

From the Vice President (Clinical) Professor Chris Day FMedSci

Suzanne.candy@acmedsci.ac.uk 020 3141 3231

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Professor Terence Stephenson Chair General Medical Council Regent's Place, 350 Euston Road, London NW1 3JN

Dear Terence

Re: Consultation on Medical Licensing Assessment

The Academy of Medical Sciences recognises the importance of maintaining and strengthening public trust in the medical profession. As part of the consultation on Medical Licensing Assessment (MLA) we would like to take the opportunity to highlight some areas which the GMC should consider vis-à-vis the curricula and training needs of the future medical workforce, and aspiring towards excellence in delivery of medical education.

To achieve a first class workforce, medical schools need to develop models of training that equip medical students with a solid generalist foundation, robust training in the evaluation of evidence, the necessary skills to work across the NHS-industry interface, a systems-based mindset with a holistic understanding of the determinants of health and a commitment to life-long learning. We take the view that the UK approach should continue to foster broad education with an eclectic mix of educational excellence and student experience rather than narrow training; it is important for medical schools to maintain flexibility and diversity to be able to achieve these broad outcomes through diverse mechanisms. The recent announcement of an additional 1,500 medical training places provides an opportunity for UK medical schools to demonstrate innovation in their curricula to meet broad outcomes set by the GMC. Indeed, the Academy's recent report *Improving the Health of the Public in 2040* highlighted the need for the GMC to assess how education in population science, preventative medicine and informatics is achieved by UK medical schools, and to bring about an update to curricula.

We have seen the Medical School Council's response to the MLA consultation endorsed by every Medical School Dean across the UK and would wish to strongly endorse their response. In particular, we urge the GMC to give careful consideration to potential unintended consequences of introducing an MLA in terms of impact on curricula. In terms of setting thresholds for safe practice, and the GMC remit to ensure minimal rather than common standards, we urge the GMC to develop mechanisms to ensure that the introduction of the MLA does not disincentivise medical schools from continuing their commitment to excellence in the delivery of medical education, and medical students from aspiring to the highest standards.

Yours sincerely

Professor Chris Day FMedSci

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41 Portland Place London W1B 1QH

+44 (0)20 3141 3200 info@acmedsci.ac.uk www.acmedsci.ac.uk