

Notes of a meeting of the UK Medical Education Database Advisory Board

Friday 17 May, 10.30 – 13:30

Room 2.08 General Medical Council Regents Place, 350 Euston Road, London NW1 3JN

Attendees

Professor Steve Thornton
 Professor Jon Dowell
 Dr Simon Fleming
 Professor Bill Irish
 Dr Helena McKeown
 Dr Gurdas Singh
 Mark Shannon
 Professor Colin Melville
 Rachel Wilkes
 Dr Duncan Henderson
 Dr Katie Petty-Saphon
 Richard O'Kelly
 Professor Chris McManus
 Russell Smith
 Thomas Oppè
 Daniel Smith
 Peter Tang
 Edward Knight

Chair
 Research Subgroup Chair
 AoMRC Trainees
 COPMeD
 BMA
 BMA MSC
 BMAT
 GMC
 HESA
 NES
 MSC
 UCAS
 UCL
 UKFPO
 GMC
 GMC
 MSC
 MSC

By telephone

Veronica Vele

GAMSAT

Presenters

Dr Colin Tilley
 Dr Katherine Woolf
 Dr David Harrison

NES
 UCL
 UCL

Apologies

Alastair Henderson
 Dr Chris Smith
 Alan Robson
 David Darton
 Kate Gregory
 Martin Hart
 Andrew Ledgard
 Jonathan Howes
 Denise Jones
 Adam Van Coevorden
 Dr Tom Yapp
 Professor Keith Gardiner
 Dr David Best
 Rachel Greatrix

AoMRC
 BMA MSC
 DH
 GMC
 GMC
 GMC
 GMC
 GMC
 HEE
 HESA
 HESA
 HEIW
 NIMDTA
 UCAS
 UCAT

1 Welcome and introductions Chair

1. The chair welcomed members to the UKMED Advisory Board. Marita MacMahon Ball has now left ACER GAMSAT, she enjoyed working with the UKMED Advisory board and wishes the project all the best for the future. Dr Helena McKeown has taken over from Dr Anthea Mowat as the new BMA representative on the UKMED Advisory Board. Professor Bill Irish attended his first UKMED Advisory Board meeting as the new representative from COPMeD.

2 Approval of minutes from 7 December 2018 and matters arising Chair

2. The minutes of the meeting on 7 December 2018 were reviewed and approved as an accurate record. Actions from the previous meeting were reported to have either been completed or were in progress. The action to create a UKMED policy paper outlining why a motivated intruder test is not required will be circulated offline.

3 UCAS update

3. Daniel Smith reported that UCAS have agreed to supply UCAS person IDs in the future data loads. There were issues with using hashed identifiers and de-duplicating (ensuring each person only has one hashed person identifier) applicants who made applications over more than one application cycle, and it was agreed that linking on UCAS person IDs would be more accurate.
4. UCAS will also supply additional data fields to UKMED, including information about applicants' qualifications. The GMC and MSC are currently in process of confirming the list of UCAS courses to be included in the UKMED data load.

4 UKMED Forum

5. Peter Tang informed the group that the UKMED Forum is now live. The UKMED Advisory Board also have access to the Forum and members can post and respond to messages by logging into the UKMED website.
6. The Forum will be used to answer questions from researchers with the aim of reducing queries through emails. Frequently asked questions could be directed to the Forum, with plans to include message threads that outline best practice for the use of the Safe Haven and other statistical topics.

5 UKMED Conference

7. Peter Tang reported that the UKMED Conference on 15 March was successful and well received. The attendees found it useful to hear about the variety of studies using UKMED data and found the tips about using the Safe Haven and the database very helpful.
8. Some conference attendees had queried whether training on how to use UKMED data will be available in the future. Further discussions about training is discussed under item 14.

6 UKMEDP86 – public release of data tables

9. The Chair informed the group that the project was discussed by the Deans of the Medical Schools and upon review of the proposal, they considered that this was not the best way to use the data. There were concerns that release of test scores in data tables without context could result in data being misleading or misinterpreted.
10. The Board agreed that it was important to take into consideration the views of the Medical Schools and agreed that it was important to provide some transparency.
11. Daniel Smith presented an example interactive report that demonstrated how the test score data could be presented. Professor Jon Dowell suggested that it may be helpful to collaborate with the Medical Schools Council Selection Alliance (MSCSA) to consider controlled data release. The MSCSA would be asked to determine whether release of this type of information (similar to option B) would add value to medical school applicants.
12. A paper will be taken to the next MSCSA Board and shared with Medical School Deans.

