

# Programme Specification

<b>A The nature of the award</b>		
1	Programme Title	Medicine
2	Final award	Bachelor in Medicine and Bachelor in Surgery
3	Intermediate awards	-
4	Awarding institution/body	St. George's Hospital Medical School, a member institution of the University of London
5	Teaching institution	University of Nicosia
6	Programme accredited by	General Medical Council (GMC)
7	UCAS/JACS code	N/A
8	<a href="#">QAA benchmark statements</a>	Medicine
9	Date specification produced	08 July 2022

<b>B Features of the programme</b>		
1	Mode of study	Full time
2	Usual length of programme	4 years
3	Other features of the programme	International programme Clinical Practice (Years 3 & 4) in Cyprus, Israel, or USA

<b>C Educational aims of the programme</b>	
<p>The aim of the programme is to produce graduates with the essential foundation of knowledge, understanding, skills and attitudes required for the practice of medicine competently and professionally at F1 level (pre-registration level in Cyprus / level of an intern in the US or equivalent), in a patient-centred, multi-professional environment and to equip them for a career of life-long learning and professional development.</p> <p>The Medical School at the University of Nicosia mirrors St. George's University of London aim to provide this within an integrated and stimulating curriculum which forms the basis for future learning and development in the graduate's chosen field.</p>	

<b>D Intended learning outcomes of the programme</b>		
	<i>Advanced knowledge and understanding of:</i>	<i>Related teaching and learning methods and strategies</i>
1	Have a knowledge and understanding of the sciences underlying medical practice, of health and its promotion, and of disease, trauma and disability and their prevention, diagnosis and management. This should be in the context of the individual and their place in the family and society and of the population as a whole.	Small group work, lectures, expert tutorials, clinical and communication skills workshops, self-directed work, online learning, reading, staff feedback and supervision, clinical placements.

2	Have developed an understanding of the work of other health care professionals, and demonstrate a willingness and ability to work interprofessionally and to learn from other professional groups.	Problem based learning (PBL) and clinical placements.
		<i>Assessment</i>
		Assessed through all Domains:  Professional Knowledge Domain (written examinations) Professional Skills Domain (OSCEs) Becoming a Doctor Domain (clinical practice, professionalism assessment and Student Selected Components (SSCs)).

	<i>Cognitive skills: the ability to</i>	<i>Related teaching and learning methods and strategies</i>
3	Have demonstrated intellectual curiosity and a capacity for critical understanding.	Small group work, especially PBL; clinical and communication skills workshops, lectures, practical sessions, self-directed learning, reading, staff feedback and supervision, clinical placements.
4	Have the potential to undertake further training in any branch of medicine or medical science for which they are fitted. This recognises the limitations that may restrict choice for a student with a disability.	Small group work, especially PBL; clinical and communication skills workshops, lectures, practical sessions, self-directed learning, reading, staff feedback and supervision, clinical placements.
		<i>Assessment</i>
		Assessed through all Domains:  Professional Knowledge Domain (written examinations) Professional Skills Domain (OSCEs) Becoming a Doctor Domain (clinical practice, professionalism assessment, SSCs).

	<i>Practical skills: the ability to</i>	<i>Related teaching and learning methods and strategies</i>
5	Have demonstrated proficiency in basic clinical skills, including gathering information systematically, sensitively, and effectively from patients; undertaking comprehensive physical examination of patients; choosing appropriate diagnostic procedures, rationalising that choice and interpreting the results of such investigations; selecting appropriate treatment options for patients with specific conditions; recognising and managing life-threatening conditions.	Clinical Skills sessions, Communication Skills sessions, Clinical Placements in all specialties.

6	Have acquired the following additional skills and experience: personal / time / resource management skills; IT literacy; ability to work within a team; good record keeping; ability to apply the principles of audit; ability to contribute to the teaching of others / presenting information clearly and succinctly.	PBL, Clinical Skills sessions, Communication Skills sessions, practical sessions, Clinical Placements, (SSCs)
7	Value the need for life-long learning, enquiry and research.	PBL, Clinical Skills and Communication Skills sessions, practical sessions, Clinical Placements, SSCs
		<i>Assessment</i>
		Assessed through all Domains:  Professional Knowledge Domain (written examinations) Professional Skills Domain (OSCEs) Becoming a Doctor Domain (clinical practice, professionalism assessment, SSCs).

