

# **Postgraduate Medical Education and Training** Annual Report 2022



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### **About Us**

# The NES Medical Directorate's primary responsibility is the education and training of doctors in Scotland.

We are also responsible for the appraisal and re-validation of all doctors in Scotland as well as a number of cross-cutting and multi-professional programmes, including patient safety, quality improvement of patient care and the development of Scotland's remote and rural workforce.

Most of our focus is on the training of Scotland's 6000 postgraduate trainee doctors who deliver care every day while in hospitals and general practices within NHS Scotland. We oversee this training, making sure it meets the regulatory standards of the GMC and that trainees make the right progress.

Through distribution of Additional Cost of Teaching (ACT) funding, we support undergraduate medical education and training, delivered by Scotland's five medical schools: ensuring resources are used properly to underpin the clinical teaching of medical students in hospitals and general practices.



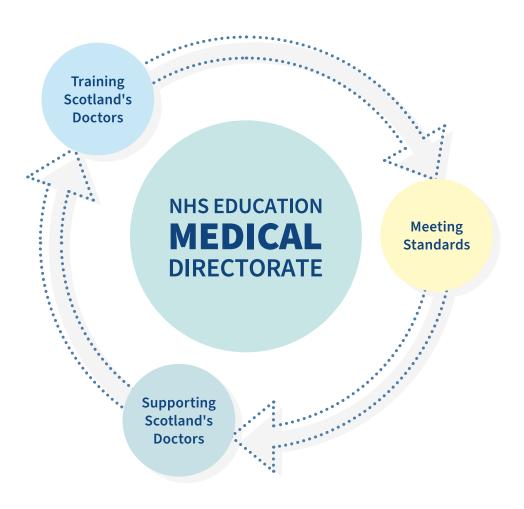
# About Us

The continuing development of doctors is another key task, and we support many educational and training initiatives for fully trained Consultants, General Practitioners and Associate Specialists. Alongside this, we lead on multi-professional training schemes for pharmacists, general practice nurses and general practice managers, whilst having a pivotal role in relevant research through our involvement in the Scottish Medical Education Research Consortium.

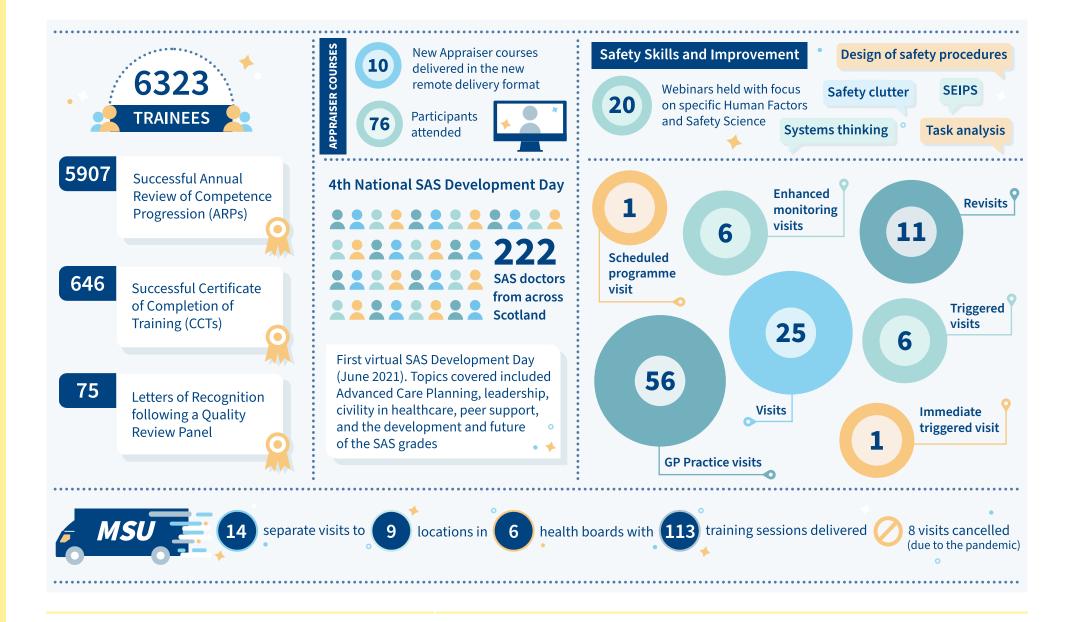
Our overarching aim is to deliver first-class medical education and training for Scotland; to ensure safe, effective care for patients, both now and in the future.

