

September 2014/19

Core operations

Request for data

Returns should be made via the HEFCE secure data collection site by **noon on Monday 20 October 2014**

This document asks higher education institutions in the UK to provide data on the intake of medical and dental students in the 2013-14 and 2014-15 academic years.

Medical and dental students survey 2014

Survey for the Department of Health and the UK higher education funding bodies



Scottish Funding Council
Promoting further and higher education

Cyngor Cyllido Addysg
Uwch Cymru
Higher Education Funding
Council for Wales

hefcw



Department for
**Employment
and Learning**

www.delni.gov.uk

HIGHER EDUCATION
FUNDING COUNCIL FOR ENGLAND
hefce

Contents

Executive summary	2
Purpose	2
Key points	2
Action required	2
Changes and clarifications since MDS13	3
Changes to tables	3
Intake targets for institutions in England	3
Sign-off procedures	3
Survey details	3
Data preparation and submission	3
Definitions and guidance	4
Examples	6
Row and column descriptions	8
Annex A Higher education institutions with joint medical schools	9
Annex B Examples of tables	10
Annex C Summary of MDS 2014 – institutions in England only	12

Medical and dental students (MDS) survey 2014

Survey for the Department of Health and the UK higher education funding bodies

To	Heads of higher education institutions in the UK with undergraduate medical or dental programmes
Of interest to those responsible for	Student data, Funding
Reference	2014/19
Publication date	September 2014
Enquiries to	Sarah Azadian-Zobay, tel 0117 931 7207, e-mail mds@hefce.ac.uk Andrew Taylor, tel 0117 931 7026, e-mail mds@hefce.ac.uk

Executive summary

Purpose

1. This document asks higher education institutions in the UK to provide data on the intake of medical and dental students in the 2013-14 and 2014-15 academic years.

Key points

2. This is an annual, UK-wide survey. HEFCE is conducting it on behalf of the Department of Health (DH), the Scottish Funding Council, the Higher Education Funding Council for Wales and the Department for Employment and Learning in Northern Ireland.
3. Data from this survey are used by HEFCE and DH as an early indicator of medical and dental intakes, to inform DH workforce planning and hence the joint consideration by DH and HEFCE of the need for changes to student intake targets. HEFCE will also be using the data to monitor the medical and dental intake targets and to inform funding allocations.
4. The census date for the 2014-15 intake data is 9 October 2014.
5. Higher education institutions with joint medical schools (see Annex A) are expected to submit a single joint return. We also expect a joint return to be made by the Universities of Leeds and Bradford.
6. As part of the Government's commitment to transparency, HEFCE intends to publish data on confirmed 2013-14 intakes on our web-site. See www.hefce.ac.uk/whatwedo/crosscutting/healthcare/mds/ for the equivalent 2012-13 data.

Action required

7. Completed workbooks must be returned via the HEFCE secure data collection site no later than **noon on Monday 20 October 2014**.

Changes and clarifications since MDS13

Changes to tables

8. Starting with the 2014 Medical and dental students survey (MDS14), institutions in England will have a new read-only summary worksheet. See paragraph 14 for details.

Intake targets for institutions in England

9. For institutions in England where there is a medical and/or dental school, the relevant intake target will appear on each of the MDS worksheets.

Sign-off procedures

10. From MDS14 onwards, the verification worksheet, used to sign off data for institutions in England, need no longer be posted to HEFCE but should be submitted electronically. The data must be signed off by the head of institution and submitted by **Friday 7 November 2014**. See paragraphs 17 to 19 for more information on the verification process.

Survey details

Data preparation and submission

11. Contacts within the medical and dental schools will be able to access their institution's workbook via the HEFCE secure data collection site in September 2014. Information on how to use the secure data collection site will be sent to data contacts at the institutions in September. The workbook will be saved in Excel 2010 and is individually prepared for each institution.

12. The name of the workbook will be mds14____.xlsx, where the suffix identifies the institution. Do not attempt to rename or reformat the workbook, because our systems for loading institutions' returns depend on the file-naming convention and file formats.

13. All totals, labels and table formats will be locked using Excel's cell protection facilities. Do not attempt to change the contents of the protected cells, or the structure of tables by adding or deleting any rows or columns. Only cells where data are required should be altered. If a password warning appears, this means a protected cell has been selected or an attempt made to 'paste' over a protected cell.

