



FACULTY OF PHARMACEUTICAL MEDICINE

OF THE ROYAL COLLEGES OF PHYSICIANS OF THE UNITED KINGDOM

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GMC consultation survey 'Welcomed and valued: Public consultation' Response from the Faculty of Pharmaceutical Medicine

General questions

Q1. Overall, do you like this draft guidance?

Yes No Not sure

Please tell us more about what you like or dislike:

- Clearly written, focused on student/learner needs within the regulatory framework.
- Explains the regulatory framework clearly.
- Contains useful links to other documents / guidance.
- Contains practical advice.
- Tone is supportive and realistic.

Q2. Does the guidance fulfil its purpose of giving practical advice on how to support disabled medical students and doctors?

Yes No Not sure

If yes, what advice did you find most helpful? If no or not sure, how could we improve it?

All seemed useful. Explanation of basic concepts is good – breakdown of definition of disability and reasonable adjustments.

Q3. Do you like the title, *Welcomed and valued*?

Yes No Not sure

If no or not sure, please suggest other titles for the guidance:

Would be useful to know that this title was considered appropriate by disabled students / learners.

Q4. Do you like how the guidance is structured?

Yes No Not sure

Please tell us more:

It is well structured, although it would be useful to have the entire contents at the beginning rather than just at the start of each new chapter. Panels and tabulations are helpful though some of the tabulations are very detailed. It is quite text dense – could some of the quotations in panels be put into speech bubbles / artworked for example?

Q5. Should the guidance include more information or clarify anything further?

Yes No Not sure

If yes, what information should we include?

The document clearly explains that the GMC has no direct remit over selection to medical school but is responsible for outcomes and broadly describes the considerations in relation to outcomes. However, it would be useful to have more information about how the criteria impact on admissions criteria – links to any guidance, or case studies / examples?
Specific examples / case studies about the practical implications of the outcomes for disabled learners / potential learners (undergraduate and post-graduate) would be useful and would bring this to life (along the lines of the linked student FtP examples which are very good).
Case studies of how ‘reasonable adjustments’ have been made in the workplace in different scenarios would be helpful. It would also be useful to have some – even very limited - information about what adjustments are not reasonable, to aid calibration and expectations, though this might be difficult to provide.

A number of these points might be addressed through additional resources (Q9) rather than in the guidance.

Q6. Does the guidance thoroughly cover undergraduate education?

Yes No Not sure

If no or not sure, what more could it include?

As in Q5 above, examples / case studies would help to illustrate this.

Q7. Does the guidance thoroughly cover postgraduate education?

Yes No Not sure

If no or not sure, what more could it include?

As in Q5 above, examples / case studies would help to illustrate this.

Q8. Does this guidance help disabled medical students and/or doctors understand what they can expect of education organisations and employers?

Yes No Not sure

Please tell us more:

Describes duties of organisations and employers clearly. Examples of reasonable adjustments would be useful.

Q9. We will be developing supporting resources for this guidance, including short video clips and written accounts of disabled learners' experiences. Would other supporting resources be helpful?

Yes No Not sure

If yes, what resources would you like to see?

Case studies from the perspective of both organisations and disabled learners.

Q10. Is there anything we have overlooked in respect to equality, diversity and inclusion? Are there ways we can make this guidance more accessible?

Yes No Not sure

Please tell us more:

Audio version? Ability to expand some of the detailed tables.

Q11. Do you have any other comments or reflections overall?

Yes No Not sure

Please tell us more:

The general questions on the draft guidance conclude here. We would really appreciate your feedback on the detailed questions that follow about each chapter, but we understand if this is not possible due to time constraints. If you only wish to complete the general questions, please skip to the final section of this document, to give us some information about yourself.

Chapter 1: Our consideration as a professional regulator

Q12. Have we covered all the relevant topics?

Yes No Not sure

If no or not sure, what else should we cover?

Q13. Is the information about disability (pages 11-16) and reasonable adjustments (pages 17-18) clear and helpful?

