

Kent and Medway Medical School – Where are we now? Chris Holland Professor of Medical Education Dean of Kent and Medway Medical School





www.kmms.ac.uk

KMMS vision

KMMS will:

- be a beacon for first-class medical education and research, and the first choice for all those aspiring to achieve excellence in person-centred medical care in the UK
- innovate in teaching, research and leadership
- offer early clinical placements that showcase GP, Community and Mental Health on a par with all other medical specialities

We will produce a new cohort of medical graduates who:

- will be representative and inclusive of the communities our graduates will serve
- will understand the critical importance of integrated, multi-professional care
- will find global solutions to local challenges and lead, manage and innovate in 21st Century healthcare
- will be confident, entrepreneurial advocates for patients, their families and their communities



The KMMS Mission is to:

- widen participation in medicine
- address significant health inequalities in Kent and Medway
- provide high-quality placements
- ensure that all our students have significant exposure to primary care, mental health and acute medicine
- have an innovative curriculum

This is why our bid was successful and we were awarded places by the government

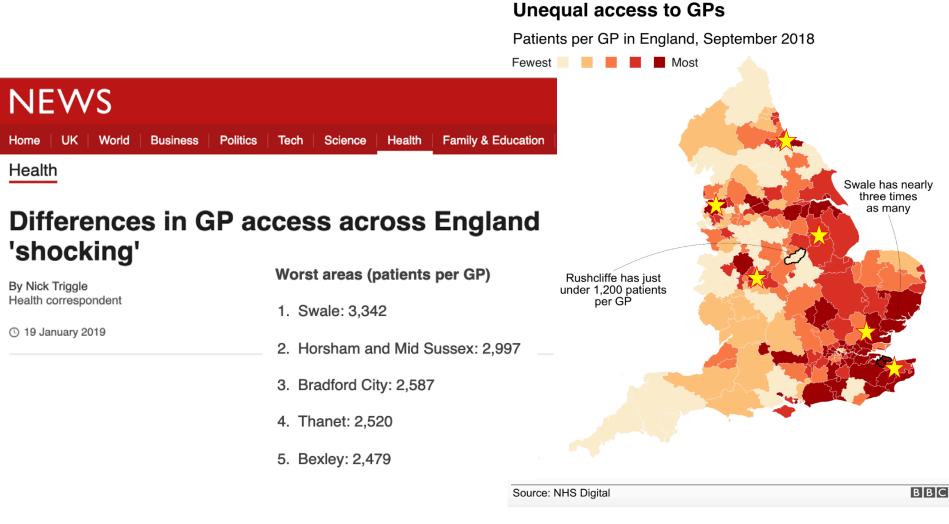
Love Island's Dr Alex: "The NHS needs more doctors, we need more nurses, we need more space."

As a junior doctor in the A&E department, Love Island's Dr Alex George tells i he suffered with his mental health when pressure was high





How do we address this imbalance?





Collaboration and Partnerships

Parent Universities

Canterbury Christ Church University and University of Kent in collaboration

Medway



NHS Partners





Government, Local Agencies
 & Representatives





University of

Kent

Canterbury Christ Church

University



Recent Appointments

Senior Management Team:



Philip Chan Admissions and **Recruitment Lead**



Anna Romito Undergraduate Programme Director



Stephanie Green School Administration Manager



Scarpa Schoeman Assessment Lead

GP Team



Kate Neden GP and Community Education Lead



Adetutu Popoola **GP** Educator

Naren Srinivasan **GP** Educator







Facilities and building



STHEM building at Christ Church

- Co-located with Science, Engineering and Health
- High-fidelity, interprofessional hospitalbased Sim suite
- Anatomy Learning Centre



- KMMS building at Kent
- GP Sim suite
- 3 in 1 seminar room
- 2 dedicated computer labs





