



# Annual Quality Report

## 2015/16

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## Foreword

Delivering the highest possible quality is at the centre of everything we do in NIMDTA. We all, regardless of our job role, seek to continually improve our services to Doctors and Dentists in training, with the overall aim of improving patient care and creating the medical and dental workforce that will be necessary to meet the future needs of the population of Northern Ireland.

In order for us to deliver our programmes, we rely on a range of partners within many other HSC Bodies, but in particular with the five HSC Trusts, the PHA, GP Practices and Dental Practices who, on a day-to-day basis, provide the quality of training required to meet the standards prescribed by our Regulatory Bodies. In this respect we have continued to develop effective Learning and Development Agreements which include robust quality assurance processes to ensure that standards are consistently achieved. These are regularly reviewed and, where necessary, revised to ensure that we remain able to reflect best practice across the wide range of specialties and sub-specialties covered within our operational plan.

As always, we have sought to continually improve our processes and procedures in all areas through an on-going review programme. The following developments detailed within this report have been of particular note during the year:

- A range of successful Quality Improvement projects delivered through the inaugural Clinical Leadership Fellows' Programme (ADEPT)
- Introduction of the 15 module Generic Skills Programme for ST and CT Doctors (iQUEST)
- Advances in the important area of Recognising and Improving Trainers
- Progress in the development of Simulation and Human Factors expertise
- Significant training for Educators, Education Managers and Administrative staff in Quality Improvement Methodology
- A highly successful Educational Excellence Day designed to recognise exceptional achievements

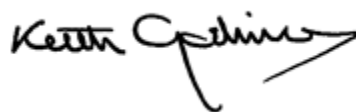
We have, as always, responded positively and in a timely way to the vast array of changes which have impacted on our services. We have also continued to perform well in meeting our targets, despite the many additional demands that have arisen during this period. We remain aware that there are further significant challenges ahead, but remain confident that we are well placed to deal with these effectively.

We have continued to run Staff Engagement Workshops in order to maximise the input from all of our staff. These have been well attended and have continued to indicate that staff members regard NIMDTA as a good place to work and that they feel valued.

Although we have detailed our achievements to date in the following Report, we remain committed to a continuous improvement ethos through which we will continue to demonstrate future progress.



Alistair Joynes  
Chair



Professor Keith Gardiner  
Post-Graduate Dean/Chief Executive

## Role of NIMDTA

The Northern Ireland Medical and Dental Training Agency (NIMDTA) is an Arm's Length Body sponsored by the Department of Health (DoH) to train postgraduate medical and dental professionals for Northern Ireland. NIMDTA seeks to serve the government, public and patients of Northern Ireland by providing specialist advice, listening to local needs and having the agility to respond to regional requirements.

NIMDTA commissions, promotes and oversees postgraduate medical and dental education and training throughout Northern Ireland. Its role is to attract and appoint individuals of the highest calibre to recognised training posts and programmes to ensure the provision of a highly competent medical and dental workforce with the essential skills to meet the changing needs of the population and health and social care in Northern Ireland.

NIMDTA organises and delivers the recruitment, selection and allocation of doctors and dentists to foundation, core and specialty training programmes and rigorously assesses their performance through annual review and appraisal. NIMDTA manages the quality of postgraduate medical and dental education in HSC Trusts and in general medical and dental practices through learning and development agreements, the receipt of reports, regular meetings, trainee surveys and inspection visits. It works in close partnership with local education providers (LEPs) to ensure that the training and supervision of trainees support the delivery of high quality safe patient care.

NIMDTA recognises and trains Clinical and Educational Supervisors and selects, appoints, trains and develops educational leaders for foundation, core and specialty medical and dental training programmes throughout NI.

NIMDTA is accountable to the General Medical Council (GMC) for ensuring that the standards set by the GMC for medical training, educational structures and processes are achieved. The Postgraduate Medical Dean, as the 'Responsible Officer' for doctors in training, has a statutory role in making recommendations to the GMC to support the revalidation of trainees. Revalidation is the process by which the GMC confirms that doctors are up to date and fit to practise. NIMDTA also works to the standards in the Committee of Postgraduate Dental Deans and Directors (COPDEND) framework for the quality development of postgraduate dental training in the UK.

NIMDTA seeks to enhance the standard and safety of patient care through the organisation and delivery of relevant and valued career development for general medical and dental practitioners and dental care professionals. It also supports the career development of general medical practitioners and the requirements for revalidation through the management and delivery of GP appraisal.

NIMDTA aims to use the resources provided to it efficiently, effectively and innovatively. NIMDTA's approach to training is that trainees, trainers and educators should put patients first, should strive for excellence and should be strongly supported in their roles.

## Explanation of Quality Reports

The 'Health and Personal Social Services' (Quality, Improvement and Regulation)(Northern Ireland) Order 2003 introduced a Statutory **Duty of Quality** on the Health and Social Care Board and Trusts. This meant that each Health and Social Care organisation has a legal responsibility to ensure that the care that it provides must meet a required standard.

**Quality Standards** for Health and Social Care (HSC) in NI were formally launched on 14 March 2006 and delineated five key quality themes:

- Corporate leadership and accountability of organisations
- Safe and effective care
- Accessible, flexible and responsive services
- Promoting, protecting and improving health and social well being
- Effective communication and information

The Quality 2020 Strategy designed to protect and improve quality of health and social care in Northern Ireland was launched in 2011. The purpose of **Quality 2020** was to create a strategic framework and plan of action that would protect and improve quality and therefore Patient Safety over a 10 year period.

The vision of **Quality 2020** was for HSC *"to be recognised internationally, but especially by the people of Northern Ireland, as a leader for excellence in health and social care."*

Quality 2020 has five **Strategic Goals**:

- Transforming the Culture
- Strengthening the workforce
- Measuring the improvement
- Raising the standards
- Integrating the care

Objective 4 of the Quality 2020 Strategy placed a requirement on each HSC organisation to produce a **Quality Report** every year. The aim of these Quality Reports is to increase accountability of the HSC organisations against the Duty of Quality that health and social care organisations are required by law to meet.

Quality Reports are required to state clearly the progress made in each organisation toward meeting the goals of the strategy and also to comment on the improvement made to the quality of services commissioned, delivered or promoted within the previous 12 months by that organisation.

NIMDTA recognises the vital role that postgraduate medical and dental education and training plays in ensuring patient safety and enhancing patient care and this **NIMDTA Quality Report for 2015/16** sets out what NIMDTA has done to support Quality 2020 under each of the five **Quality 2020 Strategic Goals**.

## 1. Transforming the Culture

**Quality 2020 Aim: We will make achieving high quality the top priority at all levels in health and social care. We will promote and encourage partnerships between staff, patients, clients and carers to support decision making.**

### NIMDTA Board

The NIMDTA Board is responsible for the strategic direction and control of NIMDTA's activities and comprises a non-executive Chair and five non-executive members (three lay members, one medical practitioner [currently vacant] and one dental practitioner). The Board delegates specific areas of work to its three sub-committees (Audit, Governance and Risk, Remuneration) and to the Senior Management Committee.

The Audit Sub-Committee supports the Board by providing an independent and objective review of financial system and information, the adequacy and effectiveness of the systems of internal control, as well as compliance with the law and appropriate guidance.

The Governance and Risk Sub-Committee supports the Board by providing oversight of NIMDTA's corporate governance framework. This Committee seeks to ensure that processes and governance structures are in place to effectively monitor risks and provide high quality training.



NIMDTA Board 2015/16  
Mr Lee Wilson, Mr Alistair Joynes, Mr Gordon Smyth (front)  
Mr Deane Morrice, Mr Derek Maguire (standing)

The Remuneration Sub-Committee supports the Board by considering issues in relation to the remuneration of directors and senior managers.

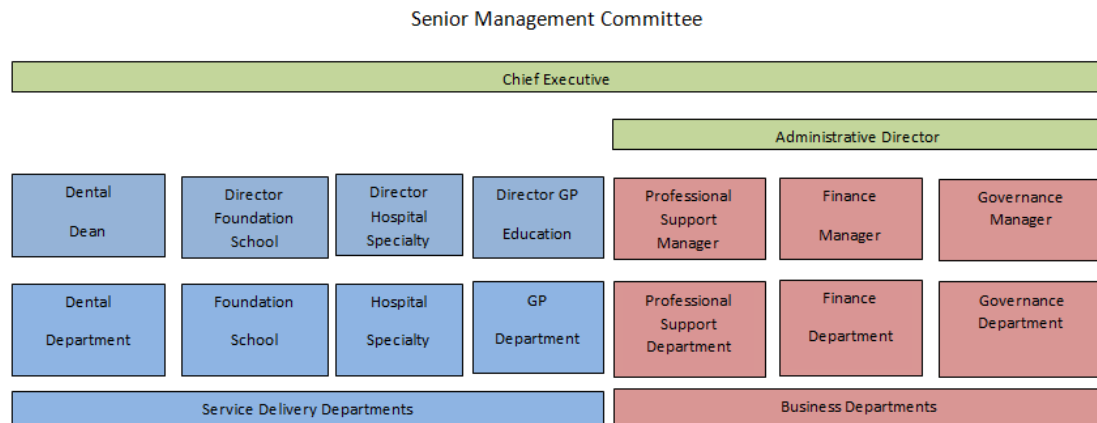
The Board receives reports from members of the Senior Management Committee on the quality of training delivered by each of NIMDTA's four service departments (Dentistry, Foundation, Hospital Specialty and General Practice) as well as on the quality of performance of NIMDTA's three business departments (Finance, Governance and Professional Support).

Board members play a key role in transforming the culture of NIMDTA through their commitment to NIMDTA and their sustained interest in NIMDTA delivering high quality service in all aspects of its work which is evidenced by their attendance at staff briefings, joint workshops with senior members of staff, support of educational events (Annual Foundation Induction Day and Clinical Education Day), meetings with distinguished visitors, interview panels for senior staff appointments in addition to their work at Board and Board Sub-committee meetings.

## NIMDTA Senior Management Committee

The Senior Management Committee supports the Board through the provision of operational oversight of NIMDTA and the delivery of its services.

The delivery of postgraduate education and training to doctors and dentists by NIMDTA is primarily carried out by four departments – Dentistry, General Practice, Foundation and Hospital Specialty. These four departments are supported by a further three business departments – Professional Support, Finance and Governance. The members of the Senior Management Committee are shown below:



NIMDTA has established a number of internal cross-departmental groups that work to ensure that specific areas of NIMDTA’s services are delivered consistently across departments, that learning is shared amongst key individuals and that peer support is available.

Quality is embedded within the Senior Management Committee, Departmental Committees and cross-departmental groups and is a responsibility of all educator and administrative staff.

NIMDTA’s Quality Management Group is a cross-departmental group which monitors and assesses the delivery of postgraduate medical and dental education and training against national standards. The GMC’s Quality Improvement Framework outlines the responsibility of NIMDTA as a Deanery for the quality management of postgraduate medical training.

The aims of NIMDTA's Quality Management Group are to ensure that standards required by regulatory bodies are met by promoting and sharing good practice across all specialties; enhancing the training of trainers, improving the quality of curriculum delivery in all specialties, removing obstacles to postgraduate medical education and training; and developing the resources and infrastructure of postgraduate medical education and training.

## NIMDTA Reports

NIMDTA reports to the DoH through Monitoring Returns, Annual Reports and Financial Statements, Annual Quality Reports and through Accountability Meetings (mid-year; end of year). NIMDTA is accountable to the GMC for ensuring that the GMC standards for postgraduate medical training (Promoting Excellence) are achieved in NI (Dean’s Report to the GMC). NIMDTA also is required to respond to GMC queries, results of GMC National Training Surveys and other educational metrics

(examination success, annual reviews of progress of trainees, success at recruitment into specialty training).

## Good Practice

Good practice, areas for improvement and areas of concern are identified through reports from Local Educational Providers (LEPs) and specialty training programmes, visits to educational units and from surveys of trainees. NIMDTA has a variety of opportunities to share good practice:

### Nationally

- Conference of Postgraduate Medical Deans (COPMED)
- Committee of Postgraduate Dental Deans and Directors (COPDEND)
- Committee of General Practice Education Directors (COGED)
- Dean's Reports to the GMC
- NIMDTA reports to Royal Colleges and Faculties

### Regionally

- DoH Responsible Officer Forum (regarding revalidation)
- DoH Medical Leaders' Forum (clinical service-medical education interactions)
- Public Health Agency (PHA) Medical Directors Group (clinical service-medical education interactions)
- NI Postgraduate Education Forum
- NIMDTA Lead Educator Forum

Medical Leaders Forum  
Monday 7<sup>th</sup> September 2015  
1.00pm-4.00pm  
D2 Lecture Theatre, Castle Buildings

AGENDA	
Apologies	
<b>PART I STRATEGIC ISSUES</b>	
<b>Items</b>	<b>Papers</b>
1. Strategy for Attracting and Retaining Trainees in NI <b>Keith Gardiner &amp; Dr Cathy Jack</b>	17/15
2. GMC Generic Professional Capabilities Framework <b>Keith Gardiner</b>	18/15
3. Consent for Examination, Treatment or Care in adults and children <b>Dr Cathy Jack</b>	19/15
4. Development of Advanced Nursing Practice Framework and role of ANP <b>Mary Hinds</b>	20/15

Medical Leaders Forum  
March 7<sup>th</sup> 2016  
1.00-4.30pm  
D2 Lecture Theatre, Castle Buildings

AGENDA	
Apologies	
<b>PART I STRATEGIC ISSUES</b>	
<b>Items</b>	<b>Papers</b>
1. Leadership Opportunities for Medical Trainees <ul style="list-style-type: none"> <li>Belfast Trust STEP Programme <b>Dr Cathy Jack, Dr Claire Lundy and Mr Kris McKeever</b></li> <li>ADEPT Clinical Leadership Fellowship <b>Keith Gardiner, Dr Rachel Hutton &amp; Dr Natalie Thompson</b></li> </ul>	6/2016 7/2016
2. Factors Influencing Medical Career Decisions in Trainees in NI <b>Keith Gardiner &amp; Dr Rachel Hutton</b>	8/2016
3. NI Blood Transfusion Service <b>Dr Susan Atkinson ; Dr Damien Carson</b> <ul style="list-style-type: none"> <li>NI Transfusion Committee Work plan to optimise blood component use in NI</li> <li>HSC Circular 2/16 concerning implementation of NICE Clinical Guideline 24 on Blood transfusion <a href="http://www.nice.org.uk/guidance/ng24">http://www.nice.org.uk/guidance/ng24</a></li> </ul>	9/2016

**Agenda**

MEETING: Specialty Lead Educators Forum  
DATE: Tuesday 29 September 2015  
TIME: 2.00 pm  
VENUE: Conference Room, HSC Leadership Centre, Hampton Manor Drive, Belfast

**Presentation:**  
Guest Speaker: **Mr Tom Lynch, Head of Nuclear Medicine, NCC & Founder, Experior App**

- Apologies
- Minutes of Previous Meeting For Approval
- Matters Arising from Previous Minutes
- Chairman's Business
- New Appointments
- Updates on Workforce planning
- iQUEST: Generic Capabilities for Specialty Trainees
- ADEPT NI Clinical Leadership Fellows Programme
- NIMDTA Policy Developments
- NIMDTA Trainer Developments
- Revalidation Update
- Quality Management Group Update

NIMDTA issues a Lead Educator Newsletter to welcome new educators, announce forthcoming training events for educators and trainees, celebrate good practice and achievements and to highlight changes in guidance and policies.

**NIMDTA Lead Educator News** Newsletter June 2015

**Index for Your Diary**  
Annual Educators' Day is on Friday 18 September 2015 at Belfast Castle and is being held jointly with GUB for the first time.  
Lead Educator Forum: Last meeting will be held on 2pm on Tuesday 29 September at the HSC Leadership Centre. The Forum will replace the COP.

**Advanced Communication Skills - Revalidation**  
New Headlines (Aspect Article: Generalist) will lead a lesson on workplace communication skills on Monday 5 October 2015.  
Advanced Trainee Support Workshop to be held on Wednesday 10 November 2015.  
Faculty of Medical Leadership and Management Regional Conference Thursday 12 November 2015 at Royal Hall.

**NIMDTA World Quality Day**  
Event with Professor Susan Atkinson on Friday 13 November 2015.  
Dr John Collins  
We will be very sorry to lose Dr Collins who has been Associate Dean for Clinical Development since 2007 until his retiring at the end of November 2015.  
Dr Cathy Jack  
We are very pleased to have Dr Cathy Jack as our new Deputy Chair of the HSC Leadership Centre and Education (COGED).  
Emergency Medicine  
Thursday 11 Nov 2015  
Anaesthetics  
Thursday 12 Dec 2015

**Appointments & Resignations:**  
A warm welcome is extended to:  
Dr John Black - HSC D2  
Dr Mike Murray - Simulation Lead  
Dr Cathy Jack - Associate Dean - Clinical and Professional Support  
Head of School - Diagnostic  
Dr Cathy Black - Medical Microbiology & Public Health

**Quality**  
GMC Standards  
New and Super GMC contributions  
Developing & Reviewing for generic professional capabilities  
Introducing required competencies  
Publication and Disclosure  
http://www.gmc-uk.org/leadership/quality/ (27/01/2015)  
GMC Standards  
New GMC Standards for Medical Education and Training to be launched on 30 July 2015  
New policy being developed on return to work  
Additional training needs  
Seven new Training Posts in NI have been created at D2 in HSC. These posts have been funded by the HSC Trust.  
There will be 2000+ visits / Speeches Reviews in the autumn in NI.  
Emergency Medicine  
Oncology & Geriatrics  
General Surgery  
General Medicine

**Trainee News and Events**  
ADEPT Clinical Leadership Fellows Programme  
Academy of Medical Sciences (AMS) Scheme  
Ms Sandra McEllen (Public Health) has been selected as one of the inaugural cohort of 20 female scientists across the UK to take part in the British scheme to support more women to achieve senior research positions.  
New Academic Clinical Fellowships/Consultants  
Congratulations to:  
Dr Gill Davidson (Genetics); ACP  
Dr Emma Cunningham (Genetic Medicine); ACP  
Dr Debra Bradley (Public Health Medicine); ACP  
Special Leadership and Professional Skills  
Speciality trainees:  
The recent Leadership and Professional Skills programme for specialty trainees is to be launched on 18th October 2015 at the HSC Leadership Centre by Dr Anne Egan (COGED).  
They are all well supported and well-attended.  
Quality Improvement Human Factors, Training for Consultant Interview  
Trainee Issues  
Next meeting: Tuesday 20 October 2015 at 5pm.