Yes No Not sure

Please tell us more:

Q14. Is it useful to include the GMC's considerations on disabled learners for each stage of medical education (pages 20-28)? And are the explanations about the GMC considerations clear and helpful?

Yes No Not sure

Please tell us more:

Chapter 2: What do we expect of medical education organisations and employers

Q15. Are the duties of medical education organisations and employers helpful to include in the guidance?

Yes No Not sure

Please tell us more:

Q16. After reading this chapter, do you feel you have a good understanding of the legal obligations (pages 34-38) and what our standards (*Promoting excellence*, pages 39-40) require in relation to disability?

Yes No Not sure

Please tell us more:

Q17. Do the panels 3 and 4 give you enough information to answer the questions on:

- a. **Panel 3: Am I disadvantaging or discriminating against other students by supporting disabled students (pages 38-39)?**
- b. **Panel 4: Is there any type of support for a student that is not compatible with clinical practice in the future (pages 40-41)?**

Yes No Not sure

Please tell us more:

Chapter 3a: How can medical schools meet their duties?

Q18. After reading this chapter, do you feel you have a good understanding of making the medical course inclusive for disabled learners?

Yes No Not sure

Please tell us more:

Q19. Will the process described in the seven-step framework on page 54 support disabled students?

Yes No Not sure

If yes, how? If no or not sure, how could we improve the framework?

Q20. Do you agree with using *Outcomes for graduates* as the benchmark to decide whether to support a disabled medical student? Do you have any suggestions about how we can express this more directly in relation to clinical practice as a Foundation doctor?

Yes No Not sure

Please tell us more:

Q21. Is the advice on occupational health services Panel 5 (pages 52-53) clear and helpful?

Yes No Not sure

Please tell us more:

Q22. Is the advice on specific elements of the course (clinical placements and assessments) on pages 68-69 clear and helpful?

Yes No Not sure

Please tell us more:

Q23. Do the panels 7 and 8 give you enough information to answer the questions on:

- a. Panel 7: Can schools provide an adjustment that is not considered as realistic in the clinical environment, such as extra time (pages 70-71)?
- b. Panel 8: What can medical schools do when students are diagnosed with a health condition or disability as a result of failing an assessment (page 71)?

Yes No Not sure

Please tell us more:

Q24. Does the 'Towards graduation' section (pages 72-74) give you enough information on the requirements to graduate a medical student (meeting all of the *Outcomes for graduates* and being fit to practise), the Transfer of Information and Special Circumstances processes?

Yes No Not sure

If no or not sure, what other information should we include?

Chapter 3b: How can postgraduate educators and employers apply their duties?

Q25. After reading this chapter, do you feel you have a good understanding on making postgraduate training and practice inclusive and accessible for disabled doctors?

Yes No Not sure

If no or not sure, how can we improve this?

Q26. Does the guidance give you enough information on arrangements through Transfer of Information and pre-allocation through Special Circumstances (pages 83-84)?

Yes No Not sure

If no or not sure, what other information should we include?

Q27. Does the guidance give you enough information on less than full time training (pages 85-86)? Are there other arrangements for flexible training we have not considered here?

Yes No Not sure

If no or not sure, what other information should we include?

Q28. Will the process described in the seven-step framework on page 88 support disabled doctors?

Yes No Not sure

If yes, how? If no or not sure, how could we improve the framework?

Q29. Do you agree with the concept of shared responsibility for sharing information about doctors' health and disabilities (pages 82-83)?

Yes No Not sure

Please tell us more:

Q30. Is the advice on specific elements of postgraduate training (educational review, assessments, ARCPs, career advice) clear and helpful (pages 96-103)?

Yes No Not sure

Please tell us more:

Q31. Do you support the explanation on panel 13 about the interaction of health, fitness to practise and patient safety (pages 105-106)?

Yes No Not sure

If yes, how? If no or not sure, how could this be improved?