

Notes of a meeting of the UK Medical Education Database Board

Wednesday 15 June 2016, 14.00 – 16.30
GMC Office 350 Euston Road, London NW1 3JN

Attendees

Professor Steve Thornton	Chair
Charlie Bell	BMA MSC
Luke Bruce	GMC
David Darton	GMC
Professor Jon Dowell	Chair, UKMED Research Group
Siobhan Fitzpatrick	MSC
Rachel Greatrix	UKCAT
Duncan Henderson	NES
Ed Knight	MSC
Marita MacMahon Ball	GAMSAT
Professor Chris McManus	Professor of Psychology and Medical Education, UCL
Pete McNair	GMC
Thomas Oppé	GMC
Dr Katie Petty-Saphon	MSC
Professor Bill Reid	COPMeD
Mark Shannon	BMAT
Daniel Smith	GMC
Rebecca Taylor	GMC
Veronica Vele	GAMSAT
Dr Kim Walker (tel)	UKFPO

Apologies

Dave Anson	GMC
Paul Buckley	GMC
Professor Jane Dacre	AoMRC
Professor Derek Gallen (rep)	HEW and UKFPO
Keith Gardiner	NIMDTA
Martin Hart	GMC
Jonathan Howes	HEE
Andrew Ledgard	GMC
Dr JP Lomas	AoMRC Trainees
Alan Robson	DH
Kirsty White	GMC

1. Welcome and introductions

The Chair welcomed members to the meeting. Introductions were made and apologies were noted.

2. Approval of minutes from 25 February 2016

Enc 1

The minutes were agreed to be an accurate record, with a brief discussion on the following items not elsewhere on the agenda:

- HESA data were refreshed to include: an additional year (2014/15), additional information on intercalated degrees; corrections to coding errors for Swansea and Lancaster; and mode of study (to avoid duplication if a student is intercalating at an external university).
- Following the refreshed HESA data, Tranche 1 data extracts have been re-issued and 3 of the 4 Tranche 2 data extracts have been released this week. The fourth study included a change request for enhanced HESA disability data, which is close to be finalised. Initial analysis is requested for the October Research sub-group meeting.

Members of the Development Group expressed concerns around the delay to the release of data during tranche 2 Phase 1, with the implications borne by researchers (who luckily have been able to accommodate the slippage thus far), and risks to reputational damage. Members accepted the reasons for the delays, but were clear that UKMED should provide a more accurate timetable for data release in Phase 2. The GMC reported that they were working to ensure UKMED was fully integrated into the GMC Information Services (IS) plan for 2017, which should prevent a re-occurrence of such delays.

3. Status update, *Pete McNair*

Pete McNair gave an update to members on the status of database development, Phase 1 evaluation and proposals for Phase 2.

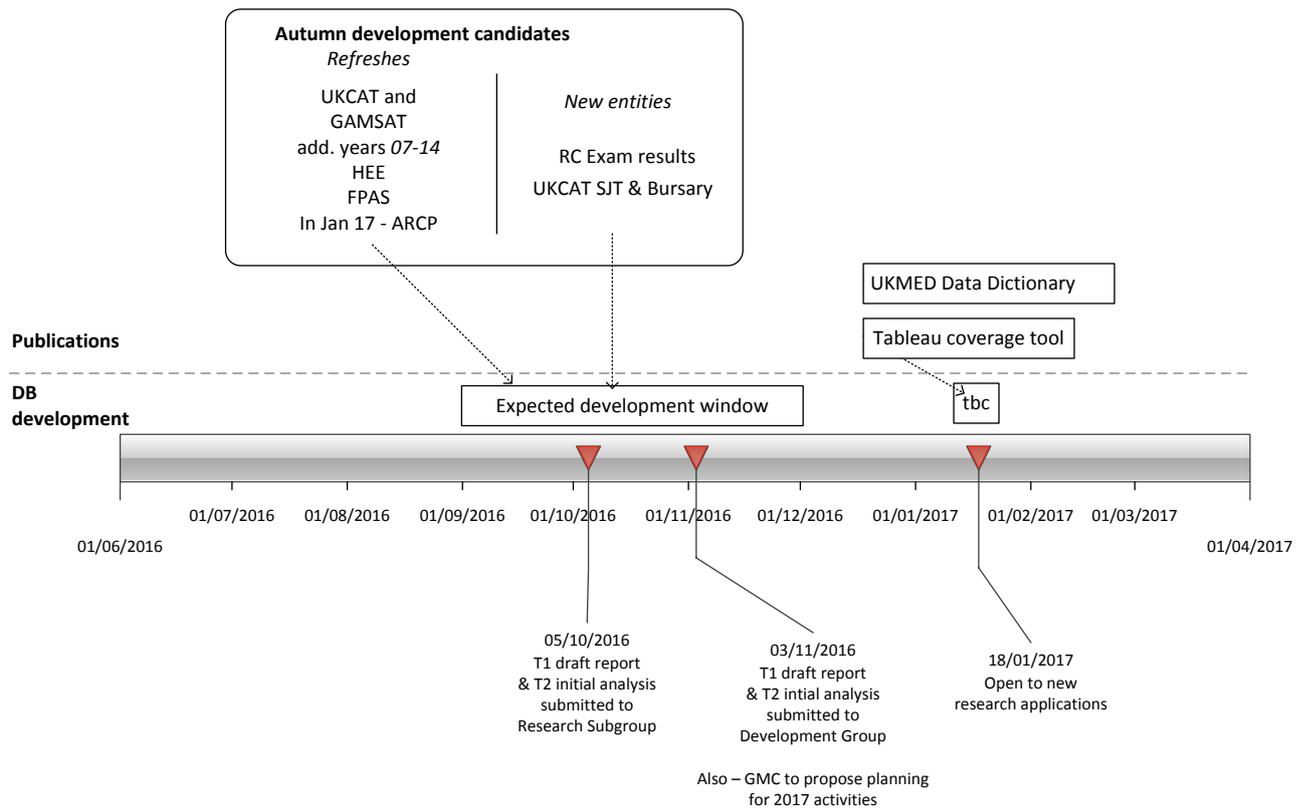
There is a commitment to 25 days' development time from the GMC IS team in the autumn, which could encompass refreshed existing datasets and the introduction of new datasets, including the Prescribing Safety Assessment. There was a note of caution that the 'wish list' data items discussed at the February Development Group meeting may be problematic as there is significant data gathering work to do. A plan for Phase 2, including the timelines for the next round of research applications, IS resource and additional database work will be proposed at the November Development Group meeting. The group felt that two rounds of extracts in 2017 would be appropriate.