14. The Excel workbook contains the following four worksheets (see Annex B for examples):

- **MD1** – Medical students intake during the academic year 2013-14
- **MD3** – Medical students intake for the academic year 2014-15 as at 9 October 2014
- **DT1** – Dental students intake during the academic year 2013-14
- **DT3** – Dental students intake for the academic year 2014-15 as at 9 October 2014.

For institutions in England there is an additional worksheet (see Annex C):

- **MDS14Summary** – A read-only summary that shows for each MDS table the institution's intake target, the reported total intake, and the number and percentage of overseas students from the reported intake. This table will be populated automatically when data are entered in the survey tables (MD1,MD3, DT1 and DT3).

15. All worksheets in the original workbook should be returned even if they contain no data. You should keep a back-up copy of the tables that you return to HEFCE.

16. Completed workbooks must be uploaded to the HEFCE secure data collection site by **noon on Monday 20 October 2014.**

Data verification and sign-off

17. After the survey is successfully submitted to HEFCE's secure data site, institutions should check the data in the results package to ensure that they are consistent with what has been submitted and that the 'date loaded' field has the date of the latest upload. HEFCE will check the data for all institutions against previous years' returns, and for institutions in England against the intake targets set for the year. Any discrepancies will be queried with the institution (or, in the case of a joint submission, with the institution that has submitted the data).

18. HEFCE requires institutions in England to sign off their MDS data, as the survey informs funding allocations. By **Friday 7 November 2014**, all institutions in England must have signed off their MDS14 data as fit for purpose. Given its significance to institutions' funding, we require the head of institution to sign off the finalised MDS return. This requires them to understand our data collection requirements, so that they can ensure that the institution has systems capable of producing an accurate, complete return and that the preparer of the return has compiled it competently.

19. If it is anticipated that the head of institution will be unavailable to sign off the data by the deadline, institutions should e-mail mds@hefce.ac.uk to agree interim arrangements. We will expect the head of institution to sign off the data on their return. If an institution fails to meet the deadline for signing off data, or we believe the data to be inaccurate, we reserve the right to use our own estimates of data to inform funding allocations (see paragraph 29 of 'Memorandum of assurance and accountability between HEFCE and institutions', HEFCE 2014/12). We cannot guarantee that any amendments to data after 7 November 2014 will be taken into account.

20. The workbook in the results package will contain a verification sign-off worksheet. This sheet is relevant only to institutions in England and can be ignored by those in Scotland, Wales and Northern Ireland. Once HEFCE has completed the data verification process, institutions in England will be asked to print the verification sheet and have it signed by the head of institution. The scanned PDF copy of the signed verification sheet should be e-mailed to mds@hefce.ac.uk by 7 November 2014.

21. HEFCE may use the Higher Education Statistics Agency (HESA) student record to monitor parts of the MDS return and will query institutions if there are discrepancies.

Definitions and guidance

Coverage of tables (MD1, MD3, DT1 and DT3)

22. The intakes in all tables should be the headcount of students starting a first UK registrable medical or dental qualification programme (discounting those who already hold such a qualification). This will include students starting a 'graduate-entry course' (defined as one whose entry requirement is a first degree in a subject other than medicine or dentistry). Students who join a programme in the second or later year should also be included, unless they are transferring (see paragraph 35) or already hold a first UK registrable medical or dental qualification. All students included in the MDS should be included in the institution's individualised HESA student record for the relevant academic year.

