ADMISSIONS POLICY – MEDICINE MBChB

1. Introduction

The University of Sheffield wishes to operate a transparent, evidence-based admissions policy to the Medical courses A100 and A104. No discrimination, positive or negative, based on gender, age, disability, racial or ethnic origin, school type or family background will be applied to any candidate. The evidence pertaining to selection of medical students is considered to be strong in respect of A Level success and character traits, and less strong in respect of UKCAT score. Candidates will be selected through a complex process, which emphasises personal qualities as well as academic achievement.

The Director of Undergraduate Medical Admissions has overall responsibility for the admissions process. All applications are seen by the Director of Undergraduate Medical Admissions and either one senior member of academic staff and/or the Admissions Officer.

The Medical School receives approximately 2,500 applications each year for the MBChB course. The approved target intake is 237 including a maximum of 18 overseas students, 20 students under the Sheffield Outreach and Access to Medicine Scheme (SOAMS) and 18 for the A104 pre-medical course. Our aim also is to include approximately 10% of mature/graduate students, although no formal quota is set for this. The number of offers made each year for the five year course is determined by the number of students on the A104 course who will progress to the A100 course and the number of students who have been offered deferred entry.

The MBChB Admissions Process is divided into three consecutive stages:

Stage 1: Applications are considered to determine whether the applicant meets both the Academic and UKCAT criteria for entry. Applications that meet the criteria are progressed to Stage 2. Applicants that do not meet both the Academic and the UKCAT criteria are deemed unsuccessful.

Stage 2: The UCAS Personal Statements and references of all applicants who meet both the Academic and the UKCAT entry criteria are reviewed and graded. Those applicants deemed to have the best personal statements are progressed to Stage 3. The remaining applicants are informed that their application has been deemed unsuccessful.

Stage 3: Those applicants who meet both the Academic and UKCAT entry criteria, and who have the best personal statements are invited to attend a Multiple Mini Interview. It is the policy of this Medical School to interview all students at this stage who are being considered for entry to either the five-year course (A100) or the six-year course (A104). The applicants with the strongest performance at Multiple Mini Interview will be made an offer of a place on the degree programme via UCAS.

This document will be revised annually or when necessary and will be issued to those involved in any aspect of the selection procedure.
2. **Selection Criteria – Academic (Stage 1)**

To progress from Stage 1 to Stage 2 of the admissions process and qualify for consideration for interview, candidates must usually have:

i) A minimum of six grade ‘A’ passes at GCSE from those taken in Y11. These should be taken in one sitting. Candidates must have a minimum of Grade C in GCSE Mathematics, English and Science. These three subjects can be taken as part of the six A grades or separate from them. GCSEs should be taken over two years.

ii) A minimum of ABBB at AS level, taken in Y12. The candidate should have these AS levels at the time of application. Candidates attending schools that do not certify AS Levels will be required to declare their UMS scores. AS levels should be completed in one sitting over a one year period. For A100, they must include Chemistry, one other science and any two other subjects. AS level General Studies and AS level Critical Thinking are not considered.

iii) Predicted A2 grades of at least AAA. For the A100 this must include Chemistry and another science subject. General Studies and Critical Thinking are not acceptable as third A Levels. A Levels taken early are not considered. Further Mathematics is not acceptable if a candidate also holds A Level Mathematics.

iv) Candidates with less than the above grades will be considered only in exceptional circumstances, e.g. disrupted studies and SOAMS.

v) We will not consider resit applicants except from candidates with extenuating circumstances when this has been agreed with the Director of Admissions prior to application.

vi) For graduates, at least an upper second class degree will be required together with BBB at A level. We will not consider candidates who are registered on another degree course unless they are in their final year. AS Level and GCSE grades are not considered for graduate applicants. Graduate applicants who hold A Level Chemistry may apply for the A100 programme. Graduate applicants who do not hold A Level Chemistry may apply for the A104 programme.

Other qualifications are also considered for admission i.e. Scottish Highers, Irish Leaving Certificate, the International and European Baccalaureate and some national qualifications from students applying from other countries.

The standard ‘A’ Level offer to successful candidates for the A100 course will normally be AAA, to include Chemistry, another science and any other subject except General Studies and Critical Thinking. Further Mathematics is not acceptable if a candidate also holds A-level Mathematics. Equivalent offers are made to candidates offering other qualifications.

