



**Royal College of Surgeons in Ireland
University College Dublin**

**Institutional Quality Review
Penang Medical College, Malaysia**

Final Report
PMC response (Appendix 1)
Site visit schedule (Appendix 2)
Accepted by the UCD Governing Authority at its meeting on 21 October 2014

May 2014

1. Introduction and Overview

1.1 Background of the Review Process

1.1.1 This report considers the institutional collaboration between the University College Dublin (UCD) and the Royal College of Surgeons in Ireland (RCSI) with the Penang Medical College (PMC) in Penang, Malaysia. UCD is a constituent university, and the RCSI a recognised college, of the National University of Ireland (NUI). Both are 'designated awarding bodies' as defined by the Qualifications and Quality Assurance (Education and Training) Act 2012. The objective of this partnership is to deliver quality medical education culminating in the award of the MB BCh BAO degrees of the NUI and the Licentiate of the Royal College of Physicians in Ireland and the Royal College of Surgeons in Ireland (LRCP&SI) on graduates from Malaysia and the surrounding region.

1.1.2 Under the Qualifications and Quality Assurance (Education and Training) Act 2012, a 'designated awarding body', ie. UCD and RCSI, is legally required to review the quality assurance procedures of a 'linked provider', i.e. PMC, where an award in respect of a programme of education of the 'designated awarding body' is delivered wholly or in part by the 'linked provider'.

1.1.3 The purpose of the institutional quality review and site visit to PMC was to assist UCD and RCSI to assure themselves of the quality and standards of their own provision and the validated provision, delivered at off-campus locations. The Review Panel was tasked:

- to clarify and verify the details in the Self Assessment Report (SAR);
- to verify how well the aims and objectives of the unit are being fulfilled, having regard to the available resources, and comment on the appropriateness of PMC's mission, objective and strategic plan;
- to evaluate PMC's strengths, weaknesses, opportunities and challenges as outlined in the SAR;
- to discuss any perceived strengths and weaknesses not identified in the SAR
- To assess the effectiveness of the quality assurance/quality enhancement arrangements;
- to assess the suitability of the working environment(s);
- to comment on any recommendations proposed by PMC in its SAR;
- to make appropriate recommendations for improvement, with due consideration of resource implications; and
- to comment on the potential of future institutional quality reviews to merge and/or complement respective Medical Council and other agency accreditation documentation/site visits.

1.3.4 This was the first joint review of collaborative provision by UCD and RCSI.

1.2 Review Methodology

1.2.1 The Review Group received a Self Assessment Report (SAR) prepared by PMC prior to the site visits to Dublin and Malaysia. Additional documentation was requested by the Review Group during the visits.

1.2.2 The Review was conducted by the following reviewers:

- Ms Sarah Butler, Special Adviser on Academic Quality, University of Sussex, UK (and seconded to the Quality Assurance Agency for Higher Education (QAA) as Assistant Director in the Research Development and Partnerships Group, UK) (Chair)
- Dr John Jenkins, Consultant Paediatrician (retired) and current President of the UK Association for the Study of Medical Education (External)
- Dato' Dr Abdul Hamid Abdul Kadir, Professor and Head, Dept of Orthopaedics, Faculty of Medicine, MAHSA University College, Kuala Lumpur (External)
- Professor Grace Mulcahy, Head, School of Veterinary Medicine, University College Dublin (Internal)
- Professor Paul Gallagher, Head of School of Pharmacy at RCSI (Internal)
- Mrs Karen Henderson, Team Lead Quality Assurance at Queen's University Belfast (Rapporteur)

1.2.3 The Quality Review comprised two site visits. The Review Group visited UCD in the first instance to meet with staff and students from UCD and RCSI. The Review Group then visited PMC to meet with PMC staff, students, alumni and stakeholders.

- **2 May 2014 – UCD/RCSI**
- **6 – 8 May 2014 – Penang Medical College**

1.3 The Partners

University College Dublin

1.3.1 University College Dublin (UCD) is a large and diverse university whose origins date back to 1854. The University is situated on a large modern campus about 4 km to the south of the centre of Dublin. The University is organised into 38 schools in seven colleges. The UCD School of Medicine and Medical Science is located within the UCD College of Health Sciences.

1.3.2 UCD supports a broad, deep and rich academic community. There are currently more than 25,000 students registered on University programmes, including over 5,000 international students from more than 124 countries.

- 1.3.3 The UCD School of Medicine and Medical Science is one of 3 Schools within the UCD College of Health Sciences. The School offers medical education with the awards of MB BCh BAO, postgraduate taught programmes and research degrees.
- 1.3.4 The School currently has around 1,760 undergraduate students, 216 research postgraduates and over 499 taught postgraduates. It has 271 academic, research, administrative and technical staff.

Royal College of Surgeons in Ireland

- 1.3.5 The RCSI was established by Royal Charter in 1784. RCSI is both (a) a health sciences Higher Education Institution with Schools of Leadership, Medicine, Nursing, Pharmacy, Physiotherapy and Postgraduate Studies and (b) a Postgraduate Training Body in Surgery and related specialties. RCSI is one of four Royal Colleges of Surgeons in Great Britain and Ireland (Edinburgh, England, Glasgow and Ireland) which espouse standards of excellence in surgery as their guiding principle. The RCSI School of Medicine was established in 1886 and RCSI became a Recognised College of the National University of Ireland (NUI) in 1978.
- 1.3.6 In the decade from 1996 to 2006, RCSI underwent significant expansion through the establishment of additional Schools/Institutes on the Dublin campus, and of three new international campuses (Penang Medical College, RCSI-Bahrain and RCSI-Dubai). Following an institutional review commissioned jointly by the Higher Education Authority and the National Qualifications Authority of Ireland, RCSI was granted independent degree awarding powers in 2010. In 2011, RCSI entered into a licensing agreement with Perdana University (Kuala Lumpur, Malaysia) to establish the PU-RCSI School of Medicine.
- 1.3.7 RCSI currently has 2338 undergraduate students, and 828 postgraduate students. It has 956 academic, administrative and technical staff.

Penang Medical College, Malaysia

- 1.3.8 The RCSI and UCD established Penang Medical College (PMC) in 1995 at the request of the then Penang State Government and medical fraternity in Penang. The objective was to deliver quality medical education culminating in the award of the internationally recognised MB BCh BAO degrees from the institutions. Since its inception, the course has been conducted on a joint basis between Dublin and Penang: a pre-clinical element being delivered at either UCD or RCSI and most of the clinical course being delivered in Penang.
- 1.3.9 PMC was established in 1996. At that time the College had three owners – UCD, RCSI and the Penang Development Corporation. In 2012, Penang Development Corporation transferred its shareholding to RCSI and UCD therefore allowing PMC to become a wholly owned college of RCSI and UCD. The College was granted approval to apply for upgrading to branch campus status, subject to a number of conditions being met within five years. A change of status is required as private colleges in Malaysia may not be wholly foreign-owned.