23. International students who are entering after the first year of a medical or dental programme and intend to complete their first UK registrable medical or dental qualification, resulting in full registration with the General Medical Council, are to be reported as intakes. For example, students from the International Medical University of Malaysia joining year 3 should be included.
24. All international students should be included in the MDS survey unless an explicit exemption has been granted by the Department of Health (DH) to exclude certain students from the intake control. The procedure for reporting international students in future years (including those who may meet full placement costs) is still under review and will be subject to decisions taken by the DH following a review to be completed during 2014.
25. Where a student is studying for a medical or dental specialism that requires dual qualifications in both medicine and dentistry, such as oral and maxillofacial surgery, that student should only be reported for their first qualification. The intake on the second medical or dental programme and subsequent qualification should not be reported on this survey.
26. Students on courses preceding a course leading to a first UK registrable medical or dental qualification (such as foundation 'year 0' courses) should not be included in the reported intake figures, until they start year 1 of a programme leading to a first UK registrable medical or dental qualification. Where institutions have fully integrated programmes that include the equivalent of a 'year 0' foundation year as the first year of the programme, the student should be reported as an intake when they start year 1 of the programme leading to a first UK registrable medical or dental qualification rather than in 'year 0'. For institutions in England, as the 'year 0' foundation students on integrated courses will not be part of the MDS intake control, students in 'year 0' will count against the wider institutional student number control unless they are exempt on the basis of their entry qualifications. Therefore institutions will need to manage that intake within their overall student number control for 2014-15.
27. Students who have not withdrawn but who for any reason are repeating the year in which they were reported as an intake on MDS13 (Column 1 of MD3 or DT3) should be reported again as an intake in Column 1 of MD3 or DT3 on MDS14, as well as an intake in Column 1 of MD1 or DT1 on MDS14. Note that such students are counted against an institution's intake target in both years. If a student re-sits their exams early enough in the year of the programme to progress with their original entry cohort, then they are not a repeat intake and should not be reported again in Column 1 of MD3 or DT3 on MDS14. However, if a student re-sits their exams later in the year so that they are unable to progress with their original entry cohort (and would therefore be joining the following year's cohort), then they should be treated as an intake again in Column 1 of MD3 or DT3 on MDS14 (and in MD1 or DT1 as appropriate on MDS14).
28. Students who intend to take an intercalating non-medical or non-dental degree should be included as intakes when they first register with the institution where they intend to obtain a first UK registrable medical or dental qualification. This includes intakes to any six-year medical or dental programme that includes a non-medical or non-dental degree as part of the programme.
29. For MD3 and DT3, intakes should be reported as at **9 October 2014**. Additional intakes after 9 October 2014 but before the end of the academic year, who have not withdrawn before the end of the academic year, should be reported on the following year's (2015) survey in Column 1 of MD1 or DT1 on MDS15.

30. MD1 and DT1 intakes on MDS14 are an update of the MD3 and DT3 intakes collected on MDS13. Students who withdrew from the programme between 10 October 2013 and 31 July 2014 inclusive should be reported in Column 3 of MD1 or DT1, but not in Column 1 of MD1 or DT1 on MDS14. Students who withdraw after 31 July 2014 should be reported in Column 1 of MD1 or DT1 on MDS14.
31. Students should be treated as having withdrawn for the purposes of this survey when they cease studying towards a first UK registrable medical or dental qualification. A date recorded in the ENDDATE field on the HESA student record indicates that a student has withdrawn. If the student returns to their studies they should then be reported again as an intake in Column 1 of MD3 or DT3 on MDS14.
32. Students who transfer to a programme that is not a first UK registrable medical or dental qualification should be reported as having withdrawn even if their ENDDATE field is blank.
33. Students who transfer from a programme leading to a first UK registrable medical qualification to a programme leading to the equivalent dental qualification, or vice versa, should be reported as withdrawn on the first programme and as an intake on the second.
34. Medical or dental students transferring to a different institution in their first year should be reported as a withdrawal in Column 3 of MD1 or DT1 of MDS14 for the institution they transfer from and an intake in Column 1 of MD1 or DT1 of MDS14 for the programme they transfer to.
35. Students transferring between medical programmes after the first year should not be reported as intakes for the programme they transfer to, even when they change institutions. Similarly, students transferring between dental programmes after the first year should not be reported as intakes. However, students who transfer from a medical programme to a dental programme or vice versa, should be reported as an intake for the programme they transfer to.
36. Students who suspend their studies should only be reported as having withdrawn when they have a value in their ENDDATE field; otherwise they should be reported in the survey in Column 1 of MD1 or DT1 on MDS14.

Examples

Example 1 – Suspension of studies with return to programme: a. by census date b. after census date

37. A student started a first UK registrable medical programme on 3 October 2013 and was reported in Column 1 of MD3 on MDS13. They then suspended their studies, with no ENDDATE, and intended to return in October 2014 to retake the year. They should be reported in Column 1 of MD1 on MDS14 and not as withdrawn.
- a. If they return by the census date of 9 October 2014 they should also be reported on in Column 1 of MD3 on MDS14 and would be reported the following year in MD1 on MDS15.
 - b. If they return after the census date of 9 October 2014 they should not be reported in MDS14 MD3 but would still be reported the following year in MD1 on MDS15.

Example 2 – Suspension of studies followed by continuation alongside the original entry cohort

38. A student started a first UK registrable medical programme on 3 October 2013, then became ill from 16 December 2013 and subsequently suspended their studies. There is no ENDDATE on their HESA record. They then returned on 3 March 2014 and were able to catch up with their original entry cohort and complete the year. This student should be an intake in Column 1 of MD1 on MDS14.