**NIMDTA Lead Educator News** Newsletter September 2015

**Index for Your Diary**  
Lead Educators' Forum for 2015 on Monday 14 September 2015 at the HSC Leadership Centre. Dr Tom Lynch will give an update on his paper.  
The Forum will be held on Tuesday 15 September 2015 at the HSC Leadership Centre. Dr Cathy Jack will give an update on her paper.  
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In October 2015, NIMDTA highlighted 10 items of Good Practice to the General Medical Council in the NIMDTA Dean's Report. These are accessible on the NIMDTA Website ([http://www.nimmdta.gov.uk/download/quality\\_management/GMC%20October%202015%20DR%20-%20Good%20practice.pdf](http://www.nimmdta.gov.uk/download/quality_management/GMC%20October%202015%20DR%20-%20Good%20practice.pdf)) and describe Good Practice identified within HSC Trusts as well as new initiatives by NIMDTA

GMC Dean's Report Good Practice Items – October 2015

Item Number	LEP	Description of item	Actions taken
NID1015-10	South Eastern Trust	<b>Foundation Patient Safety Learning Events.</b>	The South Eastern Trust has introduced 'HOT' (Honest, Open, Transparent) meetings for F1 trainees where there are discussions regarding errors that they have made and how to deal with and prevent recurrence. These meetings are facilitated by the Foundation Programme Director.  This area of good practice will be shared with the Directors of Medical Education and Foundation Programme Directors across the Trusts in Northern Ireland.
NID1015-11	Western Trust	<b>Induction.</b>	The Western Trust procured a recording company to record the Junior Doctor Induction. This enabled presenters to pre-record their presentations rather than be available on the two junior doctor intake days. The presentations which formed a DVD are now available on the Trusts Intranet or by secure link on YouTube.  This area of good practice will be shared with the Directors of Medical Education across the Trusts in Northern Ireland.
NID1015-12	Southern Trust (Daisy Hill Hospital)	<b>Handover.</b>	In addition to a 45 minute Friday handover meeting which consultant attend, Daisy Hill has introduced a Monday morning "take-back" handover to review outstanding issues, incidents, changes or deaths which had occurred over the weekend. This is very supportive for trainees.  This area of good practice will be shared with the Directors of Medical Education across the Trusts in Northern Ireland.
NID1015-13	Southern Trust (Daisy Hill Hospital)	<b>Local Faculty Group.</b>	Consultants, Staff Grades and StRs meet on a weekly basis to discuss and review all junior doctors' progress. This facilitates the identification of trainees who may be experiencing difficulty and the sharing of information between clinical and educational supervisors.  This area of good practice will be shared with the Directors of Medical Education across the Trusts in Northern Ireland.
NID1015-14	Deanery-Wide	<b>Renal medicine NTS Results.</b>	The Northern Ireland Renal Medicine Training programme and Belfast HSC Trust received multiple green flags in the 2015 GMC NTS survey - there were 4 green indicators recorded for Renal Medicine, all of which were in Northern Ireland. The training programme in Northern Ireland received the best ratings in the UK.  The Northern Ireland Renal Medicine programme was inspected by NIMDTA (with external assessor support) in November 2014 and received an A1: Excellent grading.
NID1015-15	Deanery-Wide	<b>Review of Study leave Funding allocations</b>	NIMDTA developed new guidance for the allocation of study leave funding from August 2015. The new guidance categorises courses into 3 type (Mandatory, Non-Mandatory Highly Recommended and Non-Mandatory Desirable. The guidance identifies what is mandatory within each specialty, as referenced in the Curriculum. This will ensure consistency across all specialties in how study leave is allocated and will be reflective across the academic year rather than financial year. This will remain under review with further revisions for August 2016 if necessary.

NID1015-16	Deanery-Wide	<b>Foundation Meet and Greet evening</b>	The Northern Ireland Foundation School introduced a 'Meet and Greet' evening event for all new F1 doctors who had not graduated from the local medical school (approx. 25%). This enabled the new doctors to meet the Foundation Team and other F1s who were not familiar with Northern Ireland.
NID1015-17	Deanery-Wide	<b>ADEPT</b>	NIMDTA in cooperation with partner host organisations in Northern Ireland launched a Clinical Leadership Fellows' programme for the training year 2015-2016. This programme provides senior doctors in training an opportunity to take time out of programme for 1 year to work in an apprenticeship model with senior leaders in host organisations in Northern Ireland to develop organisational and leadership skills.  Clinical Leadership Fellows will undertake one or more specific projects in their host organisations under supervision, attend formal leadership training including mentoring and coaching, and be provided with opportunities to network and learn with healthcare colleagues.  The first cohort of eight Clinical Leadership Fellows commenced in August 2015 following very competitive interviews.
NID1015-18	Deanery-Wide	<b>Simulation Lead</b>	The Deanery Simulation Lead is the Lead Educator responsible for co-ordinating and developing simulation across all training programmes in Northern Ireland. The Simulation Lead is supported by an ADEPT Clinical Fellow from August 2015-August 2016 to undertake a scoping exercise across Northern Ireland with the aim of identifying where the equipment, supporting infrastructure and technical support is based. A network of Trust simulation experts is being developed.
NID1015-19	Deanery-Wide	<b>Northern Ireland Trainee Forum</b>	The NIMDTA Trainee Forum has been established to provide a better opportunity for trainee views and feedback to be heard and ensure that training in the region is delivered to the highest standard in order to deliver excellent and safe clinical care to patients.  Greater engagement between NIMDTA trainee representatives and NIMDTA Senior Educators will be of benefit to NIMDTA's commissioning and quality management roles and thereby improve the quality of training. The forum involves trainees from foundation, hospital specialty, dentistry and GP programmes, to offer trainee perspectives on current issues and future developments.

Good practice of and success for NIMDTA Educators and trainees is acknowledged on the website, in the Lead Educator News and in Trainee Newsletters.

There are trainee newsletters for Foundation, GP, Core Medicine, Paediatrics and Hospital Specialty trainees. The Foundation Newsletter has been issued weekly since August 2014.

## Board Effectiveness

The Board completes good practice case studies, as part of an annual Board self-assessment, which are submitted to the DoH.

During 2015/16, BSO Internal Audit carried out an Audit of NIMDTA Board Effectiveness which was completed in September 2015. This audit reported a Satisfactory Level of Assurance.

## LEVEL OF ASSURANCE

SUBSTANTIAL	SATISFACTORY	LIMITED	UNACCEPTABLE
In relation solely to the scope of this audit and the work performed by audit staff, Internal Audit can provide Management with satisfactory assurance in relation to <b>Board Effectiveness</b> . Overall there is an adequate and effective system of governance, risk management and control. While there is some residual risk identified this should not significantly impact on the achievement of objectives. Some improvements are required to enhance the adequacy and/or effectiveness of governance, risk management and control.			

## MANAGEMENT SUMMARY

Internal Audit can provide satisfactory assurance on the system of internal control over Board Effectiveness examined within NIMDTA. Internal Audit verified a sample of two red flag, and four good practice question/areas within the Agency's Board Governance Self-Assessment Tool (Summary of Results) made to the DHSSPS. No issues were noted and Internal Audit agreed with the self assessment ratings. There are regular Board workshops which aid in enabling regular updates that keep Board members' skills and knowledge up-to-date. As part of their role Board members seek clarification and amplification on Board issues or Board papers where required, and have access to and appropriately challenge management where appropriate.

No Priority One Findings were identified.

## Involvement of NIMDTA Staff

NIMDTA's Senior Management Committee is keen to listen to staff views, which is facilitated by staff satisfaction surveys, briefings and workshops. In 2015/16 staff workshops concentrated on values and behaviours, strategic and business planning, staff development discussion and volunteering. In addition, there is an annual review of recruitment and selection with all NIMDTA Specialty Administrative Staff to identify issues and promote learning and good practice.

Dear All

Thank you for all your help yesterday as we looked at designing a systematic approach to staff development, re-examined values and behaviours and benefited from your thoughts on areas that should be considered during the business planning cycle for 2016/17.

Please find below the conclusions that you came to in groups regarding the values and behaviours that we should all demonstrate.

Group 1	<ol style="list-style-type: none"> <li>1. Trainee and Patient Focus</li> <li>2. Openness, integrity and transparency</li> <li>3. Professionalism</li> <li>4. Solution-driven effectiveness and efficiency</li> </ol>
Group 2	<ol style="list-style-type: none"> <li>1. Trainee focus and support and quality of training</li> <li>2. Integrity and respect (incorporating probity, honesty, loyalty and openness)</li> <li>3. Excellence (passion, professionalism and performance)</li> </ol>
Group 3	<ol style="list-style-type: none"> <li>1. Accountability (fairness, responsibility, professionalism)</li> <li>2. Trainee focus (support and passion)</li> <li>3. Integrity (fairness, openness, honesty)</li> </ol>
Group 4	<ol style="list-style-type: none"> <li>1. Trainee and patient and staff focus</li> <li>2. Integrity (honesty, fairness and probity)</li> <li>3. Partnership (supportive)</li> <li>4. Excellence</li> <li>5. Leadership</li> </ol>

As we noted yesterday there was considerable agreement between groups.

At the end of the session yesterday, I suggested that we could summarise these values as 3 Ps – to make it easy to remember

1. **People-focused** (what we do – equipping people to serve people-patients)
2. **Principled** (how we do it) - *I used probity this morning but it is quite an old fashioned legal word and I wondered whether principled would be better??*
3. **Professional Excellence** (what we want to achieve)

To explain further – we want to:

1. be focused on **people** (ie NIMDTA staff, NIMDTA trainees, trainers and ultimately patients – as we aim to enhance the care of patients in NI by equipping and supporting staff to oversee and manage the training of doctors and dentists in training in NI and by equipping trainees to care for patients)
2. be **principled** in how we do this (fairness, openness and transparency)
3. achieve **professional excellence** (doctors and dentists trained to a very high standard)

I will pass our ideas about values and behaviours on to the Board and ask if these 3Ps could be endorsed.

Keith

BOARD REPORT

## STAFF ENGAGEMENT WORKSHOP

### Introduction

On 4 September 2015, thirty members of staff attended an engagement workshop.

The workshop covered the following:

- Part 1 – Staff Briefing [Roisin Campbell]
- Part 2 – Values and Behaviours [Keith Gardiner]
- Part 3 – Strategic and Business Planning [Mark McCarey]

This report will provide a summary of discussions held in relation to the above and outputs from the sessions.

**Mark McCarey**  
Governance Manager

## Next Year

1. NIMDTA will be working with Health Matters Ltd during 2016/17 on providing health and wellbeing support services in conjunction with other HSC organisations.
2. NIMDTA is establishing an Annual Educational Excellence Day during 2016/17 with the first event on 15 June 2016 to highlight achievement and share good practice.



**Dare to Excel**  
**NIMDTA Educational Excellence Day**  
**Wednesday 15 June 2016**  
**HSC Leadership Centre**

0900-0920	Registration Tea and Coffee	
0920-0930	Welcome and Introductory Remarks	Prof Keith Gardiner
0930-1010	Keynote Lecture Educational Excellence	Dr Michael McBride Chief Medical Officer
1010-1040	Presentation of Awards for Educational Excellence	Dr Michael McBride
1040-1100	Coffee/Tea Network Opportunity	
1100-1300	ADEPT Clinical Leadership Fellow Presentations (10 minutes- presentation; 2 minutes -questions)	Judges Dr Michael McBride CMO Dr Carolyn Harper PHA Prof Pascal McKeown QUB
1300 -1330	Lunch	
1330 -1345	Award of ADEPT Clinical Leadership Fellows' Prize Announcement re ADEPT Alumni Programme	Dr Michael McBride Prof Keith Gardiner

#### Categories of Awards for Doctors and Dentists in Training

1. Excellence in Research (best published research paper)
2. Excellence in Medical/Dental Education (highest achievement in Masters in Clinical Education/best contribution to advancement of medical education)
3. Excellence in Quality Improvement (best QI project) – separate awards for Foundation/Specialty
4. Excellence in Examinations (best success in National Postgraduate Examinations)
5. Recognition by National Award (most prestigious National Award)
6. Excellence in Leadership (Clinical Leadership Fellows' Prize)
7. Outstanding Contribution to Society

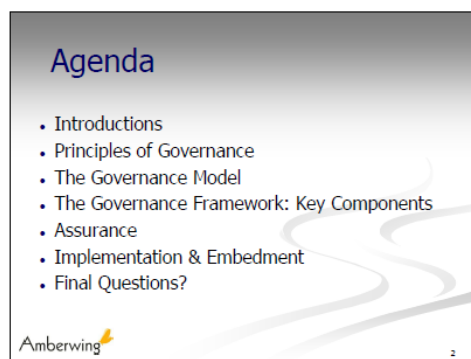
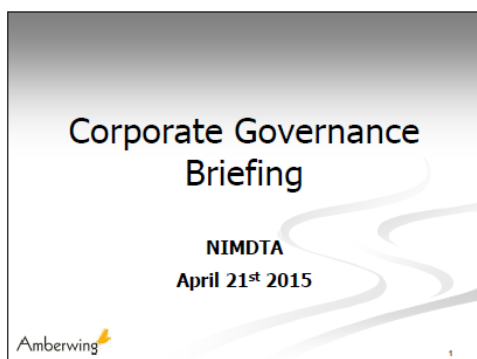
## 2. Strengthening the Workforce

**Quality 2020 Aim: We will provide the right education, training and support to deliver high quality service. We will develop leadership skills at all levels and empower staff to take decisions and make changes.**

In addition to NIMDTA's roles in the recruiting and allocating of trainees, in overseeing and managing the training delivered to doctors and dentists in training in educational units, assessing trainee progress, revalidating trainees and recognising Clinical and Educational Supervisors in educational units, NIMDTA has responsibilities for providing formal education to trainees and for training and developing its own staff. NIMDTA's activities in the training and development of these different groups are described below.

### Development of NIMDTA Board

The NIMDTA Board has a programme of development workshops each year with workshops during 2015/16 on Corporate Governance- Risk Management (April 2015), Corporate Services Scoping Exercise and Outsourcing of Accounting Services (May 2015), Collaborative Planning- Budget (January 2016) and an Advanced On Board Programme (March 2016).



#### ON BOARD ADVANCED PROGRAMME 8 March 2016 Specialty Schools Room

##### 10:00 Introduction to the programme

- An effective board - refresher

##### 10:15 Strategic leadership

- Ensuring clarity of purpose and delivery of the mandate
- Setting the strategic direction of the organisation – discharging the board's role
- Agreeing KPIs and KQIs – the right ones!
- Evaluating the success and overall impact of the organisation

##### 11:15 Performance management

- Reporting progress against KPIs and KQIs
- Getting the right information
- How does the board get the appropriate level of assurance?
- Ensuring effective oversight of key business risks

##### 12:15 Governance and compliance

- Ensuring compliance with your corporate governance framework

- Ensuring clarity of roles between executives and non-executives
  - > How effective is your Framework of Strategic Control?
  - > "Going into the engine room without touching the controls"
  - > Exercising a constructive challenge function
- Are NIMDTA's values operating effectively throughout the organisation?

##### 13:15 Sandwich Lunch

##### 14:00 Board composition, performance and development

- Appraising the performance of the Chair and board members
- Professional conduct of board business
- Putting in place the right Committee structure
- Reviewing board and committee effectiveness
- Is the board capable of dealing with a crisis?

##### 14:45 Stakeholder engagement

- Obtaining objective feedback from stakeholders and using it!
- Managing relationships with key stakeholders
- Managing the political interface

##### 15:30 Action planning

##### 16:00 Close

In addition, Board members attend two staff briefings each year at which stage they offer to answer staff questions (25 June 2015; 16 December 2015).



### NIMDTA Strategic Planning Day

**Date:** Thursday 29 October 2015  
**Venue:** Boardroom, HSC Leadership Centre  
**Aim:** To prepare NIMDTA Strategic Plan 2016-2018  
**Background:** NIMDTA should prepare and submit a strategic plan as well as its annual business plan and annual reports/financial statements as part of its governance arrangements with the DHSSPS.

The NIMDTA Board, Senior Management Committee and Team leaders had a business planning away day together in October 2015.

NIMDTA Board members are very supportive of NIMDTA educational events for trainees (Medical Foundation Induction July 2015) and educators (Annual Educators' Day 18 September 2015) as well as attending other educational workshops.

Time	Subject	Lead/Facilitator
0900-0915	Coffee/Tea available before day starts <i>Boardroom</i>	
0915-0920	Welcome and Overview of Day	Alistair Joyne
0920-0950	What NIMDTA is about (Split Groups) (a) Organisational Values (b) Mission Statement (c) Vision Statement	Board Lead/SMT Lead
0950-1045	What NIMDTA is about (Together) (a) Reporting back from Board (b) Reporting back from SMT (c) Discussion	Oliver Boylan
1045-1100	Coffee/Tea/Scones <i>Boardroom</i>	
1100-1145	Where NIMDTA is now (Split Groups) (a) Analysing internal and external environment	Board Lead/SMT Lead
1145-1230	Where NIMDTA is now (Together) (a) SWOT analysis	Oliver Boylan
1230-1315	Lunch – Hot & Colder Finger Buffet ( <i>served in the Coffee Lounge located beside Restaurant</i> )	
1315-1445	Where NIMDTA wants to get to (a) Identify limited number of strategic aims (b) Aims aligned to mission statement/vision statement (c) Aims with measurable outcomes	Oliver Boylan
1445-1500	Coffee/Tea <i>Boardroom</i>	
1500-1615	How NIMDTA is going to get there (a) Setting objectives for each aim (b) Consider resource implications (c) Consider resource gaps (d) How are objectives to be overseen	Oliver Boylan
1615-1630	Writing it all down and Monitoring	Mark McCarey
1630	Close	Alistair Joyne

### Development of NIMDTA Educators


The primary role of NIMDTA is to ensure that postgraduate medical and dental trainees receive high quality education and training and are therefore able to deliver high quality care to their patients. To ensure that this happens, NIMDTA needs to equip, develop and inspire trainers, lead and senior educators.

NIMDTA's Faculty Development Group organises, delivers and reviews training events for Lay Representatives, Recognised Trainers, Lead Educators and Senior Educators. There are a wide range of events delivered each year targeted at the training needs of NIMDTA's educators.