	<i>Transferable skills: the ability to</i>	<i>Related teaching and learning methods and strategies</i>
8	Have acquired and demonstrated attitudes necessary for the achievement of high standards of medical practice and patient care, including adherence to ethical and legal principles, probity and personal integrity, application of an evidence based approach to patient care, responsiveness to the needs and concerns of patients, understanding of the contribution of genetic, historical, social, environmental, political, occupational and behavioural factors on health, illness and disease.	Small group teaching including PBL, Clinical and Communication Skills sessions, Medical Law and Ethics sessions, Clinical Placements
9	Possess the following additional qualities: <ul style="list-style-type: none"> <li>• psychological robustness with ability for self-care</li> <li>• thoroughness</li> <li>• a realistic grasp of his or her own limitations</li> <li>• adaptability and ability to cope with change and uncertainty</li> <li>• open-mindedness</li> <li>• motivation for learning</li> <li>• reflectiveness</li> <li>• sensitivity to cultural issues</li> </ul>	Small group teaching including PBL, Clinical and Communication Skills sessions, Medical Law and Ethics sessions, Clinical Placements.
10	Be able to register provisionally for medical practice within current legislation, meeting GMC outcomes, and be able to perform pre-registration house officer (Foundation Year 1) jobs competently.	Clinical Placements, SSCs
		<i>Assessment</i>

	Assessed through all Domains:  Professional Knowledge Domain (written examinations) Professional Skills Domain (OSCEs) Becoming a Doctor Domain (clinical practice, professionalism assessment, SSCs)
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<b>E</b>	<b>Programme structure and features</b>
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The MBBS course at the University of Nicosia is four years long and based on a spiral curriculum, whereby core topics are taught at different stages of the course, with a different emphasis dependent on which stage teaching (learning) occurs.

The programme is organised around three main curricular themes: Basic and Clinical Sciences (BSC), Professional Skills (PS), Patients, Populations and Society (PPS) which run through all years of the curriculum, most overtly in the CS and T year. In addition to the themes, the programme is divided into nine PBL units – outlined below – which is how the content is organised and presented to students.

### Clinical Science Year (Year 1) Outline

In the Clinical Science year, teaching is co-ordinated around a learning week, with the week's teaching structured around a clinical problem. After an introductory module, students will cover each of six modules in the clinical science year, learning related basic science via lectures, small group teaching and practical sessions.

Scientific learning is supplemented by teaching in the following: clinical and communication skills, medical law, ethics, statistics, sociology and psychology. Students are introduced to clinical patients early in the programme. The overall approach to teaching used in the year is Problem Based Learning (PBL).

### Clinical Science Year

Term	Weeks	Modules
1	3	Foundations of Clinical Science module
	5	Life Support
	6	Life Maintenance
2	5	Life Protection
	5	Life Cycle
3	6	Life Control
	5	Life Structure

*SSCG Student Selected Component runs longitudinally*

Revision and Assessment Weeks		
	4	Assessment (incl. resits) <i>spread throughout the year</i>

Each module covers a range of clinical systems which are as follows:

Life Support	Cardio-respiratory system; Cardiology/Cardiovascular Surgery; Respiratory Medicine
Life Maintenance	Nutrition; Alimentary System including liver; Gastroenterology; Endocrinology; Renal Medicine; Urology; ENT (throat)

Life Protection	Immunology; Infection; Haematology; Oncology; Preventative Medicine; Public Health Medicine
Life Cycle	Reproduction & Development; Child Health (Paediatrics); Obstetrics & Gynaecology; Sexual Health; Ageing; Death
Life Control	Nervous system; Neurology/Neurosurgery; Vision & Ophthalmology; Psychiatry; Psychology; ENT (audiology)
Life Structure	Musculoskeletal system; Rheumatology; Orthopaedics; Traumatology; Plastic Surgery; Skin & Dermatology

### Transition Year (Year 2) Outline

There will be a 3-week Foundation for Clinical Practice block at the beginning of the year. The 15 contact teaching weeks of PBL will be in five-week blocks, alternating with three five-week blocks of clinical placements. These will be structured placements in the following clinical subjects: Medicine, Surgery, and General Practice. Students will be expected to further develop history and examination skills first practised in earlier teaching sessions.