ACTION: Daniel Smith and Peter Tang to produce a discussion paper for the next MSCSA Board meeting on in October 2019.

7 HESA assessment data and medical school extracts update

13. The Chair reported that the proposal for collecting assessment data from Medical Schools was discussed at MSC Council. While there was support for the work, it was anticipated that additional resources will be required to deliver the data within the models set out in the proposal. The Medical schools support the workshops that have been set up to explore whether data can be returned to HESA.
14. Daniel Smith explained that two options were currently being offered for the return of assessment data to HESA. One option included supplying detailed granular data and the other, supplying section scores for each assessment that could be mapped to the blueprints used for the Exam Board. It was noted that it would be hard for UKMED to resource obtaining good quality data returns outside of HESA on a rolling annual basis. The data would already be mapped to each student in the HESA returns and this eliminates the need for UKMED to do further data linkages.
15. The Board was supportive for obtaining undergraduate assessment data as it was highlighted that no performance data existed after applicants enter medical school until they enter the foundation programme. The Board agreed that to understand fully understand differential attainment, this information needs to be included in UKMED.
16. The specification must be agreed by August 2019 for the 2020/21 HESA extract, which is vital for the UKMACS project (UKMEDP089: The UK Medical Applicant Cohort Study: Applications and Outcomes Study).

8 Clinical outcome data - update

17. Daniel Smith presented an update to the proof of concept project for including clinical outcome data in UKMED. NHS Digital would like the GMC to have a framework

contract covering three–years and all NHS Digital extracts. As this goes beyond the scope of UKMED Tom Oppé will consult internally to ensure the framework contract will meet GMC requirements over the next three years.

ACTION: GMC to provide further updates on the progress of obtaining clinical outcome data.

9 UKMED meta-data

18. Daniel Smith informed the Board that UKMED will ask the test providers for some additional meta-data to provide context to the data being supplied to UKMED. This includes information on when certain tests are used and for which undergraduate entry years. The meta-data will be included in the UKMED data dictionary and it is intended to make clear to researchers when certain tests are used.

ACTION: GMC to send the test providers a specification for the requested meta-data. Where possible this will be pre-populated and providers will be asked to confirm or amend.

10. UKMED data load cycle and calendar

19. Daniel Smith presented to the Board the 2019 load cycle. The GMC is currently loading the HESA 17/18 data. The UCAS 2018 data is expected to be ready to load in June 2019. The GMC were successful in obtaining signed Data Sharing Agreements for Foundation e-Portfolio data from all four UK nations. The data will be loaded into UKMED in July.

20. HESA Data Futures is expected to go live in 2020/21, which will mean UKMED will receive data with a shorter time lag as Data Futures aims to report in year.

11 & 12 Projects with no progress and status of active projects

21. Daniel Smith presented to the Board an overview of active UKMED projects that have had trouble progressing. Some of the common issues preventing a project from progressing are around information governance or access to additional data outside of UKMED. The Research subgroup have taken onboard these issues as learning points and will be recommending to researchers to obtain information governance clearance first before UKMED approves their research applications.

22. Other issues highlighted were problems with funding or overly optimistic in the resources available to complete the projects. Professor Jon Dowell acknowledged these issues were typical in research and noted that this has shaped how the Research subgroup have been assessing recent rounds of research applications.

23. UKMEDP022 has exceeded the deadline for publishing their project. The Board has decided to publish the paper on the UKMED website as per the UKMED publications process. The researchers will be notified of the Board's decision.

24. The Board found it useful to receive feedback from the UKMED team about projects without progression and were happy to help projects progress where possible.

ACTION: Daniel Smith to explore the issues preventing UKMEDP085 and UKMEDP097 from progressing, which requires additional data from the Joint Royal Colleges of Physicians Training Board (JRCPTB).

ACTION: Olga Sierocinska King to notify UKMEDP022 researchers of the Board's decision to publish the paper on the UKMED website.