- 1.3.10 The first cohort of PMC students started the MB BCh BAO programme in 1996 and to date 13 cohorts of doctors have graduated, highlighted by the 1000th graduate in June 2013. PMC currently recruits around 150 students per year onto the programme.

Collaborative structure and awarding responsibilities

- 1.3.11 The Review Group learned that the MB BCh BAO programme structure was challenging in terms of a collaborative arrangement (although this was not immediately clear from the SAR). As noted in 1.3.8 above, the programme is a 2.5 plus 2.5 structure with students taking a pre-clinical element at UCD or at RCSI. It was also offered as a 1 plus 2.5 plus 2.5 in the case of students taking the initial Foundation Year option at PMC. However, the pre-clinical component is different at each of the two providers in some significant ways (eg the scope to take elective options at UCD and differences in pedagogical and assessment approaches). Despite this, students return from Dublin to take a common clinical component delivered at Penang which must of necessity take account of the different pre-clinical components delivered in Dublin. The degree is awarded by the National University of Ireland (NUI) and the certificate refers to conferral of the award to students who have successfully completed the approved courses of study and passed the prescribed examinations of *either* UCD *or* RCSI (depending on which of the two was attended in Dublin) and PMC. Although the award is formally that of the NUI which appoints external examiners on the recommendation of UCD and RCSI, the Review Group understood that the operational responsibility for academic standards and quality rested with UCD as a constituent university of NIU and RCSI as a recognised college of NUI and in their roles as designated awarding bodies under the Qualifications and Quality Assurance (Education and Training) Act 2012. A focus of the Review Group's enquiry was how effectively the two Irish institutions collaborated in the discharge of their responsibilities for their jointly owned college in Malaysia.

2. Institutional Self-Assessment Report

- 2.1 At the initial stages of planning for the Quality Review, Dr Claire Lacey, Assistant Registrar-Academic PMC, liaised directly with the Director of Quality Enhancement, Professor David Croke, RCSI and the Director of Quality, Dr Roy Ferguson, UCD. This included a visit by both Directors to PMC where a SAR template was proposed, a provisional schedule was mapped out and a peer review group nominated.
- 2.2 The SAR was compiled by a seven member peer review group from PMC, led by Dr Lacey. The team met on a number of occasions over two months to discuss the content of the SAR, to divide the responsibility for components of the SAR across the group as well as nominating reviewers for each section and agreeing deadlines.
- 2.3 The team carried out a staff survey and used the results of the survey and student feedback data, together with input from individuals and departments to form the basis of the report, working to the template provided by UCD and RCSI.
- 2.4 Although the Review Group felt that this was a useful, and, in parts, reflective document, which made good use of SWOT analyses and the survey results, there was some concern

regarding gaps in documentation and evidence and additional documentation was requested and provided during the site visits.

- 2.5 It appeared to the Review Group that, although input had been sought from the Shareholder Group of UCD and RCSI, there had been limited engagement from both institutions in the preparation of the report and analysis of PMC's strategic direction.
- 2.6 The Review Group was also concerned at the low level of familiarity with the SAR demonstrated by those staff and students from across the institutions who met with the Group during the site visits.

3. Inter-Institutional Governance and Oversight

- 3.1 PMC is a wholly owned college of both UCD and RCSI. The Group met with staff and students from each of the institutions. PMC faces some significant risks at present, including the withdrawal of sponsorship by Majlis Amanah Rakyat(MARA) and Jabatan Perkhidmatan Awam (JPA), and the need to position itself as a branch campus or University College. The Group was concerned that the risk of over-reliance on sponsored places had not been identified at an earlier stage by PMC, UCD or RCSI and no plans had been put in place to mitigate such a risk. The Group would advise UCD and RCSI to work together with PMC to carry out a full risk analysis of the PMC arrangement, as a matter of priority, in order to mitigate future risks, to include this in all three institutional risk registers and to refresh the analysis on a regular basis.
- 3.2 The Review Group noted that PMC had undergone recent changes in senior management personnel and was in the process of restructuring. The Group noted that a number of committees had been proposed but had not yet met, i.e., strategic planning committee, research committee, risk and audit committee, and postgraduate studies committee. The Group welcomed the new organisational and executive structures and advised that they should be closely monitored and reviewed for effectiveness.
- 3.3 The PMC is overseen by a Board of Directors which consists of senior staff from each institution and oversees the strategy of the arrangement. This Board takes advice from a local Advisory Board. At present the Board has been concentrating on the short-term goal of ensuring that sufficient students are recruited and on the restructuring and new appointments for PMC. However the Review Group would recommend that the Board of Directors should, as a matter of urgency, oversee the development of a prioritised medium to long term strategic plan for PMC which should:
- align with the institutional strategies of UCD and RCSI;
 - resolves the status of PMC as a University College or Branch Campus;
 - take into account the whole 5/6 year MB BCh BAO programme;
 - reflect the strengths of each of the partners in widening the portfolio,
 - identify the impact on all three institutions

The strategic plan should be accompanied by a plan for implementation which identifies priorities, time-scales, roles and responsibilities and any attendant risks.

The Group noted that a Strategic Planning Committee had been set up and would encourage it to work with the Board as a matter of urgency.

