

SAPC HoTs (Heads of Undergraduate GP Teaching)

Up-date July 2022

Undergraduate teaching in general practice

Current priority work areas for SAPC Heads of Teaching Group (HoTS):

1. Undergraduate teaching finance.

On 31 March 2022, following more than ten years of negotiations a new undergraduate tariff was announced in England which for the first time introduces consistent national resourcing of medical student clinical teaching regardless of setting. This development addresses longstanding concerns in relation to significantly lower government funding of undergraduate GP and community-based teaching as compared to hospital-based teaching. It also aims to harmonise previously variable local funding mechanisms in relation to undergraduate GP teaching.

The tariff figure in English medical schools from Sept 2022 will be £30,750 (plus regional market forces factor) per full time equivalent student per year in all settings, representing an increase of at least 10% over the previous minimum tariff for undergraduate primary care education of £28,000. We understand that the Welsh Government has also agreed to match the English tariff. Scotland had already introduced a comparable rate in 2019.

In addition to helping to increase GP teaching capacity and promote general practice as a positive career choice for medical students the new harmonised tariff provides welcome recognition of the importance of providing all future doctors with high quality experience in general practice and primary care.

The 2022-2023 Education and training tariff guidance for England and can be found at:

<https://www.gov.uk/government/publications/healthcare-education-and-training-tariff-2022-to-2023>

2. National curriculum guide for undergraduate general practice

The updated version of the joint RCGP/SAPC document *“Teaching General Practice: Guiding principles for undergraduate GP curricula in UK medical schools”* is available at:

<https://www.rcgp.org.uk/training-exams/discover-general-practice/medical-students/undergraduate.aspx>

We have also published an accompanying set of learning resources expanding on the themes incorporated in the curriculum guide. Contributions have come mainly from UK HoTs and also some invited content experts. *“Learning General Practice”* is also now available at:

<https://www.rcgp.org.uk/training-exams/discover-general-practice/medical-students/undergraduate.aspx>

3. Virtual Primary Care

In partnership with the Medical Schools Council (MSC) and the producers of the Channel 5 television series “GPs: Behind Closed Doors” The HoTs group collaborated in 2020 to develop an innovative video learning resource called “Virtual Primary Care (VPC)” Hosted on the MSC website VPC provides all UK medical schools with access to 150 professionally produced videos of “real life” consultations with GPs and other primary care clinicians. Every consultation is tagged for clinical and educational content, and accompanied by an educational guide with associated learning points, references and suggested activities to help students face new challenges around learning medicine through GP experiences in the aftermath of the pandemic. In 2022 we have gone on to develop “VPC – PG”, a postgraduate version of the resource which is now being piloted by HEE in England and Nes in Scotland with GP trainees. Initial feedback is positive and we hope that the resource may be rolled out to all UK GP trainees during 2023. SAPC is also working closely with the Medical Schools Council on governance and guidelines in relation to remote consultations involving medical students and patients.

4. Introduction of national Medical Licensing Assessment (MLA)

Starting in academic year 2024-25 all UK medical students in order to graduate will be required to pass the [MLA](#) as part of their medical school degree, before they can join the medical register. Also from early 2024 all international medical graduates who would previously have sat the Professional and Linguistic Assessments Board (PLAB) test will have to take the MLA if they’re applying for registration with a licence to practise in the UK. The MLA will be led by MSC and regulated by GMC. Several working groups are developing the question bank and piloting is already taking place.

SAPC and RCGP are very keen that general practice as a discipline and not just a location should be well represented in the MLA. We feel strongly that the assessment should encourage learning of both general practice “medicine” and core features of primary care eg around generalism, continuity of care, social determinants of health (as detailed in the APC/RCGP documents [Teaching General Practice and Learning General Practice](#)) There is some concern that undergraduate GP teaching leads have not thus far been very involved in developing the structure or content of the MLA. MSC MLA leads (Veronica Davids and did meet with SAPC Heads of Teaching in December 2021 and it is hope that this will result in greater collaboration and discussion.

5. Promoting general practice as a positive career choice for medical students.

GP recruitment concerns remain topical and promoting general practice as a positive career choice for graduating students continues as one of our top priorities along with ensuring that future secondary care doctors have appropriate experience in primary care at undergraduate level. (Ref: Wass Report: [By Choice not by chance](#).)

6. New Medical Schools

Five new English medical schools are now offering student places ie Sunderland, Edge Hill, Anglia Ruskin, Lincoln and Kent. Further new schools are in the pipeline or proposed (some still subject to GMC approval) at Ulster University, Brunel University, Bangor University, University of Bradford,

University of Chester, University of Worcester (Three Counties Medical School) and University of Cumbria (at Carlisle). Edinburgh University has now completed the first year of a new medical degree programme (HCP-Med) providing a unique route specifically for experienced healthcare professionals to train as doctors. Government also has proposals to introduce a new range of medical degrees by apprenticeship. *Whilst SAPC and RCGP appreciate the key drivers (workforce and widening participation) of expanding medical school and medical student numbers significant concerns remain to be addressed regarding capacity for increased demand on clinical placements and potential risks of “two tier” medical degrees.*

7. Teaching capacity in general practices.

Recruitment and retention of practices to host undergraduate GP placements continues to be a challenge. Improvement in funding will hopefully help, but other innovations and incentives are being implemented in order to increase placements available. Near Peer teaching whereby postgraduate GP trainees are engaged in undergraduate teaching has been a very positive development in some areas. A [Near Peer Teaching Special Interest Group](#) has recently been established within SAPC. We hope that Near Peer teaching can eventually be embedded in the GP training programme nationally

8. Promoting options for academic experience within GP training programmes.

We continue to work with HEE GP Schools, NIHR, universities and RCGP to promote clinical academic training programmes in order to prepare the next generation of primary care academics. It is encouraging that NIHR have this year supported a number of themed Academic Clinical Fellowship (ACF) posts in medical education.

9. Promoting educational research in primary care

Working in partnership the SAPC Educational Research Special Interest Group (led by Sophie Park and Hugh Alberti) the HoTs group provides an informal network in order to develop research questions and collect data related to undergraduate primary care education. Enquires are welcome from any colleagues interested in developing research ideas.

10. Retired clinicians and undergraduate teaching

Many GPs may wish to continue contributing to undergraduate teaching during career breaks, or after retirement from clinical practice. The HoTs supports this, recognising the benefits of being able to retain experienced clinicians and teachers in teaching and assessing students. In collaboration with the RCGP Later Career and Retired Members Group (LCARM) we have produced a short document aiming to support individual medical schools in developing a clear but flexible policy based on common experiences and expert views.

11. **Enhancing recognition for undergraduate GP Educators**

Reward and career development opportunities for university based primary care educators remains a priority matter for the HoTs group.

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