Working with all our partners, we aim to achieve this by:

- + Organising and providing excellent training programmes that attract high quality doctors to Scotland
- + Meeting and exceeding all regulatory standards through consistent application of best practice and the principles of continual improvement
- + Supporting the ongoing educational and training of Scotland's trained doctors, together with those who support their work



# Highlights



### Welcome



**Professor Stewart Irvine** Director of Medicine

2021 has been another very trying year for us all with the pandemic continuing to take its toll on our educational, professional and psychological wellbeing.

Another tough year, but again one in which we have worked collaboratively with all our partners to keep-on educating and training doctors in Scotland.

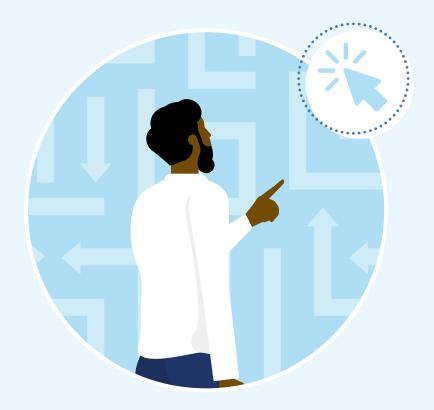
In fact, we have striven to deliver to the same standards as before and through innovation and collaboration, we have introduced many new developments and innovative ways of working, of which you may read more of in this year's report.

As before, we have organised the report under headings that best describe our main activities and in doing so update you: how we manage the training of Scotland's doctors; how we ensure standards are met; how we support the continuing education needs of senior doctors in Scotland's NHS. Our key task to recruit, educate and train around 6000 trainee doctors for Scotland continues unabated and we report on how this continues to be possible by drawing on the learning and experience of the last two years. Our function to uphold standards has been found to be working well and we report on some of the highlights in the year. We also report on our role in educating trained doctors and other key staff across NHS Scotland, sharing with you a number of ground-breaking projects and initiatives.

Sadly, this is my last foreword to the Postgraduate Annual Report. I retire at the end of March having, I hope, left the Scotland Deanery and the NES Medical Directorate in good shape; truly believing that better training leads to better care for patients, both now and in the future.

Dr Emma Watson has been appointed to be the next Director of Medicine, beginning on 1 April 2022. Dr Watson has experience as Deputy Medical Director in NHS Highland and as Chair of the Directors of Medical Education for Scotland. She has extensive experience as a practitioner, academic and educationalist and is a recognised leader in medical education in Scotland, including previous work as a Senior Medical Officer in the Scottish Government Workforce and Strategic Change Directorate.

I wish Dr Watson all the best for the future and thank colleagues both past and present for helping to make Scotland a great place to train and learn.



#### 4.1 Highlights: Speciality Training Boards



#### 4.2 Overview

During 2021 / 2022 the Deanery's training management team continued to work remotely to support doctors in training, trying to minimise the impact of the pandemic on the delivery of recruitment and the progression of doctors through their programmes.

The Training Management component of the Medical Directorate Vision was consolidated, and staff were able to focus on the rapidly changing circumstances in the pandemic well.

We saw this year as a consolidation of the major changes in the previous year, rather than one to take forward significant development, given the pressures on Health Board colleagues and in our own staff circumstances.

NES itself was carrying out national work, so several staff were seconded to the Digital team to support projects and we welcomed several new members of staff to the team, all of whom needed to be involved and training whilst working remotely.

- + We continued to support the redeployment of doctors in training.
- + We managed and supported derogation in ARCP processes and recruitment.
- + We supported doctors in the second year of working in the pandemic, whose training was affected by the suspension of routine clinics and operating.
- We provided support to staff and doctors in training who were affected by the pressures of the pandemic on workload and in personal circumstances.

