**The Scotland Deanery – GP Training Practice Quality Management Report**

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| **Practice Information** |
| Name of Practice  |  |
| Address |  |
| Quality Management activity | Choose an item. |
| Application type | **Application type**  |
| Date of Visit/Report | Click or tap to enter a date. |
| Name/s of Approved GP Training Educational Supervisor/s |  |
| Name/s of Foundation Educational Supervisor/s (if applicable) |  |
| Training/teaching currently undertaken in the practice | GP Specialty Training | Yes |
| Foundation Training | Yes, No or New |
| GP Retainer scheme | Yes, No or New |
| Undergraduate teaching | **Yes or No** |
| Practice list size |  |
| Summarise the practice and patient demographics. These might include split site, branch surgery, degree of deprivation, rurality, additional responsibilities etc.  |  |
| Significant changes in the practice since last approval that may impact on training  |  |
| Describe GP training capacity and how this is managed in the practice |  |

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| List and report progress on requirements from previous practice and ES approval |  |
| Report progress on recommendations from previous practice and ES approval |  |

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| **GMC Themes 1-3*** **Learning Environment and Culture**
* **Educational Governance & Leadership**
* **Supporting Learners**
 |
| **Induction** | **GPST** | **Foundation** |
| **Organisational**:Practices must ensure that trainees have an induction in preparation for each placement that clearly sets out their duties and supervision arrangements, their role in the team, how to gain support from senior colleagues, workplace policies they must follow and how to access clinical and learning resources [1.13]  | **Yes** | **N/A** |
| Practices and their staff must have a reliable way of identifying learners at different stages of education and training, and make sure all staff members take account of this, so that learners are not expected to work beyond their competence. [1.10] | **Yes** | **N/A** |
| **Requirements:** |
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| **Developmental Feedback:** |
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| **Good/Innovative practice:** |
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| **Educational**:The Practice ensures that trainees have undertaken appropriate educational induction. [1.13, 5.9] | **Yes** | **N/A** |
| **Requirements:** |
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| **Developmental Feedback:** |
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| **Good/Innovative practice:** |
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| **Supervision, Workload and Adequate Experience** |
| Trainee responsibilities for patient care must be appropriate for their stage of training. Supervisors must determine a trainee’s level of competence, confidence and experience and provide appropriate graded level of clinical supervision. [1.9]  | **Yes** | **N/A** |
| Practices must make sure there are enough staff members who are suitably qualified so that trainees have appropriate clinical supervision for patients to receive care that is safe and to a good standard while creating the required learning opportunities. [1.7, 1.8]. | **Yes** | **N/A** |
| Appropriate graduated supervision of consulting, including by telephone | **Yes** | **N/A** |
| Appropriate graduated experience and supervision of home visiting | **Yes** | **N/A** |
| Appropriate graduated supervision of on call/duty Dr | **Yes** |  |
| Appropriate graduated supervision of prescribing | **Yes** | **N/A** |
| Appropriate graduated supervision of referrals | **Yes** | **N/A** |
| **Requirements:**  |
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| **Developmental Feedback:** |
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| **Good/Innovative practice:** |
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| **Trainee Workload and Timetable** |
| GMC: Practices must design rotas that make sure trainees have appropriate clinical supervision, support trainees to develop relevant knowledge, skills and behaviors, provide learning opportunities, provide access to educational supervisors and minimise the adverse effects of fatigue and workload. [1.12].  | **Yes** | **N/A** |
| Trainees must have protected time for learning while they are doing clinical work and for attending organised educational sessions and other learning opportunities to meet the requirements of the curriculum. [1.16]. The working week timetable should also comply with the Working Time Regulations. | **Yes** | **N/A** |
| Workload appropriate | **Yes** | **N/A** |
| GPST:7 clinical and 3 educational session week in place | **Yes** |  |
| FY2: 1.5 Educational/self-development sessions per week |  | **N/A** |
| FY2 Trainees released to mandatory teaching |  | **N/A** |
| OOH experience reviewed and discussed | **Yes** |  |
| Working Time Regulations accommodated | **Yes** | **N/A** |
| **Requirements:** |
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| **Developmental Feedback:** |
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| **Good/Innovative practice:** |
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| **Teaching, Feedback and Assessment** |
| Doctors in training must be able to take study leave appropriate to their curriculum or training programme. [3.12] | **Yes** | **N/A** |
| Practices must make sure that work undertaken by trainees provides learning opportunities and feedback on performance and gives an appropriate breadth of clinical experience. [1.15] | **Yes** | **N/A** |
| Regular formative feedback is provided to trainees both formally and informally | **Yes** | **N/A** |
| Adequate support is provided for delivering GPST WPBA or FY SLEs | **Yes** | **N/A** |
| Appropriate RCGP Exam support provided | **Yes** |  |
| **Requirements:** |
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| **Developmental Feedback:** |
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| **Good/Innovative practice:** |
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| Practice provides protected time to allow Educational Supervisors to undertake the administrative and educational aspects of their role [1.21, 4.2]. | **Yes** | **N/A** |
| **Requirements:** |
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| **Developmental Feedback:** |
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| **Good/Innovative practice:** |
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| **Teamwork and Leadership** |
| Practices must support every trainee to be an effective member of the multi-professional team by promoting a culture of learning and collaboration. [1.17] | **Yes** |
| **Requirements:** |
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| **Developmental Feedback:** |
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| **Good/Innovative practice:** |
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| **Safety, Raising concerns and feedback to the practice**  |
| Practices should demonstrate a culture that allows trainees to raise concerns about patient safety, and the standards of care or of education and training, openly and safely [1.1].  | **Yes** |
| Practices must demonstrate a culture that investigates and learns from mistakes and reflects on incidents and near misses [1.3]. | **Yes** |
| Practices must demonstrate a learning environment and culture that supports trainees to be open and honest with patients when things go wrong and help them to develop the skills to communicate with tact, sensitivity and empathy [1.4].  | **Yes** |
| Practices must demonstrate a culture that seeks and responds to feedback from trainees [1.5]. | **Yes** |
| Good handover requires that all GPs in the practice produce high quality, contemporaneous written notes on patient consultations [1.14]. | **Yes** |
| There is an established safety culture and team learning from events - SEA, complaints review etc. | **Yes** |
| There is practice Quality Improvement Activity with Trainee involvement | **Yes** |
| **Requirements:** |
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| **Developmental Feedback:** |
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| **Good/Innovative practice:** |
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| **Wellbeing and Professionalism** |
| Practices should support trainees to develop the professional values, knowledge, skills and behaviors required of all doctors [1.12].  | **Yes** |
| Trainees must be supported to meet professional standards and guidance that uphold the medical profession [3.1]. | **Yes** |
| Trainees must be encouraged to take responsibility for their own health and wellbeing [3.2]. | **Yes** |
| Practices must have processes to identify, support and manage trainees when there are concerns about professionalism, progress, performance, health or conduct [2.16 & 3.14].  | **Yes** |
| Trainees must not be subjected to, or subject others to behaviours that undermines professional confidence, performance or self-esteem [3.3].  | **Yes** |
| Trainees must receive information to support them move between different stages of education and training [3.5] and transition to independent practice.  | **Yes** |
| **Requirements:** |
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| **Developmental Feedback:** |
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| **Good/Innovative practice:** |
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**GP Specialty Training - Educational Supervisors**