- 3.4 The Review Group could not find clarity as to how the Board reported to UCD and RCSI on business issues such as finance and risk. The Review Group would recommend to UCD and RCSI that formal reporting lines for finance/ risk and business interests are established into the governing authorities of each institution.
- 3.5 The constitution of the Academic Council includes senior managers from RCSI, UCD, PMC and the Registrar of NUI. This Committee meets three times per year and approves academic policy, curriculum, senior academic appointments and promotions, quality assurance and accreditation and acts as the Board of Examiners for PMC. This constitution and remit of this body appeared to provide a secure basis for academic governance of PMC involving the relevant senior officers from all partners and the execution of a range of functions at the appropriate level. The SAR indicated that there were reporting lines to both UCD and RCSI to ensure accountability but it was less clear from discussions with staff as to exactly what these were. The Review Group Recommended that reports from the PMC Academic Council should be submitted to the UCD Academic Council and the Medicine and Health Sciences Board in RCSI.
- 3.6 The Review Group noted in particular the Academic Executive Committee and its key operational role in academic governance. Academic Executive Committee brings together senior staff from RCSI, UCD and PMC. The Group found that it dealt effectively with a wide range of issues. The Group recommended that PMC should build on this by:
- ensuring immediately that the 5/6 year MB BCh BAO programme was addressed as an entity so that the impact on the PMC clinical component of curriculum change to the pre-clinical component at UCD and/or RCSI is anticipated and jointly planned for;
 - expanding the terms of reference of the Group from next academic year to include a formal holistic review of quality assurance of the MB cBCh BAO programme; and
 - considering a formal reporting mechanism for the subsidiary academic committees (Curriculum Development Committee, Medical Education Community of Practice, Library Committee, Student Liaison Committee, Research Committee and Postgraduate Studies Committee) into the Academic Executive Committee rather than solely to the President.

In addition the Group would recommend that the institutions build upon the good work of the Academic Executive Committee in order to provide clearer lines of communication and integration across the three institutions.

- 3.7 The Review Group noted the proposed executive structure which has not yet been fully implemented as the PMC awaits the appointment of the Chief Operating Officer and will also be replacing the Registrar after he retires in September 2014. The Review Group found some conflict or duplication in the job description for Vice-President with what was indicated for other roles in the new executive structure (particularly with regard to strategic planning). The Group recommends that this is investigated and resolved and that the Board ensures, with immediate effect, that the structure provides for clear delineation of

responsibility for the delivery of the strategic plan. In addition, the Review Group would recommend that formal job descriptions are produced for all officers in the executive structure and that the structure is reviewed regularly for effectiveness.

- 3.8 The Review Group acknowledged the experience and capability of the new Chief Executive Officer/President/Dean but would advise that this job description is reviewed to ensure that it remains at a strategic level and is not too wide-reaching.
- 3.9 The Review Group saw evidence of a close operational working relationship between PMC and the two Dublin institutions through communication with departmental heads, the Academic Executive Committee, the Boards of Examiners and the Academic Council.
- 3.10 Although the Review Group was impressed by the quality of staff and students in each part of the MB BCh BAO programme and how it was governed, there was a clear issue surrounding the totality of the programme and how it did not consistently appear to be considered as a whole by the three partner institutions. This is an issue which runs throughout this report but is highlighted here as a strategic issue. Whilst the governance in each individual institution for the respective component of the programme was relatively clear, there was a lack of clarity around the governance for the whole programme/arrangement which involved all three institutions. The Review Group assessed that there was a need for a shared understanding across the three institutions of governance and their related roles and responsibilities. This should be documented in the revised Memorandum of Agreement. In addition there is a need for oversight of the whole programme by the awarding bodies.

4.0 Institutional Management of Academic Standards and Quality Arrangements

- 4.1 The Review Group acknowledged that a small organisation such as PMC is able to deal with any problems or issues which may arise in a timely manner. There was evidence that this was done effectively and that PMC was delivering a high quality programme. However, such ad hoc actions militate against a strategic overview which can be used to identify themes or trends and may provide for more pro-active problem solving or systematic enhancement.
- 4.2 Although various elements of quality assurance are in place, there is no holistic overview of the MB BCh BAO programme on an annual basis taking into account all available evidence including, for example, external examiner reports, self-reflection, trend analysis of key statistical data and student surveys. The Review Group would encourage the College to further develop a culture of quality for the institution as a whole which is proactive and includes an annual review across departments which will identify issues for improvement and also identify and disseminate good practice. Such an approach would be vertical across the whole five year programme and horizontal, looking across all departments. The locus of responsibility for setting standards and for quality assurance is not clear within the proposed executive structure. This should be clarified.
- 4.3 Student views are very important in identifying issues and good practice. At present students may provide lecturer feedback and there is also student representation on the

Curriculum Development Committee. It is suggested that this may be broadened to allow students input to module review and an annual process of programme review.

- 4.4 In meetings with staff and students there was no doubt that feedback was very positive. The students proved to be excellent advocates for UCD/RCSI and PMC. The students articulated clearly the perceived differences in the pre-clinical components experienced at UCD and RCSI in terms of pedagogical approach and assessment strategies.
- 4.5 Each department carries out quality assurance through student surveys, teaching reviews and module reviews. The Review Group noted that the College wishes to expand its use of student surveys and would encourage this. The College should ensure that students are kept informed of any changes made in response to the surveys. In addition, the Review Group suggested that PMC should canvass a wider range of views (alumni, interns, employers) on the effectiveness of the programme. All departments should regularly consider student feedback/evaluations.
- 4.6 It is clear that communication has been improving both within PMC and with the Dublin institutions and there is more liaison between staff who work on the full MB BCh BAO programme. In addition, PMC makes use of the same external examiner as UCD/RCSI and staff from PMC may sit on the Examination Boards at the Dublin institutions.
- 4.7 It was not clear to the Review Group which regulations applied to the arrangement at PMC and clarity about whose regulations apply to an award in which there are four partners is critical. There is a need for a comprehensive set of general regulations for the 5/6 year MB BCh BAO programme as a whole (outlining such issues as periods of registration, appeals, intermission, complaints, awards and aegrotats etc.) and which take account of the fact that, although there are two designated awarding bodies, the students complete a common clinical component and it would be invidious to treat them differently depending on where their pre-clinical component had been taken. PMC were unable to explain what academic regulations governed the PMC clinical programme and similarly there needs to be academic regulations which UCD and RCSI agree jointly for the conduct of the PMC clinical component (covering assessment, resits/repeats, extenuating circumstances, operation of the examination board etc).
- 4.8 It was difficult for the Group to identify how academic standards were set and monitored for the programme as a whole. The Group recommended that PMC should develop appropriate procedures for defining and setting appropriate assessment standards in conjunction with UCD/RCSI. These should be implemented as from next academic year.
- 4.9 The Group would also recommend a more comprehensive approach to monitoring standards and that:
- PMC takes a holistic five year view of grade distribution as a means of monitoring standards
 - metrics should be developed to provide a more objective approach to the regular review and comparison of standards between students on the same degrees across the

partners (UCD,RCSI and the PMC programme). In addition, it may be useful for PMC to benchmark Key Performance Indicators against Malaysian comparators.

- 4.10 The Review Group was concerned about the current Student Record management arrangements which depended on a number of different spreadsheets. The Review Group was concerned about the accuracy and security of the current arrangements and would recommend as a matter of urgency that a comprehensive, integrated and secure Student Management System be introduced (driving admissions, progression, examination and award, and curriculum management etc).