Example 3 – Registration, withdrawal then re-registration

39. A student started a first UK registrable medical programme on 3 October 2013 but suspended studies on 6 January 2014. They notified the institution on 20 June 2014 that they do not intend to return and an ENDDATE was recorded in the 2013-14 HESA student record. As the student has withdrawn from the first UK registrable medical programme by 31 July 2014, they should be reported in Column 3 and not in Column 1 of MD1 on MDS14. If the student subsequently reversed this decision after the 31 July 2014 and chose to return they would be treated as an intake in a subsequent survey.

Example 4 – Re-sitting of exams followed by continuation alongside the original entry cohort

40. A student started a first UK registrable dental programme on 3 October 2013. They re-sit their first year exams in August 2014. They pass and are able to continue with their original entry cohort onto year 2 in September 2014, and therefore should be reported in Column 1 of DT1 on MDS14.

Example 5 – Re-sitting of exams followed by continuation alongside the following year's cohort

41. A student started a first UK registrable medical programme on 3 October 2013. They are unable to re-sit their exams in August 2014 and subsequently are unable to continue with the 2013-14 original entry cohort. They will re-sit their exams in July 2015 and continue with the 2014-15 cohort into their second year. This student would be reported in Column 1 of MD1 on MDS14 and in Column 1 of MD3 on MDS14 and in the following year should be reported in Column 1 of MD1 on MDS15.

Example 6 – Transfer to a programme that is not a first UK registrable medical or dental programme

42. A student started a first UK registrable medical programme on 3 October 2013 but transferred to a biosciences degree on 6 January 2014. As the student had withdrawn from the first UK registrable medical programme by 31 July 2014, they should be reported in Column 3 and not in Column 1 of MD1 on MDS14.

Example 7 – Transfer from a medical to a dental programme

43. A student started a first UK registrable medical programme on 3 October 2013 but on 6 January 2014 transferred to a first UK registrable dental programme. As the student had withdrawn from the first UK registrable medical programme by 31 July 2014, they should be reported in Column 3 and not in Column 1 of MD1 on MDS14. However, as they started a first UK registrable dental qualification programme on 6 January 2014 they should be included as an intake in Column 1 of DT1 on MDS14.

Row and column descriptions

44. For all tables, student numbers should be reported by sex, fee eligibility and domicile.
45. Fee eligibility, as coded on the HESA student record, indicates for the purposes of this survey whether a student is eligible to pay home or other fees. Students charged home fees are coded 1 in the fee eligibility field (FEEELIG) and those charged other fees are coded 2.
46. Domicile columns refer to the country of the student's permanent or home address prior to entry to the programme. European Union (EU) and overseas students are those **not** domiciled in Great Britain, Northern Ireland, the Channel Islands or the Isle of Man. For English institutions, for the purposes of the caps of 7.5 per cent on overseas medical intake and 5 per cent on overseas dental intake, only intakes recorded as subject to 'other' fees in Column 1d will be counted.
47. Column 2 on all tables records students on a graduate-entry course. Students entered in this column should also be included in Columns 1a to 1d on each table as appropriate.
48. Column 3 on MD1 and DT1 records intakes who have withdrawn from the programme between 10 October 2013 and 31 July 2014 inclusive, by fee eligibility. Intakes who have withdrawn from the programme by 31 July 2014 should be reported in Column 3 of MD1 or DT1 on MDS14 and not included in Column 1 of MD1 or DT1 on MDS14.

Annex A: Higher education institutions with joint medical schools

We expect the following higher education institutions with joint medical schools to submit a medical return this year:

- University of Brighton and University of Sussex
- University of Hull and University of York.

There should be a single joint return from each joint medical school.

Annex B: Examples of tables

This annex provides examples of tables MD1, MD3, DT1 and DT3, which appear in the Excel workbook for the Medical and dental students survey 2014.