Work continued nationally in Scotland and across the four nations to ensure minimal disruption and virtual working for:

- + ARCPs (Annual Review of Competence Progression)
- + ARCP appeals
- + LTFT (Less Than Full Time) applications
- + IDT / IRT (Inter-deanery transfers / Inter-regional transfers)
- + OOP (Out of Programme) applications
- + Study leave

One of our priorities was to minimise the impact of the pandemic on training where possible. We saw an increase in doctors able to take up research, but continued to see rapidly changing requirements in some areas which necessitated ensuring accurate information was available to our doctors in training.

Study leave continued to be affected and we saw a significant change to delivery of teaching toward virtual courses. The team have worked to ensure that virtual courses were approved and again we supported the transition to virtual and online training by using unspent study leave funds normally used for travel expenses to support Board bids for equipment and local delivery of simulation and remote teaching. We began the work of combining the Professional Support Unit, Less Than Full Time working and Careers Advice into one umbrella service, with the focus on providing support to all doctors in training who required to have a more flexible training pathway.

The new Trainee Development and Wellbeing Service will be launched in 2022. This service will reflect the reality that working in a flexible way and accessing adjustments is an option for all doctors in training, and that work / life balance has an increasing importance.

Underpinning the work of the administrative teams is the NES Turas platform, in particular the Training Programme Management (TPM) module which has seen significant improvement in reporting capacity and amendments to Annual Review processes. TPM has proven invaluable as it is able to be accessed from anywhere and is not dependent on being within the NHS network, and has supported working from home for most of our staff in the workstream.

This year we again participated fully in UK recruitment, working with lead recruiting bodies across the UK to panellists and in supporting the management of applications. NES provides the infrastructure of recruitment in Scotland and despite the pandemic recruitment was able to proceed ensuring the smooth provision of doctors in training this year.

In 2020 we advertised 854 Foundation Year One and filled 824 (97%). We also advertised 296 Core & 846 Specialty posts and filled 293 (99%) and 756 (90%) respectively.

Our priority is the assurance that our trainees are progressing as expected and continue to train and work safely for themselves and most importantly for patients.

- + Of the 7,166 ARCP outcomes recorded for 6,104 doctors in training, 5,752 (80%) were positive and 1,096 (15%) were neutral outcomes.
- + 318 (4%) were outcomes that indicated further activity was needed to reach the required standard. Of these, 18 were Outcome 4 which meant the doctor was released from training (this may not translate to 18 doctors, but 18 outcomes which may include dual training).

New ARCP outcomes which related to the impact of COVID-19 have been created and agreed which allow trainees to have the delays and missed training opportunities recorded specifically with clear no detriment to the trainees.

- 336 ARCP outcomes (4.7%) were 'COVID Outcomes' (Outcome 10.1, 10.2). The comparable figure in 2019–20 is 14%. This reduction provides evidence that overall, training disruption was reduced in the 2020–21 training year.
- + Of the 336 ARCP 10.1 / 10.2 outcomes awarded:
  - 271 (80.7%) were 10.1 and as such did not require training extension
  - 65 (19.3%) were 10.2, resulting in COVID-related training extensions. This represents 0.91% of all ARCP outcomes and is considerably less than those that required extensions for non-COVID reasons (Outcome 3) 161, (2.2%)

#### 4.3 Looking Ahead

Since March 2021 we have consolidated the new models of working with a Lead Dean or GP Director having leadership of one or more of the eight specialty groupings, with overall management of Associate Deans and other medical colleagues.

Training management aligns the training managers and teams with these specialty groupings, meaning that the LDD has oversight of all parts of the training for doctors in the specialty grouping programmes. We are looking to further develop how the specialty groupings work across training and in reviewing the structures of programme distribution across the regions to increase the sustainability and equity of access to training opportunities.

We hope to develop Turas TPM further with further automation of Less Than Full Time applications and the development of a generic form and process flow capability that will allow us to further automate processes with improved accessibility for trainees. We are also working on improving our access to trainee wellbeing services with online referral and a new website.



The implementation of the changes to how training is delivered in the UK, agreed by the four nations in 2016, will continue. Improving Medical Training (IMT) will see the first trainees completing the extended three-year core programme, and we will continue to provide access to doctors in training who completed the previous two-year core medical training and then took time away, to convert to the three year and progress to their chosen specialty programme.

