Medical Students Committee (MSC)
Written report to the ARM 2023

Introduction

The BMA medical students committee (MSC) represents medical students in the UK. We consider and address issues of importance to medical students and make sure medical student views are represented in wider BMA policy. Raymond Effah and Lara Akinnawonu were appointed as co-chairs of the medical student committee in September 2022 for a one-year term. The co-chairs are supported by four deputy chairs, each with a policy portfolio in education, finance, welfare and widening participation respectively. The following report provides an overview of the policy work and projects undertaken by the MSC over the past year.

Shaping the future of medical education

UKFPO foundation programme allocation review

Earlier in the year, Health Education England (HEE), along with the other UK education bodies, carried out a stakeholder engagement process to seek views on possible changes to the foundation programme allocation process. The proposed alternative approach recommended applicants be allocated via computer-generated ranking or Preference Informed Allocation (PIA) instead of the current system of using Situational Judgement Test (SJT) and Educational Performance Measures (EPM) scores. From the moment the review was announced, we worked to inform all medical students about the process and the proposed changes, and we pushed to ensure that any new system would consider the pros and cons for students. As part of our engagement, we organised a successful national webinar in December 2022 with the UKFPO and professor Amir Sam, the architect of the proposed new system. To make sure that our lobbying activity represented your views, the various aspects of the proposals were discussed and voted on at our MSC meetings. Following the webinar, we wrote jointly with the BMA’s medical academic staff committee (MASC) to provide our views on the PIA as a temporary measure while time is taken to consider a better and fairer system for the longer-term. We also stressed that the process for Specialised Foundation Programmes (SFP) should remain in its current form, at least until the impact of the broader changes can be assessed, as the SFP’s academic component represents a vital gateway to a clinical academic career. We’ve pushed for this through our regular meetings with the UKFPO and have worked more collaboratively with them to improve their communication and address student’s frustrations from the past. We were pleased to see that the UKFPO have now announced that the PIA system will be used to allocate graduates starting the foundation programme in 2024, which means students will no longer have to sit the SJT. We will continue to monitor the implementation of this new process in the 2023-24 session.

Guaranteed places on the foundation programme

This year we celebrated the guarantee that all 2023 UKFPO applicants would have a place on the foundation programme. While in the past all graduates were found places, this is the first year when this uncertainty was removed. This is testament to our collective lobbying efforts as we maintained the pressure on government for this guarantee. We will continue to advocate to ensure that all UK trained graduates have a job at the end of the programme in light of the new changes to foundation programme allocation.

Medical degree apprentices

We are no longer expecting any apprenticeship programmes to start until September 2024 at the earliest. The first cohort of medical degree apprentices was due to begin their training this year, with more being employed by trusts and enrolled on medical degree courses next year. The MSC has voiced its concerns on rolling out a radically different and untested approach to medical education, rather than focusing on the major issues affecting students and the wider under-funded and under-resourced education and training pathway. As medical students, apprentices will be able to join the BMA and enjoy student member benefits, but as employees, further consideration will need to be given on the range of trade union support that will be available.

Guidance for medical students during industrial action
To ensure that medical students were informed of their rights and responsibilities if on placement during junior doctor industrial action, we produced guidance which covered a variety of areas including how medical students can show support for their striking colleagues and what to do if asked to work outside of competencies during strike days.

We also worked with the BMA consultants committee to produce guidance for consultants regarding the role of medical students during strikes and the support they might require. The guidance covered areas including attendance, acting up and educational opportunities during periods of industrial action.

Finance

Finance continues to be a key issue for medical students across the country, with student loans being at higher rates than ever before and an NHS bursary that is at a similar level to it was in 2013, often not enough for students to cover essentials like rent and groceries. In England, the government introduced a new maintenance loan increase. This was barely more than £50 in real terms and was seen as a kick in the teeth given the rising living costs. It will do very little to support those with an ever-increasing financial burden and who will need to carry out part-time employment on top of their already stressful and time-consuming studying schedule.

In June, a briefing was sent to MPs outlining the barriers currently prevent students from studying as well as those barriers that are affecting the recruitment of medical students. It highlighted the issue that graduates who have already taken a student loan are not eligible to receive support if they wish to pursue medicine as a second degree and are offered a place on a standard five-year course. Furthermore, first year students on Graduate Entry Medicine (GEM) courses do not receive sufficient student loan to cover all their tuition fees, leaving them with a gap that they must fund through an alternative source.

The NHS bursary is also not fit for purpose and our briefing outlined that the Department of Health and Social Care/NHS Business authority should increase the number of means tested and non-means tested amounts available to students. The bursary should be calculated based on the current financial means of the individual, their predicted expenses and what they had received previously in maintenance loans from student finance. Furthermore, both the bursary application process and ways of access to NHS bursary hardship funds need to be reformed entirely. We have also been in correspondence with the Parliamentary Under-Secretary of State for the School System and Student Finance, to request a meeting to discuss these issues further.

Things have been somewhat more positive for those in Wales, whose government has offered a more significant increase, and MSC is working with the BMA Welsh medical schools committee to discuss funding and bursaries. We thank them for their genuine efforts to help medical students.

The BMA Scottish medical students committee is campaigning for the introduction of a return of service bursary to be made available to medical students in Scotland on the basis that such a bursary should be available to all students studying medicine in Scotland.

Last academic year, following extensive lobbying by the Northern Ireland MSC (NIMSC) and other stakeholders, the Department of Health agreed to pilot the award of a travel contribution in lieu of residential accommodation. This contribution was initially awarded to Queens University Belfast (QUB) students on placement in the Southern HSC Trust but more recently has been extended to Northern, and Western HSC Trusts and will be available to both QUB and Ulster University students.