Headcount of medical students

Intake during the academic year 2013-14

MD1

UKPRN:

HESAINST:

Please upload the survey by noon Monday 20 October 2014

Survey contact: Sarah Azadian-Zobay mds@hefce.ac.uk 0117 931 7207

Date Loaded:

Intake target:		1		1a		1b		1c		1d		2	3
Fee eligibility	Total intake of students not withdrawn from the programme		Domiciled in Great Britain		Domiciled in Northern Ireland		Domiciled in the Channel Islands & Isle of Man		Domiciled EU and overseas		Intake to 'graduate-entry' courses (included in Column 1)	Intake of students withdrawn from the programme (not in Column 1)	
	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women			
Home fees	0	0	0	0	0	0	0	0	0	0	0	0	
Other fees	0	0	0	0	0	0	0	0	0	0	0	0	
Total	0	0	0	0	0	0	0	0	0	0	0	0	

Headcount of medical students

Intake for the academic year 2014-15 as at 9 October 2014

MD3

UKPRN:

Please upload the survey by noon Monday 20 October 2014

Survey contact: Sarah Azadian-Zobay mds@hefce.ac.uk 0117 931 7207

Date Loaded:

Intake target:		1		1a		1b		1c		1d		2
Fee eligibility	Total intake of students not withdrawn from the programme		Domiciled in Great Britain		Domiciled in Northern Ireland		Domiciled in the Channel Islands & Isle of Man		Domiciled EU and overseas		Intake to 'graduate-entry' courses (included in Column 1)	
	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women		
Home fees	0	0	0	0	0	0	0	0	0	0	0	
Other fees	0	0	0	0	0	0	0	0	0	0	0	
Total	0	0	0	0	0	0	0	0	0	0	0	

Headcount of dental students

Intake during the academic year 2013-14

DT1

UKPRN:

Please upload the survey by noon Monday 20 October 2014

Survey contact: Sarah Azadian-Zobay mds@hefce.ac.uk 0117 931 7207

Date Loaded:

Intake target:												
Fee eligibility	1 Total intake of students not withdrawn from the programme		1a Domiciled in Great Britain		1b Domiciled in Northern Ireland		1c Domiciled in the Channel Islands & Isle of Man		1d Domiciled EU and overseas		2 Intake to 'graduate entry' courses (included in Column 1)	3 Intake of students withdrawn from the programme (not in Column 1)
	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women		
Home fees	0	0	0	0	0	0			0	0		0
Other fees	0	0	0	0	0	0	0	0	0	0		0
Total	0	0	0	0	0	0	0	0	0	0		0

Headcount of dental students

Intake for the academic year 2014-15 as at 9 October 2014

DT3

UKPRN:

Please upload the survey by noon Monday 20 October 2014

Survey contact: Sarah Azadian-Zobay mds@hefce.ac.uk 0117 931 7207

Date Loaded:

Intake target:												
Fee eligibility	1 Total intake of students not withdrawn from the programme		1a Domiciled in Great Britain		1b Domiciled in Northern Ireland		1c Domiciled in the Channel Islands & Isle of Man		1d Domiciled EU and overseas		2 Intake to 'graduate entry' courses (included in Column 1)	
	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women		
Home fees	0	0	0	0	0	0			0	0		0
Other fees	0	0	0	0	0	0	0	0	0	0		0
Total	0	0	0	0	0	0	0	0	0	0		0

Annex C: Example summary table (institutions in England only)

This annex provides an example of the MDS14Summary table, which appears in the Excel workbook for the Medical and dental students survey 2014 for institutions in England only.

2014 Medical and dental students survey summary (read-only)

Survey contact: Sarah Azadian-Zobay, mds@hefce.ac.uk, 0117 931 7207

Information taken from MDS14 forms MD1, MD3, DT1, DT3

Institution:

UKPRN:

This summary is for information purposes only and HEFCE will notify institutions of any adjustments to grant arising from over-recruitment later this year.

2013-14 Intakes

Table	2013-14 Intake target	Total intake	Overseas intake	Percentage overseas
MD1	0	0	0	
DT1	0	0	0	

'Total intake' is the sum of columns 1 and 3 of MD1 or DT1.

'Overseas intake' is the total number of students returned as domiciled EU and overseas (column 1d) subject to other fees.

'Percentage overseas' is 'Overseas intake' divided by 'Total intake' expressed as a percentage.

2014-15 Intakes

Table	2014-15 Intake Target	Total intake	Overseas intake	Percentage overseas
MD3	0	0	0	
DT3	0	0	0	

'Total intake' is the sum of column 1 of MD3 or DT3.

'Overseas intake' is the total number of students returned as domiciled EU and overseas (column 1d) subject to other fees.

'Percentage overseas' is 'Overseas intake' divided by 'Total intake' expressed as a percentage.