

Scotland Deanery Quality Management Visit

Trainee Session

Site Question Set Version 3

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| **Specialty: Grades:** |
| **Site:** |
| **Date of Visit:**  |
| **Type of Visit:**  |
| **Panel Member:** |
| **Information for panel members:**The questions within this question set have been created with reference to the GMC standards for Promoting Excellence, the GMC published standards, the GMC National Training Survey, The Scottish Training Survey and the previous deanery visit question guide. The questions have been mapped to the requirements within Promoting Excellence and in order to make an accurate assessment of whether standards are being met visit panels should aim to complete all core questions during every visit. The Chair may direct panel members to give more time/ weight to certain question areas where the available data suggests risk but the visit should still cover all core question areas. Panel members should strive to ask the questions as they are written to ensure that there is no alteration to the tone or meaning of the question. For lab based specialties, the standard question set may not be appropriate to use in its entirety and panel members should use an alternative question set. |
|  | **Introduction (Visit Lead)**  |
|  | * Provide an explanation of the Deanery’s quality management process, and the purpose of visits.
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|  | * Ask trainees/trainers if they have any questions about the process?
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|  | * State that comments will be compiled into a report that will not personally identify or name any trainee. However, if anyone would like to speak to someone in confidence about an issue, they can contact a named Quality Manager
* Explain that question set is based around the 10 standards (S) and supporting requirements (R) listed within the five themes of the GMC Standards for medical education and training:
	+ Learning Environment and Culture (S1.1-2, R1.1-22)
	+ Educational Governance and Leadership (S2.1-3, R2.1-20)
	+ Supporting Learners (S3.1, R3.1-16)
	+ Supporting Educators (S4.1-2, R4.1-6)
	+ Developing and Implementing Curricula and Assessments (S5.1-2, R5.1-12)
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| **Induction – hospital (or site)**  |
| **Trainee Core Questions** | **Trainee supplementary Questions** |
| 1. Did everyone receive hospital (or site) induction?
2. What about hospital (or site) induction here works well?
3. Could induction to the hospital (or site) be improved? If so how?
 | What happens if a trainee is unable to attend the scheduled hospital (or site) induction?What guidance was provided about seeking consent?Did you receive IT passwords and IT training before you started your clinical work?How is ‘who to contact in the event of a concern’ or ‘what to do in the event of *an incident’ covered?* |
| If no issues are raised in the PVQ:Your replies to our PVQ suggest that there are no issues in regard to the induction you received, would you like to make any further comment about induction?  |
| **Induction – Department / Ward / Unit**  |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. Did everyone receive induction to the department (or unit or ward)?
2. How well did your inductions equip you to work in the department (or unit or ward)?
3. How could department (or unit or ward) induction be improved?

For FY1s in first post1. How helpful did you find shadowing?
 | How well did this induction cover **all of your roles** **and responsibilities** by day and out of hours?How well is information about the rota, clinic (theatre) access shared? Did this induction include how to access local clinical protocols or guidelines, and did it include how you can access learning opportunities?Did this induction include educational and clinical supervision arrangements and how to contact senior support?Did this induction include the opportunity to meet consultant supervisors and other non-medical staff in the unit? |
| If no issues are raised in the PVQ:Your replies to our PVQ suggest that there are no issues in regard to the departmental/ward induction you received, would you like to make any further comment about induction?  |
| **Formal Teaching**  |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. How many hours per week of locally delivered teaching can you attend?
2. What prevents you attending these hospital teaching sessions?
3. Could teaching be improved and if so how?
4. What proportion of your regional/national programme teaching do you manage to attend?
 | To what extent is the teaching relevant to your curriculum?Is your local teaching bleep free?What access to any simulation types of teaching do you get here?  |
| If no issues are raised in the PVQ:Your replies to our PVQ suggest that there are no issues in regard to the teaching you received, would you like to make any further comment about formal teaching?  |
| **Study Leave**  |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. How easy is it for you to request and take Study Leave?
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| If no issues are raised in the PVQ:Your replies to our PVQ suggest that there are no issues with the you being able to request or take study leave, would you like to make any further comment about study leave?  |
| **Formal Supervision**  |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. How often have you met with your educational supervisor?
 | How and when you did you receive information about who was to be your educational supervisor? How were you advised about who was to be your formal clinical supervisor?Did you agree a personal learning plan with your educational supervisor?How easy was it to arrange a meeting with your educational supervisor?How useful have the meetings been? |
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| **Clinical Supervision (day to day)**  |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. Do you know who to contact for supervision both during the day and out of hours?
2. Have you ever felt you have had to cope with problems beyond your competence or experience?
3. How accessible and approachable are your senior colleagues when asked for support?
 | How do others know the level of competence associated with your stage of training? Does your clinical supervision ensure safe care for patients?How would you respond if you are asked to work without adequate supervision, or to perform tasks beyond your competence?How would you respond if you are asked to seek consent for a procedure beyond your competence? |
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| **Adequate Experience (opportunities)** |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. Are there particular competencies / intended learning outcomes that are difficult to achieve?
2. How often do you get to outpatient clinics (or theatre sessions, where relevant)?
3. Does this post allow you to develop your skills and competences in managing acutely unwell patients?
4. What percentage of your time is spent carrying out duties which are of little benefit to your education, training or personal development?
 | Are your placements long enough that trainers can get to know you and can reliably judge your performance and progress?How does the use of support staff enable trainees to access learning and training opportunities? |
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| **Adequate Experience (assessment)** |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. How easy is it for you to complete the workplace-based assessments required of this post?
2. How fair and consistent are your assessments?
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| **Adequate Experience (multi-professional learning)** |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. What opportunities do you have to **learn with** other health professionals such as Nurses, Pharmacists or allied health professionals?
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| **Adequate experience (other)** |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. What opportunities are there for you to engage in quality improvement\* projects or in audit?