### Transition Year rotations

Delivery	Weeks	Units/placements (undertaken on rotation)
Introductory Teaching/ PBL	3	Foundations of Clinical Practice
Problem based learning	5	Mechanisms of Disease
Clinical attachments	5	General Medicine or General Surgery or General Practice
Problem based learning	5	Body Systems
Clinical attachments	5	General Medicine or General Surgery or General Practice
Problem based learning	5	Specialties
Clinical attachments	5	General Medicine or General Surgery or General Practice
Self-directed	3	SSC - Student Selected Component: study an area of interest in depth, developing research and gain insight into possible careers.

### Revision and Assessment Weeks

	4	Assessment (incl. resits)
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Each PBL unit covers a range of clinical systems which are as follows:

Mechanisms of Disease	Haematology; Oncology; Immunology; Infection
Body Systems	Cardio-respiratory system; Cardiology; Respiratory Medicine; Gastroenterology; Nervous system; Neurology; Ageing
Specialties	Nervous system; Neurology/Neurosurgery Musculoskeletal system; Rheumatology; Orthopaedics Reproduction & Development; Child Health (Paediatric Medicine)

### Non-Clinical Teaching Programme (Investigation of Disease)

In addition to the above a programme of lectures and tutorials takes place during the clinical blocks. This teaching programme covers the following areas: clinical biochemistry, cell pathology, haematology, immunology, medical microbiology, pharmacology and radiology.

### Penultimate Year (Year 3) Outline

In the clinical practice years (Years 3 & 4) students will be based at our partner clinical sites in Limassol (Cyprus), Tel Aviv (Israel), Chicago (USA).

P Year is a full time clinical year. The students will rotate through a number of specialist and general clinical attachments. Five weeks will be dedicated to each of: paediatrics; obstetrics and gynaecology; psychiatry; neurology/disability/stroke; general medicine (geriatrics and cardiology); medical specialties (AMU, dermatology, rheumatology); general surgery; and surgical specialties (ENT, ophthalmology, trauma, orthopaedics) plus palliative care. In addition, there will be four weeks of introductory teaching in the year, which usually take place in the week before the start of each pair of rotations.

### Penultimate Year Rotations

Weeks	Modules/attachments
1	Introductory Week to Medicine
5	Medicine (General Medicine and Acute Medicine, Dermatology, Rheumatology)
5	Medical Specialities (Cardiology, Geriatric Medicine)
1	Introductory Week to Surgery
5	General Surgery (Breast, Upper GI, Lower GI, Urology, Vascular)
5	Surgical Specialties (Ophthalmology, Acute Orthopaedics, ENT, Elective Orthopaedics, Plastics, Palliative Care)
1	Introductory Week to Psychiatry and Neurology
5	Psychiatry
5	Neurology
1	Introductory Week to O&G and Paediatric Medicine
5	Obstetrics & Gynaecology
5	Paediatrics

### Revision and Assessment Weeks

4	Clinical Assessment (incl. resits)
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### Final Year (Year 4) Outline

The Final Year acts as preparation for becoming a Foundation Year 1 (or equivalent) doctor. The year begins with a short introduction to advanced clinical practice. Following this, in rotation, each student then spends time in Public Health, Accident & Emergency, and Anaesthetics & Critical Care Unit. Students also spend 5 weeks in one medical and one surgical hospital attachment shadowing junior doctors, as Assistant Foundation Doctors (AFD) in both Medicine and Surgery; and students do one 5-week Assistantship in GP. All students have a 7-week elective period (SSC FY2) (of which students must complete at least 5 weeks) and a 5 week SSCFY1 and many choose to work abroad. The year is ended by a short Postgraduate clinical training preparation course.

Clinical Rotations (3 x 5 weeks, 2 x 4 weeks, 1 x 2 weeks);

Finals Assessment (4 weeks);

Student selected components (2 x 5 weeks);  
Preparation for Postgraduate Clinical Practice.

### Final Year Rotations

Weeks	Attachments
5	Student Selected Component 1 (SSCFY 1)
5	Assistantship Medicine
5	Assistantship Surgery
5	Assistantship General Practice
4	Accident & Emergency Medicine
4	Critical Care and Anaesthetics
2	Public Health
5	Student Selected Component 2 (SSCFY 2 Elective)
1	Postgraduate clinical training preparation

### Revision and Assessment Weeks

4	Clinical Finals Assessment (incl. resits)
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Delivery of the programme progresses from being predominantly small group and lecture based in the Clinical Science year to being predominantly ward and experientially based in the Clinical Practice Years. The transition year contains components of each type of teaching and learning.