July 2019









Admissions Open September 2019





The admissions challenge

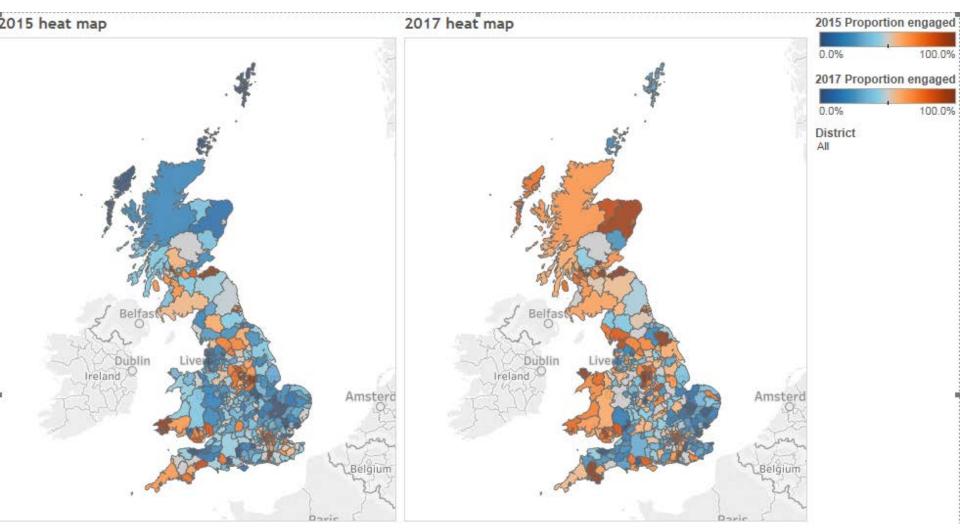
- Medical programmes are academically demanding and full of exams
- Selection leans towards success in secondary school assessments
- This introduces bias towards "good" schools; selection and the private sector
- Reinforces inequalities in society
- Many potentially strong young people have diminished chances of entering profession

Journalism							
Law							
Life Sciences							
Management Consi	ultancy						
Academia							
Advertising							
Science							
Finance							
CEOs							
Film & TV							
Architecture							
Top Jobs Overall							
Performing Arts							
IT							
Accountancy							
Corporate Senior M	lanagemen	t					
Public Sector Senio	r Managen	nent					
Engineering							
Chiefs of Fire, Amb	ulance and	Police					
Whole workforce	30 40	50	60	70	80	90	1
 Professional or M Working Class Or 	lanagerial (Origins	5.0	

How is medicine doing?

	HEI generally	Medicine
Entrants from POLAR Quintile 1 & 2	26%	16%
Entrants from state funded schools	91%	74%
Entrants who are first in family to enter tertiary education	45%	23%





Imperial funded to target cold spots in Medway and Thanet As well as others in Essex and Bedfordshire



Kent and Medway Medical School Approach

- Operate minimum standards, using GCSE/UCAT
- We won't use predicted grades at all
- Standard conditional offer AAB
- Subject to academic attainment, guaranteed interview for students who come from the Kent & Medway Progression Federation (KMPF) a partner school or college of either Canterbury Christ Church University or the University of Kent or at a University of Kent Academies Trust school.
- Enhance contextual approach; rank applicants who have achieved strong results in challenging schooling and personal contexts.





KMMS Open Day at Kent, April 2019













KMMS Open Day at Christ Church, June 2019









Logia



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Virtual Open Day September 2019





Virtual O	pen Day			\mathbf{v}
290 views				
16	491		-	0
17	1	Live chat	Share	Download
MEDICAL	nt and M subscribers	edway Meo	d 🖸 :	SUBSCRIBE

https://youtu.be/khRQ_2GsVew













TO BE A DOCTOR

N TO BE A DOCTOR

Two University of Kent students found dead in one week in Canterbury

🖨 KENT TRAVEL NEWS	SIGN ME UP FOR NEWS ALERTS O					
By Alan Smith ajsmith@thekmgroup.co.uk						
Published: 13:02, 25 October 2019 Updated: 14:47, 25 October 2019						
A city university is mourning the tragic deaths of two students just a week apart.						
Post-graduate Jessica Small, 26, was found at her home near the University of Kent campus in Canterbury on Friday, October 11.						