3. **Selection Criteria – UKCAT (Stage 1)**

All candidates will be required to undertake the UK Clinical Aptitude Test (UKCAT). The application is then considered by the Director of Undergraduate Medical Admissions and a decision will be made as to whether an interview should be granted. Candidates whose UKCAT score falls below the threshold (currently 2510) will not normally be considered for interview.

Applications that meet **both** the Academic and UKCAT entry criteria will be progressed to Stage 2 of the Admissions Process. Applications that do not will be deemed unsuccessful.
4. **Selection Criteria - Non-Academic (Stage 2)**

The Medical School will be looking for evidence of certain personal qualities. These qualities include character, values, talents and abilities. These qualities may be: Concern for others; Conscientiousness; determination; diligence; flexibility; humility; initiative; leadership; long-term commitment; orderly organisation; public performance; responsibility; self-directed study skills; time management; trustworthiness. The list is not intended to be exhaustive and we recognise that there are many other qualities that may benefit the future professional. We consider it unlikely that any individual possesses every one of these and other desirable qualities and DO NOT advise candidates to treat this as a check list.

We will review the personal statement and teacher’s reference for evidence of such qualities, in order to build a personal profile of the candidate, and we will further explore these areas at multiple mini interview. It is important to highlight evidence rather than to engage in a form of false modesty. It should also be clear that the truth-telling is a vital component of professional behaviour and we will view any untruth or significant exaggeration very seriously.

5. **Selection Criteria – Grading of Candidates**

Applicants are not ranked on their Academic Attainment or UKCAT performance for selection purposes. All applications that meet the above Academic and UKCAT criteria will be progressed to Stage 2. In most cases, candidates with less than the minimum entry requirements will be rejected.

Candidates will be graded on their academic ability by staff within the Medical Admissions Office. Applications are given an overall grade and checked that they meet the minimum subject requirements. All candidates meeting the minimum entry requirements will have their applications sent to a trained Assessor who will then grade the UCAS personal statement and reference.

The assessors will then grade personal qualities as indicated in 4 above. Candidates given the highest grades for their personal statement and reference and who meet the academic and UKCAT requirements will be considered for interview. Candidates who have achieved low scores will usually be rejected.

6. **Multiple Mini Interview Process (Stage 3)**

Candidates with the highest grades for their Personal Statements will be invited to attend a Multiple Mini Interview. The Medical School interviews approximately 600 candidates for Medicine each year. From 2014-15 the Medical School will use Multiple Mini Interviews (MMIs) as evidence has shown that these are a more reliable and fair means of assessing applicants.

The Multiple Mini Interviews comprise a series of eight stations. Each station typically lasts 8 minutes. The focus of these stations may be centred around the following criteria:

- Communication skills
- Depth and breadth of interests (achievement in specific fields)
- Evidence of commitment for caring
- Knowledge of and interest in study in Sheffield
- Medical work experience
- Motivation for Medicine
- Numeracy
- Understanding the nature of Medicine (including Ethics and Good Medical Practice)
- Values and attitudes.

MMI Interviewers are drawn from medical educationalists, medically qualified senior members of staff, biomedical scientists, junior hospital doctors, senior nurses, senior medical students and lay people.
During the MMI, candidates are graded on performance at each station. The scores from each station are totalled to give an overall score. Based upon this grading the Director of Undergraduate Medical Admissions will then make the final decision as to whether a place is offered. Candidates will be notified of the decision through UCAS.

7. Policy on Students with a Disability /Medical Condition/Learning Difficulty

i) Applicants who satisfy our academic criteria are encouraged to submit a formal UCAS application. They should indicate on their UCAS form if they have a disability/medical condition, including dyslexia that will require additional support during the medical course. The disclosure of a disability, including any specific learning disability such as dyslexia, allows the University to provide support for offer holders, but will not influence the admission selection procedures.

ii) Candidates with a learning disability are encouraged to contact the University’s Disability and Dyslexia Support Service in advance of their UCAS application.

iii) Applicants should inform the UKCAT testing organisation (in advance of the test) of their situation so that appropriate arrangements can be made.

iv) Candidates who disclose a disability will be interviewed in the same way as all other students and their disability will not be discussed or evaluated during the interview. The selection panel will make a recommendation purely on the basis of the performance of the candidate at this interview.

v) If an applicant with a disability/medical condition (with the exception of a learning disability) is offered a conditional place to study medicine, they will complete an Occupational Health Questionnaire, and an Occupational Health Physician will then assess the candidate’s fitness to undertake a medical degree course.