### Student Selected Components (SSCFY1 and SSCFY2):

In line with GMC guidelines students are allocated time to complete SSCs. The aim of SSCs is to allow students to study in depth an area of interest. In the Clinical Science Year students complete an SSC that aims to teach key transferable skills, useful for later SSCs and other areas of study. In T year, students have a 3-week SSC (with an additional floating week) that is student selected, here the students choose to study a topic of academic value. The F year 5 week SSCFY1 enables students to study a specialist clinical area of choice. The final SSC of the course is the five-week elective in F year (SSCFY2) that takes place after Clinical Final Assessment. From 2021, for some students there will be an opportunity to undertake this prior to or longitudinally during the final year.

### UNIC specific considerations:

Some themes have special deliberation and support given the UNIC institutional context. While all areas of the curriculum are supported, the ones listed below have been given further detailed consideration and cultural and context specific sessions are also provided:

#### Basic and Clinical Sciences

- The need to provide additional teaching material with the PBL cases so that the student experience of the Nicosia community and cultural setting is supported;
- Awareness that in clinical practice Cypriot, European, Israeli and North American guidelines may sometimes be used rather than UK guidelines.

#### Professional Skills

- Strategies for addressing clinical communication in a different cultural setting, where there are potential language and cultural differences between students and patients.

#### Patients, Populations and Society

- Recognition that clinical service delivery takes place in both private and the public health service settings;
- Recognition that in Cyprus community services provision is often not centrally co-ordinated.
- The importance of teaching Medical Ethics and Law as practised in the UK (specifically England and Wales) to the MBBS students based in Nicosia.

**Award of credits:**

The MBBS degree is a [FHEQ](#) Level 7 qualification.

The MBBS programme is not credit-rated.

**F General teaching and learning strategies**

The Teaching and Learning Strategy for the course is based on the following principles:

*Learner-centred*

This implies that in planning, delivering and evaluating the curriculum the emphasis is on optimal learning more than on teaching. The overall objective is to increase the understanding and skills of the student, and methods of learning have been devised to help students in a structured and effective way.

*Directed self-learning*

Directed self-learning implies that the teacher sets objectives, but the student takes responsibility for deciding how and when to achieve them. Responsibility for learning should be shared between teacher and student, with the student an active, not a passive participant.

*Stimulating*

Teaching methods and teacher roles are intended to stimulate enquiry, not be a substitute for it. The course includes a small amount of didactic teaching (course spirals 1 and 2) and it is intended that this will give the student necessary information to think and understand the relevance of what has been learned, and not simply to accumulate information.

*Integrated*

We aim to give clinical relevance to all that students learn, as well as making the process of learning relevant and interesting. At the same time, we want students to know the scientific basis of medicine, so that their clinical skills and practice are underpinned by a rigorous understanding of the basic sciences. Students should also understand why they are learning topics, and should be able to use information critically, rather than memorising for an exam, only to forget it immediately that hurdle is passed. This approach is intended to encourage 'deep learning'.

*Clear Learning Objectives and defined Outcomes*

A clear statement of learning outcomes in the clinical science years act as a means of communication between course organisers, students and teachers, and allows co-ordination between course outcome, what is taught, and the assessment of learning. For the later years of the course, learning and assessment is framed around clinical practice outcomes, with defined tasks for each year and placement set at an appropriate level as student progress towards graduation and meeting GMC defined outcomes.

*Using a spiral curriculum*

The course is based on a spiral curriculum of core themes that repeat through two spirals. Spiral 1 lasts 12 months and uses a problem-based learning approach, reflecting the capacity of graduates to learn at a more aggressive pace. It features six modules delivered sequentially, using the learning week with the approach of problem based learning. Spiral 2 is an 18 week PBL programme that inter-digitates with clinical attachments and uses a common PBL approach to consolidate learning in spiral 1.

*Problem Based Learning (PBL)*

PBL cases unfold through a series of structured 'scenarios' over tutorial session/s assisted by a facilitator. All curriculum themes may feature as part of the case/problem of the week, but the Basic and Clinical Sciences theme will usually predominate. The other curriculum themes have one or more sessions devoted to them in most weeks. In all cases, the activity of these sessions relates to, or arises from, the case/problem of the week. Other teaching during the week may include



lectures, practical classes, tutorials, patient-based activities in the community or hospitals, visits to health related community groups, clinical demonstrations and independent learning assignments. At the end of the week, an “Expert Forum” will be held. Typically, this will comprise a group of experts, sometimes including patients, who face questions on the case of the week or related topics. Self-directed study is allocated to allow students to follow up on learning objectives generated by the problem/scenario of the week.