The flagship event each year is the Clinical Education Day which was held on 18 September 2015 in conjunction with the Centre for Medical Education, Queen's University of Belfast.



Clinical Education Day  
Friday 18 September 2015  
Belfast Castle



**Transitions, Career Progression, Behaviour**

09.00 – 09.30	Registration	
09.30 – 09.30	Welcome	Professor Stuart Elliott (QUB) Mr Alistair Joyne (NIMDTA)
09.30 – 10.00	Invited lecture <b>Workplace Behaviour</b>	Dr Liz Donohoe Director of Medical Education & Consultant Paediatrician, University Hospital, Southampton
10.00 – 11.00	<b>Workshop Session Part 1</b>	
Workshop 1	Dental Multiprofessional Training: Training as a team	Mr Nicholas Taylor (COPDEND & HEMVA) Mr David Hendon (NIMDTA)
Workshop 2	Teaching and Training in an Integrated Care Partnership	Dr Margaret O'Brien (HSCB) Dr Claire Loughrey (NIMDTA)
Workshop 3	Medical Education Research	Dr Derry Donnelly (QUB)
Workshop 4	Multiprofessional Education	Professor Bill Reid (COPDEND & HEMVA) Dr Susan Trepper (QUB) Dr Janette Clegg (QUB)
Workshop 5	GMC Update and New GMC Standards	Professor Ian Curran (Assistant Director of Education, GMC)
11.00 – 11.15	Coffee, Tea and networking	
11.15 – 12.45	Symposium <b>Transitions in a Clinical Career</b> Chair: Angela Carragher and an steve	Preparing students for Practice Dr Wendy Watson, Consultant Physician and Diabetologist and Honorary Research Fellow (University of Aberdeen) Ms Lorna Dwyer (QUB) <b>Resilience Training</b> Dr Claspie Muthuland (QUB) <b>Trainee Perspectives</b> NIMDTA Trainee <b>Providing Trainee Support</b> Ms Georgia Jones (Head of Foundation School, HEMVA) <b>Occupational Health Perspectives</b> Dr Aileen Tait (Belfast Trust)

12.45 – 13.30	Lunch and networking	
13.30 – 14.30	Key Note Address <b>Lessons from a Fellowship</b> Chair: TBC	Dr Anne Kilgallon Deputy Chief Medical Officer, DHSSPS
14.30 – 15.30	<b>Workshop session part 2</b>	
Workshop 1	The Evolving Structure of the Dental Team	Mr Simon Reid (Chief Dental Officer) Mr Nicholas Taylor (COPDEND & HEMVA) Professor David Hussey (NIMDTA)
Workshop 2	Human Factors Training	Dr Jim Murray (QUB) Dr Richard Carr (SE Trust)
Workshop 3	Workforce Planning	Ms Heather Stevens (Director Workforce Planning, DHSSPS) Dr Joanne McClean (HSA)
Workshop 4	New GMC Standards	Professor Ian Curran (Assistant Director of Education, GMC)
15.30 – 15.45	Coffee, Tea and networking	
15.45 – 16.50	Symposium <b>Career Progression</b> Chair: David Hussey and John Collins	<b>Key Influences in Career Decision Making</b> Professor Jennifer Cleland Chair of Medical Education, University Aberdeen  <b>How doctors progress</b> Ms Kirsty White Head, Education Quality Assurance, GMC  <b>How dentists progress</b> Mr Nicholas Taylor COPDEND & HEMVA  <b>Shape of Training</b> Dr Paddy Woods Deputy Chief Medical Officer, DHSSPS
16.50-17.00	Closing Remarks	

This was very well received. The keynote address was delivered by Dr Anne Kilgallen, Deputy Chief Medical Officer on Quality Improvement – Lessons from a Fellowship. There was an Invited Lecture on Workplace Behaviour, Symposia on Transitions in a Clinical Career and on Career Progression as well as nine workshops.

Workshops were held for educators throughout 2015/16:

- Induction (16 November 2015; 24 March 2016)
- Leadership Skills (19 June 2015)
- Advanced Communication Skills – Motivation (5 October 2015)
- World Quality Day (13 November 2016)
- Annual Trainee Support Conference (18 November 2015)
- Quality Improvement Workshop (24 March 2016)



NIMDTA World Quality Day Event  
Friday 13 November 2015  
Visit of Professor Ian Curran, Assistant Director of Education GMC

Time	Event	
0930-1100	Professor Ian Curran meeting with ADEPT Clinical Leadership Fellows (Question & Answer Session)	Seminar Room
1100-1120	Coffee Break	
1120-1200	Professor Ian Curran meeting with NIMDTA Senior Team	Seminar Room
1200-1300	NIMDTA Education Quality Presentations	Seminar Room
1300-1330	Lunch	
1330-1430	Invited Lecture- Professor Ian Curran Delivering Quality in Postgraduate Education and Training	Seminar Room
1430-1500	Questions and Answers from NIMDTA Lead Educators	Seminar Room

**Faculty Development Workshop  
Trainee Support Review Group**  
Wednesday 18 November 2015  
Malone Suite, Ramada Hotel, Shaw's Bridge, Belfast



**Supporting Trainees – Hearing the Trainee**

**Aims of Workshop**

1. To learn how stressful issues may affect trainees
2. To discuss how support may be directed in these situations
3. To learn the processes involved where there is alleged bullying and harassment
4. To learn how to define concerns and formulate a management plan
5. To discuss and recognise the stresses concerned when trainees are under investigation for conduct concerns
6. To recognise and support trainees who are returning to practice after long term absence with health or various issues

**Programme**

09.00 – 09.30	Registration	
<b>Session 1</b>		
09.30 – 9.50	Welcome and Introduction	Dr John Collins
	'I was involved in a Serious Adverse Incident Investigation'	Trainee Doctor
9.50 – 10.05	Open to Group Discussion and Feedback	Dr John Collins
10.05 – 10.15	Trainee's Perception of the Group Action Plan and Outcomes	Trainee Doctor
10.15 – 10.20	Chairman's Summary of Case and Learning Points	
10.20 – 10.40	'Returning to practice after long term absence'	Trainee Doctor
10.40 – 10.55	Open to Group Discussion and Feedback	Dr John Collins
10.55 – 11.00	Trainee's Perception of the Group Action Plan and Real Outcome	Trainee Doctor
11.00 – 11.10	Chairman's summary of case and learning points	
<b>11.10 – 11.30 Coffee</b>		
11.30 – 11.50	Bullying and Harassment	Dr Richard Tubman
11.50 – 12.20	A Trainee's personal experience	Trainee doctor
<b>12.30 – 13.30 Lunch</b>		

<b>Session 2</b>		
13.30 – 14.15	Keynote Speaker – 'Defining Trainees' Concerns and Deciding on an Action Plan'	Dr Helen Goodyear
14.30 – 15.30	Trainee Forum Part 1 • Achieving a Work-Life Balance • Coping with family issues and training Panel Discussion – Dr C Harron (Chair), Dr James Reid	ADEPT Fellow ADEPT Fellow
<b>15.30 – 15.45 Coffee</b>		
15.35 – 16.15	Trainee Forum Part 2 • Coping with difficult events in paediatrics • The Trainee and the GMC – A Stressful or Supportive Relationship? Panel discussion – Dr Rachel Hutton (Chair), Dr Helen Goodyear	ADEPT Fellow ADEPT Fellow
16.15 – 16.30	Summary	Dr John Collins Professor K Gardiner

**Contributors**

- Professor Keith Gardiner, Postgraduate Medical Dean, NIMDTA
- Dr John Collins, Associate Dean for Career and Personal Development, NIMDTA
- Dr Richard Tubman, Associate Dean for Visits and Faculty Development
- Dr Helen Goodyear, Associate Postgraduate Dean for Professional Support, West Midlands HEE
- ADEPT Fellows
- Trainee doctors from a variety of specialties



**Quality Improvement Workshop for Educators & Trainers\***

Thursday 24 March 2016

Riddell Hall, QUB

	Subject	Facilitator
09.00-9.10	Registration	
09.10-09.15	Introduction	Keith Gardiner
09.15-09.45	Introduction & Group Work	Nigel Hart
09.45-10.15	Understanding Quality Improvement	Gavin Lavery
10.15-10.45	How to make a QI project succeed	Brenda Cannon
10.45-11.00	Coffee/Tea	
11.00-11.25	The outcomes from a system – the Red Bean Experiment	Gavin Lavery & volunteers
11.25-12.00	How to support trainees to do QI	Niall Leonard
12.00-12.30	Culture and Quality Improvement	Claire Loughrey

**Learning outcomes**

1. To understand the improvement science underpinning improvement methods
2. To learn some tools that can be used immediately in the working environment
3. To recognise the importance of measurement to demonstrate continuous improvement
4. To reflect on how educators and trainers may best support trainees undertaking QI
5. To engage in the concept that change is possible and patient care can be improved and made safer

\*Sponsored by the Health Foundation and the Improvement Network of Northern Ireland (INNI)

**Advanced Communication Skills**  
Brid Hendron, Associate Advisor in Dentistry  
Monday 5 October 2015 1.30-5pm  
Boardroom NIMDTA

*"Motivation will almost always beat mere talent."*

*Norman. R. Augustine*

The ability to motivate ourselves and others is a key skill in the increasingly challenging environment of healthcare. This is of critical importance when we find ourselves, team members or trainees struggling to meet expectations or demands. At these junctures an **understanding** of motivation can create much needed leverage. This workshop is an opportunity to look specifically at motivation and expand our skills in this area. Understanding some of the many facets of motivation will create flexibility in our approach to others and ensures motivation becomes integral to our planning.

**Learning Outcomes:**

This workshop will enable you to:

- Recognise your own individual motivational style and pattern.
- Recognise how this may vary from others around you
- Appreciate several unconscious aspects of motivation including values and beliefs
- Identify possibilities and methods of helping to motivate others.

Each year there is also a Lay Representative Training Day (17 September 2015).

The quality of training events is monitored by feedback from the participants at each event which is reviewed at Faculty Development Group meetings.

During 2015/16 NIMDTA supported 31 educators and trainers working towards university level qualifications in clinical education (nine GP; 14 Dental; eight Hospital Foundation/Specialty), six educators working towards university level qualifications in Quality Improvement and one educator who is undertaking a Master's degree in Health Service Management.

### **Development of NIMDTA Education Management Staff**

NIMDTA Education Management staff members perform a vital role in overseeing and managing NIMDTA's training programmes in Dentistry, Medical Foundation, GP and Specialty Training.

NIMDTA recognises the importance of developing and supporting its staff and of communicating effectively with them. NIMDTA seeks to engage with staff through staff briefings (4/year) and staff engagement workshops (2/year).

In 2015/16 staff engagement workshops concentrated on values and behaviours, strategic and business planning, staff development needs and volunteering.

NIMDTA Education Management staff members are also invited to staff induction, educator workshops and the Annual Clinical Education Day.

NIMDTA staff were invited to take part in an on-line HSC-wide Staff Satisfaction Survey between October and December 2015. Out of 59 staff, 32 responded (59%) in comparison with response rate for the HSC of 26%.

While there were positive responses on personal development, engagement, raising concerns and wellbeing, NIMDTA needs to address issues on work/life balance, staffing levels, annual appraisal rates and engagement with senior managers.

NIMDTA supported an administrative staff member in pursuing a professional Accounting qualification, three team leaders were supported to undertake training in project management (PRINCE2), one team leader to undertake a university qualification in Workplace Health and Wellbeing and further members of the Education Management staff to undertake training in the advanced use of computer programmes.

NIMDTA places high value on supporting its Health and Wellbeing Strategy and continues to facilitate employees to take part in a weekly exercise programme. A Health and Wellbeing Group has been established during 2015/16.

A NIMDTA choir has been formed during 2015/16 as part of NIMDTA's Health and Wellbeing strategy.

#### **Highlights of Survey**

##### **Personal Development**

- 81% respondents indicated that they would recommend NIMDTA as a place of work which has increased from 63% in 2012.
- 73% indicated that they were enthusiastic about their job which is higher than the response in both the HSC and the NHS 71% HSC, 67% NHS.
- 93% indicated that their job makes a difference.
- 87% responded that they are able to do their job to a standard they are pleased with which has increased from 63% in 2012.
- 88 % indicated that they know what is expected at work which has increased from 70% in 2012.

During 2015/16 NIMDTA organised the following Staff Development Events:

- Practice Wellness (19 May 2015)
- Induction workshops (16 November 2015; 24 March 2016)
- Advanced Communication Skills – Motivation (5 October 2015)
- Administrative Staff Development Programme (8 January 2016)
- Dealing with Difficult and Abusive Customers (8 February 2016)



### PRACTICE WELLNESS

Date: Tuesday 19 May 2015  
 Time: 10.00am – 4.30pm  
 Venue: Lagan Valley Island  
 Facilitator: Brid Hendron

This session affords an opportunity to stop and think about ourselves, our teams and our practices – a type of health check if you like. We will walk through many of the signs and symptoms of stress on our practice as a whole system and ourselves as individuals. The day will be interactive and directly translated into a dental practice setting. It will explore a model for understanding and combating work based stress and also provide a framework for enriching our own lives. Are you ready for a change?

**Learning outcomes:**

On completion of the course you will:

- Understand a diagnostic tool for system based stress
- Understand the three compartment model of stress and its impact on your overall health.
- Appreciate the importance of state management
- Be familiar with the most common signs of system stress in dental practice
- Possess a tool kit of stress eliminating communication patterns
- Delight in your own individual brilliance!

### Dealing with Difficult and Abusive Customers Workshop for Administrative Staff

Monday 8 February 2016  
 NIMDTA Boardroom  
 Programme

14.00-14.10	Introduction Why are we running this workshop	Keith Gardiner
14.10-14.40	Harassment and Bullying in the Workplace	Roisin Campbell
14.40-15.40	Case Studies & Role Play	Oliver Boylan
15.40-16.00	Practical Steps	Denise Hughes or Gillian Carlisle

### NIMDTA STAFF ADMINISTRATIVE DEVELOPMENT PROGRAMME

9.30am INTRODUCTION OF PROGRAMME AND PARTICIPANTS

**SESSION ONE BEING EFFECTIVE IN YOUR ROLE**

- Understanding department/organizational objectives
- How do you contribute to these?
- Skills needed to be effective
- Awareness of Service Improvement

**SESSION TWO COMMUNICATION SKILLS**

- Communication methods
- Techniques / skills for communicating effectively
- Importance of effective listening
- Body language interpretation
- Dealing with difficult situations

**SESSION THREE ASSERTIVENESS**

- Assertiveness Survey
- What is assertiveness?
- What stops us from being 'assertive'?
- Behaviour types
- Tips and techniques
- Group exercise

**SESSION FOUR MANAGING YOUR WORKLOAD and TIME MANAGEMENT**

- The benefits of effective workload management
- Principles of time management
- Efficient systems and routines
- Managing your emails

**SESSION SIX TEAM EFFECTIVENESS**

- Characteristics of an effective team
- Belbin's team roles
- Group exercise

4.30pm CLOSE



## Development of NIMDTA Trainees

In 2015/16, the eleventh annual programme of mandatory Generic Skills training days was delivered regionally for all Medical Foundation Year 2 (F2) doctors. A total of ten days of study leave is set aside for attendance at these training days. Attendance is closely monitored and if a module is not attended an opportunity is offered to attend in the following year. Sessions include training on the following:

**Module 1a:** Acute Kidney Injury–Interactive teaching session on Acute Kidney Injury;

**Module 1b:** Educational Opportunities and Requirements during F2 – ePortfolio and requirements for Foundation ARCP (Annual Review of Competence Progression);

**Module 2:** Career Management – Dr John Collins, Associate Dean;

**Module 3:** The Doctor as a Teacher / Quality Improvement;

**Module 4:** Patient Safety / Medico-legal Seminar;

**Module 5:** Teamwork;

**Module 6:** Breaking Bad News and Ethics;

**Module 7:** Professionalism and Resilience awareness/ Fitness to Practice;

**Module 8:** Safeguarding: Child Protection, Vulnerable Adults and Domestic Violence;

**Module 9:** Dial 999 (Delivered at the Northern Ireland Ambulance Service HQ); and

**Module 10:** Advanced Life Support (ALS) training courses (Trust delivered).

### Generic Skills

#### Confirmed Modules & Dates 2015 – 2016



Module Number	Module Title	Option 1	Option 2	Option 3	Option 4	Option 5	Option 6	Option 7	Mop up
<b>Module 1</b>	Acute Kidney Injury & Educational Opportunities	Fri 14/08/15	Mon 17/08/15	Fri 21/08/15	Mon 07/09/15	Mon 14/09/15	Wed 16/09/15	Mon 28/09/15	
<b>Module 2</b>	Career Management	Thurs 10/09/15	Wed 23/09/15		Wed 21/10/15	Thurs 22/10/15	Wed 04/11/15	Thurs 12/11/15	Wed 27/01/16
<b>Module 3</b>	Quality Improvement	Mon 14/03/16	Mon 04/04/16	Fri 08/04/16	Mon 11/04/16	Fri 22/04/16	Fri 29/04/16	Fri 06/05/16	
<b>Module 4</b>	Patient Safety	Mon 12/10/15	Wed 14/10/15	Mon 26/10/15	09/11/15	Mon 23/11/15	Tues 16/02/16	Wed 17/02/16	
<b>Module 5</b>	Communication Skills	Fri 04/09/15	Mon 07/09/15	Fri 11/09/15	CANCELLED	Fri 25/09/15	Mon 28/09/15	Mon 12/10/15	18/01/16
<b>Module 6</b>	Ethics / Breaking Bad News	Mon 25/01/16	Mon 08/02/16	Mon 14/03/16	Mon 25/04/16	Fri 29/04/16	Mon 09/05/16	Mon 16/05/16	
<b>Module 7</b>	Professionalism / Medical Leadership	Wed 09/12/15	Tues 15/12/15	Tues 05/01/16	Tues 19/01/16	Wed 27/01/16	Wed 03/02/16	Wed 09/03/16	
<b>Module 8</b>	Safeguarding	Fri 02/10/15	Fri 30/10/15	Fri 08/01/16	Fri 25/01/16	Fri 12/02/16	Mon 18/04/16	Fri 22/04/15	
<b>Module 9</b>	Dial 999	Fri 18/03/16	Fri 25/03/16	Wed 20/04/16	Fri 29/04/16	Wed 18/05/16	Wed 15/06/16		

All sessions are interactive and designed to meet the professional needs of this group of doctors as they start their professional careers. To accommodate the increased numbers all modules are delivered on seven separate occasions to ensure all F2 doctors can attend. Valuable on-line feedback from the doctors who attend is scrutinised and contributes to strengthen and enhance these training days.