5. Institutional Management of Learning Opportunities

- 5.1 The Review Group noted that the MB BCh BAO programme had been externally reviewed and accredited by a number of bodies including the Irish Medical Council, Malaysian Medical Council, Thai Medical Council, Sri Lanka Medical Council and the Malaysian Qualifications Agency. In addition, the programme has been recognised by the Indonesian Medical Council.
- 5.2 PMC is based on two campuses which are close together, Sepoy Lines campus and Residency Campus. The Review Group had a short tour of the facilities within PMC and visited Penang Hospital, which is the second largest Ministry of Health hospital in Malaysia. The clinical teaching facilities are satisfactory. The College has the use of four hospitals for clinical placements. The Review Group was unable to visit the other sites but noted that the SAR indicated that there were a number of issues regarding the other sites such as the need for further developments such as the establishment of teaching centres, effective assimilation of students into clinical teams and the possibility of the appraisal of non-PMC faculty with teaching roles. The Group would encourage the College to continue to address these issues. The use of Penang Hospital on an exclusive basis provides excellent opportunities for the students; the abundant and varied nature of the caseload provides an ideal base for clinical teaching. It is a clear benefit that students experience clinical practice in the same context that they will eventually practise. The use of the hospitals is formalised in a ten year memorandum of agreement with the Ministry of Health.
- 5.3 The students have indicated that they are satisfied with the facilities and are very articulate and supportive of the programme as a whole. Students on the pre-clinical components in Dublin would appreciate more feedback from their teachers.
- 5.4 The availability of senior, very experienced medically-qualified academic staff, who, free from competing clinical and administrative responsibilities, can apply their vast clinical experience to teaching on a whole-time basis is commendable. The high calibre, clearly committed teaching staff with a strong focus on teaching could provide opportunities for PMC and UCD and RCSI to work together in developing scholarship in medical education.
- 5.5 The use of MOODLE as a Virtual Learning Environment is appreciated by staff and students and the Review Group would recommend PMC give consideration to up-skilling staff in the use of MOODLE and provide support for exploiting this to its full potential.

- 5.6 The Review Group was concerned at the apparent current lack of strategic approach to the 5/6 year MB BCh BAO programme as an entity. The Group recommended that a holistic approach to the development of a learning, teaching and assessment strategy across the whole 5/6 years should be adopted taking account of the differences in curricula and pedagogic approach between the alternative UCD and RCSI pre-clinical components. UCD/RCSI and PMC should work together as partners to enhance the curriculum and anticipate and pre-empt issues which might arise from the two separate pre-clinical streams.
- 5.7 Students too need to have a coherent view of the programme and should be provided from the outset with easily accessible information on the programme as a whole. There is a need for a document which sets out the full 5 year programme for students and staff alike (6 year programme for foundation year students). This could be expanded into a curriculum map to indicate what can be expected of students. The Review Group was impressed by the blueprint prepared for the review by the Malaysian Qualifications Agency and would recommend building upon this across all departments to ensure constructive alignment between teaching, assessment and learning outcomes across the whole degree programme.
- 5.8 The Review Group was very pleased to note the good informal and friendly relations between the student body and the academic and support staff. The academic staff and clinicians who teach were clearly impressed by the quality of the students on the programme.
- 5.9 The Review Group noted the effective work of the Curriculum Development Committee (CDC) and would advise the College to look at ways in which teachers who are not members of this Committee can have a formal input. The Review Group would encourage the Committee to:
- conduct a major curriculum review on a periodic basis involving Malaysian stakeholders (Ministry of Health, MMC, Ministry of Education) and professional bodies such as Academy of Medicine Malaysia and Malaysian Medical Association with participation by educationalists from local public medical schools to ensure an appropriate range of specialties and sub-specialties within the full MB BCh BAO programme;
 - consider ways of making opportunities for non PMC Dublin students to take electives in Penang; and
 - consider how reflective practice is engendered through the programme.
- 5.10 The Review Group commends the College on the interdepartmental approach taken to embed in the curriculum the 8 professional attributes for professionalism and the ten domains of safety derived from the WHO Patient Safety Guide.
- 5.11 The Review Group also noted the extra-curricular activities which are available for students such as involvement in community projects.
- 6.0 **Student Recruitment and Admissions**
- 6.1 The College is facing a significant challenge with the withdrawal of sponsorship in 2014 by MARA and in 2015 by JPA.

6.2 The Admissions/Student Recruitment (ASR) Group has been set up and works well between UCD/RCSI and PMC in considering different kinds of recruitment to replace the sponsored places. The College had relied heavily on sponsored places in the past and had to produce new marketing materials for the potential markets of international and local private students. The Review Group commend the formation and initiative of the ASR Group which has provided an integrated approach and effective joint working to endeavour to meet the challenges regarding recruitment. The ASR Group has initiated and carried out a number of actions including:

- rebranding and generation of new marketing materials;
- development of new PMC website with online application form;
- school visits and seminars in Malaysia, Indonesia and Sri Lanka;
- recruitment at Education fairs in Malaysia, Philippines and Singapore; and
- extending recruitment to Unified Examination Certificate (UEC) schools (Chinese system schools).

6.3 The Review Group is of the opinion that the ASR Group would derive significant benefit from carrying out a root cause analysis which would give the institutions an opportunity to reflect on this situation and then put into place appropriate actions. Taking account of the results of this, the ASR Group should develop a longer term strategy based on effective market research, consistency and transparency, whilst maintaining the appropriate quality of student intake.

6.4 The admissions criteria for MB BCh BAO are set by UCD and RCSI and whilst the Group was in general satisfied that the admissions procedures were carried out in a consistent and transparent way, there was evidence that not all admissions interview panels had a representative from RCSI or UCD as required by the procedures.

6.5 With a planned increase in private students, the Review Group would highlight a possible issue regarding competition between UCD and RCSI as private students are more likely to exercise a choice. This is a factor that the institutions may have to manage in the future.

6.6 The institutions should also be aware of the potential issues regarding internships for international students in Malaysia, given that non-Malaysian students cannot obtain internships in Malaysia.

6.7 The Review Group met with Foundation Year students and was impressed by the quality of these students who had just missed the admissions criteria for entry to the 5-year programme.

7.0 Research and Postgraduate Programmes

7.1 The Review Group acknowledged the current research carried out by staff within the College including the Cochrane Network for Malaysia, and membership of the BOLD network with Imperial College London and the Asian Network of Obstructive Lung Disease.