*Structured around a Learning Week*

In the Clinical Science year, and in the PBL blocks of the T year, the course follows the structure of the Learning Week. The content for a series of weeks is determined by the St George’s module planning group, which also decides on cases that will illustrate the module/unit and theme content for the week. The case is a starting point to allow students to understand the relevance of their learning to their future clinical practice as doctors. Other learning activities, including lectures, lab work, clinical demonstration, clinical and communication skills, medical law and ethics, etc. are related to this central case.

*Clinical practice years (T-F)*

In the Transitional Year, all students make the transition from the academic environment into learning in the workplace, such that they are able to learn effectively and safely from direct patient contact and other healthcare professionals in a clinical environment. In the Penultimate Year, students extend the scope and depth of their learning in specialty placements and senior medicine and surgery. In Final Year, students are supported to achieve the standard required for foundation practice through 1:1 apprenticeships with foundation doctors (or equivalent junior doctor status internationally) (in medicine and surgery), and a GP, and additional placements in critical care and anaesthetics, and accident and emergency. Students are also encouraged to expand their horizons with the public health block, final year SSCs. Placement locations extend across Cyprus, US and Israel, offering a range of rural and urban experience, with accommodation provided for more distant sites. Across all years, students collate evidence of their learning in a clinical workplace portfolio.

G	Assessment
<p>The assessment across all years of the curriculum is aligned to by the domain of competence being tested. The SGUL domains align with the GMC domains, these are designated as:</p> <ol style="list-style-type: none"> <li data-bbox="199 1344 1382 1456"> <p><b>1. Professional Knowledge</b> (<u>knowledge and application of knowledge</u>): including biomedical sciences, psychological, social science, ethical and legal issues, population health and medical research principles.</p> <p><i>Assessment tools:</i> Written tests (including online) for knowledge and application of knowledge, predominantly in Single Best Answer (SBA) format, but also including some SAQs (Short Answer Questions) and free text prescribing.</p> </li> <li data-bbox="199 1668 1382 1881"> <p><b>2. Professional Skills</b> (<u>clinical and communication skills</u>): including the ability to conduct consultations with patients, diagnose and manage clinical presentations, communicate effectively with patients and colleagues in a medical context, provide immediate care in medical emergencies and carry out practical procedures safely and effectively. Students must also be able to prescribe drugs safely, effectively and economically, and use information effectively in a medical context.</p> <p><i>Assessment tool:</i> Objective Structured Clinical Examinations (OSCEs) for clinical and communication skills.</p> </li> </ol>	

3. **Becoming a Doctor (attendance, professionalism and clinical practice):** students have to demonstrate that they behave according to professional ethical and legal principles, that they engage in learning, reflection, teaching others, working effectively within a multi-professional team, and consider their duty to protect patients and improve care.

*Assessment tools:*

A range of tools to test different aspects of developing professionalism and clinical practice e.g.

- attendance and other professional behaviours
- critical appraisal skills and discursive writing (project reports, including within SSCs and electives)
- clinical/communication skills in clinical work situations (Workplace Based Assessments, Clinical Placement Assessment Tools)
- presentation skills, written and verbal (e.g. posters, debates, oral presentations, patient leaflets, etc.)
- reflection (reflective portfolio)

Students are required to pass each domain separately before being permitted to progress to the next year of the programme.

A variety of examination types are used during the programme to measure student learning and to determine whether a student is ready to progress from one stage of the programme to the next. These include:

- Short Answer Questions (SAQs) where students give a short written response to a question.
- Single Best Answer Questions (SBAs) where, in response to a short question or statement, students select a single best answer from a range of given possible responses.
- Objective Structured Clinical Examinations (OSCEs) where students perform a set of structured tasks, which can include practical procedures, interviewing skills, or examination of a patient.
- Clinical Cases e.g. Mini-CEXs, where students are observed interacting with patients.
- Essential Clinical Skills Assessment (ECSA) involving an invasive clinical examination, a procedure or a prescribing skill where the interpretation of the findings, or implications of the prescription from the task need to be considered in the context of a clinical case.
- Direct Observation of Procedural Skills (DOPS) where students are observed carrying out particular procedures to be certified competent in them e.g. taking blood pressure.
- Case Based Discussions (CBDs) where students are questioned, in a structured way, on particular cases they have been actively involved in.
- Portfolio; a collection of evidence that demonstrates students' ability to analyse information required for direct patient care or the improvement of patient care (e.g. audit or basic survey); reflective writing which demonstrates the ability of the students to reflect on their clinical experiences, to direct their own personal development and to learn how to give and accept constructive criticism.
- Reports, oral presentations or posters on work carried out in Student Selected Components.

**Clinical Science Year Formative Assessments**

Domain	Type	Timing
Professional Knowledge	Written papers	Autumn term
Professional Skills	Objective Structured Clinical Examination (OSCE)	Spring term

### Clinical Science Year Summative Assessments

Domain	Type	Timing
Professional Knowledge	Written papers	At the end of Life Protection - assessments for the Foundations of Clinical Science, Life Support, Life Maintenance and Life Protection modules.  At the end of Life Structure - assessments for the Life Cycle, Life Control and Life Structure modules.
Professional Skills	Objective Structured Clinical Examination (OSCE)	End of year
Becoming a Doctor	Attendance	Throughout the year in multiple settings (longitudinal)
	Other Professional Behaviour	
	Student selected component (written report)	Starts Autumn term, completed Spring term
	Basic Life support	Autumn term

### Transition Year Summative Assessments

Domain	Type	Timing
Professional Knowledge	Year Specific Knowledge Test: Written papers	End of year
Professional Skills	Objective Structured Clinical Examination (OSCE)	End of year
Becoming a Doctor	Attendance	Throughout the year
	Other professional behaviour	
	Clinical Workplace Portfolio	
	Student Selected Component* (involves the completion of: proposal, research poster or a niche SSC and a Quality of Participation form)	Starts Autumn term, completed in Summer/Autumn
	Case Analysis Project (written report)	Starts Autumn term, completed Spring term

\*SSC completed in Transition year, but assessed in Penultimate year (grades carried over)

### Penultimate Year Summative Assessments

Domain	Type	Timing
Professional Knowledge	Year Specific Knowledge Test: Written papers	End of year
Professional Skills	Objective Structured Clinical Examination (OSCE)	End of year
Becoming a Doctor	Attendance	Throughout the year
	Other professional behaviour	
	Clinical Workplace Portfolio	

	Student Selected Component* (involves the completion of: proposal, research poster or a niche SSC and a Quality of Participation form)	Following T year assessments
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\*SSC completed in Transition year, but assessed in Penultimate year (grades carried over)

### Final Year Summative Assessments

Domain	Type	Timing
Professional Knowledge	UK Prescribing Safety Assessment (PSA)	End of year
	Knowledge Proficiency Test (KPT): Written paper	
Professional Skills	Objective Structured Clinical Examination (OSCE)	End of year
Becoming a Doctor	Attendance	Throughout the year
	Other professional behaviour	
	Clinical Workplace Portfolio	
	Student Selected Component Final Year 1 (involves the completion of: proposal, case report and attendance form)	Starts prior to the commencement of F year, completion date depends on rotation group
	Student Selected Component Final Year 2 - Elective (Formative but compulsory) Two proposals (planning and final) prior to the elective, and a written report and quality of participation form at the end of their elective.	The timing will be determined based on requirements for postgraduate clinical training.

## H Support for students and their learning

There are a number of ways in which students receive support throughout their programme of study.

### **Personal Tutor system**

The Personal Tutor system is designed to provide:

- A point of contact over the course
- Support for personal development through encouragement of reflective practice
- Support for academic development by maintaining an overview of progress and by being a channel for feedback

Students are allocated a Personal Tutor, who will see them regularly and who remains their Personal Tutor for the duration of their course. Students are also provided with a site-specific Personal Tutor for the duration of their clinical P and F Years. Personal Tutors combine academic and pastoral roles and have undertaken training which focuses on identifying students who are struggling and may have academic, personal, family or mental health issues. Tutors are strongly encouraged to contact the Personal Tutor Lead for advice if they have concerns about students. All tutors are aware of specific provisions to support students academically.