The GP department places 13 trainees each year in each of the five Trust areas. Altogether there were 227 GP trainees on the GP Specialty Training Programme during 2015/16. GP Training Programme Directors in each Trust area organise weekly one day formal education sessions for these trainees in their Trust areas. During 2015/16, the GP department delivered 348 courses and training events for GP trainees. The department also supports Practice-based Small Group Learning (PBSGL) for ST2 (Specialty Trainee Year 2) and ST3 trainees. This is a formal education programme which provides educational materials online on which to base group learning. It is administered from NHS Education for Scotland. PBSGL was first introduced at McMaster University, Canada, in 1986. This initiative has received excellent feedback from GP Trainers and trainees alike.

NIMDTA has participated in Project ECHO during 2015/16. This involves ST2 trainees participating in a formal education programme to understand Quality Improvement (QI) methodology and its application. All ST2 trainees were then able to take part in an integrated Dermatology initiative during which connection is made to a practical educational session via webcam in individual GP practices.

The purpose of the programme is to build capacity in QI methodology in General Practice and set up collaborative working between Primary Care and other care providers.

Within the Medical and Dental Hospital Specialties, delivery of the curriculum for trainees is a joint responsibility of NIMDTA and Local Education Providers. Each Specialty unit is expected to have weekly teaching sessions.

During 2015/16, NIMDTA re-designed its training in generic professional and leadership skills for specialty trainees in response to the Shape of Training report and the new GMC Generic Professional Capabilities Framework. Shape of Training highlighted that medical education and training extends well beyond learning the technical aspects of medicine and should also focus to a major extent on the development of a doctor's professional values, attitudes and behaviours.

The General Medical Council has described these qualities as Generic Professional Capabilities and considered them under nine domains:

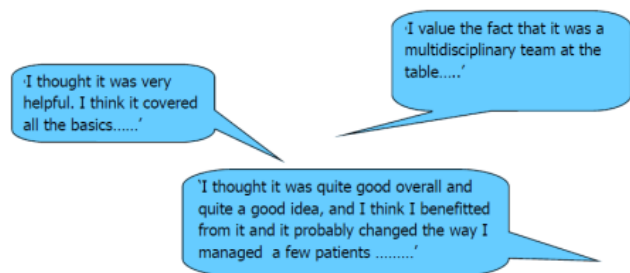
1. Professional values and behaviours
2. Professional skills
3. Professional knowledge
4. Capabilities in health promotion and illness prevention
5. Capabilities in leadership and teamworking
6. Capabilities in patient safety and quality improvement
7. Capabilities in safeguarding vulnerable groups
8. Capabilities in education and training
9. Capabilities in research and scholarship

#### Project ECHO - Dermatology ST2 Trainees

Project ECHO, (Extension for Community Healthcare Outcomes), uses teleconferencing technology to improve access to specialised care through supporting and training primary health care professionals, (HCPs), remotely, (at spokes), from a centralised 'hub' of experts. ECHO has been proven to improve care across the United States and a pilot study in community hospice nurses in Northern Ireland, (NI), showed an improvement in knowledge and self-efficacy of HCPs.

In order to determine if ECHO would be effective in other contexts in NI five ECHO knowledge networks were funded in 2015/16 including Dermatology for GP trainees.

Evaluation showed that ECHO was well received in this group and that most felt that their knowledge and skills had improved.



Recommendation 6 of the Shape of Training report is that appropriate organisations must introduce a generic capabilities framework for postgraduate training based on Good Medical Practice that covers communication, leadership, quality improvement and safety.

NIMDTA has therefore designed a modular, generic professional skills framework for all medical and dental specialty trainees. There are 15 modules divided into three sets of 5 modules – with one set each being targeted at initial (CT 1-2/ST 1-2), intermediate (ST3-5) and final (ST6-8) years of specialty training. The programme is called iQUEST (improving Quality and Understanding to Enhance Specialty Training). iQUEST seeks to address the components of the GMC’s Generic Professional Capabilities Framework, building on the generic skills programme delivered by the NI Foundation School and preparing trainees for the next steps in their career.

The image displays 15 module cards for the iQUEST programme, organized into three columns: Initial Specialty Years, Intermediate Specialty Years, and Final Specialty Years. Each card includes a title, aims, and a list of learning objectives. A vertical label 'Compulsory' is placed between the first and second columns.

- Initial Specialty Years:**
  - 1. Understanding Healthcare (Career)
  - 2. Being a Professional (Compulsory, GPC 1,2,3,4)
  - 3. Human Factors (GPC 6,7)
  - 4. Quality Improvement (GPC 8)
  - 5. Career Development: CV, Resilience and Personality Types (Career)
- Intermediate Specialty Years:**
  - 6. Teaching the Teacher (GPC 9)
  - 7. Supervisory Skills (GPC 9)
  - 8. Using Evidence (GPC 10)
  - 9. Leading a Team on Call (GPC 4,5)
  - 10. Medicine and the Law (GPC 3,3)
- Final Specialty Years:**
  - 11. Supporting Trainees (GPC 8)
  - 12. Building High Performance Teams (GPC 5)
  - 13. Clinical Leadership – Understanding the Financial Context (GPC 3)
  - 14. Clinical Leadership – Improving Services and Managing Transformational Change (GPC 3)
  - 15. Career Development: Applying for a Consultant Job (Career)

The iQuest programme was officially launched by Dr Anne Kilgallen, Deputy Chief Medical Office on 15 October 2016 at the HSC Leadership Centre.

**iQUEST**  
IMPROVING QUALITY AND UNDERSTANDING TO ENHANCE SPECIALTY TRAINING

**iQuest Generic Skills Programme for Medical and Dental Specialty Trainees Launched**

iQuest, the new generic professional skills framework for all specialty trainees, was officially launched on Thursday 15 October 2016 at the HSC Leadership Centre by Dr Anne Kilgallen, Deputy Chief Medical Officer.

This programme consists of 15 modules divided into three sets of 5 modules – with one set each being targeted at initial (CT1-2/ST1-2), intermediate (ST3-5) and final (ST6-8) years of specialty training and is mapped to the new GMC Generic Professional Capabilities Framework.

Ms Diane Taylor, Head of the HSC Leadership Centre, welcomed trainees and guests to the launch. Professor Keith Gardiner, Postgraduate Medical Dean, gave an overview of the programme and why it has been introduced.

Dr Anne Kilgallen, Deputy Chief Medical Officer, who is also a Health Foundation/NI Quality Improvement Fellow launched the programme with an inspiring lecture entitled 'A Promise to Learn'.

In the launch address, Dr Kilgallen described the origins of Improvement Science and explained how Improvement Science builds on the understanding of disease biology gained through basic biomedical research and on the identification of effective therapies through clinical research trials by ensuring that patients get the right therapies.

Dr Kilgallen explained the behavioural characteristics of learning – of seeking feedback, sharing information, asking for help, talking about errors and of experimenting. Dr Kilgallen quoted the literature showing that hospitals with higher staff engagement have lower mortality rates, better outcomes for patients, fewer hospital acquired infections and significantly fewer mistakes. The importance of collecting and using data was emphasised.

Dr Kilgallen concluded her address by explaining the primary drivers of improvement – developing ideas, having the will/desire to change the current state to one that is better and having the capacity to apply the theories, tools and techniques that enable the execution of those ideas.

**iQUEST**  
IMPROVING QUALITY AND UNDERSTANDING TO ENHANCE SPECIALTY TRAINING

What trainees said about the modules:

I attended the 'human factors' and 'quality improvement' iQUEST modules at the launch event. These modules were fantastic. They were well thought through with an extremely credible faculty. Both sessions were practical, relevant and engaging. They have enabled me to view my clinical environment with very different eyes. I feel much better equipped to tackle quality improvement projects armed with these perspectives and tools. I would highly recommend these modules to all trainees.

Dr Julia Courtney, ADEPT Clinical Leadership Fellow and Paediatric Trainee

Human Factors - Strengths of Course	Trainee Comments from the Evaluation Sheets	Quality Improvement
Very friendly and enthusiastic facilitators. Invaluable insight into non-technical skills development. Very thought provoking examples – both clinical and otherwise.		Easy to understand. Very relevant. Made sense!
Human Factors - Strengths of Course		Quality Improvement
Brilliant course. Well thought through and balanced contributions from each faculty member. Good use of multimedia and practical demonstrations.		Good variety of speakers – different content but consistent key messages. Lots of real life examples so can see ideas being put into practice.
Human Factors - Improvements?		Quality Improvement
None - great course – hopefully will be delivered to all trainees (and consultants!) thanks.		Interested enthusiastic speaker. Genuine passion for Quality Improvement. Inspiring.
Human Factors - Comments		Quality Improvement
Very, very good intro to HF. I really liked team working session. On this I would start to do is use CUS structure next time I encounter conflict.		Good use of practical examples. Reassurance of having confidence to make changes.

In addition, NIMDTA provides a range of formal education and examination preparation courses.

Dental Foundation Training is based on a National Dental Foundation Training Curriculum and Assessment Framework. This programme is delivered in the general dental practice setting. In 2015/16, 33 trainees were allocated to Northern Ireland as part of a broader National Recruitment process. NIMDTA participated in a pilot to standardise Dental Foundation Training assessment methodology across England, Wales and NI. This pilot heralds the introduction of mandatory 'Satisfactory Completion' in the training year 2016/17. A weekly education programme ensures regular contact with peers and with Dental Educators outside the training environment.

Dental Core Training (DCT) is optional for dental graduates and allows for additional experience in a hospital-based environment. Twenty-two Dental Core Trainees were appointed in 2015/16. Training was monitored through the Hospital Dentistry Committee at NIMDTA supported by the Training Programme Director for DCT.

NIMDTA also provide trainees with opportunities to undertake academic training. A Clinical Academic Training Committee was established in December 2007 between the QUB School of Medicine, Dentistry and Biomedical Sciences in partnership with NIMDTA and the Belfast HSC Trust to provide research training for medical trainees.

DoH provides the budget for this scheme which is channelled through NIMDTA. There are three types of posts –

1. Academic Clinical Lecturers (ACL) – these are normally three year posts and candidates will usually have already completed a PhD or MD;
2. Academic Clinical Fellows (ACF) – these are normally two year posts for those who have yet to complete a research degree; and
3. Academic F2 – this is a four month placement designed as an opportunity to explore academic medicine.

During 2015/16, there were nine appointments at Foundation level and four appointments at Specialty level with the first Dental Academic Clinical Fellow commencing their integrated academic training in February 2016.

Workshops in Quality Improvement and Human Factors were provided specifically for trainees at the Faculty of Medical Leadership and Management (FMLM) Regional Conference on Thursday 12 November 2015 which was supported by NIMDTA.

### **Support of NIMDTA Trainees**

NIMDTA directly provides support and guidance to many trainees experiencing difficulty. NIMDTA also co-operates closely with Directors of Medical Education and eEducational Supervisors on the management of these trainees within LEPs. This work is progressed in line with NIMDTA's Management of Trainees Requiring Support Policy which is available online.

A database aids the tracking and follow up of trainees in difficulty. A total of 59 new referrals were received in 2015/16. As of March 2016, there were 93 trainees active on the database. Reasons for referral were similar to previous years and included health, conduct and performance. Of the new referrals, nine were from the Foundation Programme. There was one referral for a dental trainee during

2015/16. The Associate Dean for Careers and Professional Support provided face-to-face meetings with each new referral and continued support was coordinated if required.

Mental health and resilience issues continue to be frequently present in referred cases. In a proactive response, this year has seen the formation of a Resilience Working Group in collaboration with QUB aimed at reviewing both undergraduate and postgraduate resilience training and developing a collaborative strategy in this area.

Within Career Development, equipping Foundation doctors with knowledge to enable good careers planning continues to be a priority for the department. Many F1 and F0 trainees (Final Year Medical Students undertaking assistantships) continued to receive the introductory career choice workshops provided in their work places. Across the year, 7 career modules were held as part of the Foundation Generic Skills Programme with 242 F2 trainees attending. The content of these sessions covered the essentials of career planning including self-assessment, career exploration and decision making.

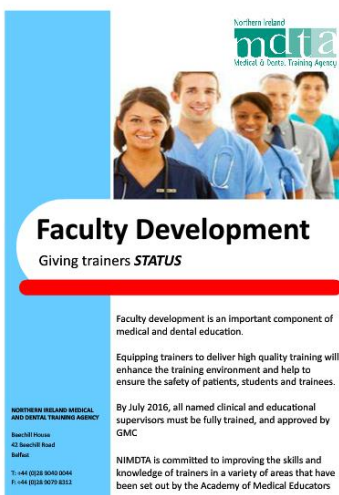
The Associate Dean for Careers and Professional Support jointly delivered the pilot of the iQUEST module “Career development- CV, Resilience and personality types “. This was delivered to 19 trainees in the early stages of their speciality career and will continue to be delivered as part of iQUEST programme in the coming year.

Individual face-to-face career counselling sessions were provided to approximately 40 trainees who had either been referred by Training Programme Directors or self-referral.

### Development of Recognised Trainers based in Local Education Providers

In August 2012, the GMC introduced a new requirement ‘Recognising and Approving Trainers’. This initiative required that all named Clinical and Educational Supervisors (trainers) for postgraduate medical trainees be accredited by July 2016.

NIMDTA was required to agree criteria for recognising trainers in NI, develop and align training courses to the Academy of Medical Educators’ Framework, put in place systems for data entry, provisionally (July 2014) and ultimately fully recognise all trainers (July 2016).



The NIMDTA Recognition of Trainers Programme is called STATUS:

- S** Selection of Trainers for role using a competency based application
- T** Training defined
- A** Appraisal for Educational Role included within each doctor’s annual
- T** Transfer of Data from Trusts to NIMDTA
- U** Underperformance management
- S** Supporting trainers through job planning & PA allocation

The Training that is required as part of this STATUS programme is:

S	Supervisory Skills
T	Teaching the Teacher
A	Anti-discriminatory (online module on equality and diversity)
T	Trainee Support
U	) Unique to
S	) Specialty

The training events were delivered at NIMDTA and on HSC Trust sites in partnership with Trust Education Departments.

By 31 March 2016, 441 hospital trainers have been fully recognised. All GP

Trainers are already fully recognised with 71 new GP Trainers being accredited during 2015/16.

### Training of GP Trainers

There are 245 General Practice Trainers in 135 different training practices. There have been 28 new GP trainers appointed since April 2015 and four trainers have retired.

Each year there is continued interest from potential trainers who apply for and successfully complete the Learning and Teaching Course. In 2015/16 a total of 27 GPs attended the Learning & Teaching Course. The course aims to provide basic training for a competent, confident teacher in General Practice by:

- Providing a facilitative learning environment;
- Involving participative and flexible learning methods;
- Supporting personal development;
- Developing skills of critical thinking and self-evaluation; and
- Modeling good educational practice.

GPs who complete the Learning and Teaching Course, submit a portfolio and who are successful at the practice visit become accredited Trainers in GP. Those GPs then enter into a run through training programme for one year provided by NIMDTA to enhance one-to-one and group skills in advance of having a trainee in practice. This year an extra training day for new trainers was held. The purpose of this was to form small groups of new trainers who could meet throughout the year and share best practice and provide one another with peer support.

All trainers regularly meet with their colleagues within their area group to share learning and receive training from Programme Directors and Associate Directors on current issues. These locality learning days form part of the mandatory requirements for trainer re-accreditation along with three-yearly practice visits (<http://www.nimdta.gov.uk/general-practice/specialty-trainers-and-practice-managers/>).

## GP Trainers and Training Practices

Welcome to the GP Trainer page. We hope that you find the information provided on this page useful for your role as a GP Trainer. If you have any documents or useful links you would like to appear here, or you would be interested in helping to keep this page up to date, please contact [gpspecialtytraining.nimmdta@hscni.net](mailto:gpspecialtytraining.nimmdta@hscni.net)

### Essential Trainer Documents

- [Trainer Indemnity Letter](#)
- [Trainer SLA](#)
- [Trainer SLA - Process](#)
- [GP Trainee Contract](#) – All training practices who have a St2 or St3 will receive the contract from NIMDTA HR Department. It will be populated with the relevant personal details of the trainee (including salary scale and holiday entitlement).
- [GP Trainer Induction Booklet](#)
- [GP Trainer status of practitioners where the GMC is taking action through fitness to practise procedures](#)

The Trainer Groups organise at least two training sessions per year. In the last year topics covered have included:

- Trainees in Difficulty;
- Equality Diversity and Opportunity Training
- E-portfolio training
- Quality Improvement Methodology and Applications

NIMDTA also provided training for the following groups:

- Clinical Supervisors in Out of Hours;
- Practice managers; and
- Peer review training for GP Trainers.

NIMDTA regularly met with the Trainer Convenors group to improve information sharing and good practice.

### Training of GP Appraisers

NIMDTA Lead Appraisers have had two training days provided during 2015/16. The first day was a meeting with a medical adviser from HSCB who deals with doctors under investigation and complaints at HSCB level. The second day was a 'back to basics' day, where a review of Lead Appraisers' motivation and goals was undertaken. Lead Appraisers hold quarterly meetings with their small group of Appraisers and also meet with the Regional Appraisal Co-ordinator on a regular basis.

NIMDTA held two full day training conferences for Appraisers during 2015/16.

The first conference was a full day on 3 June 2015 at Mossley Mill, Newtownabbey. This included a presentation from Dr Mary Larkin on safeguarding children, providing an update for Appraisers, and providing valuable guidance on how to advise Appraisees in this area. Clinical Psychologist, Dr Sarah Meekin, then provided an overview on resilience in the workplace. A review of Myers-Briggs personality types by Paula O'Kelly from the HSC Leadership Centre in the afternoon provided an opportunity for the appraisal teams to review the dynamics at work within their teams. Each day also provides an appraisal update from the regional appraisal co-ordinator. The evaluation of the day showed that more than 90% of Appraisers felt that the presentations and workshops were good to excellent.