ACTION: Daniel Smith to update the data dictionary

ACTION: Medical Schools Council to advise on priorities for new datasets to be included

The GMC proposed timeline was presented (see below), for the next 12 months, including Phase 2 research studies invited in early 2017.

The risk register was reviewed, and two issues were raised relating to the HESA data: that data is only secured up to the academic year 2014/15 and that a contract to secure the data for future years is required. It was noted that any new data, for example undergraduate module performance, to be requested for collection by HESA must be finalised by September to be included in the academic year 2017/18; the data would then be available in January 2019. There was a discussion around the capacity to align data collected from undergraduate medical schools, for example a consistent measure of professionalism or the number of component marks in similar/ the same formats.



4. Update on Tranche 1 research reports

Enc 2

Professor Jon Dowell gave an overview of research progress since the February meeting. One research study had been approved; three of the five who were invited to resubmit, did so and have been approved electronically as they had introduced all of the recommended changes. Anecdotal conversations outside of these research studies confirms a growing interest in UKMED, although many of these want to link to external datasets. Members agreed that the process for inviting, reviewing and approving data requests to UKMED has been successful.

The Tranche 1 research reports have had some novel and interesting findings to data, although it is too early to share these. There are opportunities for shared learning – for example the time taken to categorise Fitness to Practise declarations (although noted that it is hoped that the source of data will be moving from self-report by applicants to the register to report by medical schools); the reflection that HESA SEC data was more reliable than UKCAT SEC; interpretations of data e.g. that a Code 5 ‘missing evidence’ outcome on ARCP was not necessarily a bad outcome reflecting on the trainee but may reflect the tutors’ annual leave. There is also an action for the UKMED Research Sub Group to explore running imputation for missing data centrally against the entire database, rather than on a per extract basis.

Following the refresh to HESA data, the data extracts were re-issued for the three studies, which will add a time delay to the finalising of the research reports, with drafts now expected for the October Research sub-group meeting.

There was a discussion around the membership of the Research sub-group, and the implications of extending the data coverage into Phase 2, e.g. for royal college exam data and PSA. The

original intention was for the Development Group to be the stakeholder sign-off; and the Research sub-group to comment on research methodologies and reliability of the proposed studies; however the membership of the Research sub-group is also representative of data providers in Phase 1. One of the data providers currently represented on the Research sub-group indicated that they would not be comfortable not having input into the Research sub-group, particularly in the early stages of UKMED. There were also concerns voiced around the Research sub-group becoming too large.

ACTION: Research sub-group to propose model(s) of membership for the Research sub-group as part of evaluation of Phase One.

5. Update on Tranche 2 research applications, *Daniel Smith*

Daniel Smith confirmed that Tranche 2 data releases have been loaded into the safe haven, and agreements have been formalised with the researchers. Three of the four datasets have now been released for Tranche 2 studies. Initial analysis and key findings are requested for the October Research sub-group meeting. It is proposed that these reports are finalised for January 2017, if the researchers agree with the revised timeline.