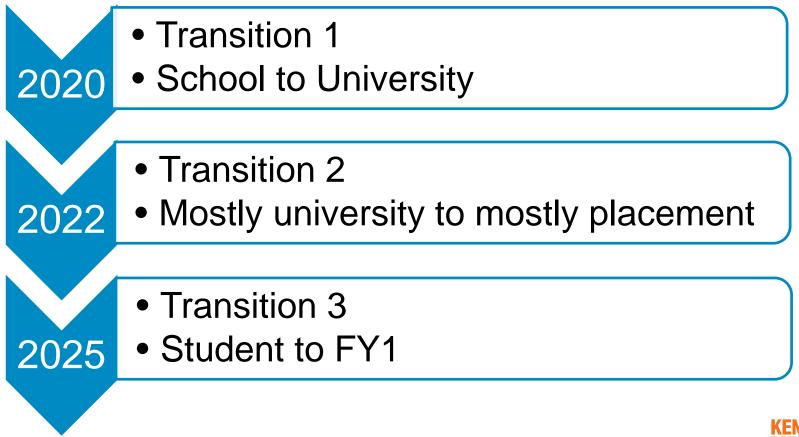
The University of Kent in Canterbury has been struck by tragedy twice in one week

Seven days later, police were called to a property in University Road, where the body of 18-year-old Conor Chambers was discovered.



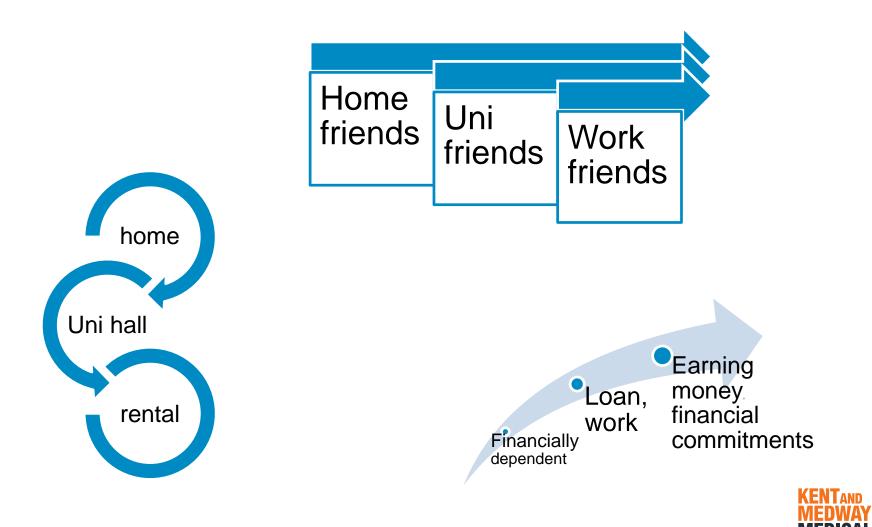
Transitions in Medical School

When





Multidimensional



SCHOO

Adjustment

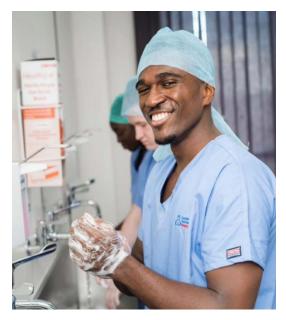
Physical

- Stress of the new
- Economic
 - Decisions and responsibilities
- Psychological
 - Identities gained and lost



KMMS Programme

For Students



For Patients



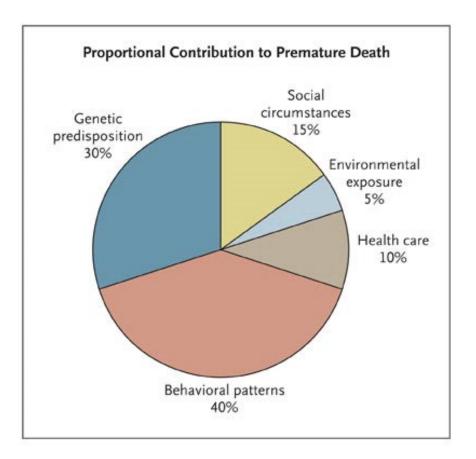
For Kent and Medway





Determinants of Health and Their Contribution to Premature Death.