- 7.2 The Review Group commended the College on its efforts to establish a research portfolio, building on its embryonic research strengths and setting up a Research Committee in order to develop a research culture.
- 7.3 The Review Group recommended that the College should continue to develop a sustainable research strategy with clearly prioritised areas, drawing on expertise from RCSI and UCD to develop this strategy. The current links established with Medical Education Research Group in RCSI would be of use in that manner. The research strategy should include an implementation plan that takes account of the new strategic direction of the College and the issue of the viability of the College with respect to feasibility of new admissions.
- 7.4 The development of a research strategy and research culture would be of enormous benefit to students, providing them with a comparable experience to that of RCSI/UCD clinical students. Efforts should be made to provide enhanced opportunities for students to develop research skills and actively engage in research.
- 7.5 A research infrastructure should also be of benefit to staff providing them with support such as protected research time, access to appropriate journals and seed funding. In addition, staff who do not have research degrees could be encouraged to undertake them, and be supported in the process.
- 7.6 The Review Group would commend the College for its recent efforts in developing postgraduate programmes and the recent establishment of a Postgraduate Studies Committee. The programmes are in areas of good practice and build upon or replicate the Dublin curriculum. The College has asked the Ministry of Health about unmet needs and so can have a ready market for the programmes. The development of a postgraduate portfolio will assist the College in preparation for branch campus status if agreed.
- 7.7 The Review Group would advise the College to liaise closely with UCD/RCSI before investigating possible links with other universities and would encourage the development of an approved postgraduate portfolio in a planned and strategic manner.

8.0 External Links

- 8.1 The College has excellent links with a number of accrediting bodies, including the Irish Medical Council, the Malaysian Medical Council and the Malaysian Qualifications Agency. The College has been accredited most recently by the Irish Medical Council in 2012, and the Malaysian Medical Council and Malaysian Qualifications Agency in 2013. In addition, the College has been accredited by the Malaysian Ministry of Higher Education as a private college.
- 8.2 The College has a Memorandum of Agreement with the Ministry of Health to provide clinical placements in three hospitals with sole access to Penang Hospital.
- 8.3 The Chief Executive/President/Dean is the chair of the Council of Deans of Private Institutions of Higher Education in Malaysia. Staff in the College are members of national professional bodies and professional networks.

8.4 Staff and students are involved in community outreach programmes to the local community and indigenous people villages.

8.5 The Review Group commends the College on its excellent links with a range of national and local agencies and hospitals.

9.0 Student Support

9.1 The Review Group was very impressed by the 'family' atmosphere in PMC and the positive views of the students reinforced this.

9.2 The College has a Student Support section which deals with students on an individual basis when issues are identified. The College also employs a part-time student counsellor who is available one afternoon per week. Academic Executive Committee flags up any student issues for resolution. In addition, the students tend to support each other informally and the PMC Students Association may also raise issues with the College in its role as the Student Representative Council.

9.3 The Review Group would recommend UCD, RCSI and PMC to review the student support area to:

- ensure appropriate induction/ orientation and re-orientation (on the return to Penang) and support mechanisms in anticipation of an altered student profile with higher numbers of international students;
- ensure appropriate links between the student support and the registry functions;
- establish a continuum between the pre-clinical and clinical programmes to ensure a pathway between RCSI/UCD and PMC for transmission of information about students who may need adjustments or supervision for academic and non-academic (health, conduct) matters;
- ensure consistent statistical reporting in order to identify any trends which require action; and
- keep under scrutiny the adequacy of the counselling arrangements particularly in the context of a different recruitment strategy.

9.4 The College indicated in the SAR that the number of student support staff may not be adequate at present. The Review Group would encourage the College to consider increasing staff in this important area, particularly given the predicted increase in international students who may require a higher level of support.

9.5 The Review Group agreed that individual students appeared to be well dealt with but there was a need for the College to develop consistent policies and case law regarding extenuating circumstances to also take account of the expectations of UCD and RCSI and ensure parity of treatment. In addition, the Review Group noted that there is no clear policy on reasonable adjustments for students with disabilities and would encourage the College to remedy this.

9.6 It was unclear what complaints procedure applied to the 5/6 year programme as a whole and also what process was in place for appeals to the designated awarding bodies against

decisions of their examination board. In this latter case, the procedures clearly had to take account of the procedures at UCD and RCSI but also to ensure equitable treatment of students on the same 5 (or 6) year programme. The Review Group recommended that UCD and RCSI should jointly address this matter.

- 9.7 The Peer Assisted Learning Scheme provides peer support for students. The Review Group welcomes this scheme and advises that it could be built upon to provide a more structured scheme, for example, providing training for peer mentors.

10.0 Staffing and Staff Development

- 10.1 The Review Group met with academic and professional/technical/support staff and was impressed by the collegial atmosphere and the appreciation by the students of the staff.
- 10.2 The Review Group met with some honorary and adjunct staff (all of whom are senior and intermediate hospital staff) and noted good practice in departments in guidance about teaching expectations and practice provided to these staff. The Review Group would encourage this good practice to be adopted consistently in all departments in the College. The Review Group noted further that honorary and adjunct staff are not formally appraised and recognised the sensitivities around this but would urge some manner of informal assessment to ensure teaching quality.
- 10.3 The Review Group noted that academic staff are appointed in consultation with the Dublin institutions and representatives of UCD/RCSI are involved in interviewing for professorial positions. The qualifications required for appointment are aligned with the requirements of UCD/RCSI staff.
- 10.4 The grading criteria for academic staff have recently been reviewed, taking into account good practice and this has led to an increased rate of promotions amongst the staff.
- 10.5 The Review Group met with professional/technical and support staff and was impressed with the commitment shown by the staff and recognised the vital role of administration underpinning the operation of the College. The Review Group heard that there was little cross departmental working to cover for staff sickness, leaves and vacancies. It recommended that, when recruited, the Chief Operating Officer might look at developing effective working practices to alleviate pressure points as there does not seem to be a systematic appraisal of problems relating to staff shortages in some areas.
- 10.6 There was some confusion surrounding the status of the Employee Continuing Education (ECE) guidelines for staff development and the availability of study leave and funds for studying. The Review Group would encourage the College to clarify the policies surrounding staff development, particularly amongst professional, technical and support staff.
- 10.7 It is recognised that in a small organisation there may be few opportunities for promotion for professional, technical and support staff and the College is recommended to consider other methods of reward and motivation.