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| **GMC 4 & 5 - Supporting Educators, Implementing curricula and assessments** |
| GP ES Name |  |  |  |  |
| E&D Training up to date | **Yes** | **Yes/NFD** | **Yes/NFD** | **Yes/NFD** |
| WPBA Calibration up to date | **Yes** | **Yes/NFD** | **Yes/NFD** | **Yes/NFD** |
| Peer review of teaching up to date | **Yes** | **Yes/NFD** | **Yes/NFD** | **Yes/NFD** |
| PDP for Educational Role | **Yes** | **Yes/NFD** | **Yes/NFD** | **Yes/NFD** |
| Evidence of satisfactory engagement with and formative feedback within e-portfolio | **Yes** | **Yes/NFD** | **Yes/NFD** | **Yes/NFD** |
| **Requirements: see below** |
| **Developmental Feedback:** |
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| **Good/Innovative practice:** |
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**General Practice Retainer Scheme**

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| **Retainer Mentor(s) Name** |  |
| Retainer Contract in place | **Yes/NFD/NA** |
| Appropriate clinical experience | **Yes/NFD/NA** |
| Mentor sessions meets requirements | **Yes/NFD/NA** |
| Practice meetings/business exposure | **Yes/NFD/NA** |
| Appropriate supervision/overlap arrangements in place | **Yes/NFD/NA** |
| Appropriate arrangements for Docman/results/referrals | **Yes/NFD/NA** |
| Positive retainer feedback | **Yes/NFD/NA** |
| Recent mentor educational update | **Yes/NFD/NA** |
| Associate advisor supports approval | **Yes/NFD/NA** |
| **Requirements: see below** |
| **Developmental Feedback:** |
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| **Good/Innovative practice:** |
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| **Summary** |
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| **Recommendations to SQMG:** |
| **Approval: -** | **Standards****Met** | **Type** | **Conditional/****Unconditional** | **Duration** |
| **Training Practice** | **Met** | Choose | Choose | Choose |
| **Educational Supervisors** |
| Click to insert name | **Met** | Choose | Choose | Choose |
| Click to insert name | Choose | Choose | Choose | Choose |
| Click to insert name | Choose  | Choose | Choose | Choose |
| Click to insert name | Choose  | Choose | Choose | Choose |
| **Quality Management** | **Standards Met** |  | **Requirements** |  |
| **Foundation** | Choose  |  | Choose |  |
| **Retaining** | Choose  | Choose | Choose | Choose |

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| **Requirements (with timescales):** |
| **Training Practice** |  |
| **Educational Supervisors** |
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| **Foundation** |  |
| **Retaining** |  |
| **Recommendations/Suggestions:** |
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| **Report completed by:** |  |
| **Signature:** |  |
| **Other visit team members (if applicable)** |  |
| **Report date:** | Click or tap to enter a date. |

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| **Regional Quality Management Group Review: (agreed /SQMG review requested)** |
| **Members:** |  |
| **Outcome:** | Choose an item. |
| **Comments: (If SQMG review requested and outcome)** |
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| **Date:** | Click or tap to enter a date. |