### **Academic Difficulties**

Academic progress is monitored regularly by the Course Director, Year Leads and assessment leads and through the Becoming a Doctor domain. Any students failing any part of any assessment will receive feedback and are requested to meet with an academic member of staff to discuss their progress, for example the Responsible Examiners, Clinical Academics and Theme Leads who are able to assist with specific areas of learning and assessment.

### **Careers Advice**

Having in mind the international student base of the Medical School in Cyprus, graduate advice is in place to guide students with careers support for the country in which they hope to practice medicine. Students meet with the Careers & Alumni Team to discuss their career pathways and the options available to them. A bank of information has been created regarding the rules and regulations of practicing medicine in various countries. Guides for certain countries are available on Canvas and additional ones are added depending on the needs of the students, and this information continues to be updated. Personalised support is provided for postgraduate training applications, e.g. for the UKFPO's F1, Israeli Internship (Staj), Australian pathways, US/Canadian residency matching programmes, among others. Additional services are available to our students in collaboration with the Student Affairs Office at the University of Nicosia, such as workshops on CV writing and Interviewing Skills, Time management, Self-confidence and more. Students are encouraged to take advantage of the career services available at the Medical School and address queries about practicing medicine overseas.

### **Student Services Centre**

The Student Services team run a one stop service that aims to help students with any non-academic related issues, continuously throughout their studies. Support ranges from assisting with visa applications (including spousal support visas) to the 'basics' such as finding accommodation and transportation. The Centre provides newly admitted students with sim cards, road maps, bus routes, and booklets on things to do in Cyprus. In addition, the Centre handles requests for official documents and assists students with local banking processes and health insurance applications. As part of the Centre, the team supports Medical School Student Society elections and runs social events and activities, club registrations, the host family program and other important functions with the aim to promote a full and active student life.

### **Student Counsellor Service**

An independent and confidential Student Counsellor service is available to students free of charge. This provides expert help and advice on a wide range of emotional and personal problems. This 'appointment only' service is provided by the Centre for Therapy Training and Research (KESY). The Student Counsellors will not normally approach students in the first instance. Staff are encouraged to contact the Student Counsellors if they are concerned about students, but students are also encouraged to make contact themselves.

### **Student Information**

A Student Handbook is distributed to students on arrival which includes information and signposting regarding student welfare as well as a comprehensive Student Support diagram.

### **Course Director**

The Course Director takes an overview of students' academic progress and is available for consultation when serious problems arise. The Course Director will also advise members of staff if a student's personal difficulties are having an adverse effect on his or her welfare or academic progress.

### **Associate Dean for Students**

The Associate Dean for Students (ADfS) chief role is to serve as a resource of information and support to students, ensuring that any issues and concerns they have, are adequately addressed. The ADfS is easily accessible and helps to enrich staff and student interactions. This is in an effort

to further enhance internal communication and the student experience. In the scope of this, the ADfS meets with students and their representatives on a frequent basis.

### **Mental Health Lead**

The Mental Health Lead serves to promote psychological wellbeing at the Medical School and to train both students and staff in recognising and handling basic student psychological challenges and referring pathways. This administrative role has been introduced in order to further enhance available support to students.

Beyond all of the above systems, students who wish to discuss their individual needs with the staff of the Medicine programme who have particular responsibility for student welfare and health and safety are asked to contact the Student Support Officers or the Health and Safety Officer respectively for information.

## **I Criteria for admissions**

Applicants to this course must:

- Have a minimum of a 2:1 Honours degree or equivalent (3.3 GPA in the US, 3.2 in Canada) or an MSc, MPhil or PhD in any discipline
- Satisfactory score in the entrance examination GAMSAT or MCAT
- Complete a successful interview
- Pass health and police screening

Applicants will be required to have spent time in a healthcare setting, either hospital, general practice or the community. This is intended to help applicants evaluate and reflect on their choice of medicine as a career.

If English was not the primary language during the applicant's first degree, they must also take the IELTS (International English Language Testing System) or equivalent (e.g., TOEFL). An IELTS score of 7.0 overall (with a score of 7.0 in the written element and no less than 6.5 in any other element) or equivalent is required.

Successful applicants from outside of the EU will also need to provide the documents required by the Cyprus Immigration Department for issuance of a student visa.

Note: students are no longer being admitted to the programme. The final intake was in 2021.