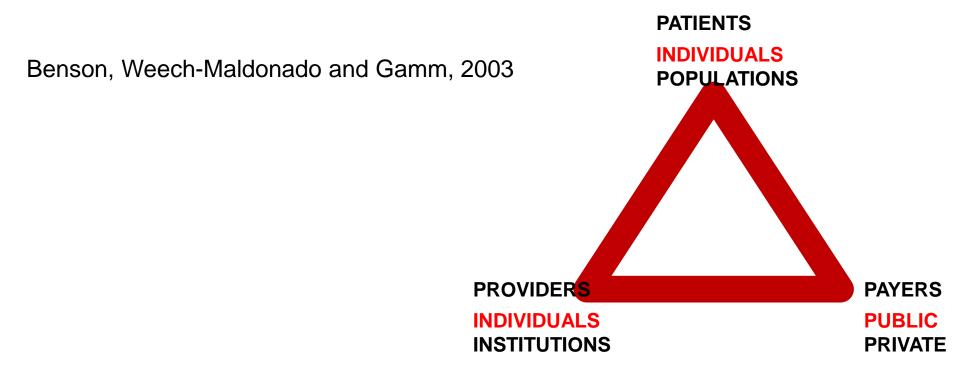
Schroeder SA. N Engl J Med 2007;357:1221-1228.





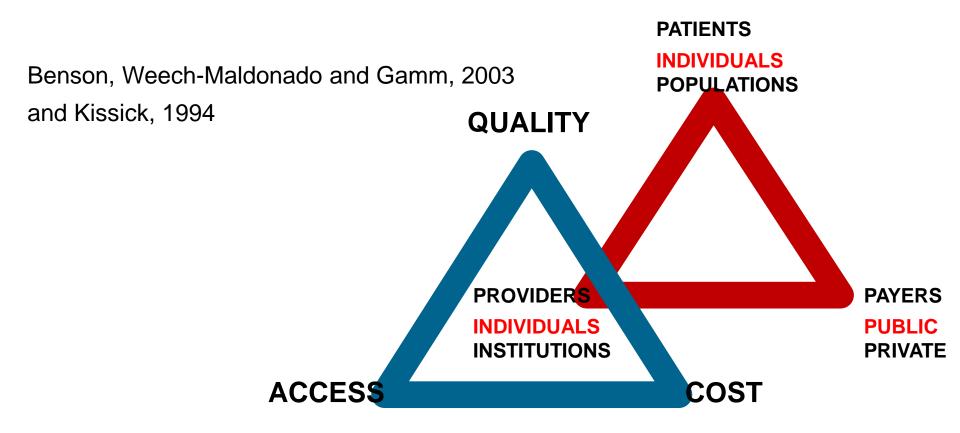
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The 3 P's and the Iron Triangle





The 3 P's and the Iron Triangle





Association of Coworker Reports About Unprofessional Behavior by Surgeons With Surgical Complications in Their Patients

William O. Cooper, MD, MPH; David A. Spain, MD; Oscar Guillamondegui, MD, MPH; Rachel R. Kelz, MD, MSCE, MBA; Henry J. Domenico, MS; Joseph Hopkins, MD, MMM; Patricia Sullivan, PhD; Ilene N. Moore, MD, JD; James W. Pichert, PhD; Thomas F. Catron, PhD; Lynn E. Webb, PhD; Roger R. Dmochowski, MD; Gerald B. Hickson, MD