- + We will be working with colleagues across the four nations to agree the future design for recruitment, and to reflect the lessons learnt during this pandemic year about what we can do differently and virtually and what we think still benefits from face-to-face arrangements.
- We will see the launch of the Trainee Development and Wellbeing Service, with enhanced capacity for support and increased flexibility for doctors in training, creating a positive support ethos for all stages of training.

- We need to ensure trainees, trainers and our APGD and TPD network have access to essential training, including Active Bystander training to support our commitment to whistleblowing duties and equality and diversity values.
- We will continue to develop and fund simulation training across specialties and access from all regions, delivering on new curricular requirements and different ways of training. Associate Deans are being appointed to support simulation training development in all specialty groupings and we are utilising increased study leave funding to ensure we are delivering for doctors in training in procuring essential training and in supporting Board facilities that can be used on a multi-professional basis.



# **05** Meeting Standards

#### **5.1 Highlights: The Training Year in Numbers**



#### 5.2 Overview

COVID-19 has had a significant impact on service provision and training. The ongoing need to work differently has driven remarkable innovation and produced extraordinary collaboration between ourselves in the Scotland Deanery and our important stakeholders, both in Scotland and beyond.

The COVID-19 Survey we introduced, to evaluate the impact of COVID-19 on trainees, is a striking example of agility and innovation. Looking at training, service, and the psychological impacts of COVID-19, we revealed that trainees across a range of different training programmes were impacted educationally, professionally, and psychologically. Important learning that we have used to better support the personal health and well-being of trainees together with their educational needs.

Alongside this, we remain fully committed to wider improvement and you can read about the work we have done to improve our data quality, our use of data, our processes and what has been done to train our internal team. These efforts have paid off and been recognised by our regulator, the General Medical Council (GMC), who concluded that the Scotland Deanery quality system was working well and meeting the necessary standards, particularly regarding the quality of our data inputs and the consistency of our decision making across specialties and Health Boards. Pleasingly the GMC made no recommendations for the Scotland Deanery: a welcome endorsement of our system and the fantastic work of our team. A well-earned position from which we can further improve, recognising that there is always more to do.

Decisions to invest in quality management and introduce a consistent, standardised approach across Scotland have proved to be of benefit. The correlation between poor training and poor patient care is self-evident and we all have a duty to raise standards in the former to make care better for patients, now and in the future.

#### **5.3 Looking Ahead**

In the wake of the COVID-19 crisis training environments will remain very challenging in many of our specialty groupings. The associated risks may further compound the pressures of heavy workloads and we need to be vigilant for signs of stress in the training environment, and work with Health Board colleagues to support our trainee doctors and their wellbeing.

We will visit new sites and services across Scotland, to gauge how training is being delivered in the new setting and to determine whether migration or concentration of services has impacted on standards e.g., the Radiology Department of the new Royal Hospital for Children, in Edinburgh, once their move is fully complete.

We will publish a new strategic work plan that sets out areas we want to develop and improve, with particular focus on how we use data, ways we can strengthen governance and reporting, how we develop our teams and how we engage with all stakeholders.



#### **5.4 Improvements in Action**

Over the course of training year we have identifies many areas of good practice with the innovation and drives of Scotland's trainers highlighted in the example given below.

#### **Theme 1: Learning Environment and Culture**

- + Foundation: Glasgow Royal Infirmary Within General Internal Medicine chief residents have provided support to the department around improvements to handover processes and rota management.
- + Foundation: Royal Infirmary Edinburgh, Little France We learned about a buddy system to provide each Foundation trainee in Trauma and Orthopaedics with a mentor. Foundation 1 trainees reported that their ST buddy helped them learn about the specialty and gave them a 'go to' person to help with queries. Foundation 2 trainees attended clinics and theatre lists with their ST buddy and Consultant.
- + General Practice: Dr Simpson, Luty and Ormond Practice Send FY trainees out on an orienteering session to find their way around the village, suggesting a stop off at the coffee shop as well as including clues to finding the local defibrillator sites.

+ Emergency Medicine and Anaesthetics: Queen Elizabeth University Hospital

Served hot food overnight last year which was greatly appreciated by staff working long hours during the pandemic. The café being opened also allowed staff to have a socially distanced break away from the wards as not all existing rest facilities were open.