Candidates are personally responsible to ensure that evidence is provided about any disability or other factor affecting their mental or physical ability to practise as a doctor. This evidence may also provide indications of recommendations of support, which can be followed by a full needs assessment if required, for those students who are eligible for Disabled Student Allowances. For those students not eligible for the Disabled Students’ Allowances, e.g. overseas students, additional support may be funded through resources available within the University.

vi) The Disability and Dyslexia Support Service write to every student who has been offered a place, and asks them to complete a learning support questionnaire. If a student discloses a number of support needs, an information visit with the student may be required to assess fully their learning needs and determine reasonable adjustments that may have to be implemented.

vii) For candidates declaring a physical disability, the above Committee will meet to review the report of the Occupational Health Physician and make a decision on the fitness of the candidate to undertake the course.

8. Health Screening

In accordance with national guidelines for the protection of both patients and healthcare workers, all successful applicants must complete a course of hepatitis B immunisation.
Applicants do not need to complete a course of hepatitis B immunisation prior to commencing the course, as this will be arranged by the Occupational Health Department on entry. The Medical School will however accept as documentary proof an authenticated laboratory report showing either the presence of hepatitis B surface antibody, or if antibodies are not developed after a full course of immunisation, that they are negative for hepatitis infectivity. The Medical School reserves the right to re-test any or all of its medical students for all or any markers of hepatitis B virus. Screening tests will only be recognised from a United Kingdom accredited laboratory. A negative result from overseas laboratories will be checked when you arrive in Sheffield.

If an applicant is an infectious hepatitis B carrier, there is no reason that they should not undertake a medical degree. However, the student will not be allowed to undertake exposure prone procedures and their course may need to be modified to accommodate Department of Health guidance on activities they may or may not perform. The student would also need to be aware at a very early stage that his/her career options will be limited by his/her carrier status.

The Medical School is constantly reviewing the immunisation requirements and procedures for medical students. Candidates will be required to comply with these if they are offered a provisional place.

Students who have serious health problems, or who know that they are infected with Hepatitis C or HIV must disclose this on their UCAS form, as their course may need to be modified to accommodate Department of Health guidance on activities they may or may not perform. All potential students with significant health problems will be individually assessed for suitability for the course.

In March 2007 the Department of Health issued guidance on health screening of new entrants to the NHS for Hepatitis B, Hepatitis C, HIV and TB, which requires all new starters who will carry out exposure prone procedures in the course of their work to be screened for Hepatitis B surface antigen, Hepatitis C and HIV. Anyone found to be an infective carrier of one of these viruses is excluded from carrying out exposure prone procedures (EEP’s).

EEP’s are defined as ‘procedures where there is a risk that an injury to the worker may result in the exposure of patients’ open tissue to the blood of the worker. These include procedures where the worker’s gloved hand may be in contact with sharp instruments, needle tips or sharp tissues (e.g. spicules of bone or teeth) inside a patient’s open body cavity, wound or confined anatomical space where the hands or fingertips may not be completely visible at all times.”

Most surgical procedures, some medical ones such as implantation of permanent pacemakers and some obstetric procedures are EPP’s, as potentially are some activities in Emergency Medicine. Although students will be able to complete a medical course without doing EPP’s, they will not be able to assist in theatre or in some practical procedures. Thus, students may miss out on some aspects of the course.

If any student declines testing they will be excluded from EPP activities. If a student is found to be infected, they will be excluded from EPP activities. The Occupational Health Service will not disclose the reason for exclusion to the University, only that the student is not allowed to do EPP work and the course may have to be modified.

It is strongly recommended that students be tested, not just to ensure that they can undertake EPP’s during training, but also if they are not tested now, and then move into an EPP career such as surgery, they will have to be screened at that stage. It is better to know as early as possible about ones status, as it might influence career decisions.

Although it is extremely unlikely that a student will have one of these diseases, it is in the interest of the student to know if they are infected, as early treatment may be beneficial, and steps may need to
be taken to protect partners and household contacts. If a student were to be HIV positive, it would be important to protect them from occupational risks such as TB.