Key Points

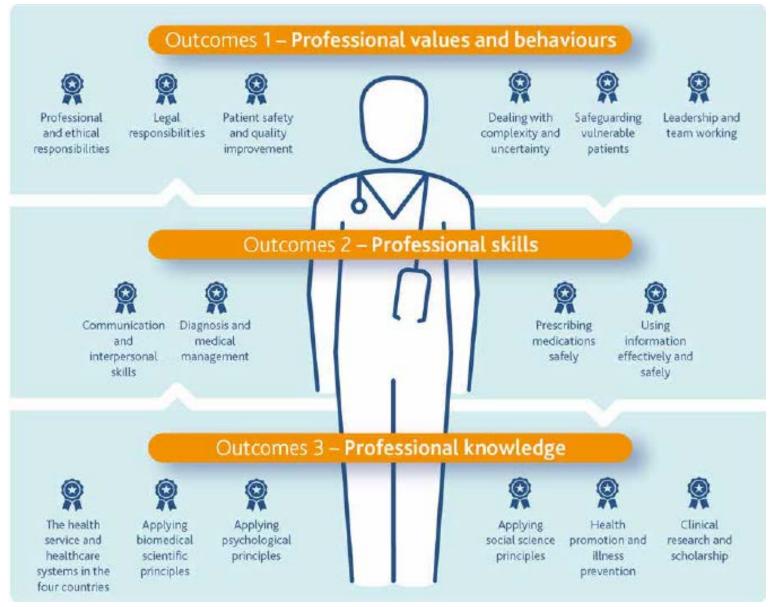
Question Do patients of surgeons with a higher number of coworker reports about unprofessional behavior experience a higher rate of postoperative complications than patients whose surgeons have no such reports?

Findings Among 13 653 patients in this cohort study undergoing surgery performed by 202 surgeons, patients whose surgeons had a higher number of coworker reports had a significantly increased risk of surgical and medical complications.

Meaning Surgeons who model unprofessional behaviors may help to undermine a culture of safety, threaten teamwork, and thereby increase risk for medical errors and surgical complications.



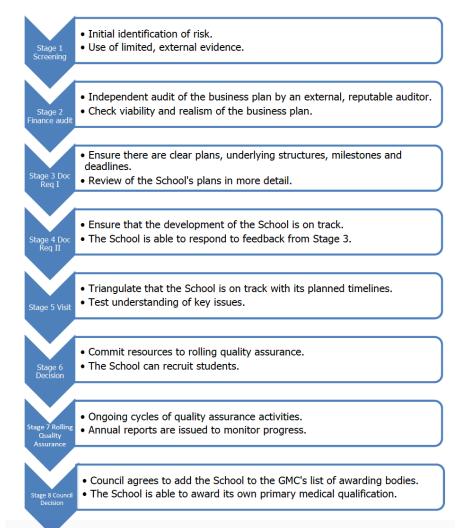
GMC Outcomes for Graduates (2018)