Paediatrics: Dumfries and Galloway Royal Infirmary The department routinely seek feedback from trainees. Dr Ben Rayen, Clinical Director, meets with all trainees at the start of their post, mid-point and end to discuss and receive feedback. Dr Peter Armstrong, Director for Medical Education also sends out an online survey for trainees to complete. Any issues raised from feedback are discussed amongst the consultant body and steps taken to address.

#### Theme 2: Educational Governance and Leadership

+ Obstetrics and Gynaecology: Princess Royal Maternity Hospital / Glasgow Royal Infirmary

New consultants have been given specific time in their job plans to plan and deliver educational related tasks. This shows a cultural shift in the recognition and value of training within the department.

#### + Surgery

We will be receiving college survey data and Liaison Member (LM) reports from Joint Committee on Surgical Training (JCST) which we plan to use to inform our QRP process. They provide external triangulation of intelligence about training provided and can be reviewed along with existing data prior to QRP. This assists our current process in guiding which areas to focus on in the QRP.

#### **Theme 3: Supporting Learners**

+ Foundation: Victoria Hospital, Kirkcaldy

Trainees in General Internal Medicine reported several initiatives focussed on wellbeing during the COVID-19 pandemic. These included access to a wellbeing hub out with the clinical area and restructuring of working patterns in acute medicine so that trainees worked their acute shifts within the same team of junior staff and consultants.

#### + Foundation: St John's Hospital, Livingston

Foundation trainees within General Internal Medicine have been supported within working hours to attend their mandatory teaching sessions, with the help of hybrid sessions using online resources. This has greatly improved the numbers of trainees being able to attend sessions and has been well received.

#### + University Hospital, Ayr

Trainees' reported difficulties with being able to attend clinics consistently through Deanery visits from 2015–2018. These concerns were captured in the Deanery visit report requirements that are sent to Directors of Medical Education to address. The employment of a Rota Co-ordinator in 2017, improved trainees' access to clinics through the scheduling of clinics into the trainee rotas. The requirement was addressed in the 2018 Deanery visit and rostered clinics were highlighted as a good practice item at the 2019 Deanery visit to the site.

At the 2021 revisit, trainees continued to have some clinic time included within their rota, despite the challenges faced due to the COVID-19 pandemic.

#### + Mental Health: Tayside

Delivery of teaching programmes using Microsoft Teams over the last 18 months due to the impacts that the COVID-19 pandemic. These developments have enabled teaching sessions to be recorded and accessed later by those unable to attend. In addition, it has meant that those who have previously had to travel large distances for teaching, no longer need to make these journeys.

#### **Theme 4: Supporting Educators**

#### + General Practice

SPESC course rapidly adapted to ensure ongoing GP ES provision. General Practice, Foundation – Joint working with Foundation on Scotland wide first recognition process for new Foundation Training practices.

# Theme 5: Developing and Implementing Curricula and Assessments

#### + General Practice

Training and support delivery to GPSTs and GP ES's around RCA exam (CSA replacement) within a short time scale including additional help for those who failed. The pass rate within the Scotland Deanery was one of the highest in UK.

