology; Intermediate Medicine & Cancer Care; Health Care of Later Life;

Year
5

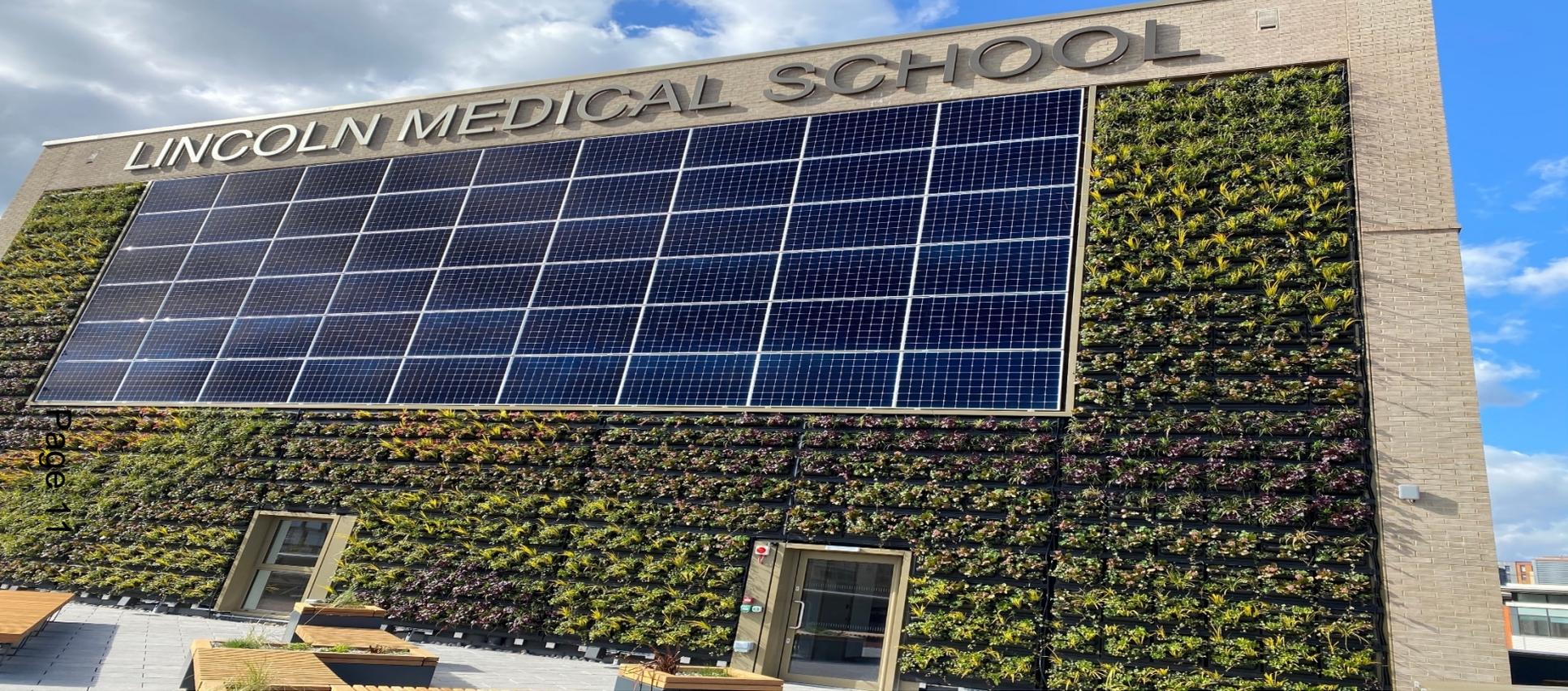
Advanced Practice II

Modules: Senior Medicine; Senior Surgery & Musculoskeletal Disorders; Primary Care; Critical Illness.
Transition to Practice; Elective; Senior Assistantship

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Delivery

Student numbers

- September 2019 – 92 (15 in Foundation Year)
- September 2020 – 198 (18 in Foundation Year)
- September 2021 – 295 (24 in Foundation Year)
- July 2022 – first cohort of 75 graduated BMedSci
- September 2022 – 370 (19 in Foundation Year)
- September 2023 (full complement) – 450 (15 in Foundation Year)
- July 2024 – approx. 75 of first cohort will graduate as doctors



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Questions?



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