Assessment

KENTAND MEDWAY MEDICAL SCHOOL

GMC Accreditation Process









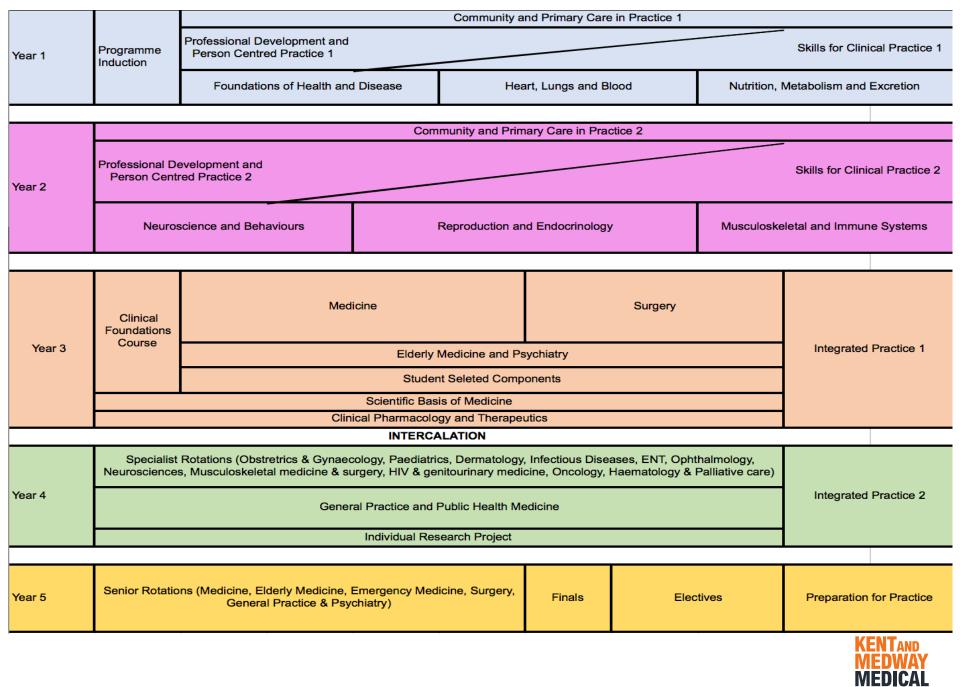
Bachelor of Medicine Bachelor of Surgery

- Five year course
- Systems-based learning
- Integrated programme with early patient contact
- Reflective of contemporary graduate requirements
- Technology and innovation embedded throughout
- Rich opportunities for student choice
- Scholarly learning through tasks
- Emphasis on primary care, public and mental health



	Programme	Community and Primary Care in Practice 1 (28 days) (20 credits L4)							
Year Programme 1 Induction		Person Centred Collaborative Practice 1 (20 credits L4)		e 1	Skills for Clinical Practice 1 (20 credits L5)			credits L5)	
	Foundations of Health and Disease			Heart, Lungs and Blood		Nutrition, Metabolism and Excretion			
		(20 credits L4)			(20 credits L5)		(20 credits L5)		
		Community	and Prima	ry Care	e in Practice 2 (33 days)) (20 crea	dits L5)		
Year	Year Person Centred Collaborative Practice 2 (20			20 credits L5) Skills for Clinical Practice 2 (20 c		credits L5)			
2	Neuros	science and Behaviour R		Repr	roduction and M		Iusculoskeletal and Immune Systems		
		(20 credits L5) Endocrir		locrino	ology (20 credits L5) (20 cr		credits L5)		
	Clinical								
			veeks) (20 credits L6)		Surgery (15 weeks) (20 credits L6)		-		
	Course (10					· · ·			
Year	,	Credits L6) Elderly Medicine and Psychiatry (1.5 days a week) (20 credits L6)					Integrated Practice 1		
3		macology and Therapeutics (10 credits L6)					(60 credits L6)		
	Scien	ntific Basis of Medicine (30 credits L6)			Chudent Calented Commence 1				
		Student Selected Component 1			Student Selected Component 1				
		(10 credit L6	•		(10 credits L6) or PLACEMENT YEAR				
					-				
Year	C	eneral Practice and Public Hea			s) (40 credits L6)	cradita	16)	Integrated Practice 2	
4						cieuits	20)	(60 credits L6)	
	Individual Research Project (60 credits L6)								
	Regional Attachments 3x 8 weeks (120 credits L7)								
Year	Clinical and Professional Studies Unique Learning				Finals (60 credits		Preparation for		
5		Environment (CAPSULE)	ue Leanning	9	L7)	Elective	Practice		
		Seminar Programme							
								KENTAND	





Kent and Medway Medical School Assessment

- To be a beacon for first-class medical education and research, and the first choice for all those aspiring to achieve excellence in person-centred medical care in the UK.
- To create a new cohort of medical graduates equipped with the knowledge, skills and attributes to be excellent Doctors and to contribute to the essential changes required to keep the NHS functioning.