13 Research applications from Research subgroup 7 May 2019

25. A total of nine applications were received in the latest round.
26. Two projects were invited for resubmission:
 - a. UKMEDP099 - Does your personality affect outcome in the SJT and PSA?
 - b. UKMEDP102 - The effect of eLearning on acquisition of prescribing skills by medical students.
27. Three were recommended with requested changes:
 - a. UKMEDP104 - How do students on gateway courses progress through medicine, compared to standard entry peers of similar backgrounds?
 - b. UKMEDP106 - The fairness of the UKFPO post allocation process from the perspective of the patient.
 - c. UKMEDP107 - Can Situational Judgment Test (SJT), Educational Performance Measure (EPM) and/or Prescribing Safety Assessment (PSA) scores predict the likelihood of being sanctioned by the General Medical Council (GMC)?
28. Three were recommended with no changes:
 - a. UKMEDP101 - Investigating the potential factors that might influence Prescribing Safety Assessment (PSA) scores amongst UK final year medical students and their predictive validity for performance in early postgraduate training.
 - b. UKMEDP103 - Predictors of postgraduate exam performance in psychiatrists.
 - c. UKMEDP105 - Exploring the convergent validity of the Prescribing Safety Assessment (PSA).
29. One was rejected:
 - a. UKMEDP100 - A retrospective analysis looking at the correlation between a successful ARCP outcome, Urology ST3 selection outcomes and CCT.
30. The Advisory Board accepted the recommendations from the Research Sub-Group.
31. Dr Katie Petty-Saphon had discussed the projects with the PSA Executive Board. The PSA Executive Board suggested that UKMEDP101 and UKMEDP106 could be merged as the projects were very similar. Professor Jon Dowell explained that the Research subgroup does ask researchers with similar projects to get in touch to explore whether it is possible for them to merge projects.

14 UKMED training dataset

32. Professor Chris McManus has agreed to provide a training workshop for UKMED researchers. The workshop will take place in UCL facilities. The UKMED team will explore whether the Safe Haven can support the workshop with temporary logins and

a teaching dataset. The teaching dataset, a reduced and obscured dataset with no identifiable information, will include typical problems encountered by researchers.

33. The workshop will charge on a cost recovery basis. Although the option of providing a free workshop was discussed, it was agreed that attendees were more likely to turn up to an event if it was paid for.
34. The Board supported the training workshop and asked the GMC to explore whether it would be feasible to set this up.

15 AOB - Poster presentations prior to project publication/completion

35. The Board was reminded that UKMED operates on a 'no surprises' basis and any output or preliminary findings being made public by researchers require UKMED approval. UKMED requires outputs using HESA data to abide by the HESA statistical disclosure rules, which apply to all outputs including poster presentations.
36. Professor Jon Dowell proposed that the Research subgroup should be given one month's notice to review publications, including poster presentations with preliminary findings, before it is released in the public domain. The Board was in support of formalising the rules for publications.

ACTION: Daniel Smith and Olga Sierocinska King update the publication rules for publications including preliminary findings presented at conferences.

16 AOB – 2019 meeting dates

37. The next 2019 UKMED Advisory Board meeting date is:
 - a. Wednesday 20 November 2019, 12.00–16.00. Medical Schools Council, Woburn House, Tavistock Square, Kings Cross, London WC1H 9HD.

Session 2

17 UKMED workforce planning users – Applications of UKMED data for workforce profiling (NES)

38. Dr Colin Tilley from NES gave a presentation to the Board on how Scotland is using UKMED data to develop and enhance workforce planning strategies.
39. Dr Colin Tilley thanked the UKMED team and the Board for providing NES with the data that will enable evidence-based workforce planning. He thanked the GMC team and the Dundee HIC Safe Haven team for providing valuable guidance and technical support.
40. UKMED data has helped provide the evidence-base for the retention of Scottish medical graduates in Scotland. The data will be useful for forecasting and designing recruitment and retention strategies, such as measuring the impact of ScotGEM, a four-year graduate entry programme designed to improve retention in the Scottish workforce.
41. The data highlighted the high proportion of doctors taking time out of training after completing the Foundation training programme. Russell Smith commented that it would be important to investigate whether trainees are taking time out to deliver

health outside of formal training programmes. The GMC noted that the workforce planning extracts also include the practice history dataset which could help explore whether trainees are taking time out to deliver service.

42. Currently, the UCAS applicant data are not included in the workforce planning extracts. UCAS was happy to explore whether the dataset can be made available via this route.

ACTION: Daniel Smith and Richard O’Kelly to explore whether UCAS data can be included in the workforce planning extracts.