\*Note that for some programmes including Foundation and Internal Medicine/Core Medicine there is a curricular requirement to undertake QI projects (and audit would not be sufficient). |  |
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| **Feedback to trainees** |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. Do you get feedback on your clinical decisions during the day and out of hours?
2. Is that feedback constructive and meaningful?
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| **Feedback from trainees** |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. What opportunities do you have to provide feedback to trainers and the management team on the quality of the training you are experiencing here?
 | *Do you have local trainee forums at which you would be able to raise issues or concerns related to the quality of training you are receiving?* |
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| **Culture & Undermining**  |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. How supportive are your clinical team and senior colleagues?
2. Have you experienced or witnessed behaviour that has undermined confidence, performance or self-esteem?
3. How would you raise concerns about bullying or undermining behaviours?
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| **Workload / Rotas** |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. Do you have gaps on you current rota? Have these gaps been filled with non-training posts e.g. locums?
2. Does your rota design accommodate    specific learning opportunities to match your curriculum requirements such as clinics, endoscopy lists or theatre sessions (where relevant)?
3. Do you have the opportunity to engage with rota organisers and introduce improvements, for example PCAT\* for rotas?
4. Are there aspects of this rota that are compromising your well-being?

\*PCAT: Professionalism Compliance Analysis Tool  | Are there other rota issues that have implications for patient safety?*Do you feel they are managed proactively, in a way that protects patient safety and your training? – example – arranging cover in advance.**What are the barriers to such engagement in your experience?* |
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| **Handover** |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. When does handover take place during the week and weekends?
2. Is there an agreed structure to how patient information is handed over?
3. Do you feel the handover arrangements provide safe continuity of care for new admissions and for those in downstream wards?
4. How is handover used as a learning opportunity?
 | Who takes part in the handovers and who leads them?Is a written record kept of any of the handovers? |
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| **Educational Resources**  |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. How adequate are facilities (including space) and resources to support learning (including access to learning resources, IT for assessment etc.)
 | **Remove from question set.**  |
| If no issues are raised in the PVQ:Your replies to our PVQ suggest that there are no issues with facilities and learning resources to support your learning, would you like to make any further comment about facilities? |
| **Support** |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. Is support available for those struggling with the job, with health and or in other ways?
2. Does this site accommodate requests for reasonable adjustments for trainees with needs?
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| If no issues are raised in the PVQ:Your replies to our PVQ suggest that there are no issues with the support available for those struggling with the job, would you like to make any further comment about support?  |
| **Educational Governance** |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. How would you raise concerns about the quality of training in your current post, and what happens when a concern about training is raised?
2. Do you have local trainee forums or meetings at which you would be able to raise issues or concerns related to the quality of the training you receive?
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| **Raising concerns** |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. If you had any concerns about patient safety, how would you raise them, and how effectively are they addressed?
 | Can you give us an example of a concern you have raised? |
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| **Patient Safety** |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. If your friend or relative had been admitted here would you have any concerns about the quality or safety of their care?
2. Do you have any concern about the system for boarding of patients in your hospital?
3. What routine systems are in place to monitor the safety of patients, e.g. tracking Borders, safety huddles or equivalent?
 | How long could an inpatient go without seeing a Consultant? |
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| **Adverse Incidents and Duty of Candour** |
| **Trainee Core Questions** | **Trainee supplementary questions** |
| 1. If you were involved in an adverse incident:

a) Would you receive the necessary support? b) How would this happen? 1. How do you receive feedback on the outcome of an incident report? Would there be an opportunity to learn from it?
2. When something goes wrong with a patient’s care, how supported do you feel in communicating what has happened to the patient affected?
 | How does the system here foster learning among the whole team when something goes wrong such as incidents or near misses |
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