10.8 Concerns had been raised in the staff survey about communication within the College. The Review Group noted that all-faculty meetings had now been introduced, together with finance meetings, weekly senior management team meetings and briefing meetings on specific topics. This should alleviate concerns and the Review Group would recommend that the College ensure that there are no gaps in communication particularly to v professional, technical and support staff with regard to future plans and vacancies within the College.

10.9 The Review Group considered the current appraisal system and had some concerns regarding the openness and transparency of its operation.

11.0 Student Information

11.1 Students receive information about the programme in a number of ways: through the website, booklets, course handbook and a very effective peer information system. Although peer information is useful, it should not take the place of official information. With a changing student profile it will be more important to ensure that all information is adequate, accurate and timely and to correct the current over-reliance on peer information.

11.2 There is a gap in information – at present there is no overall course map for the MB BCh BAO programme which shows the full journey from PMC to Dublin and back to PMC. This should be remedied immediately. Students also need to be reliably informed about differences between the UCD and RCSI pre-clinical components.

11.3 Students receive orientation for their time in Dublin but do not receive a formal orientation on their return to Penang. It is important that students receive re-orientation for this part of the programme.

12.0 Written Agreement

12.1 The written agreement expires in 2015. The Review Group recommends that the written agreement is reviewed as a matter of urgency in order, *inter alia*, to:

- be more explicit about the nature of the collaboration;
- define the respective roles, responsibilities and obligations of each of the partner institutions;
- define the regulations which pertain to each part of the MB BCh BAO programme and what regulations govern the programme as a whole;
- clarify the quality assurance arrangements which apply to the pre-clinical and clinical components and the MB BCh BAO programme as a whole;
- a statement of arrangements as to how the parties will comply with the statutory requirements of the two jurisdictions; and
- clarify the status of students and their entitlements.

13.0 Conclusion

The Review Group commends the College on its open and honest approach to the quality review and how it has worked to allow the review to progress as smoothly as possible. The Self Assessment Report showed reflection and the meetings with staff and students

provided for useful dialogue. The Review Group was impressed by the bright, articulate and supportive students, the committed and experienced staff, both academic and professional/technical and support staff and the quality of the curriculum which had been accredited by a number of bodies.

The Review Group understands that the College has been and is still going through a challenging time with a change in senior management, a major restructuring exercise which is continuing and the sudden loss of the sponsorship of a majority of its applicants. The College has been making its best efforts, aided by colleagues from UCD/RCSI to deal with these challenges. The Review Group was assured that on an operational level the College was in close communication with counterpart staff in UCD/RCSI.

However, the Review Group had concerns regarding the strategic overview of the arrangement between the three institutions. The lack of an overall strategic plan; the lack of a strategic recruitment plan and the absence of overall programme and general regulations for the 5/6 year MB BCH BAO programme pointed to a short-term focus which will be to the detriment of the arrangement. In addition, the lack of clarity of responsibilities identified between the three parties may cause a lack of ownership particularly with regard to quality assurance and the setting of academic standards. The programme is split into two parts, pre-clinical and clinical and whilst each part may operate well there is a need for a more holistic approach to the programme as a whole which will bring benefits to both students and staff.

The Review Group was assured during the visit that some of these issues were being dealt with and would encourage the Board of Directors to use the review of the Memorandum of Agreement to clarify regulations, responsibilities and priorities alongside the preparation of a strategic plan which should be widely communicated to staff in the College and the respective institutions.

14.0 **Commendations**

The Review Group commends the College on the following:

14.1 The openness and willingness shown by the College in their engagement with the review process, especially given the heavy accreditation burden which the College has borne in the previous three years with external agencies.

14.2 The recent review and strengthening of the management/executive structures within the College

14.3 Students who are bright, articulate, supportive of the College and each other.

14.4 The very positive feedback from hospital clinicians about the calibre of the students.

14.5 Academic and professional/technical/support staff who are committed and work together in a collegial manner.

14.6 The availability of senior, very experienced medically-qualified academic staff, who, free from competing clinical and administrative responsibilities, can apply their vast clinical experience to teaching on a whole-time basis.

14.7 The interdepartmental approach to embedding professional attributes into the curriculum and the steps which have been taken to incorporate teaching of professional development in the context of patient safety.

14.8 The excellent links and relationships with agencies and hospitals.

14.9 The abundant and varied nature of the caseload in Penang General Hospital which makes it an ideal base for clinical teaching.

14.10 The work of the Academic Executive Committee which, although it is a relatively new committee, is a clearly effective working committee.

14.11 The work of the Admissions/Student Recruitment Group which has faced up to the challenges of the loss of sponsorship and works effectively across the three institutions to deal with this in the short-term.

14.12 The use of student surveys and the representation of students in the committee structure.

14.13 The use of the staff survey and the reflective SWOT analysis which can be built upon for a strategic view.

15.0 **Recommendations**

The Review Group recommends the following:

15.1 Strategic Oversight

(a) The Board of Directors should, as a matter of urgency, oversee the production of a prioritised medium to long-term strategic plan for PMC which:

- is aligned with the institutional plans of UCD and RCSI;
- resolves the status of PMC as a University College or branch campus;
- takes account of the whole 5/6 years of the MB BCh BAO programme;
- uses the strength of all parties in widening the portfolio; and
- identifies the impact on all three institutions.

The strategic plan should be accompanied by a plan for implementation which identifies priorities, time-scales, roles and responsibilities and any attendant risks. (Paragraph 3.3)

(b) The three institutions should work together to draft a strategic recruitment plan which takes into account the changing environment for PMC, is based

on a root cause analysis, reliable market research, and brings a clear focus to the recruitment exercise. (Paragraph 6.3)

- (c) UCD and RCSI should work together with PMC as a matter of priority to carry out a full risk analysis of the PMC arrangement in order to mitigate future risks, include this in all three institutional risk registers and refresh the analysis on a regular basis. (Paragraph 3.1)

15.2 Governance and accountability

- (a) UCD and RCSI should establish formal reporting lines for finance/ risk and business interests into the governing authorities of each institution and should ensure that reports from Academic Council are submitted to the UCD Academic Council and the Medicine and Health Sciences Board in RCSI. (Paragraphs 3.4 and 3.5)
- (b) PMC should build on the effectiveness of the Academic Executive Committee by:
 - taking immediate steps to ensure that the 5/6 year MB BCh BAO programme is addressed as an entity;
 - expanding the terms of reference of the Group for next year to include a formal holistic review of quality assurance of the programme; and
 - considering a formal reporting mechanism for the subsidiary academic committees into the Academic Executive Committee rather than solely to the President.(Paragraph 3.6 and 3.10)
- (c) The Board should ensure, with immediate effect, that the new executive structure provides for clear delineation of responsibility for the delivery of the strategic plan, that job descriptions are provided for all officers and that the structure is reviewed regularly for effectiveness. (Paragraphs 3.2 and 3.7)