The second conference was a full day on 20 November 2015 at Mossley Mill, Newtownabbey. This included attendance by the GMC, allowing Appraisers the opportunity to discuss the implications of revalidation on appraisal and some of the anxieties which Appraisees had regarding communications

received from the GMC. A representative from BMA NI General Practitioner’s Committee NIGPC, who is also a Lead Appraiser, provided an overview of advice available for practices in difficulty. The afternoon included an overview of revalidation by the Responsible Officer from HSCB and an opportunity for a question and answer session with the Responsible Officer RO; and two workshops on the Form 4 and PDP, and on Quality Improvement were provided by two Lead Appraisers. The evaluation showed that more than 95% of Appraisers felt that the conference talks and workshops were good to excellent.

### **Training of Dental Professionals**

The Dental Department provides a Continuing Education Programme for Dentists and Dental Care Professionals (DCPs). During 2015/16, 1406 educational opportunities were offered through NIMDTA’s Continuing Education Calendar. In addition, a series of ‘in-practice’ training events were provided which received very positive feedback. During 2015/16, NIMDTA ran a successful pilot of an externally accredited Certificate in Special Care Dentistry.

### **Retention and Induction of GPs**

The GP Department has been working collaboratively with the Health and Social Care Board (HSCB), to recruit, retain and induct GPs into the Northern Ireland workforce. This arrangement is underpinned by a Service Level Agreement with the HSCB. NIMDTA’s role in the Career Development scheme is to facilitate the arrangement of the relevant assessments through the GP National Recruitment Office and to facilitate practice placements for assessment. Satisfactory completion of the scheme enables admission to the NI Performers List. During 2015/16, seven applicants completed the Returner scheme, one is currently in the scheme and three are pending. One applicant is currently in the Induction scheme. Twenty-one applicants have been accepted onto the Retainer scheme.

### **Training in Quality Improvement**

Quality Improvement training has been provided for NIMDTA Foundation trainees for four years. The NIMDTA GP Department appointed Dr Nigel Hart as Associate Director in Quality Improvement in 2014. Quality Improvement training has been available for NIMDTA GP trainees since 2014/15. These GP trainees are being provided with opportunities to use these skills in specific projects during their ST2 year.

Quality Improvement training is provided to Foundation trainees through the Foundation Generic Skills Programme.

Quality Improvement training is provided to medical and dental specialty trainees through the iQUEST Generic and Professional Skills Programme which was launched by Dr Anne Kilgallen on 15 October 2015.

Quality Improvement training was also provided for NIMDTA Educators and Trainers on 24 March 2016.

Foundation and Specialty trainees have opportunities to put Quality Improvement skills into practise during their attachments to HSC Trusts. The South Eastern (SQE programme) and Belfast (Safety and Quality) HSC Trusts have very active Quality Improvement programmes within which NIMDTA trainees are given opportunities to be involved.





## Next Year

1. In collaboration with NICON and the Academy of Medical Royal Colleges, NIMDTA have planned and contributed to a Leadership for High Quality Healthcare event at Lisburn and Castlereagh City Council on 20 April 2016
2. NIMDTA has organised in collaboration with NICON a session on Calling all Clinicians – Dare to Lead at the NICON Annual Conference on 28 June 2016
3. NIMDTA is organising the annual educator flagship event – Clinical Education Day for 9 September 2016. This will be run jointly with QUB for the second year. The Title of ‘Deeper, Wider and Higher’ reflects the themes of the invited lecture and major symposia of Simulation Down Under, Differential Attainment and the Habits of an Improver. In addition to the three symposia, there are 10 workshops.
4. NIMDTA has organised an Achieving Recognition Day for 16 September 2016 at Ramada Hotel to assist trainers to become NIMDTA Recognised Trainers.
5. NIMDTA in collaboration with the Faculty of Medical Leadership and Management and the Belfast Trust has organised a guest lecture on ‘Learning from Leaders’ on 19 September 2016 at Elliott Dynes Education Centre, Royal Victoria Hospital
6. NIMDTA in collaboration with the NI Simulation and Human Factors Network has organised an autumn conference – Thinking Differently: How do we change behaviour to improve patient safety- on 14 October 2016 at Riddel Hall, QUB.
7. In collaboration with NICON, NIMDTA will be contributing to a NICON event on 19 October 2016 – Clinical Leadership – An essential ingredient in delivering sustainable change.
8. In collaboration with QUB and the Ulster Medical Society, NIMDTA has organised a Research for Trainees Day on 20 October 2016 at the Postgraduate Centre, Belfast City Hospital.
9. In collaboration with QUB, NIMDTA will be organising for the fourth year an Annual Professional Support Workshop. This will occur on 17 November 2016 at Riddel Hall, QUB
10. New workshops for NIMDTA educators have been organised for 6 October 2016 on Facilitation Skills and on 21 October 2016 on Leadership Skills. A workshop is to be developed during 2016/17 on Advanced Teaching the Teachers- Technology Enhanced Learning
11. Clinical Facilitator Training is to be delivered on 8 May 2016
12. New workshops are planned for the NIMDTA Education Management Teams during 2015/16 on Time Management and Prioritisation (12 May 2016), Interview Skills (2 September 2016) and Leadership for All (11 November 2016)
13. NIMDTA will be providing a training event targeted at Lay Representatives on 14 September 2016.
14. NIMDTA is participating in the planning of the NI Regional Faculty of Medical Leadership and Management Conference to be held on Thursday 9 March 2017 at Riddel Hall, QUB.

### 3. Measuring the Improvement

**Quality 2020 Aim: We will improve outcome measurement and report on progress for safety effectiveness and the patient/client experience. We will promote the use of accredited improvement techniques and ensure that there is sufficient capacity and capability within the HSC to use them effectively**

#### NIMDTA Board

NIMDTA is held to account by the DoH through completion of reports and attendance at Accountability Reviews (Chair and Chief Executive). In addition, the Board completes a self-assessment annually and had its effectiveness as a Board audited by BSO Internal Audit during 2015/16. There was a satisfactory level of assurance provided.

The Chair of the Board is appraised annually by the Chief Medical Officer and the Chair in turn appraises the other members of the Board.

NIMDTA's Senior Management Committee members report to the Board on the quality of performance of NIMDTA's service and business departments.

#### NIMDTA Educators and Administrative Staff

The quality of performance of NIMDTA senior educators and senior managers is considered by formal appraisal annually. Administrative staff members are in turn appraised by Team Leaders in each department annually.

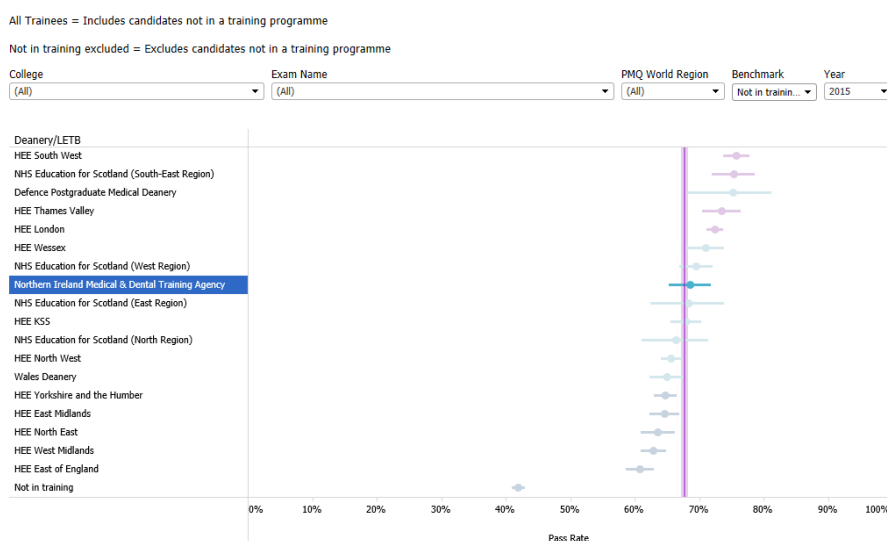
The performance of Heads and Deputy Heads of NIMDTA Specialty Schools is assessed during annual review of each Specialty School. The quality of training delivered by a NIMDTA training programme and the leadership of the Training Programme Director is considered through review of the specialty training programme on a regular cycle.

#### NIMDTA Formal Training of Trainees

The quality of NIMDTA's provision of formal education is assessed through direct trainee feedback, National Trainee Surveys and success in examination results.

Northern Ireland Trainees performed well in Specialty Examinations in GP, Clinical Radiology and Psychiatry in comparison with trainees from other regions of the UK.

Pass rates of GMC registered specialty exam candidates by Deanery / LETB (Excludes candidates sitting exams whilst in foundation programmes)

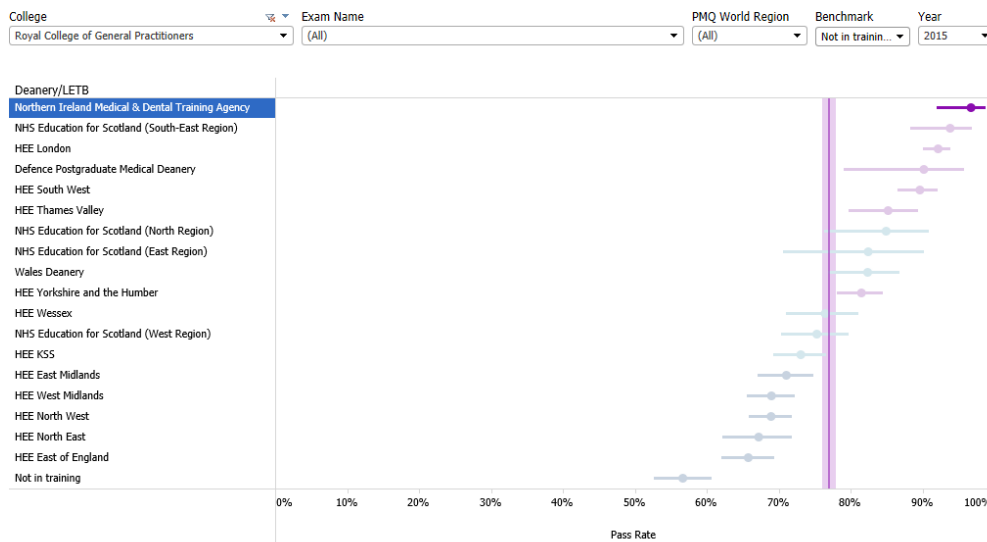


In the GP department in 2015/16, a total of 34 trainees sat their Applied Knowledge Test in October 2015 and 31 passed at the first attempt, one at third attempt and two failed. A further 28 trainees sat the same test in January 2016 when 27 passed and one failed. During this year 57 trainees undertook the Clinical Skills Assessment with 52 passing at the first attempt and five failed. NI GP trainees outperformed trainees from all other regions of the UK in 2015/16.

### Pass rates of GMC registered specialty exam candidates by Deanery / LETB (Excludes candidates sitting exams whilst in foundation programmes)

All Trainees = Includes candidates not in a training programme

Not in training excluded = Excludes candidates not in a training programme

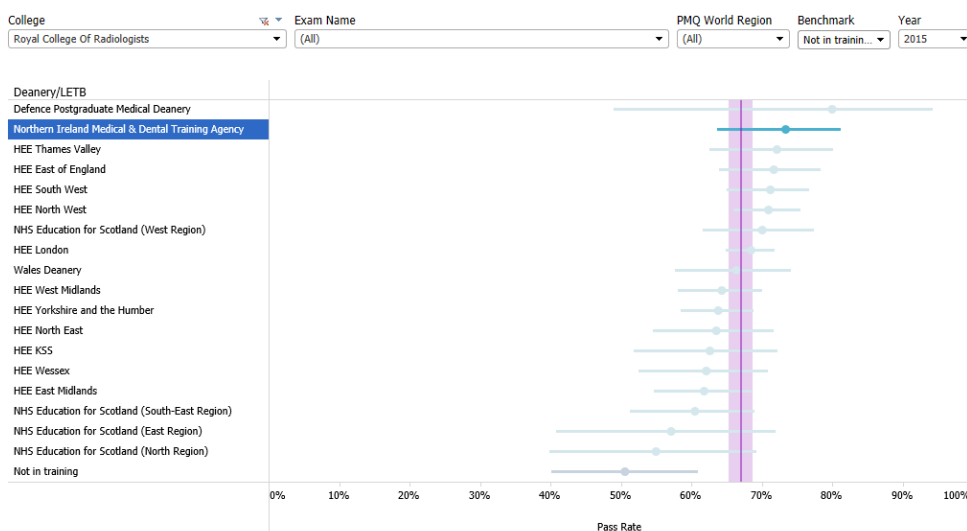


Royal College of GP Examination Results for NIMDTA – highest performing Deanery in the UK

### Pass rates of GMC registered specialty exam candidates by Deanery / LETB (Excludes candidates sitting exams whilst in foundation programmes)

All Trainees = Includes candidates not in a training programme

Not in training excluded = Excludes candidates not in a training programme



Royal College of Radiologists Examination Results for NIMDTA – second highest performing Deanery in the UK

The GMC National Training Surveys look at 15 different indicators to measure trainee’s satisfaction with the postgraduate medical education and training that they are receiving in their deanery in comparison with other trainees. The results for 2015/16 training year are shown below.

UK – Higher Trainees - Comparison for GMC Indicators 2016

Indicator	England	NI	Scotland	Wales	Ranking
Overall Satisfaction	83.55	85.48	84.70	85.33	1 <sup>st</sup>
Clinical Supervision	91.38	93.56	92.23	91.41	1 <sup>st</sup>
Clinical Supervision out of hours	91.02	93.42	91.78	90.60	1 <sup>st</sup>
Reporting systems	76.27	78.15	77.57	74.64	1 <sup>st</sup>
Handover	72.09	75.44	73.28	69.92	1 <sup>st</sup>
Induction	86.96	92.40	88.72	88.20	1 <sup>st</sup>
Adequate Experience	83.43	86.16	84.42	85.20	1 <sup>st</sup>
Supportive Environment	77.71	79.71	79.17	78.63	1 <sup>st</sup>
Work Load	46.42	50.83	49.99	48.62	1 <sup>st</sup>
Educational Supervision	91.87	94.33	92.33	92.07	1 <sup>st</sup>
Access to Educational Resources	71.06	71.20	72.10	73.80	3 <sup>rd</sup>
Feedback	80.62	82.18	82.20	81.53	2 <sup>nd</sup>
Local Teaching	64.61	64.15	66.10	66.82	4 <sup>th</sup>
Regional Teaching	71.84	71.85	69.99	71.12	1 <sup>st</sup>
Study Leave	72.12	78.08	73.31	72.99	1 <sup>st</sup>

For Higher Trainees – NIMDTA has scored 12 out of 15 first places and 1 second place for these UK wide results

For Core Trainees – NIMDTA has scored 6 out of 15 first places with 4 second places.

For Foundation Trainees – NIMDTA has scored 6 out of 13 first places with 6 second places.

For all trainees – NIMDTA has scored 9 out of 15 first places and 3 second places for these UK-wide results.

Feedback from trainees on NIMDTA formal education events is collected online using the Intrepid Course Management System which requires trainees to complete an assessment before a certificate of attendance is produced. Feedback from trainees is scrutinised and contributes to the strengthening and enhancing of these training days.

### Learning and Development Agreements

NIMDTA has Learning and Development Agreements in place with each of the five HSC Trusts and Service Level Agreements with each GP Trainer to describe the responsibilities of each body in the management and delivery of postgraduate medical and dental education and training.

NIMDTA senior educators and Education Management teams meet with the Medical Director and Director of Medical Education of each HSC Trust at least annually to ensure that postgraduate medical and dental education and training is being effectively managed and to discuss any new developments or outstanding concerns. This is also an opportunity to identify and share good practice.

### Training in Educational Units

NIMDTA is responsible to the GMC for managing and improving the quality of postgraduate medical education and training delivered in training practices (GP) and training units within the five HSC Trusts and the Public Health Agency.

NIMDTA oversees and coordinates its functions of Quality Management through the NIMDTA Quality Management Group which meets every two weeks. This Quality Management Group aims to monitor, manage and improve postgraduate medical education through a collaborative partnership with the Regulator (GMC), Local Education Providers and the other stakeholders.

The quality of delivery of postgraduate medical education and training is assessed by:

- Reviewing annual reports from NIMDTA Specialty Schools to assess appropriateness of action plans and to identify good practice to be shared with others;
- Reviewing twice per year reports from Local Education Providers to assess appropriateness and progress of action plans and to identify good practice to be shared with others;
- Carrying out NIMDTA Visits (cyclical, interim progress and problem solving) to Local Education Providers which assess against the GMC standards;
- Carrying out programme reviews to assess training in the region for a specialty against the GMC standards; and
- Reviewing the results of the GMC Annual National Trainee Surveys

During 2015/16, NIMDTA carried out seven specialty reviews, 16 cyclical visits (including hospital dentistry), seven follow-up visits, three triggered visits, 43 visits to general medical practices (8 new practice visits; 35 reaccreditation visits) and visits to all 33 general dental practices acting as training practices during 2015/16. NIMDTA was involved in visits to four units under Enhanced Monitoring by the GMC.

Reports from the visits were reviewed and assessed by the Quality Management Group (QMG), taking account of LEP action plans before the Final Reports were released. The outcomes of these visits were shared with the HSC Board and PHA (through Liaison meetings), DoH (through the Medical Education Policy Group) and the GMC (through Dean's Reports).

NIMDTA was required to submit a Dean's Report to the GMC in October 2015. The Dean's Reports are used by the GMC with other sources of information to monitor the quality of postgraduate medical education and training and ensure that the GMC standards for training are being met. The GMC in assessing NIMDTA's Dean's Report from October 2015 indicated that they agreed with 100% of NIMDTA's ratings of identified concerns and 89% of status updates. In their letter of response to NIMDTA's Dean's report (DR) they stated *"We found the DR to be of a high standard and would like to particularly note that the structure of your updates is very clear and helpful. The Deanery comments and next steps information added to the Trust's responses have been very useful for our scrutiny. The information provided in the updates was very helpful with extensive evidence triangulated through the deanery visits and the NTS data."*

### **NIMDTA Trainee Progress and Revalidation**

Each medical trainee is required to have their progress in training/performance reviewed annually (Annual Review of Competence Progression [ARCP]). The processes for conducting these annual reviews are described in the Foundation Reference Guide (Foundation) and the Gold Guide (Specialty Training). An ARCP panel is required to assess the adequacy of the evidence and documentation provided and to make a judgement about a trainee's suitability to progress to the next stage of training or to confirm if training has been completed satisfactorily.