KMMS Assessment philosophy & strategy

Informed and influenced by:





VISION / INNOVATION

NOVATION



SPIRIT/CULTURE

General Medical Council

RIGOR / PATIENT SAFETY



KMMS Assessment philosophy & strategy

Drivers

- **Overall Programme view for MLA success** 5 year perspective
- Continuous assessment focus (multiple lower stakes assessment, building up as year progresses)
- Integration of knowledge (reduce silo learning and increase retention of knowledge)
- Valid and reliable data to underpin high stakes decisions
- Workload management for staff and students re assessment burden
- **Feedback** to students important
- Reduce strategic studying of students in an integrated assessment system
- End of year integration, remediation and improvement assessment opportunity
- Fair standard setting method with a back-up method as reality check



GMC Medical Licensing Assessment (MLA)

- National benchmarking for minimum standard for Foundation training & common threshold for safe practice for those with a licence to practice
- From 2023 for all UK medical students and for International medical graduates (IMGs)
- 2 parts:
 - AKT Applied Knowledge Test Centrally set by GMC, administered via Online SBA exam to all medical schools. Standard set by national panel / process. PM≈ 56-60%
 - CPSA Clinical and Professional Skills Assessment Medical school must produce evidence how their system and CPSAs in previous years support and meet the minimum standards set by GMC for this domain. Vast majority of UK med schools use OSCEs
 - > **No compensation** between these 2 parts
- MLA performance has reputational risk for medical schools, esp. new schools like KMMS
- KMMS assessment strategy designed to optimise outcomes in MLA



Curriculum Mapping: Why

Reproduction & Endocrinology

Endocrinology

- Diabetes
- **Diabetic emergencies**
- Chronic diabetes

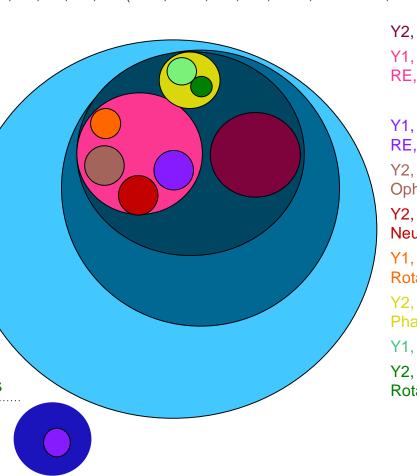
Renal disease Eye disease Neurological disease Vascular disease

Treatment Insulin actions

Prescribing high risk drugs Nutrition, metabolism & excretion

Renal disease!

Physiology/HistologyAnatomy?



Y1, Y2 (FHD, GP1, RE)

Y1, Y2, Y3, Y3, Y5, Y5 (GP1, CS, RE, CFC,SBM, IP1) Y1, Y2, Y3, Y4, Y5 (FHD, GP1, CS, RE, CFC, Rotations, SBM, IP1, Rotations, GPPH, IP2, Rotations, Ethics, Pharmacology) Y2, Y3, Y5 (FHD, GP1,CS, RE, Rotations) Y1, Y2, Y3,Y4, Y5 (FHD, PCPDP1, GP1, CS, RE, GP2, Rotations, SBM, GPPH, Rotations) Y1, Y2, Y3, Y4, Y5 (FHD, GP1, CS, PCPDP2, RE, Rotations, GPPH, Rotations) Y2, Y3, Y4 (FHD, GP1/2, CS, RE, Rotations,

> Ophthalmology) Y2, Y3, Y4, Y5 (FHD, GP1/2, CS, Rotations, Neurosciences, GPPH, Rotations)

Y1, Y2, Y3, Y4, Y5 (FHD, CS, GP1, GP2,

Rotations, GPPH, Rotations)

Y2, Y3, Y4, Y5 (Rotations, Clinical Pharmacology, Ethics)

Y1, Y2, Y3 (FHD, RE, Clinical Pharmacology)

Y2, Y3, Y5, (CS, Clinical Pharmacology, Rotations, Preparation for Practice)