15.3 Holistic programme view

- (a) UCD and RCSI should work together, as a matter of priority, to address the need for an overarching set of general regulations for the PMC collaboration (addressing for example, registration periods, intermission, complaints and appeals procedures) and to clarify the academic regulations (governing assessment, operation of the examination board etc) for the clinical component of the MB BCh BAO programme taken at PMC and the requirements for the final award. (Paragraphs 3.10, 4.7 and 9.6)
- (b) PMC students should, as from next academic year, be provided with a transparent and easily accessible overview of the MB BCh BAO programme which includes both pre-clinical and clinical components. (Paragraphs 3.10, 5.7 and 11.2)

15.4 Quality and Standards

- (a) The locus of responsibility for academic quality and the setting and maintenance of academic standards should be clarified in the executive structure and the academic governance structure with immediate effect (Academic Executive Committee). (Paragraphs 3.6, 3.7 and 3.10)
- (b) An annual review of quality and standards should be held which takes into account all available data sources including staff and student views, external examiner reports, and admission, progression and completion data and elicits the views of a wider range of stakeholders regarding the enhancement of quality. This review should be pro-active, across all departments, consider the five year programme as a whole, and identify issues for improvement and examples of good practice for wider dissemination and systematic adoption. (Paragraphs 3.10, 4.2 and 4.9)
- (c) PMC should work with the Dublin institutions to develop appropriate procedures for defining and setting assessment standards which should be implemented as from next year. All three institutions should take a more comprehensive approach to monitoring standards, and metrics should be developed to provide a more objective approach to the regular review and comparison of standards between students on the same degrees across the partners (UCD, RCSI and the PMC programme). In addition, it may be useful for PMC to benchmark Key Performance Indicators against Malaysian comparators. (Paragraphs 3.10, 4.8 and 4.9)
- (d) The current student record arrangements should be replaced as a matter of urgency with a comprehensive, integrated and secure database for student information (driving admissions, progression, examinations and award, and curriculum management). (Paragraph 4.10)

15.5 Learning Opportunities

- (a) PMC should consider deploying support and training in order to exploit educational technology, and in particular MOODLE, to the full. (Paragraph 5.5)
- (b) A holistic approach to the development of a learning, teaching and assessment strategy across the whole 5/6 years of the MB BCh BAO programme should be adopted forthwith taking account of the differences in curricula and pedagogic approach between the alternative UCD and RCSI pre-clinical components. UCD/RCSI and PMC should work together as partners to enhance the curriculum and anticipate and pre-empt issues which might arise from the two separate pre-clinical streams. (Paragraphs 3.10 and 5.6)

15.6 Research

- (a) Drawing on expertise from RCSI and UCD, PMC should continue to develop a sustainable and prioritised research strategy which includes enhanced opportunities for students to develop research skills and actively engage in research. (Paragraph 7.3)

15.7 Student Support

- (a) UCD, RCSI and PMC should review the student support area to:
 - ensure appropriate induction/ orientation and re-orientation (on the return to Penang) and support mechanisms in anticipation of an altered student profile with higher numbers of international students;
 - ensure appropriate links between the student support and the registry functions;
 - establish a continuum between the pre-clinical and clinical components so that student information can be transferred and referral pathways be established between Dublin and Penang;
 - ensure consistent statistical reporting in order to identify any trends which require action;
 - keep under scrutiny the adequacy of the counselling arrangements particularly in the context of a different recruitment strategy.
 - develop policies on reasonable adjustments and disability access, and case law on extenuating circumstances, taking account of RCSI and UCD approaches.
(Paragraph 9.3)

15.8 Staff and Staff Development

- (a) The College should ensure that there are consistent and transparent communications with all staff, ensuring that staff are kept fully aware of all initiatives, College priorities and plans, vacancies and development opportunities. (Paragraph 10.8)
- (b) PMC should ensure that honorary and adjunct staff receive adequate and consistent guidance on what is expected in their roles. (Paragraph 10.2)
- (c) The College should consider ways of rewarding the role of professional, technical and support staff and providing motivation. When recruited, the Chief Operating Officer might look at developing effective cross-departmental working practices to alleviate pressure points on administrative functions. (Paragraphs 10.5 and 10.7)

15.8 Memorandum of Agreement

The Memorandum of Agreement should be reviewed **as a matter of urgency** to provide *inter alia*: clear definition of the roles, obligations and responsibilities of the

respective partner institutions; clarification of the regulations which pertain to each part of the MB BCh BAO programme and what regulations govern the programme as a whole; clarification of the quality assurance arrangements which apply to the pre-clinical and clinical components and the programme as a whole. (Paragraph 12.1).

Appendix 1: Penang Medical College Response to the Review Group Report

Penang Medical College welcomes the independent evaluation of our strengths, weaknesses, opportunities and challenges as reported by the Quality Review Group.

The College found the generation of the Self-Assessment Report an extremely valuable and useful exercise. The consultation of all staff through our feedback survey and the work of the PMC peer review team and its outreach across the institution ensured the success of this as a reflective exercise.

PMC would like to thank the Review Group for their considerable efforts during the Site Visit and their understanding of the challenges facing PMC in this period of transition.

Penang Medical College would like to state that we find the Quality Report a fair and accurate document and there exists no factual inaccuracies that require correction. The commendations and recommendations in the Quality Report are very welcome as the basis of our Quality Improvement Plan over this next strategic phase in PMC's development.

