UKMED Strategy Board

Terms of reference (November 2025)

Background

1   The UK Medical Education Database (UKMED) reflects a shared vision of data contributors, students and doctors to raise standards in medical education through a high-quality database which can improve our understanding of training pathways and support robust research into students' and doctors' progress and the assessment hurdles at each point on the pathway.

2   Each organisation involved in the UKMED has a separate set of responsibilities and priorities, but each also has a large stake in ensuring medical education is fair and supported by high quality evaluation.

3   In the pathfinder pilot phase (2015-2016), the development of the UKMED was guided closely by the UKMED Development Group, comprised of data contributors across the four countries, data subjects and independent academic input supported by the Medical Schools Council (MSC) and the General Medical Council (GMC). This ensured that the development of the database has been guided by those responsible for regulating, funding and delivering medical education as well as the students and doctors engaged in it.

4   As UKMED moved to a business-as-usual model in 2017, the UKMED Development Group became formalised and renamed the UKMED Advisory Board to reflect the continuing importance of this forum in providing advice on the development and use of the database.

5   In 2025, now the UKMED has become well-established, and its operational processes professionalised, the governing body will be renamed the Strategy Board to reflect a renewed focus on strategic development as the UKMED enters its second decade.

Legal Arrangements

6   Those contributing data will remain data controllers according to their existing arrangements for using the data they hold. This means that they can receive

and deal with research requests for their own information independently of the UKMED.

7   The UKMED database is held at the GMC and the data are shared by contributors with the GMC under data sharing agreements. The GMC is then sole data controller in respect of the use of the data shared into the UKMED database by the UKMED participants.

8   As such the GMC has the legal responsibility to ensure that all agreements with data providers are adhered to absolutely. None of the boards, sub-groups or organisations participating in this project may require the GMC to take any action which would compromise its role as the Data Controller.

Purpose

9   The overarching purposes of the Strategy Board are:

a To provide advice to the GMC as data controller on the development and use of the database,

b Support the MSC in the development of the UKMED website and communications,

c Identify opportunities to further develop UKMED within a strategic framework and then work with the GMC and MSC to implement or operationalise those improvements.

d To work within members' own organisations and together across organisations and networks to identify opportunities to improve the data collections and to meaningfully engage with UKMED's outputs and to utilise its potential for evidence-based decision making.

10 Specifically, the UKMED Strategy Board will:

e Support the strategic development of the database by:

i.   Developing the strategic vision for the UKMED, working with the GMC and MSC to operationalise that vision based on funding and resources available.

ii.   Identify external funding opportunities to support research, training or expansion of the UKMED.

iii.   Proactively managing risks and opportunities to the UKMED and its core functions.

f Provide advice on data use, including:

    i Providing guidance and support to the GMC, where required, with the acquisition of new data sets and timely collection of existing data sets.

    ii Identification of any requirements their organisations or stakeholder networks may have that could affect the collecting, storing, sharing and reporting on the data.

g Receive updates from the Research Subgroup as to accepted applications, reports and publications, and, when required/requested, provide advice on any risks, concerns and opportunities presented by the findings.

h Work closely within members' own organisations and networks to enhance the quality and completeness of medical education data availability.

Frequency

11 The Strategy Board will meet approximately two times per year, in line with the research application cycles.

12 One meeting will be an all-day in-person workshop focused on the development of the strategy and roadmap for its delivery. Other parties may be invited to this workshop to contribute to certain disscisions or items.

13 The second meeting will be a shorter virtual meeting covering operational progress towards delivering the strategy, as well as business as usual updates.

14 In addition, the GMC and MSC will provide biannual updates on data collections, accepted projects and published research. This newsletter will be distributed to members of the Strategy Board, Research Subgroup, and key stakeholders outside these groups [data donors/providers].

Approach

15 Strategy Board members are responsible for consultation within their respective organisations. The UKMED Strategy Board assumes that they are representing their organisation as whole and have the required mandates so to do.

16 To ensure that each organisation's and stakeholder networks' views are considered, in the event that members are not able to attend, they will

endeavour to provide feedback on papers and/or nominate a representative to attend in their place.

17 The GMC and MSC are committed to working with the Strategy Board and Research Subgroup to deliver and develop the UKMED, engaging with their advice and recommendations regarding the reports that are published and the research proposals that are approved.

18 The Research Subgroup's review of emerging research findings will be discussed in the Strategy Board prior to publication. Strategy Board members agree to not disclose discussions in order not to prejudice the publication of research reports.

19 The Strategy Board will be informed of research findings and may make recommendations, but it will NOT block the publication of any unfavourable or controversial findings.

Membership

20 The Chair of the Strategy Board is appointed for a three-year term.

21 The Board will include data contributors and organisations who may, in time contribute data which will help future-proof the UKMED database. Independent academic expertise is welcome to guide prioritisation of research questions and to suggest improvements to medical education data quality. Table 1 indicates the current and future proposed membership of the Board.

Table 1 UKMED Advisory Board membership

Organisation	Data Contributor
Academy of Medical Royal Colleges	Yes – on behalf of individual medical colleges and faculties.
AoMRC Academy Trainee Doctors Conference of Postgraduate Deans	No - representing the data subjects
ASME	No
BMA Medical Students Committee	No - representing the data subjects
BMA (Main Committee)	No – representing the data subjects
Conference of Postgraduate Medical Deans of the United Kingdom (COPMeD)	Yes
Department of Health	No
Graduate Australian Medical School Admissions Test (GAMSAT)	Yes
General Medical Council	Yes
Health Education and Improvement Wales (HEIW)	Yes
HESA/JISC	Yes
Medical Schools Council	Yes
MPS Foundation	No
NHS Education Scotland	Yes
NHS England	Yes
NIMDTA	Yes
UCAS	Yes
UK Clinical Aptitude Test (UCAT)	Yes
UKFPO	Yes
Independent academic	No
Research Subgroup chairs	No