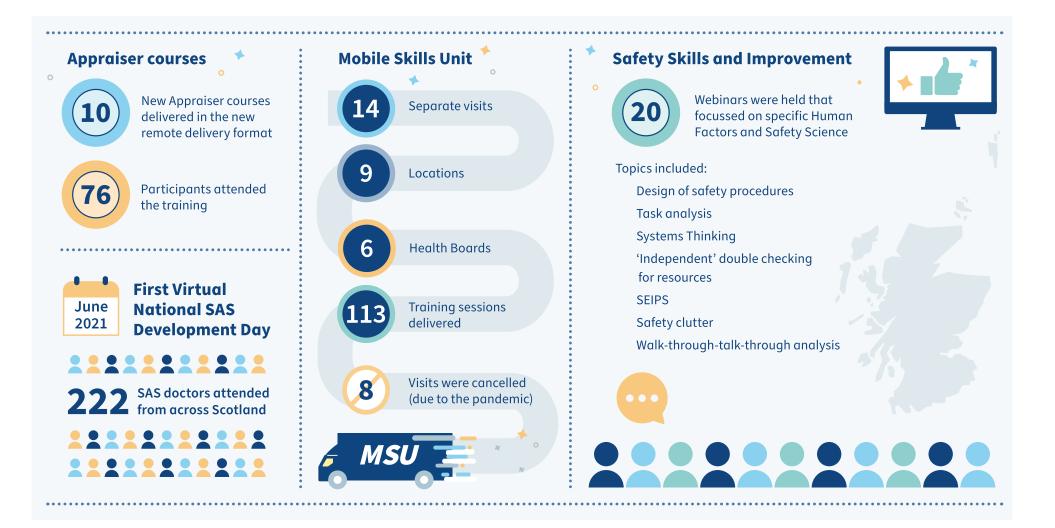
#### + Mental Health: Lothian

It was raised by trainees that the psychotherapy competence was challenging to achieve. There has been a development of Balint work across NHS Lothian which has been supported by the Department of Psychiatry. There is also provision of a monthly Balint leadership supervision group for higher psychiatry trainees. Several of the supervisees are on the Balint Society leadership accreditation pathway which will expand access to the approach.



# **06** Supporting Scotland's Doctors

#### 6.1 Highlights



#### 6.2 Overview

To maintain high levels of healthcare provision and patient safety it is important that training is a continuous activity for healthcare professionals within the NHS.

To achieve this the NES Medical Directorate Professional Development workstream exists to develop and deliver a range of uni-professional and multi-professional activities in support of doctors in training, their trainers, and the wider trained healthcare workforce.

Training has been designed so it can be delivered within a range of settings wherever needed throughout Scotland. The development of remotely accessed flexible training allows NES to offer training which covers most NHS staff, allowing the balance to be struck between a highly skilled workforce with minimal time out of the workplace.

#### 6.3 Faculty Development Support Unit (FDSU)

Throughout 2021 the COVID pandemic has continued to influence each area of work which falls within the remit of the Faculty Development Support Unit (FDSU):

- + The Faculty Development Alliance
- + Recognition of Trainers
- + Approved Medical Practitioner training
- + Leadership and Management Programme

Ongoing development, our increased use of technology, and effective collaborative across various teams and organisations, has enabled the FDSU to function effectively across many areas, albeit in a different way, with only a few courses necessarily, remaining on hold. 6

#### **6.4 Approved Medical Practitioner Training**

Since 2018 NES has been the sole provider of entry-level and update training for Approved Medical Practitioners (AMP) working in Scotland. This mandatory training for Psychiatrists must, by law, be updated every five years to maintain a practitioner's AMP status.

Initial (entry-level) AMP training is delivered in two parts – an online module and a virtual workshop. Completion of both are necessary to fulfil the requirements for recruitment to the role of an AMP. In 2021, NES delivered 11 virtual workshops with 78 delegates completing Initial AMP training. NES also delivered nine, new, one-day virtual workshops for Update (Core and Capacity) training for 68 delegates.

Update training in both Child and Adolescent Mental Health Services and Forensic was paused during 2021 as the demand for these courses was extremely low.

Work began to develop and update all AMP training resources, with the focus in 2021 being on the online learning resources which form part of Initial AMP training. Progress has been made with the introduction of new content and a significant change in presentation style. We are grateful to the AMP Faculty group for their significant contribution to this development work – the progress made would not have been possible without their specialist input.

#### **6.5 Faculty Development Alliance**

In 2021, the FDA focussed on the delivery of courses to support new trainers, therefore prioritised the delivery of the Trainer Workshop (TW), the Pre-CCT TW and the Scottish Prospective Educational Supervisor Course (SPESC).

There were 36 virtual TWs with 260 participants from 14 Health Board areas.

A waiting list for TWs grew during 2021. Working collaboratively with Directors of Medical Education (DMEs) from six Health Boards, we agreed that they could deliver face-to-face TWs for larger numbers (up to 16). However, participation would be restricted to only those working within that Board area, and it was agreed that NES COVID guidelines would be followed.

One face-to-face TW was delivered by NHS Forth Valley in 2021 with 15 participants.

A virtual Pre-CCT TW was offered to trainees in their final year of postgraduate training in preparation for them taking on a training role as a Consultant. This course was full, with eight participants from four Health Boards areas.