In addition, the ARCP panel is required to consider a self-declaration form from the trainees (Enhanced Form R), Supervisor's reports and Employer's Exit statements and decide if there are any concerns about a trainee's ability to be recommended for revalidation. Revalidation is the process by which licensed doctors are required to demonstrate on a regular basis that they are up to date and fit to practise. Each doctor has a Responsible Officer and has a connection to a designated body. The Responsible Officer is

responsible for making recommendations to the GMC as to whether the doctor is up to date, fit to practise and should be revalidated. For doctors in training in NI, their designated body is NIMDTA and their Responsible Officer is the Postgraduate Medical Dean. Responsible Officers for doctors in training base their recommendations on the outcomes of the ARCP process.

**Exception Exit Report - to be completed by the Employing Trust (must be typed)**

Trainee Forename:	Trainee Surname:	GMC Number:
Speciality:	Grade:	
Start Date:	End date:	Details of Employment/Placements/Locum
<b>Details of Concerns/Investigations:</b>		
Does this trainee have any conditions or undertakings placed on them by the GMC or other organisation?		YES / NO
If YES, are they complying with those GMC conditions/undertakings?		YES / NO / N/A
Has this trainee been excluded or suspended from work?		YES / NO
Investigation of Health, Conduct, Capability	This trainee has been involved in a formal health, conduct or capability investigation by GMC, NCA, Police, Deanery or Trust.	YES / NO
	This has been concluded satisfactorily with no unresolved concerns about this trainee's health/conduct/capability. Please give a brief summary of the investigation(s):	YES / NO
Investigation of Serious Untoward Incidents / Significant Event	This trainee has been involved in formal serious untoward incident/significant event investigation (incident resulting in death or harm to a patient, staff, visitor or member of the public or damage to the reputation of a healthcare provider)	YES / NO
	This has been concluded satisfactorily with no unresolved concerns about this trainee's fitness to practise. Please give a brief summary of the investigation(s):	YES / NO

Complaints	This trainee has been named in complaint(s)	YES / NO
	This has been concluded satisfactorily with no unresolved concerns about this trainee's fitness to practise or conduct. Please give a brief summary of the complaint(s):	YES / NO
Other Concerns or Comments (not relating to areas above)		
<b>To be completed by Medical Director or agreed medically qualified deputy:</b>		
Signature	Date	
Full name	Job Title	
Name of the Organisation	GMC Number	

Reminder: In all circumstances a copy of this report should be shared with the trainee doctor

Therefore there are two decisions made at each ARCP panel – a decision about whether the trainee can progress to the next year of their training or complete training and a decision as to whether there are any concerns about their revalidation.

An ARCP panel must contain at least three members appointed by the Specialty Training Committee. In addition, where an unsatisfactory outcome is anticipated, the panel should contain a senior Deanery representative, an External Advisor and a Lay Representative.

Reports are requested from the Lay and External Representatives on NIMDTA ARCP panels on the processes and outcomes of the ARCPs and any learning from these reports is considered at the Quality Management Group and changes are made to the ARCP policy and to the teaching contained in ARCP workshops for Lead Educators.

NIMDTA processes and procedures regarding revalidation recommendations for trainees are overseen at the NIMDTA Revalidation Operational Group whose membership, in addition to NIMDTA Senior Educators and Administrators, includes Trainee, Lay, HSC Trust and GMC Representatives.

In the year 2015/16, a positive revalidation recommendation was made for 156 doctors in training (68 for GP trainees and 88 for Hospital Specialty Trainees) bringing the total of positive recommendations for doctors in training in NI since revalidation began to 464. All requests for deferral of the recommendation

made for doctors in training (237) were made as a consequence of their Certificate of Completion of Training date having moved from the time they were first appointed to their programme, due to changes in the length of time their training was taking place over. There were no doctors in training who required notification to the GMC of non-engagement with the revalidation process.

### **GP appraisal**

All General Medical Practitioners in NI must undergo an annual appraisal to maintain their status on the NI GP Performers' List. NIMDTA co-ordinates and manages the process of GP Appraisal in NI and works in partnership with the DoH and the Health & Social Care Board (HSCB) under the guidance of a Central Board of Management. The governance arrangements are underpinned by a Service Level Agreement and a Communications Protocol with the HSCB which are updated annually.

NIMDTA appraised 1,549 GPs in 2015/16. NIMDTA worked effectively with HSCB to facilitate the HSCB Responsible Officer in making revalidation recommendations to the GMC for 564 GPs in NI during 2015/16.

The NIMDTA appraisal team met with the HSCB revalidation team quarterly. This provided the opportunity for information sharing between the two groups and also for enhanced team building in facilitating the revalidation of GPs in Northern Ireland.

### **Next year**

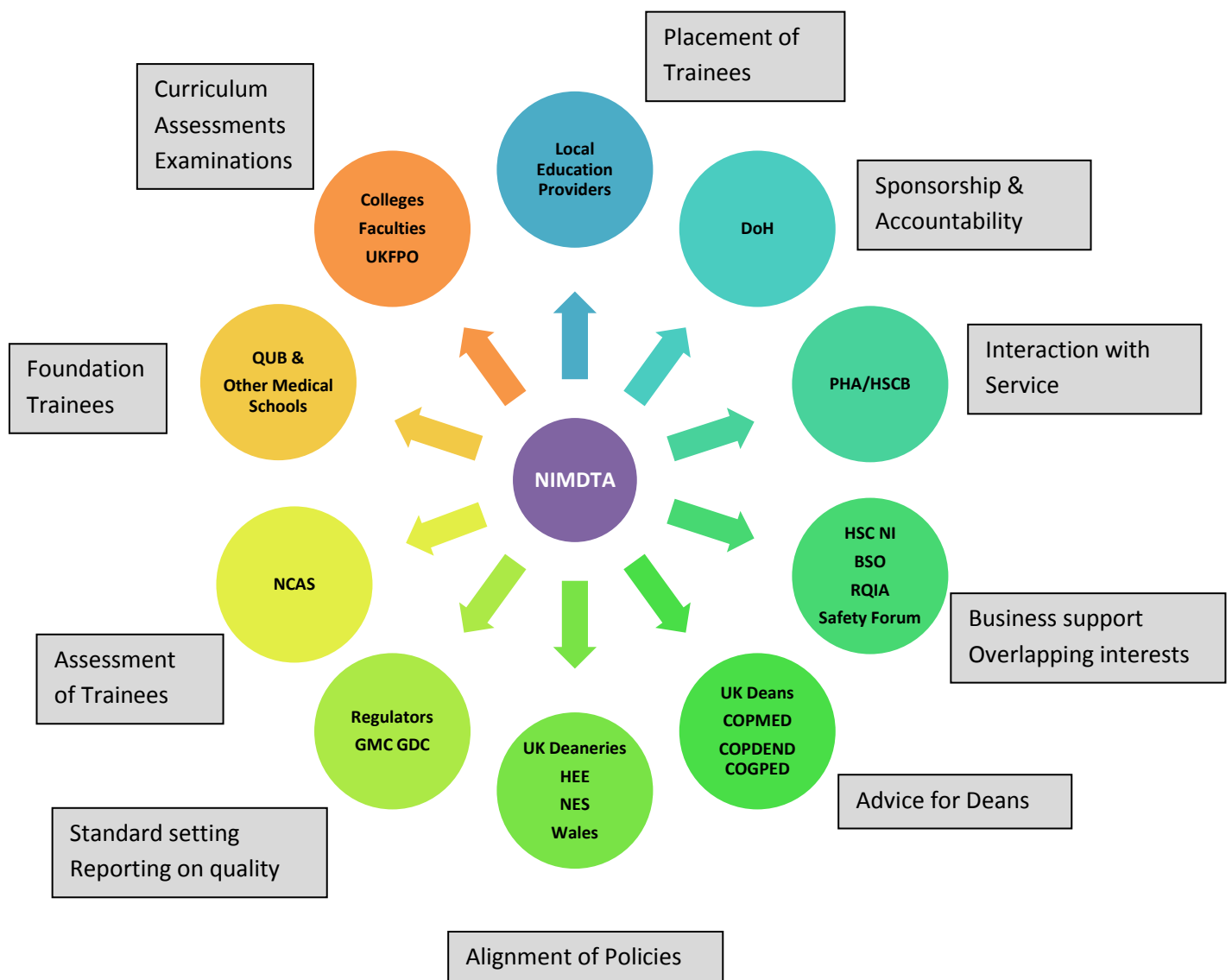
1. The NIMDTA Quality Management Team is arranging monthly planning meetings during 2016/17 in preparation for a GMC Regional Visit in March 2017 to assess undergraduate and postgraduate medical education and training in NI.
2. NIMDTA will be piloting Quality Indicators for Core Medical Training units developed by the Joint Royal College of Physicians Training Board during 2016/17.
3. During 2016/17 BSO Internal Audit will be auditing ARCP and Revalidation Processes, Trainee Support and Performance Management/Complaints.

## 4. Raising the Standards

**Quality 2020 Aim: We will establish a framework of a clear evidence-based standards and best practice guidance. We will establish dynamic partnerships between service users, commissioners and providers to develop, monitor and review**

### Partnership Arrangements

To carry out its roles effectively, NIMDTA needs to work closely with HSC Trusts, Medical Royal Colleges and Faculties, the Workforce Policy Directorate - DoH (Sponsor Branch), commissioners (PHA/HSCB), HSC Safety Forum, Business Services Organisation (BSO - internal audit, finance, equality, legal services, HSC leadership Centre, Clinical Education Centre), Regulation and Quality Improvement Authority (RQIA), Queen's University of Belfast (QUB) and other medical schools, national regulators (GMC, GDC), National Clinical Assessment Service (NCAS), UK Foundation Programme Office (UK FPO), postgraduate education professional bodies (COPMED, COPDEND, COGPED, UK Senior Managers' Forum), postgraduate education bodies in other parts of the UK (Health Education England, NHS Education for Scotland and the Wales Deanery) and doctor's and dentist's organisations (BMA, BDA).





## **NIMDTA Contributions**

NIMDTA contributes to the development and dissemination of standards and best practice guidelines through the participation of NIMDTA representatives in a wide range of National, GMC, DoH and Regional groups as detailed below.

During 2015/16, NIMDTA representatives participated in **National** groups and events regarding postgraduate medical and dental education:

UK Foundation Programme Board  
UK Foundation Curriculum Group  
UK Medical Education Database Development Group  
Academy of Medical Royal Colleges' Education Committee  
Conference of Postgraduate Medical Deans (COPMED)  
Committee of Postgraduate Dental Deans and Directors (COPDEND)  
Committee of GP Education Directors (COGPED)  
COPMED Senior Managers' Forum  
COPMED Revalidation Operational Group  
COPMED 4 Nations Revalidation Overarching Group  
COPMED Professional Support Group  
COGPED/RCGP partnership group  
COGPED/General Practice Committee liaison group  
Health Foundation Q Cohort  
JRCPTB- SAC in Rehabilitation Medicine – as Lead Dean  
MDRS Quality and Standards Group  
MDRS Medical Careers Working Group  
National Multi-Specialty Conference (NACT)  
NHS Education for Scotland Annual Conference  
RCGP Curriculum Development Group  
RCGP Assessment Committee  
RCGP Specialty Advisory Committee  
Royal College of Surgeons England Research Day for Trainees 12 February 2016  
UK Recognition of Trainers Forum (26 June 2015)

During 2015/16 NIMDTA representatives participated in working groups and events organised by the **General Medical Council:**

- Equivalence Advisory Group
- National Trainee Surveys Group
- Quality Leads Group
- Regional Advisory Forum
- Doctor as Scholar Event (3 February 2016)

During 2015/16, NIMDTA representatives participated in **DoH** groups and events:

- Medical Education Policy Group
- Medical Leaders' Forum
- Responsible Officers' Forum
- Confidence in Care Revalidation Delivery Board
- Library Advisory Group
- Privacy Advisory Committee
- Death Certification Implementation Working Group
- Central Medical Advisory Committee
- Employer Liaison Group
- Interview with Chair of Expert Panel Prof Bengoa

During 2015/16, NIMDTA representatives participated in **regional** groups and events

- QUB-NIMDTA-Belfast Trust Clinical Academic Training Board
- Northern Ireland Confederation for Health and Social Care (NICON)
- PHA Medical Directors' Group
- Quality 2020 Implementation Steering Group
- eHealth Project Board
- Faculty Medical Leadership and Management (FMLM) Regional Conference Organising Committee
- Improvement Network of Northern Ireland
- Postgraduate Medical Education Forum
- BMA JDC/NIMDTA Liaison Group
- NIMDTA/PHA/HSCB Liaison Group
- Faculty of Medical Leadership and Management (FMLM) NI Conference – Medical Leadership and Quality Improvement (12 November 2015)
- Gain Committee
- Ulster Medical Society
- HSC Trust Medical Directors' Group

## NIMDTA and Quality 2020

NIMDTA contributes to the Quality 2020 agenda through the involvement of Professor Keith Gardiner (Postgraduate Medical Dean) and Dr Claire Loughrey (Director of General Practice) as members of the Quality 2020 Implementation Group and the eHealth Project Board.

Professor Keith Gardiner was one of the task leads for Quality 2020 Task 13: Establishing a Common Patient Safety Curriculum for Health and Social Care NI which was completed in January 2016. This aim of this task was to consult, agree and introduce a common curriculum for patient



Quality 2020 Task 13:

ESTABLISHING A COMMON PATIENT SAFETY CURRICULUM FOR HEALTH AND SOCIAL CARE NI

Final Meeting  
Friday 15 January 2016  
HSC Clinical Education Centre, Clady Villa, Knockbracken

### Meeting Programme

09.00- 09.10	Welcome and Introductions	Dr Glynis Henry CBE, Head – Clinical Education Centre
09.10-09.40	Summary of Progress of Task 13	Professor Keith Gardiner, Postgraduate Medical Dean, NIMDTA
09.40-10.10	Attributes Framework – Supporting Leadership for Quality Improvement and Safety	Ms Cathy McCusker, Senior Professional Officer, NIPEC & Dr Gavin Lavery, Clinical Director –HSC Safety Forum, PHA
10.10-10.40	Improvement Network of Northern Ireland	Dr Gavin Lavery, Clinical Director –HSC Safety Forum, PHA
10.40-11.00	Coffee/Tea	
11.00-12.00	Quality Improvement Presentations	Chair: Dr David Stewart, Medical Director, ROIA
12.00-12.45	Next Steps – Patient Safety Curriculum for NI	Discussion Groups: Group Leaders: Professor Pascal McKeown- Director, Centre for Medical Education, QUB Ms Sharon O'Donnell – Medicine Governance Pharmacist, Belfast Trust Dr Glynis Henry- Head, Clinical Education Centre, BSO
12.45-13.00	Concluding Remarks	

safety in undergraduate and postgraduate education programmes for health and social care in Northern Ireland. This group brought together undergraduate and postgraduate educational leaders in pharmacy, nursing and medicine in Northern Ireland with universities, training agencies, HSC Trusts and HSC Arm's Length Bodies.

NIMDTA clinical radiology, emergency medicine and foundation trainees are participating in an eHealth project (Exterior) to develop an online formative assessment tool to accelerate learning in the interpretation of plain X-rays. NIMDTA obstetrics and gynaecology trainees are participating in the development of an eLearning tool to improve the interpretation of cardiotocographs (records of fetal heart beat and uterine contractions during labour). NIMDTA foundation trainees have been involved in Quality 2020 Task 14 – Harmonising Logistics – which is aimed at developing strategies to minimise variations in practice that junior doctors face when moving between different HSC Trusts in NI.

NIMDTA Simulation Lead Dr Mike Morrow and NIMDTA ADEPT Clinical Leadership Fellow Dr James Reid are leading a Quality 2020 Task – Improving Patient Safety through Multi-disciplinary Simulation and Human Factors Training. Patient safety will be improved by providing staff with a safe, simulated environment in which to focus on human factors such as communication, team working and situational awareness.

NIMDTA representatives have met with the NI Social Care Council's senior team and discussed how elements of the World Health Organisation (WHO) Patient Safety Curriculum could apply to the Social Care Setting (20 November 2015; 3 March 2016)

### NIMDTA and National Quality Improvement Work

Professor Keith Gardiner and Dr Claire Loughrey have been members of inaugural cohort of the Health Foundation Q initiative. This initiative aims to make it easier for people from all parts of the health care system to enhance their skills and make tangible benefits for patients. Professor Keith Gardiner and Dr Claire Loughrey have worked with just over 100 Q Fellows from across the UK to design, refine and test this initiative so that it is ready for wider recruitment in 2016.

NIMDTA participated in a RQIA Review of Quality Improvement Systems completing an organisational questionnaire and meeting with the review team on 16 September 2016. NIMDTA representatives attended the Joint Stakeholder Event on 28 October 2015 at Mossley Mill, Newtownabbey.

### NIMDTA and External Views

NIMDTA has recruited a team of 32 Lay Representatives to provide external scrutiny and contribute to a number of different Deanery activities. These activities included recruitment and selection panels, assessment panels (ARCP / Record of In Training Assessment); deanery visits and appeal panels.

#### Lay Representative Induction Programme

Thursday 17 September 2015  
Boardroom, NIMDTA



09.15 am	Registration	
09.30 am	Welcome and Introductions	Dr Richard Tubman Associate Dean
09.45 am	Roles of Lay Representatives	Dr Richard Tubman Associate Dean
10.15 am	Equality and Diversity – implications for your role	Ms Roisin Campbell HR Manager
10.45 am	Coffee/Tea Break	
11.05am	NIMDTA: Structure, Function and Relationships Organisation of Postgraduate Medical Education and Training	Prof Keith Gardiner Postgraduate Medical Dean
11.35 am	Deanery Visits: • Purposes and Aims • Documentation	Dr Richard Tubman Associate Dean
12.10 am	Administration for Lay Representatives (a) Booking system (b) Report Forms (c) Claim Forms and payment	Ms Denise Hughes Hospital Training Co-ordinator
12.30 pm	Wrap Up and Future Training Needs	Dr Richard Tubman Associate Dean

All lay representatives are required to prepare a report for NIMDTA on the processes and outcomes of the activity that they took part in.

An induction event for new Lay Representatives was held on 17 September 2015 when 29 Lay Representatives attended.