## **J Employability and employment**

There are a number of options for graduates of the Nicosia programme, depending on their country of origin. These include:

- UK students have their St George's degree recognised in the UK and are eligible to apply for Foundation Year posts in the UK. The Foundation Programme is a two-year planned programme of general training which forms the bridge between medical school and specialist / general practice training. Successful completion of the Foundation Programme Year 1 grants students eligibility for full registration with the GMC.
- For students from outside of the UK wishing to apply to the UK Foundation Programme, there are additional stipulations that must be met in line with prevailing immigration regulations in the UK at the time of application. These include having an appropriate visa that demonstrates the 'right to work' in the UK.
- The MBBS is approved by the Educational Committee for Foreign Medical Graduates (ECFMG) and the degree is listed in the World Directory of Medical Schools (WDOMS). US students are eligible to participate in the Match Program for residency and take the United States Medical

Licensing Examinations (USMLE). The School provides support for those undertaking the USMLE Step 1 and Step 2 CK through practice tests. Canadian students are eligible to participate in the Canadian Resident Matching Service (CaRMS) and take the Medical Council of Canada Evaluating Examination (MCCEE).

- Israeli students are able to apply for provisional registration through the Israel Medical Council.
- Lebanese students are able to apply for registration and complete residency programmes in Lebanon.
- Australian students will be provisionally recognised by the Australian Medical Council.
- All students are advised to check with their own individual national authorities if they wish to practise in their own country and work together with the graduate advising team.

Thereafter, graduates can pursue a wide range of career paths within Medicine. There are also many additional opportunities for doctors including research, pharmaceutical industry and government. All branches of clinical medicine require a period of general training followed by specialist training, the duration of the latter depending on the specialty and the country where it is carried out.

The Medical School has a dedicated Careers & Alumni Office where students can seek advice and guidance on their career preferences. This is available to students from day one of enrolment on the MBBS.

<b>K</b>	<b>Methods for evaluating and improving the quality of teaching and learning</b>
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The following methods are regularly used for improving the quality of the student experience and assuring standards:

- Annual Programme Monitoring Report and bi-annual Quality Reports to St George's Undergraduate Programmes Committee.
- Quality Management framework (overarching policy on how teaching and learning will be monitored and evaluated throughout the programme).
- Course Committee (overall responsibility for the operational management of the programme).
- Year specific committees and groups, who meet regularly to review quality and standards, e.g. CS and T Year Committee, P and F Year Committee, Placements Management Group, Module Debrief meetings. These have representation from the student body, and feed into Course Committee.
- Medicine Assessment Committee and other assessment specific groups.
- Module and Clinical Block reports based on staff and student feedback and questionnaires. These feed into the relevant groups above and in turn report up to Course Committee.
- Associate Dean for Students, who is responsible for the student experience beyond the curriculum.
- Service Level Agreements with Clinical Placement Providers (P and F Year).
- QA proformas to monitor the quality and delivery of teaching and facilities that support it including for hospital and other placement sites that provide teaching.
- Internal audits
- Reports from Visiting Examiners and external professional, regulatory and statutory bodies.
- Performance Review and Peer Review of Teaching.
- Professional development activities including encouragement of staff to take part in learning and teaching support, attendance at conferences, active research participation.
- Surveys and questionnaires to evaluate teaching, learning and assessment, student support and welfare, as well as opportunities to share experiences through numerous student voice and reporting routes.

<b>L</b>	<b>Regulation of assessment</b>
<p>Each year of the programme has a detailed Scheme of Assessment that explains how the assessment is structured, indicates which assessment methods will be used and specifies what a student must achieve to progress through the programme and in the final year, to complete the programme successfully.</p>	

<b>M</b>	<b>Indicators of quality and standards</b>
<p>QAA subject review of Medicine (2000)  GMC reports (2011-2015)  External examiner reports  Student Experience Survey (annually)</p> <p>Please note: This specification provides a concise summary of the main features of the programme and the learning outcomes that a typical student might reasonably be expected to achieve and demonstrate if he/she takes full advantage of the learning opportunities that are provided. More detailed information on the learning outcomes, content and teaching, learning and assessment methods of each module can be found in the course handbook and, where they are produced, separate module guides.</p> <p>Key sources of information are:  Course documents  Student Handbooks  Programme prospectus and course leaflets  The University of Nicosia and St George's University of London internet sites  General Regulations for students and programmes of study  Programme Regulations  QAA subject review reports  Schemes of Assessment</p>	