

4 May 2023

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[REDACTED]

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Dear Miss Topping

Regulation 28 report Angela Kearn

I am responding on behalf of Professor [REDACTED].

I am deeply sorry to hear of the untimely and tragic circumstances of Angela Jean Kearns' death. I extend my deepest condolences to Angela's family and those impacted by her death.

Following an incident in Egypt, your report has raised concerns about awareness of 'Immersion Pulmonary Oedema' in the medical profession and that this condition is not specifically addressed in medical training.

Through our standards and quality assurance of medical education and training we ensure that doctors in the UK are equipped with professional behaviours, knowledge, and skills to competently assess complex and uncertain acute and emergency situations. In addition, through professional clinical reasoning doctors are able to consider relevant differential diagnoses and manage acute medical emergencies including identifying people at high risk due to underlying comorbidities (such as Angela's age and her history with hypertension).

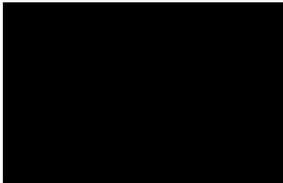
I hope the information above assures you that clinical knowledge and training is being assessed in areas that may intersect with Immersion Pulmonary Oedema and therefore if a doctor in the UK was to encounter a patient with this rare condition, they should have the tools and knowledge to be able to diagnose the condition and proceed accordingly with treatment.

Whilst it is not the role of the GMC to comment on specific clinical practice, Immersion Pulmonary Oedema is a rare condition and its emergency presentation may be similar to other medical emergencies. Its immediate management will also be similar and therefore we feel at this stage no further specific education and training intervention would be required. Institutions such as the Medical Royal Colleges may be able to provide you with information related to the details for a process to identify and develop areas where learning is needed and can be shared in postgraduate training across the relevant specialties and subspecialties.

I note that this case happened in Egypt. We are not able to comment on the level of training or the medical education system in Egypt as that country is outside our jurisdiction.

The GMC is committed to work with others in the health care sectors to improve training of the professionals we regulate so that doctors are better equipped with dealing with the variety of healthcare concerns and demands within the UK. To provide some context to medical education and training in the UK, I hope the attached annexe is helpful to you.

Yours Sincerely



Medical Director and Director of Education and Standards, GMC



cc:

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Our role as a medical regulator

Our powers in medical education, as set out in the Medical Act 1983, are two-fold: to set the outcomes for graduates of UK medical schools leading to entry on to the medical register and to approve the curricula for postgraduate training of doctors. We quality assure both aspects of medical training against our standards for the management and delivery of medical education and training. The principle of patient safety drives our work.

Undergraduate education

Our powers don't extend to mandating specific content in undergraduate curricula, but we determine and publish the high-level outcomes all medical students are required to demonstrate in order to graduate and be awarded a Primary Medical Qualification (PMQ). We updated our [Outcomes for graduates](#) in 2018 after extensive consultation. This is supplemented by a set of core [Practical skills and procedures](#) graduates must have achieved when they start work for the first time so they can practise safely.

Foundation Programme

All doctors enter the two-year Foundation Programme after graduating from a UK medical school. It provides new graduates with a range of essential interpersonal and clinical skills for managing acute and long-term conditions. The Academy of Medical Royal Colleges develops the Foundation Programme curriculum, which describes specific outcomes all Foundation doctors should demonstrate on completion of the programme. Our regulatory role is to approve the curriculum.

The Foundation Programme curriculum requires first year trainees (FY1) to meet the outcomes we have set out in [Outcomes for provisionally registered doctors with a license to practise](#), which includes fifteen core clinical and procedural skills. This enables the trainee to apply to the GMC for full registration and a license to practice, which is a requirement of entry to the second year of the Foundation Programme.

Quality assurance of education and training

We also have a duty to make sure medical education and training in the UK is meeting our standards. We expect organisations responsible for educating and training medical students and doctors in the UK to meet the standards set out in [Promoting excellence: standards for medical education and training](#).

We quality assure medical schools, postgraduate deaneries and local offices, and local education providers (such as NHS trusts and health boards) to check they are meeting our standards. Our quality activities are risk based, which means we look at our evidence and decide which areas are likely to be of concern. We provide feedback to organisations on how well we think they are meeting our standards.

If we are concerned about something, we ask for more information to seek assurance that any issues are being dealt with appropriately, and if we're not satisfied with the response we can intervene.

We can place organisations providing postgraduate training under ‘enhanced monitoring’, which we do to promote and encourage local management of concerns about quality and safety. This involves more frequent progress updates and we can provide representation on a locally led visit to investigate a concern or check on progress. Where possible we work with all organisations to address the concern and develop a sustainable solution. Sometimes we need to work with other regulators to make improvements.

We also approve new medical schools, which we subject to an extensive period of quality assurance to ensure their programmes will deliver *the Outcomes for graduates* and meet the *Promoting Excellence* standards.