NIMDTA also receives externality by inviting educators from other parts of the UK to observe and take part in Deanery visits to educational units, in annual review panels to assess progress of trainees and for appeal panels. Each of these representatives is asked to prepare a report for the Postgraduate Dean on the processes and outcomes of the activity that they took part in.

NIMDTA also receives external views from the GMC from Enhanced Monitoring visits (there were four of these carried out in 2015/16) and through feedback from the GMC Scrutiny Group on NIMDTA Dean's report to the GMC.

NIMDTA also receives information from the GMC on how NIMDTA trainees perceive training in NI compared with other regions of the UK (GMC National Training Survey) and on how well NIMDTA trainees progress through their training (Annual Review of Competence Progression), succeed at examinations or succeed in their applications to enter specialty training.

The work of NIMDTA is subject to audit by the Business Services Organisation Internal Audit team throughout each year. In September 2015, an audit was carried out of the Recruitment and Selection of Lay Representatives. NIMDTA received a satisfactory level of assurance with no Priority 1 and three priority 2 findings identified. Internal Audit carried out an audit in January 2016 of the progress made towards the Recognition of Trainers as required by the GMC. NIMDTA received a satisfactory level of assurance with one Priority 1 and two Priority 2 findings identified.

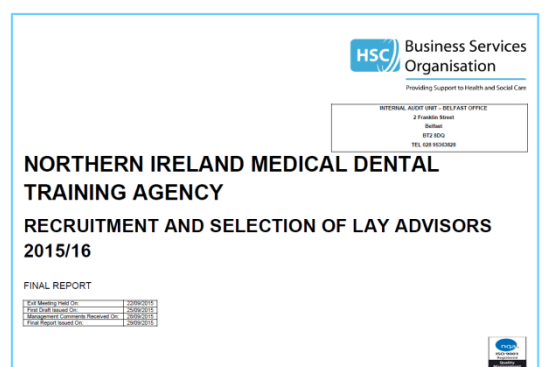
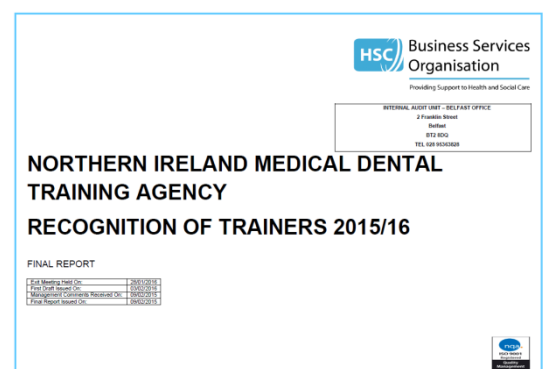
The feedback received from the Lay Representatives, External eEducators, GMC and Internal Audit are all fed back to the Quality Management Group where best practice and learning are used to improve policies, processes and actions. Weaknesses identified by BSO Internal Audit were addressed.

### **NIMDTA and Communication with Trainees**

NIMDTA actively seeks feedback from trainees and involvement of trainees in NIMDTA Committees.

NIMDTA engages with and listens to trainees in a number of ways:

1. [NIMDTA Surveys of Trainees](#). NIMDTA conducts surveys of trainees before carrying out visits to the units in Local Education Providers that they are allocated to. These surveys inform the visiting team and are discussed at NIMDTA's pre-visit briefing sessions of the visiting team.
2. [GMC Surveys of Trainees](#). The GMC conducts an Annual Survey of Trainees. NIMDTA strongly supports the GMC in maximising the response rate of trainees in NI to this survey. NIMDTA



reviews and distributes the results of this survey and provides responses to the GMC. 99.6% of NIMDTA trainees completed the survey in 2015/16. In this survey trainees raised fifteen patient safety issues but did not raise any undermining concerns.

3. NIMDTA visits to Local Education Providers. NIMDTA has a rolling five yearly visiting cycle to visit all the training units in NI. During these visits, NIMDTA meets with trainees in peer groups to listen to their views in a confidential setting. Concerns raised by the trainees are discussed anonymously with trainers and fed back on the day to the Educational and Clinical Leaders in the Local Education Provider and included in NIMDTA's visit reports.
4. Trainee Representatives. NIMDTA includes trainee representatives in the membership of the Training School Boards (Foundation, Specialty and GP) which oversee the delivery of postgraduate medical education in each programme. NIMDTA also includes trainee representatives in appropriate Sub-Committees (Revalidation Operational Groups, Clinical Academic Training Committee).
5. Trainee meetings. NIMDTA Educators meet with individual trainees to listen to concerns, discuss career choices and provide support.

The Foundation School has an active and well established Foundation Doctors' Forum which promotes inclusion of Foundation doctors' views in regional working groups and sends representatives to national meetings thus linking with other Foundation doctors in other regions. Representatives of this forum are full members of the Foundation School Board and include a Final year Medical student along with an F1 and an F2 doctor. Issues pertaining to Foundation doctors are highlighted through this Deanery level reporting structure. The Foundation School links directly with the recruited and selected Foundation Programme Directors based in the LEPs, three times a year. Opportunities exist to discuss areas of good practice and directly influence how they are disseminated in the region.

NIMDTA has a Trainee Forum bringing together trainee representatives from all the Foundation, GP, Dental and Hospital Specialty School Boards to provide a better opportunity for trainee views and feedback to be heard and to ensure that training in NI is delivered to the highest standard with the overarching aim of enhancing patient care.

The NIMDTA Foundation School introduced a Foundation Weekly Update from August 2014. This is circulated to all F1 doctors, F2 doctors and Foundation contacts. The objective of the Foundation Weekly Update is to streamline communication to all Foundation doctors, trainers in contact with Foundation doctors and all in health and medical education in Northern Ireland who are in contact with Foundation doctors.

All information is presented in 'bite sized' chunks of information relating to current issues relevant to front line healthcare staff. Regular features include topics such as Foundation e-portfolio and ARCP reminders; Healthcare news and information alerts; Foundation and Specialty Recruitment information; Regional Generic Skills

**NIMDTA - Enhancing Patient Care through Training**

Welcome to the Foundation Weekly Update Friday 4 March 2016

UKFPO allocations 4 March 2016: An announcement has been made by the United Kingdom Foundation Programme Office (UKFPO) that **Foundation job allocations have been released** following a technical issue that halted publishing on 3 March 2016.

**Northern Ireland Foundation Prospectus March 2016:** Information on the F1 and F2 posts available as choices within the Northern Ireland Foundation School has been published on the NIMDTA website. The information has been provided by Foundation Faculty in the five trusts and was collated by the HEP's team. The information is designed to give details of the departments and locations within which F1 and F2 doctors are placed. The information can be updated where changes are needed. Please contact the Foundation team if adjustments to information are required.

**Team Assessment of Behaviour (TAB) second placement for Foundation Doctors:** During March all Foundation doctors who have not completed a TAB in their first placement should choose and request those working alongside them to complete TAB forms. Please aim to secure at least 16 plus TABs, as a minimum of ten responses are required for your named Foundation Educational Supervisor to release and discuss the TAB. If concerns are raised your Educational Supervisor will discuss comments with you directly. A complete and released TAB is essential for your end of year ARCP.

**Northern Ireland Foundation School Information Event:** To facilitate final year medical students in making choices about the available FPA3 posts for F1 and F2 doctors from August 2016 an information evening will be held on Tuesday 8 March 2016 in Lecture Room 1 at the Medical Biology Centre (MBC), Lisburn Road, BT9 7AE. Foundation doctors and Foundation Faculty along with Trust representatives will attend. The event is scheduled to run from 18.30hrs to 19.30hrs and will offer an opportunity to hear about the educational resources available in local education providers (LEPs).

Information on medical courses in the UK in response to requests for notification about courses which may be of interest to Foundation doctors the following website gives an extensive list of upcoming courses suitable for doctors at all levels including Consultants. It covers comprehensively all specialties and also more generic courses. The study leave budget for Foundation doctors will support attendance at mandatory training and recognised essential courses only. Sign pointing to this website does not imply financial support or endorsement to attend these courses. <http://www.meds-uk.com/>

**JRCPTB** Important: Counting overseas and locum work towards previous experience: Links to experience section of JRCPTB website that is used to apply to CT1-level programmes in core medical training (CMT) and/or acute care common stem: acute medicine (ACCS-AAM). This covers recruitment to all UK training programmes in these specialties. Three tabs on the experience page - minimum experience, maximum experience and non-UK experience. A maximum of 3 months of experience in EM will count towards the 18 months allowed, so a lot of the trainees going to Australia may still be eligible. All of a 12 month locum service post in medicine would count towards the 18 months. <http://www.ccr.com.au/~/media/press-releases/2015/04/experience>

Important information for doctors who after completion of Foundation Programme training: do not secure or progress into a recognised training scheme. The GMC webpage link [http://www.gmc-uk.org/doctors/2016\\_03\\_04\\_explains\\_that\\_if\\_you\\_are\\_a\\_licensed\\_doctor\\_without\\_a\\_connection\\_to\\_a\\_designated\\_body\\_you\\_will\\_revalidate\\_in\\_the\\_same\\_way\\_as\\_all\\_other\\_licensed\\_doctors](http://www.gmc-uk.org/doctors/2016_03_04_explains_that_if_you_are_a_licensed_doctor_without_a_connection_to_a_designated_body_you_will_revalidate_in_the_same_way_as_all_other_licensed_doctors). This means you need to inform the GMC you have no prescribed connection to a designated body by logging on to GMC Online.

In Planning: Generic Skills, Module 5. We are currently liaising with the speaker for Module 5 Communication Skills to secure a further two dates for those Foundation Doctors who have yet to complete the session. Dates will be released in the coming week and spaces are limited to 35 participants.

Important: Notify us when you cannot attend a module via: [Foundation.nimdt@bncni.net](mailto:Foundation.nimdt@bncni.net) so we may offer this space to a peer who has not yet secured a place on this module.

Northern Ireland Foundation School Contact email: [Foundation.NI@bncni.net](mailto:Foundation.NI@bncni.net) Friday 4 March 2016

mandatory training information for all F2 doctors; information relevant to Foundation Programme trainees and those who act as supervisors; GMC information and new publications; Northern Ireland regional initiatives and their roll out; Academic opportunities and educational meetings; Celebrating the success of current and past NIFS Foundation doctors.

The information is confined to one A4 page and contains the key weekly messages relevant to all involved in Foundation Programme training in Northern Ireland.

There are also NIMDTA Newsletters for GP, Core Medical, Paediatric and Hospital Specialty Trainees.

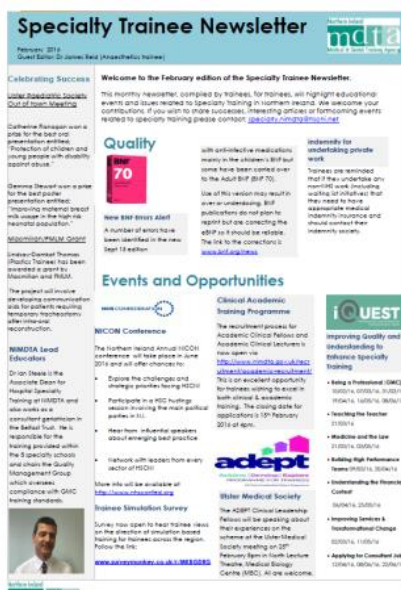


**Specialty Trainee Newsletter**  
November 2014  
Guest Editor: Dr Rachael Nathan (Primary Trainee)

**Celebrating Success**  
Congratulations to Dr Kyle McDonald for his RCSI (Trauma and Orthopaedics) Diploma in November 2014.

**Quality**  
The study leave budget has recently increased to £1000 per trainee during the training year. Please see the Study Leave Policy on the NIMDTA website for further information.

**Events and Opportunities**  
TRAINER FORUM  
Next Meeting: 20/10/15  
ADEPT 2014/2017  
The application form for the ADEPT Clinical Leadership Fellowship Programme 2016/2017 will be available on the NIMDTA website from 15 January 2016.



**Specialty Trainee Newsletter**  
February 2015  
Guest Editor: Dr James Reid (Anaesthetics Trainee)

**Celebrating Success**  
Congratulations to Dr Catherine Ferguson who is a candidate for the best oral presentation award and young person with disability award given to the ADU BIP (BIP 70).

**Quality**  
The ADU BIP (BIP 70) will be held in the next few weeks. A number of topics have been identified in the review. It is important that you are up to date with all the latest information on the ADU BIP (BIP 70).

**Events and Opportunities**  
NIMDTA Local Education  
Dr Ian O'Shea is the Associate Dean for Medical Specialty Training at NIMDTA and is responsible for the local education programme in the Belfast Hub. He is responsible for the training of the 15 specialty trainees and is also the Quality Management Group (QMG) chair.



**Specialty Trainee Newsletter**  
March 2016  
Guest Editor: Dr Lauren Megaw (Psychiatry Trainee)

**Celebrating Success**  
Congratulations to Dr Chris Watson, DSc (Anaesthetics) for his RCSI (Trauma and Orthopaedics) Diploma in November 2014.

**Quality**  
The study leave budget has recently increased to £1000 per trainee during the training year. Please see the Study Leave Policy on the NIMDTA website for further information.

**Events and Opportunities**  
TRAINER FORUM  
Next Meeting: 20/10/15  
ADEPT 2014/2017  
The application form for the ADEPT Clinical Leadership Fellowship Programme 2016/2017 will be available on the NIMDTA website from 15 January 2016.

## NIMDTA and Trainee Opportunities

NIMDTA works closely with QUB to promote opportunities for clinical trainees to undertake academic training, to be involved in scholarly activity and to present their research work. In November 2015, NIMDTA partnered with QUB and the Ulster Medical Society (UMS) to promote and organise a very successful Junior Doctors' Prize Evening for the second consecutive year.

The President of the Ulster Medical Society Dr Michael McBride (Chief Medical Officer) chaired the evening event and presented prizes to trainees for the best poster and best oral presentations.



**Annual Junior Doctors' Prize Evening**  
Thursday 5 November 2015  
Centre for Experimental Medicine, QUB

**Programme**

5.30pm	Deadline for posters to be displayed in Foyer	
6.00-7.15pm	Poster Judging	
7.30pm	Welcome and introductions	UMS President: Dr Michael McBride
7.35pm	Oral Presentations	Chair: UMS President
	Sandra McAllister Rosam Gray Jamie Campbell Serena Martin Ashley McIlroy	
8.15pm	Award of Poster Presentation Prize	UMS President
8.45pm	Award of Oral Presentation Prize	UMS President
8.50pm	Concluding Remarks	UMS President



The Annual Junior Doctors' Prize Evening was held in the QUB centre for experimental Medicine on Thursday evening 3 November 2015.

The evening commenced with a poster competition – with 20 abstracts selected for poster presentation in categories of Clinical Research, Case Reports/Case Series and Quality Improvement



Professor Pascal Mowoun (QUB) asking Mr Robert Spence (trainee in general surgery) about his poster entitled – Management of Acute Gallstone Pancreatitis



Drs Noileen Osborne and Rebecca Robinson standing beside their art work designed to highlight art in Psychiatry and promote Psychiatry as a specialty to Foundation doctors.



The prizes for the best poster presentations were awarded to:

Mr David Dick (core surgery trainee) – diagnostic rates in Thyroid lobectomy

Dr Susan Adley (obstetrics & gynaecology trainee) – reducing surgical site infection rates after Caesarean section

There were five oral presentations delivered by Ms Sandra McIlister, Mr Roman Gray, Dr Jamie Campbell, Dr Serena Martin and Dr Ashley McInroy/Dr Rebecca Robinson (double act).

The prize for the best oral presentation went to Mr Roman Gray (General Surgery trainee) for his presentation – The role of Cyclooxygenase 2 expression in stage II and stage III colon cancer survival.

The evening was introduced and chaired and the prizes were awarded by the Chief Medical Officer Dr Michael McBride, President of the Ulster Medical Society 2015-16.



Dr Michael McBride awarding best poster presentation prize to Dr Susan Adley



Dr Michael McBride awarding best oral presentation prize to Mr Roman Gray

NIMDTA representatives helped to organise a very successful Regional Conference of the Faculty of Medical Leaders and Managers in November 2015 which provided trainees with the opportunity to present their work on quality improvement.



2<sup>nd</sup> floor  
6 St Andrew's Place  
London WC2E 8JZ  
444 (0) 203 075 1343  
enquiries@fmlm.ac.uk  
www.fmlm.ac.uk

**FMLM Northern Ireland Regional Conference**  
Thursday 12<sup>th</sup> November 2015  
Belfast Castle  
*Learning to Improve*

TIME	DESCRIPTION	CHAIR
08.30 – 9.00	Registration & Refreshments	
09.00 – 09.10	Welcome and opening remarks Dr Cathy Jack	
09.10 – 09.40	Quality and safety in a modern health care system Sir Liam Donaldson	Mr Peter Lees
09.40 – 10.35	Workshop Session 1 – Delegates to select <u>one</u> workshop	
	<b>1A GMC: Innovation and Leadership</b> Professor Ian Curran Prof Curran will explore the importance of generic professional capabilities in clinical leadership. Drawing on his experience with the Harvard Macy Institute in Boston he will highlight the differences between transactional and transformational leadership and outline the characteristics and processes underpinning successful innovation.	
	<b>1B Human Factors (aimed at students and trainees)</b> Dr Richard Carry and Dr Caroline Howe Explore the definition and relevance of human factors to safer healthcare.	
	<b>1C General Practice in the 21st Century</b> Dr Jeremy Courtney, Dr Brendan O'Brien and Dr Margaret O'Brien	
	<b>1D Quality Improvement</b> Dr David Hill, Dr Niall Leonard, Dr Claire Lundy and Dr Philip Hall An interactive workshop: Understanding Quality Improvement methodologies.	
	<b>1E Big Data &amp; Healthcare</b> Dr Michaela Black An interactive workshop setting the scene of What is Big Data? What help can it provide? A review of successful case studies from various scenarios and ending with a group activity of planning: how could Big Data help you and what is needed?	
10.35 – 10.50	Refreshments Opportunity to network and visit exhibition	
10.50 – 11.15	Quality 2020 Attributes Framework & Patient Involvement Dr Gavin Lavery and Dr John Simpson	



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6 St Andrew's Place  
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444 (0) 203 075 1343  
enquiries@fmlm.ac.uk  
www.fmlm.ac.uk

TIME	DESCRIPTION	CHAIR
11.20 – 12.00	Poster Sessions (including 3 minute oral presentations) <i>Please see programme of oral sessions below</i>	
	<b>1: Quality 2020: Measuring Improvement</b> Awarding institution: HSC Safety Forum	Jacqueline Fearon Dr Gavin Lavery
	<b>2: Student Poster Session</b> Awarding institution: QUB	Dr Niall Leonard Professor Roy Spence
	<b>3: Quality 2020: Transforming Culture and Strengthening the Workforce</b> Awarding institution: DHSSPS	Dr Anne Kilgallon Dr John Simpson
	<b>4: Quality 2020: Raising Standards (STG/Band 7 and above)</b> Awarding institution: NIMDTA	Professor Ian Curran Professor Keith Gardner
	<b>5: Quality 2020: Raising Standards (CT1-CT3 and ST3-ST5)</b> Awarding institution: FMLM	Mr Peter Lees Ms Kirsten Armit
12.00 – 13.00	Lunch Opportunity to network and visit exhibition	
13.00 – 13.20	Ministerial Address Mr Simon Hamilton MLA	Chair TBC
13.20 – 14.00	Medical Engagement, Collective Leadership and Quality Improvement Mr Vijaya Nath	Dr Claire Loughrey
14.00 – 14.50	Workshop Session 2	
	<b>2A "Quality Improvement...me? Really?"</b> Medical training is necessary but not sufficient to be a clinical leader. In this interactive session we will explore the challenges facing doctors and how quality improvement tools and 6 key messages may just help! Dr Brian Robson	
	<b>2B Human Factors (aimed at GPs and Consultants)</b> Explore the definition and relevance of human factors to safer healthcare. Dr Richard Carry and Dr Caroline Howe	
	<b>2C Key Evidence in Evidence Based Medicine</b> The role of systematic reviews for people making decisions about health and social care. Professor Mike Clarke	

## FMLM Northern Ireland Regional Conference Learning to improve

12 November 2015, Belfast Castle  
[www.fmlm.ac.uk](http://www.fmlm.ac.uk)

The FMLM NI Regional Conference was held at the Belfast Castle on World Quality Day - Thursday 12 November 2015.