6. Evaluations of phase 1, *Daniel Smith*

The Post Implementation Review and Evaluation (PIRE) forms have been sent to all members of the Development Group and Research sub-group, for completion by 22 July, accompanied by the Project Initiation Document (PID) and the timeline for the project to date, to be considered at the November Development Group meeting.

Members reflected on the cost of providing data for UKMED, which thus far has been borne by the data providing organisations.

Members reflected on the valuable resource offered by UKMED in terms of workforce planning as well as research and evaluation. There had been a discussion around a separate reporting sub-group, which members suggested should be revisited for Phase 2. There were also discussions around charging for data releases; ready access to some data for trusted organisations/ individuals e.g. not for publication but to support activities such as workforce planning; the workload for Research sub-group members and their voluntary commitment to the project.

The Medical Schools Council confirmed it intends to appoint a Data Analyst, with part of the job plan linked to UKMED. It was suggested by the Development Group members that this offered the opportunity for the MSC to take a lead in collecting new datasets directly from medical schools for example data on multiple-mini-interviews, if there is scope to standardise data collected.

7. Options for autumn 2016 data load, *Pete McNair*

Enc 3

Pete McNair sought input from the Development Group around making the best value from the GMS IS time in the autumn, ahead of formal approval for Phase 2. The PSA data will be available from the Medical Schools Council to upload; refreshed data will be available from Oriel.

It was noted that BMAT has been slow to reach agreement but it is still anticipated that it will be secured, provided lawyers can be convinced that offering students the option to opt out of the

BMAT to UKMED data transfer was fair. If the data sharing agreement does cover retrospective data to 2003, it would be worth extending the data coverage for other test providers as the HESA data goes back to 2002/3 inclusion of test provider data from earlier years is possible.

Members asked whether postgraduate data would be available from the AoMRC rather than from the individual colleges.

ACTION: To take a paper to the AoMRC Assessment Committee, outlining the benefits of linking their data with PLAB and prior attainment

8. AOB

Edward Knight advised members that the copyright license for the UKMED logo has been granted to the MSC, who have leased it to the GMC.

Penetration testing of the UKMED website (through which research applications are submitted but no data are held) has been completed. There were some anticipated concerns raised around security of uploading a PDF file, which will be replaced with a form within the website in August and the penetration testing will be repeated before the website re-opens for phase 2 applications.

Members queried that the HIC safe haven has undergone the same level of security testing and were reassured that it has, and evidence provided prior to exchange of contracts.

Professor Jon Dowell updated members that an editorial on UKMED is accepted in principle from BMC Medical Education, co-authored with Daniel Smith, Sandra Nicholson and Jen Cleland. Members agreed this would usefully raise the profile of UKMED, and could coincide with the launch of Phase 2. Linked to this, members considered the Research sub-group suggestion to run a workshop or session appended to existing meetings e.g. AMEE, ASME or INRESH in 2017.

ACTION: Professor Dowell to circulate draft editorial for comment and approval from Development Group

9. Date of next meeting

Thursday 3 November 2016, 10.30 – 13.30, Woburn House, London WC1H 9HD

Minutes approved at the Development Group meeting 3 November 2016

Glossary

AoMRC	Academy of Medical Royal Colleges, www.aomrc.org.uk
ARCP	Annual Review of Competence Progression
BMA	British Medical Association, www.bma.org.uk
BMAT	BioMedical Admissions Test http://www.admissionstestingservice.org/for-test-takers/bmat/about-bmat/
COPMeD	Conference of Postgraduate Medical Deans (UK), www.copmed.org.uk
FPAS	Foundation Programme Application System
GAMSAT	Graduate Medical School Admissions Test, www.gamsat.acer.edu.au
GMC	General Medical Council, www.gmc-uk.org

HEE	Health Education England, www.hee.nhs.uk
HESA	Higher Education Statistics Agency, www.hesa.ac.uk
HIC	Health Informatics Centre, www.medicine.dundee.ac.uk/hic
IS	Information Services (part of GMC)
MSC	Medical Schools Council, www.medschools.ac.uk
NES	NHS Education for Scotland, www.nes.scot.nhs.uk
NIMDTA	Northern Ireland Medical and Dental Training Agency, www.nimdta.gov.uk
PID	Project Initiation Documentation
PIRE	Project Implementation Review and Evaluation
PSA	Prescribing Safety Assessment
SEC	Socio-Economic Classification
UKCAT	UK Clinical Aptitude Test, http://www.ukcat.ac.uk/
UKFPO	UK Foundation Programme Office, www.foundationprogramme.nhs.uk