More recently, the Department of Health has approved a pilot General practice travel contribution scheme, commencing August 2023. Students on placement beyond the expected travel range of their University, Trust base or home (whichever is closest) will have an option to claim the daily travel contribution while on GP placement rather than accommodation. There is also scope for travel support for non-residential placements in certain circumstances. Unfortunately, the reimbursement amount remains at £5/day for the incoming academic year but remains under review and NIMSC will continue to push for this to be increased.

Up-to-date finance guides for Northern Ireland and Wales have been published. MSC is currently updating the finance guide for England which will be finalised in time for the next BMA session.

Welfare

In September, MSC successfully launched the medical school wellbeing checklist, which was developed by the immediate past deputy chair for Welfare last session. This aimed to contribute towards the standardisation of medical student support services throughout the region. The checklist focused on four key areas: structure, self-actualisation, feedback and workload. Representatives took this checklist and approached their wellbeing representative at their medical schools or equivalent and gradually over the course of the session produced audits to highlight the consistencies, or a lack thereof, in what was currently implemented at medical schools.
across the country. A summary of results found this session are currently being finalised and this will be a piece of work that will continue into the next session.

This follows the success of the racial harassment charter, which 42 medical schools signed up to and 31 responded to with details of the actions they have taken to provide a more inclusive and better learning environment. There has been work with our equality, inclusion and culture team to host a number of workshops to gauge how the charter has been implemented in medical schools and how best to continue this going forward.

MSC will continue to push medical schools to improve their wellbeing facilities, with the BMA working to provide better support for current medical students from a widening participation background - and continue to strive to see an end to the differential attainment gap and glass ceilings.

Widening access and participation in medicine

This session, our main goal for our widening participation (WP) portfolio was to develop a wider definition within the BMA to help us improve our approach in addressing systemic deficits in medicine. The association previously focused on improving access to medicine at the point of medical admission and as the MSC we have been leading on a paradigm shift to ensure access and participation in activities and opportunities before, during and after medical school are all encompassed within a new definition of WP. Our deputy chair has been working with the BMA’s equality, inclusion and culture team on this values-based approach, which has been supported by a conference motion. Once finalised, we will work with external stakeholders such as the Medical Schools Council and the National WP Forum to gain consensus on defining WP. In line with this work, we’ve also identified existing gaps within our information on the website and have been exploring avenues to update the website with more guidance to support aspiring medics from WP backgrounds navigate medical school contextual admissions, as well as signposting to existing local WP support networks nationally. We will continue to build on the work from previous years to collate all this information and update our BMA resources to offer better support for our members.

We’ve also met with the BMA charities to identify how we can better support initiatives that empower and uplift medical students. This year the applications from current students were less than usual, so we discussed tweaks to eligibility criteria to ensure the application process remains easy to navigate, as well as better publicising the funding available. We hope that these steps will place the MSC in a better position to provide better support to aspiring and current students from widening participation backgrounds.

Medical students conference 2023

We were pleased with the success of our first hybrid medical student conference which brought together students from across the country to discuss the most pressing issues affecting them and shape our policy for the next session. This year’s theme was ‘The future of the trade union movement’. This explored students’ aspirations as they navigate their medical career as well as solidarity with our junior doctor colleagues. It was refreshing to hear passionate speeches from students on a variety of issues including calling for improvements and clinical exposure while on placements, support for students with disabilities and neurodivergent conditions, reforming the medical student funding system and the NHS bursary and reviewing the BMA fee structure to make it more accessible for WP students.

Engaging with our membership

This year, our representatives have worked hard to put on a number of events to engage members locally. The most popular of these being pizza and pay events and helping to educate students on the dispute our junior doctor colleagues are currently engaged in.

Alongside ensuring that we have representation from across all medical schools, the MSC member relations liaison group have been looking into how we can ensure that the representation provided to members is the best that it can be. Changes have been made to internal processes that should see more consistent handovers allowing for local work to effectively continue from year to year. The MSC representative structure is also currently being reviewed to see if improvements can be made to help both representatives conduct their role while ensuring high quality representation of members. We have also made it easier for members to contact their representatives by publishing their names and emails on our website.

We have also been working with the membership benefits team to explore various avenues, from medical and retail discounts to the provision of question banks to essay competitions.

Representing our members to the bodies overseeing medical education and fighting for better terms and conditions in your future career is the greatest benefit that we as a union can provide. As part of that, we have been developing our social media (@BMAstudents) strategy to help ensure that we keep members up to date on the work that we do as a committee.
Looking ahead

Our committee is continually dedicated to ensuring medical students have seat at the table on discussions that affect them. With an increasing focus on workforce planning, medical students are an area of focus, and we believe any increase in numbers should be met with adequate funding for students, investment in placement infrastructure and educators and overall should not dilute placement opportunities.

In the face of increasing pressures as medics and as students, we must continue to remain creative, engaging and convincing in our work to try and enact the change we want to see within our medical schools and degrees, careers and with our patients. We must maintain strong unity, develop a bigger voice and a stronger collective.

The MSC will continue to represent and fight for medical students’ interest on the key issues surrounding medical education, welfare, finance and widening participation to medicine. If you would like to know more about MSC’s work, have any feedback that you would like to share or support our work, please get in touch with us at info.students@bma.org.uk

Omolara Akinnawonu and Raymond Effah
Co-chairs, MSC