Sir Liam Donaldson, Chair of Health Policy at Imperial College, London and Chancellor of Newcastle University opened the conference with an address entitled - Quality and safety in a modern health care system.

Sir Liam described problems faced in the UK health care system - variation in standards of care, slow uptake of evidence, care not being sufficiently patient-centred, poor coordination of care, variable access to care and harm.



Mr Simon Hamilton, Minister DHSSPS, gave a ministerial address outlining his vision for ensuring the quality of health and social care throughout Northern Ireland.

He announced steps to implement an improvement institute designed to drive forward innovative improvements in how health and social care services are delivered.

You can read more about this at <http://www.northernireland.gov.uk/index/medic-centre/news-departments/news-311115/news-311115-hamilton-announces-improvement.htm>

There were two excellent sessions of five parallel workshops covering quality improvement, innovation and leadership, human factors, professionalism, evidence based medicine and big data. In addition, there was a discussion of the Quality 2020 Attributes Framework (Dr Gavin Lavery and Dr John Simpson), an invited lecture on Medical Engagement, collective Leadership and Quality Improvement by Vijaya Nath, Director of Leadership Development at the King's Fund and a panel discussion on the theme of Learning to improve involving Sir Liam Donaldson, Dr Michael McBride (CMO), Dr Tony Stevens (Northern HSC Trust), Dr Margaret O'Brien (HSCB), Jacqueline Fearon (patient representative), Lindsey Daniel Thomas (plastic surgery trainee and ADEPT associate) with questions being posed by Dr Brian Robson (Executive Clinical Director, Healthcare Improvement Scotland).

There were 3 keenly contested poster competition sessions aligned to the strategic goals of Quality 2020. The winners of these sessions were:



Dr Natalie Thompson & Dr Danielle Leeson

Session 1: Measuring improvement - Dr Dorothy Johnston, Core Surgical Trainee

Session 2: Student session- Mr Owen McMoray

Session 3: Transforming culture and Strengthening the Workforce - Dr Natalie Thompson, paediatric trainee and ADEPT Clinical Leadership Fellow

Session 4: Making standards (senior trainees and staff) - Dr Poppy Stewart, anaesthetics trainee

Session 5: Raising Standards (junior trainees)- Dr Danielle Leeson, paediatric trainee

Dr Michael McBride interviewed the eight ADEPT Clinical Leadership Fellows about the ADEPT programme- why did they apply, what were they hoping to achieve, what were they actually doing, what are the challenges they have faced so far, what have they learnt, how have they found working in a non-clinical setting, what opportunities have they had through the programme and how they saw their practice changing after the ADEPT year.



ADEPT Clinical Leadership Fellows with Dr Michael McBride

(back row): Dr Natalie Thompson, Dr Gareth Lewis, Dr Grainne Donaghy, Dr James Reid, Dr Laura McLaughlin, Dr Rachael Hutton

(front row): Dr Lauren Megahy, Dr Michael McBride (CMO) and Dr Julia Courtney

## NIMDTA Clinical Leadership Fellows' Programme (ADEPT)

NIMDTA in cooperation with partner host organisations in Northern Ireland launched a Clinical Leadership Fellows' programme for the first time during the training year 2015/16.

This programme provides senior doctors and dentists in training with an opportunity to take time out of programme for 1 year to work in an apprenticeship model with senior leaders in host organisations in Northern Ireland to develop organisational and leadership skills.

Clinical Leadership Fellows undertake one or more specific projects in their host organisations under supervision, attend formal leadership training including mentoring and coaching, and are provided with opportunities to network and learn with healthcare colleagues. In addition to the specific projects, other host-based opportunities include attending and chairing meetings and working with multi-professional teams on a wide variety of other projects in their host organisations. The number and range of projects in which the Clinical Leadership Fellow is involved depends on the host organisation.





The aims of this programme are that Clinical Leadership Fellows will by the end of their placement have gained experience and an understanding of the following:

1. How the HSC works so that they can be more effective as leaders and managers and work in partnership with other leaders and managers
2. The strategic vision of health and social care in NI and the factors that influence this strategy
3. The ability to identify leadership and management styles and how to employ those styles
4. The relationship between clinical practice and service management
5. Thinking differently through reflective practice
6. Effective leadership and management of projects
7. Enabling others through working in a management role
8. Working in teams from a variety of stakeholders
9. Networking with senior colleagues facing similar challenges
10. Influencing and negotiating skills

A Leadership Development Programme has been delivered as part of ADEPT by the HSC Leadership Centre. This provides eight full days of training during the year spent in ADEPT by Leadership Fellows. During 2015/16, Clinical Leadership Fellows have been working towards a Level 7 Certificate in Leadership and Management from the Institute of Leadership and Management.

The Leadership Development Programme involves:

- 1) Induction
- 2) Module 1- Leading with Care
- 3) Module 2- Systems Leadership
- 4) Module 3 – Leading for Reform
- 5) Module 4 – Leading to Mobilise
- 6) Module 5 – The Political Leader
- 7) Module 6 – The Relentless Leader
- 8) Final Module and Assessment

During 2015/16, ADEPT Fellows were placed in host organisations in NI - GMC, RQIA, HSCB, HSC Safety Forum, HSC Leadership Centre, HSC Trusts and NIMDTA.

Fellows had opportunities to present at the DoH Medical Leaders' Forum, RQIA Stakeholder Conference, and the Ulster Medical Society, were interviewed by the Chief Medical Officer at the FMLM Regional Conference, and attended the GMC Regional Advisory Forum and NIMDTA Educator events.



(Front Row from left): Natalie Thompson (South Eastern HSC Trust), Julia Courtney (HSC Safety Forum/HSC Leadership Centre), Lauren Megahey (Southern HSC Trust), Grainne Donaghy (Belfast HSC Trust)

(Back Row from left): Rachael Hutton (Health & Social Care Board/Board Liaison Group), James Reid (NIMDTA), Lindsay Damkat Thomas (ADEPT Associate), Gareth Lewis (GMC/RQIA)

## **ADEPT Trainees 2015/16**

### **Next Year**

1. NIMDTA representatives will again be involved in organising a Regional Conference on behalf of the Faculty of Medical Leadership and Management on 9 March 2017 – Engaging, Leading and Improving.
2. NIMDTA will be partnering with the UMS and QUB to organise a Research for Trainees Day on 20 October 2016 at the Postgraduate Centre, Belfast City Hospital
3. NIMDTA in conjunction with HSC Leadership Centre has organised an Educational Excellence Day – Dare to Excel on 15 June 2016 at La Mon Hotel. At this day the ADEPT Clinical Leadership Fellows will make presentations based on their quality improvement projects
4. NIMDTA representatives will be attending the DoH Quality 2020 Workshop on 12 May 2016 at Stormont Pavilion
5. NIMDTA Educators will be contributing to the Quality 2020 Task on the use of Multidisciplinary Simulation and Human Factors Training to improve patient safety
6. NIMDTA Educators will be working with the HSCB to develop a strategy for developing the capacity and capability of the Primary Care Team in Quality Improvement
7. NIMDTA is commencing a Quality Improvement initiative for GP trainees in August 2016 called Educating for Quality Improvement for GP trainees (EQUIP). This initiative will give GP trainees an opportunity to learn about Quality Improvement by taking on a Quality Improvement Project within groups underpinned by introductory theory, training in QI tools and mentorship from local Quality Improvement leaders using the ECHO collaborative training model.

## 5. Integrating the Care


**Quality 2020: We will develop integrated pathways of care for individuals. We will make better use of multidisciplinary team working and shared opportunities for learning and development in the HSC and with external providers.**

While NIMDTA is not directly involved in delivery of care for individuals, NIMDTA promotes integrated care through engagement with Transforming Your Care which is the overarching road map for change in the provision of health and social care services in Northern Ireland (<http://www.dhsspsni.gov.uk/index/tyc.htm>).

NIMDTA promotes multidisciplinary team development through the Dental Continuing Professional Development (CPD) programme for Dentists, Dental Care Professionals and for Dental Teams.

This CPD programme continued to be popular. These courses provided 1,406 educational opportunities for dental registrants. NIMDTA's Dental Department continues to ensure that the GDC's recommended core subjects are appropriately addressed. In addition, a series of 'In-Practice' training events were developed closely aligned to the GDC recommended areas. These sessions were extremely popular with 100% uptake and very positive feedback. Educational opportunities for Dental Care Professionals have continued to expand with the successful pilot of an externally accredited Certificate in Special Care Dental Nursing.

NIMDTA runs generic skills training sessions for its 250 Foundation Year 2 doctors and for 1,100 Specialty Trainees on multi-disciplinary **team working**.

<b>FOUNDATION GENERIC SKILLS</b> <b>MODULE 5: Teamwork</b> 		
TIME	SESSION	FACILITATOR
09.30 - 10.45	Characteristics of an Effective Team The Underperforming Team Member	Mr Oliver Boylan/ Dr Kathleen Logan
10.45 - 11.00	<b>BREAK</b>	
11.00 - 12.30	Belbin Questionnaire Foundation Team Task	Mr Oliver Boylan/ Dr Kathleen Logan
12.30 - 13.30	<b>LUNCH</b>	
13.30 - 14.00	Fraud Awareness	Rachel Murphy/ Counter Fraud and Probity Services Business Services Organisation
14.00 - 15.00	Variations in the processes in individual hospitals	Dr Muhammad Sartaj Lisa Moore Public Health Agency
15.00 - 16.30	Social Styles In Teamwork Essential Communication Skills	Olwen Sheridan

**iQuest**

Improving Quality and Understanding to Enhance Specialty Training

Northern Ireland  
**mdta**  
Medical & Dental Training Agency

### Generic Professional Capabilities for NIMDTA Specialty Trainees

<p><b>12. Building High Performance Teams</b> <span style="float: right;">GPC 5</span></p> <p>All day workshop (Ms Jena Crawford, HSC Leadership Centre &amp; Mr Oliver Boylan, NIMDTA)</p> <p><b>Aims of workshop</b></p> <ul style="list-style-type: none"> <li>To understand what being in a high performance team looks like</li> <li>To appreciate the stages of team development</li> <li>To consider the importance of role modelling, mutual respect and trust to team performance</li> <li>To explore how to evaluate team performance</li> <li>To reflect on the concepts of engaging leadership and organisational performance</li> </ul>
<p><b>13. Clinical Leadership – Understanding the Financial Context</b> <span style="float: right;">GPC 5</span></p> <p>Half-day workshop (Ms Jena Crawford, HSC Leadership Centre; Mr Kevin Corr, Belfast HSC Trust)</p> <p><b>Aims of workshop</b></p> <ul style="list-style-type: none"> <li>To understand HSC Funding</li> <li>To examine the commissioning cycle and the role of the Health and Social Care Board</li> <li>To understand how to write an Investment Proposal</li> </ul>
<p><b>14. Clinical Leadership-Improving Services and Managing Transformational Change</b> <span style="float: right;">GPC 5</span></p> <p>Full day workshop (Ms Jena Crawford, HSC, Mr Hugh McCaughey, Mr Charlie Martyn, Mr David Hill SE HSC Trust)</p> <p><b>Aims of workshop</b></p> <ul style="list-style-type: none"> <li>To examine the concepts of transformational and adaptive leadership</li> <li>To appreciate how to inspire and influence others to transform</li> <li>To recognise and apply quality improvement frameworks and methodologies</li> </ul>

In 2015/16, during NIMDTA's annual education event for educators, there were workshops on Dental Multi-professional Education, Inter-professional education (nursing and medicine) and Teaching and Training in an Integrated Care Partnership. NIMDTA also ran a joint workshop with the Northern Ireland Practice and Education Council for Nursing and Midwifery (NIPEC) on 20 October 2015 to explore collaborative working and training.

NIMDTA has participated in Project ECHO during 2015/16 with trainees participating in a formal education programme to understand QI methodology and its application. All ST2 trainees were then able to take part in an Integrated Care Dermatology initiative during which connection is made to a practical educational session via webcams in individual GP practices.

### **Next Year**

1. NIMDTA is commencing a REACH OUT programme for GP trainees in September 2016. The aim of this initiative is to enable GP trainees to work collaboratively with another organisation on a project of interest to Primary Care. This initiative will promote Integrated Care.

## References

COGPED: Committee of GP Education Directors

<http://www.cogped.org.uk/>

COPDEND: UK Committee of Postgraduate Dental Deans and Directors

<http://www.copdend.org/>

COPDEND: Quality Development of Postgraduate Dental Training in the UK 2012

[http://www.copdend.org/content.aspx?Group=guidance&Page=guidance\\_quality%20development%20of%20postgraduate%20dental%20training%20in%20the%20uk%202012](http://www.copdend.org/content.aspx?Group=guidance&Page=guidance_quality%20development%20of%20postgraduate%20dental%20training%20in%20the%20uk%202012)

COPDEND Standards for Dental Educators

[http://www.copdend.org/data/files/Downloads/COPDEND\\_Standards%20high%20resolution.pdf](http://www.copdend.org/data/files/Downloads/COPDEND_Standards%20high%20resolution.pdf)

COPMED: Conference of Postgraduate Medical Deans of the UK

<http://www.copmed.org.uk/>

GMC Quality Assurance Framework

<http://www.gmc-uk.org/education/qaf.asp>

GMC Promoting Excellence

[http://www.gmc-](http://www.gmc-uk.org/Promoting_excellence_standards_for_medical_education_and_training_0715.pdf)

[uk.org/Promoting\\_excellence\\_standards\\_for\\_medical\\_education\\_and\\_training\\_0715.pdf](http://www.gmc-uk.org/Promoting_excellence_standards_for_medical_education_and_training_0715.pdf)

GMC Good Medical Practice

[http://www.gmc-uk.org/static/documents/content/Good\\_medical\\_practice\\_-\\_English\\_0414.pdf](http://www.gmc-uk.org/static/documents/content/Good_medical_practice_-_English_0414.pdf)

Foundation Reference Guide 2016 and Curriculum

<http://www.foundationprogramme.nhs.uk/pages/home/reference-guide>

A Guide to Postgraduate Specialty Training in the UK (Gold Guide Fifth Edition)

<http://specialtytraining.hee.nhs.uk/files/2013/10/Gold-Guide-6th-Edition-February-2016.pdf>

## Abbreviations

ACF	Academic Clinical Fellows
ACL	Academic Clinical Lecturers
ADEPT	Achieve, Develop, Explore Programme for Trainees
ALS	Advanced Life Support
ARCP	Annual Review of Competence Progression
BDA	British Dental Association
BLG	Board Liaison Group
BMA	British Medical Association
BMA JDC	British Medical Association Junior Doctors' Committee
BSO	Business Services Organisation
COGPED	Committee of General Practice Education Directors
COPDEND	Committee of Postgraduate Dental Deans and Directors
COPMED	Conference of Postgraduate Medical Deans
CPD	Continuing Professional Development
CCT	Certificate of Completion of Training
CT	Core Trainee
DCP	Dental Care Professional
DoH	Department of Health
EQUIP	Educating for Quality Improvement for GP trainees
Form R	Registration Form (for trainees with NIMDTA)
FMLM	Faculty of Medical Leadership and Management
GDC	General Dental Council
GMC	General Medical Council
GP	General Practice
HEE	Health Education England
HSC	Health and Social Care
HSCB	Health and Social Care Board
iQuest	Improving Quality and Understanding to Enhance Specialty Training
LEP	Local Education Providers
LETB	Local Education and Training Board
MRCP	Membership of the Royal College of Physicians
NCAS	National Clinical Assessment Service
NES	NHS Education for Scotland
NICON	Northern Ireland Confederation for Health and Social Care
NIMDTA	Northern Ireland Medical and Dental Training Agency
NIPEC	Northern Ireland Practice and Education Council (for nursing and midwifery)
NISCC	Northern Ireland Social Care Council
PHA	Public Health Agency
QMG	Quality Management Group
QUB	Queen's University of Belfast
RCGP	Royal College of General Practitioners
RCOG	Royal College of Obstetricians and Gynaecologists
RQIA	Regulation and Quality Improvement Authority

SLA	Service Level Agreement
ST	Specialty Trainee
STATUS	NIMDTA'S Recognising Trainers Programme (Selection; Training; Appraisal; Transfer of Data; Underperformance Management; Support)
TSRG	Trainee Support Review Group
UK FPO	UK Foundation Programme Office
UMS	Ulster Medical Society