**Appendix 2: Joint RCSI – UCD Institutional Review of Penang Medical College (PMC)
Review Site-Visit Schedule**

Date/Time	Meeting	Purpose / Participants	Location
Friday, 2 May 2014			
08.30-11.00	Private meeting time for Panel	Panel assembles and plans meetings	Boardroom 1, Ardmore House, UCD
11.00-11.15	Break		
11.15-12.00	Meeting with Admissions & Student Recruitment (ASR) Group members	Dr. Kenny Winser & Mr. Philip Curtis (RCSI); Dr. Pat Felle (UCD)	Boardroom 1, Ardmore House, UCD
12.00-12.15	Private meeting time for Panel		Boardroom 1, Ardmore House, UCD
12.15-13.15	Meeting with Shareholder Group	Partial representation: Mr. Gerry O'Brien; Dr. Jason Last; Dr. Pat Felle; Prof. Patrick Murray; Mr. Philip Curtis	Boardroom 1, Ardmore House, UCD
13.15-14.00	Lunch		Boardroom 1, Ardmore House, UCD
14.00-14.45	Meeting with UCD-PMC students		Boardroom 1, Ardmore House, UCD
14.45-15.00	Break		
15.00-15.45	Meeting with RCSI-PMC students		Boardroom 1, Ardmore House, UCD
15.45-16.00	Break		
16.00-17.00	Meeting with UCD & RCSI Programme Directors	Inter-institutional relationships; communications; programme management. Attendees: Dr. Jason Last (UCD); Dr. Stuart Bund (UCD); Dr. Jane Holland (RCSI); Mr. Austin Leahy (RCSI)	Boardroom 1, Ardmore House, UCD
17.00-17.30	Private meeting time for Panel		Boardroom 1, Ardmore House, UCD
Evening Free			
Saturday, 3 May			
Sunday, 4 May			
Monday, 5 May			
Morning Free			
12.30-13.30	Panel lunch - hotel		G Hotel
13.30 -16.30	Planning meeting for Panel - hotel		G Hotel
19.00-21.00	Dinner for Panel & PMC senior staff (TBC)	Prof Amir Khir, Prof Kevin Nolan, Dr Claire Lacey, Ms Salmah Aspari, Mr Menon (TBC)	Venue TBC
Tuesday, 6 May			
08.30-09.00	Panel arrives at PMC		
09.00-10.00	Meeting with President/Dean including formal presentation by PMC	Prof Amir Khir Prof Kevin Nolan, Dr Claire Lacey, Ms Salmah Aspari, Mr Menon	Multimedia Room
10.00-10.15	Private meeting time for Panel		Multimedia Room
10.15-11.00	Meeting with Review Coordinating Committee	Dr Claire Lacey, Prof Kevin Nolan, Prof Jackie Ho, Dr Tan Kean Chye, Ms Salmah Aspari, Ms Rosalind Tan,	Multimedia Room

		Ms Janice Leong	
11.00-11.15	Break		Multimedia Room
11.15-12.15	Meeting with PMC Senior Management Team	Governance, strategy & planning (inc. inter-institutional relationships) Prof Amir Khir, Prof Kevin Nolan, Dr Claire Lacey, Ms Salmah Aspari, Mr Menon	Multimedia Room
12.15-12.30	Private meeting time for Panel	Reflection on initial discussions	Board Room
12.30-13.00	Panel Lunch		
13.00-14.15	Meeting with academic staff	Teaching & Learning and Curriculum Development Prof Kirwan, Prof Richard Loh, Prof Krishnan, Prof Jackie Ho, Prof Vincent Russell, Prof Knox Ritchie, Prof Rashid Khan, Prof Premnath, Dr Foong Siew Cheng, Dr Chean Kooi Yau, Dr Vasanthie, Dr Samuel Easaw, Dr Annie Foo	Multimedia Room
14.15-14.30	Private meeting time for Panel	Consider findings & prepare for hospital-based meetings	Board Room
14.30-14.45	Panel transfers to Penang Hospital		
14.45-15.45	Meeting with Hospital Management & Clinical Leads	Dato' Dr Yasmin Bt. Sulaiman (Director of Penang Hospital) & Clinical staff.	Seminar Room 1, 4 th Floor of the ACC
15.45-16.00	Break		Seminar Room 1, 4 th Floor of the ACC
16.00-17.00	Meeting with current clinical students	Group of 20-25 3 rd & 4 th year students	Seminar Room 1, 4 th Floor of the ACC
17.00-17.15	Break		Seminar Room 1, 4 th Floor of the ACC
17.15-18.15	Meeting with interns		Seminar Room 1, 4 th Floor of the ACC
18.15	Panel departs to the hotel		
19.30-21.00	Panel dinner		
Wednesday, 7 May			
08.30-09.00	Panel arrives at Residency Campus		
09.00-09.45	Meeting with Foundation Year students	All FY students	Seminar Room at Residency Campus
09.45-10.00	Panel transfers to main campus		
10.00-10.45	Private meeting time for Panel		Board Room
10.45-11.00	Break		Board Room
11.00-11.45	Meeting with Admissions, Recruitment & Student Support staff	Mr Menon, Prof Kevin Nolan, Dr Claire Lacey, Ms Salmah Aspari, Ms Janice Leong, Ms Nuraida, Dr Vasanthie, Saralla	Multimedia Room
11.45-12.00	Coffee & private meeting time for Panel		Multimedia Room
12.00-13.00	Institutional management of academic standards & quality	How does PMC routinely review and seek to enhance standards and quality, and how effective are those mechanisms? Prof Amir Khir, Prof Jackie Ho,	Multimedia Room

		Dr Claire Lacey, Prof Kevin Nolan, Ms Salmah Aspari	
13.00-13.30	Private meeting of Panel		Board Room
13.30-14.00	Lunch		
14.00-14.45	Research & Postgraduate Programmes	Prof Amir Khir, Prof Kevin Nolan, Prof Jackie Ho, Prof Rashid Khan, Dr Claire Lacey	Multimedia Room
14.45-15.00	Break		Multimedia Room
15.00-16.00	Shareholder Group Videoconference meeting	Prof. Andrew Deeks; Prof. Cathal Kelly; Prof. Des Fitzgerald; Prof. Hannah McGee; Prof. Patrick Murray; Mr. Gerry O'Brien; Mr. Michael McGrail; Ms. Judith Gilroy; Dr. Pat Felle	PMC Multimedia Room and venues at RCSI & UCD
16.00-16.15	Break		Multimedia Room
16.15-17.00	Recruitment & staff development	Ms Salmah Aspari, Mr Menon, Prof Knox Ritchie	Multimedia Room
17.00-18.00	Short tour of teaching facilities / Optional group meeting to clarify outstanding issues		
18.00	Panel departs for hotel		
Evening Free			
Thursday, 8 May			
08.30-09.00	Panel arrives at PMC		
09.00-09.30	Optional meeting with President (or other staff) to clarify outstanding issues		Board Room
09.30-12.30	Panel prepares draft report, identify key points for exit briefing		Board Room
12.30-13.00	Exit briefing	Prof Amir Khir, Prof Kevin Nolan, Dr Claire Lacey, Ms Salmah Aspari, Mr Menon	Multimedia Room
13.00-13.30	Panel departs		