18 UK Medical Applicant Cohort Study (UKMACS)

43. Dr Katherine Woolf and Dr David Harrison from UCL Medical School presented to the Board the UKMEDP089 project investigating selection into medicine. The project explores ‘how applicants from different backgrounds choose which medical schools to apply to, and whether this affect outcomes?’. The first phase of the project launched a questionnaire to gather data on applicants’ views and choices for entering medicine. The data will be linked to UKMED data for a longitudinal study to assess what the impact of medical school choices on outcomes are.
44. The project will require medical school achievement to answer questions about the impact of medical school choice on outcomes post-entry, and the effectiveness of selection. The proposed HESA assessment data are an important outcome measure that can address this.
45. The UKMACS study is one of the largest studies of UK medical applicants ever undertaken, supported by a major medical research funder (NIHR) and major stakeholders in medicine, higher education, and medical education.
46. UKMED is essential to the success of UKMACS, and to medical education research due to its unique ability to accurately link longitudinal data.
47. Including medical school assessment data in UKMED is crucial for understanding the impact of choice and selection on medical school outcomes. Without this the project will have to wait 7 years post-application for any data on outcomes.
48. The Board was pleased to hear that UKMED had been able to provide the data to enable the kind of projects that use the database to its full potential.
49. Dr Katherine Woolf thanked the Board for their support on the project.

Summary of actions from Friday 17 May 2019 UKMED Advisory Board meeting and carried forward from earlier meetings

Action from May 2019	Status
(i) To obtain MMI data from medical schools.	In progress

<p>(ii) To collect module data from medical schools. Update: Schools do not use module data, the proposal is now to use assessment data.</p>	<p>In progress</p>
<p>(iii) Research Sub-Group to develop a check list and a dashboard for researchers to monitor and check their progress towards publication.</p>	<p>In progress</p>
<p>(iv) UKMED team to explore setting up a user group or webinars for UKMED researchers to exchange ideas and good practice.</p>	<p>In progress – ETA March 2019</p>
<p>(v) Andrew Ledgard to put together a UKMED policy paper outlining why a motivated intruder test is not required, given the current safeguards and governance in place.</p>	<p>To be circulated offline</p>
<p>(vi) Evaluation forms to be sent routinely to researchers at the end of their project by OSK.</p>	<p>In progress</p>
<p>(vii) Daniel Smith and Peter Tang to produce a discussion paper for the next MSCSA Board meeting on in October.</p>	
<p>(viii) GMC to provide further updates on the progress of obtaining clinical outcome data.</p>	
<p>(ix) GMC to send the test providers a specification for the requested meta-data.</p>	
<p>(x) Daniel Smith to explore the issues preventing UKMEDP085 and UKMEDP097 from progressing, which requires additional data from the Joint Royal Colleges of Physicians Training Board (JRCPTB).</p>	

<p>(xi) Olga Sierocinska King to notify UKMEDP022 researchers of the Board's decision to publish the paper on the UKMED website.</p>	
<p>(xii) Daniel Smith and Olga Sierocinska King update the publication rules for publications including preliminary findings presented at conferences.</p>	
<p>(xiii) Daniel Smith and Richard O'Kelly to explore whether UCAS data can be included in the workforce planning extracts.</p>	

Glossary

ADRN	Administrative Data Research Network, www.ADRN.ac.uk
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, www.admissionstestingservice.org/for-test-takers/bmat/about-bmat
COPMeD	Conference of Postgraduate Medical Deans (UK), www.copmed.org.uk
DH	Department of Health, www.gov.uk/government/organisations/department-of-health
DPA	Data Protection Act, www.gov.uk/data-protection/the-data-protection-act
EEA	European Economic Area
EPM	Educational Performance Measure
FPAS	Foundation Programme Application System
FtP	Fitness to Practise
GAMSAT	Graduate Medical School Admissions Test, www.gamsat.acer.edu.au
GDPR	General Data Protection Regulation, https://www.gov.uk/government/collections/data-protection-act-2018
GMC	General Medical Council, www.gmc-uk.org
HEE	Health Education England, www.hee.nhs.uk
HEIW	Health Education and Improvement Wales, www.heiw.nhs.wales
HES	Hospital Episode Statistics, www.digital.nhs.uk/data-and-information/data-tools-and-services/data-services/hospital-episode-statistics
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)
LRMP	List of Registered Medical Practitioners
MSC	Medical Schools Council, www.medschools.ac.uk
NES	NHS Education for Scotland, www.nes.scot.nhs.uk
NIHR	National Institute for Health Research, www.nihr.ac.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
SJT	Situational Judgement Test
UCAS	Universities and Colleges Admissions Service, www.ucas.com
UCL	University College London
UCAT	University Clinical Aptitude Test, www.ucat.ac.uk
UKFPO	UK Foundation Programme Office, www.foundationprogramme.nhs.uk
WPG	Work Psychology Group, www.workpsychologygroup.com