Testing of blood borne viruses for occupational reasons does not influence insurance or mortgage applications unless the results are positive. The financial industry now understands that being tested for HIV does not indicate a lifestyle risk.

9. **Criminal Convictions**

Admission to the course is subject to the Rehabilitation of Offenders Act (1974) Section 4(2) (Exemption) Order 1975 and the Department of Health Circular HC (88)9 guidelines regarding child protection and police checks. All offers given to applicants will therefore stipulate a condition relating to the receipt of a satisfactory DBS (Disclosure and Barring Scheme) enhanced disclosure. Candidates who have been resident overseas for a period of time will be required to provide equivalent evidence from that country.

Amendments to the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) Order 2013 mean that the University no longer requires applicants to declare all convictions or cautions because some are not classed as ‘protected’. Candidates are advised to visit the DBS Website which provides a full list of offences that will never be filtered from a criminal record (i.e. not protected regardless of time). Listed offences must always be declared as they include serious violent and sexual offences and other specified offences of relevance for posts concerned with safeguarding children and vulnerable adults. Cautions and convictions received outside of the UK that meet the same criteria as above also do not need to be declared. Candidates must tell us on the UCAS form about non-protected criminal convictions, including spent sentences, cautions (including verbal cautions), reprimands and bind over orders.

A candidate who’s DBS disclosure reveals any prison sentences, convictions, cautions, reprimands, final warnings and bind over orders may be referred to a Medical School Fitness to Practise Panel who will make a decision regarding entry onto the course. The Medical School may also seek advice from other bodies such as Student Services, the Postgraduate Deanery or the General Medical Council.

Any data relating to the DBS check will be operated in line with the DBS Code of Practice (copy available from the Medical Admissions Office). A Policy Statement on the ‘Secure Storage, Handling, Use, Retention and Disposal of Disclosures and Disclosure Information’ is also available from the Medical Admissions Office.

10. **Student Entry Agreement**

On commencing the course all students will be required to sign a Student Entry Agreement that contains practice guidelines derived from GMC requirements on becoming a competent practitioner. A copy of this agreement is available from the Medical Admissions Office and at the Medical School website. It is also a requirement that all students are issued with guidance from the GMC and the Medical School Council and students will be required to sign a document agreeing that they have received a copy of the booklet *Medical Students: professional values and fitness to practise*.

11. **Information for Applicants**

At the end of the undergraduate course you will receive your MB ChB (or equivalent) degree, which is a primary medical qualification (PMQ). Holding a PMQ entitles you to provisional registration with the General Medical Council, subject only to its acceptance that there are no Fitness to Practise concerns that need consideration. Provisional registration is time limited to a maximum of three years and 30 days (1125 days in total). After this time period your provisional registration will normally expire.
Provisionally registered doctors can only practise in approved Foundation Year 1 posts: the law does not allow provisionally registered doctors to undertake any other type of work. To obtain a Foundation Year 1 post you will need to apply during the final year of your undergraduate course through the UK Foundation Programme Office selection scheme, which allocates these posts to graduates on a competitive basis. So far, all suitably qualified UK graduates have found a place on the Foundation Year 1 programme, but this cannot be guaranteed, for instance if there were to be an increased number of competitive applications from non-UK graduates.

Successful completion of the Foundation Year 1 programme is normally achieved within 12 months and is marked by the award of a Certificate of Experience. You will then be eligible to apply for full registration with the General Medical Council. You need full registration with a licence to practise for unsupervised medical practice in the NHS or private practice in the UK.

Although this information is currently correct, students need to be aware that regulations in this area may change from time to time.

There is some discussion about whether to remove provisional registration for newly qualified doctors. If this happens then UK graduates will receive full registration as soon as they have successfully completed an MB ChB (or equivalent) degree. It should be noted that it is very likely that UK graduates will still need to apply for a training programme similar to the current Foundation Programme and that places on this programme may not be guaranteed for every UK graduate.

In addition the GMC is currently considering whether to introduce a formal assessment that all doctors would need to pass in order to be granted full registration. Although no firm decision has been taken as to whether or when such an exam will be introduced applicants should be aware that the GMC envisages that future cohorts of medical students will need to pass parts of a new UK Medical Licensing Assessment before the GMC will grant them Registration with a Licence to Practise.