A new virtual SPESC course was developed and modified during 2021 and three of these new courses were delivered with 81 participants.

Several courses (Supporting Trainees with Difficulties, the Advanced Medical Educator Course, the Approved Educational Supervisor Workshop, and the Experienced Educational Supervisor Workshop) were not delivered in 2021 either because virtual delivery was problematic, or they were undergoing review.

A wider review of the FDA is planned to consider what is currently provided, identify gaps, and evaluate our interface with trainers. This review is due to be completed and a report produced in time for the Scottish Medical Education Conference in 2022.

#### 6.6 Leadership Management Programme

Changing the two day face-to-face Leadership and Management Programme with 16 participants to a virtual one-day course with half the number of participants, enabled NES to continue delivery of a modified programme for medical and dental trainees.

Limited capacity within the NES team to deliver significantly more LaMP courses reduced the number of places normally available to trainees. We were further hampered in our delivery of LaMP by a significant reduction in the capacity of clinically based faculty, as their clinical role had to be prioritised.

In 2021, 29 virtual trainee workshops were delivered with 216 participants. We were able to deliver two non-trainee workshops (15 participants); this programme is open to SAS doctors and dentists, Consultants, GPs and qualified Dentists.

By the end of 2021, we were able to engage new members of faculty and we saw a tentative return of a few clinicians who had delivered the LaMP course pre-COVID.

#### **6.7 Recognition of Trainers**

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A significant amount of work in 2021 focussed on data management and the use of NES systems, and establishing effective communication networks with key stakeholders.

This back-to-basics approach was necessary to:

- + Increase our understanding of changes to NES systems and any potential impact on our reporting
- + Ensure changes to these systems were understood and appropriately communicated to stakeholders
- Maintain good, effective working relationships with colleagues across other areas of NES and our external stakeholders
- + Allow us to establish as near an accurate trainer list as possible for submission to the GMC

RoT reviews were impacted by COVID, with existing trainers' capacity to meet the requirements for ongoing recognition, prompting a NES meeting with Directors of Medical Education.

Following discussion and with the agreement of the Medical Directorate Executive Team, a decision was taken to postpone RoT reviews during 2022 for recognised trainers. This supportive action will allow this group of trainers' additional time to gather appropriate evidence for their ongoing recognition. However, they will re-engage with the review process at their 2023 appraisal.

#### **6.8 Quality Improvement**

#### Scottish Quality Safety Fellowship

The Scottish Quality and Safety Fellowship (SQSF) supports healthcare staff to develop leadership skills and improve the delivery of safe patient care. The 12th Cohort of SQSF was paused due to the impact of COVID, however the Fellows had their final Residential and Graduation in September 2021. The 13th Cohort of SQSF commenced in October 2022. We are now proud to have over 320 Fellows each playing their part in stronger clinical leadership across NHS Scotland and beyond. The Fellowship has reached nine different countries.

#### Scottish Improvement Leader Programme

The Scottish Improvement Leader (ScIL) programme enables public sector workers to design and lead improvement projects, lead change, and provide expert quality improvement support in the workplace. A total of 140 participants completed ScIL in 2021 from Scotland, Northern Ireland and Wales. In 2021 we also celebrated the graduation of seven cohorts that completed in the past two years, three of which were delayed due to COVID. In 2021, we saw the commencement of five cohorts in Scotland, and the second Welsh cohort commissioned by Public Health Wales. To date we have trained 765 improvement leaders through the ScIL programme.

#### Scottish Coaching and Leading for Improvement Programme

The Scottish Coaching and leading for Improvement programme was established in 2018 for a target audience of managers working within health and social care. It enables participants to develop leadership skills, gain knowledge and confidence in the core components of quality improvement, whilst embedding a coaching approach to how teams are enabled and empowered.

Three cohorts of the programme were delivered over 2021, commissioned by the Chief Nursing Officer aligned for staff contributing to the Excellence in Care programme of work. A further cohort was delivered internally for NES staff, as well as a cohort delivered for staff in Northern Ireland (NI), commissioned by the NI Health and Social Care Public Health Agency.

A total of 90 participants completed SCLIP in 2021 from Scotland and Northern Ireland. To date we have trained 420 managers through the SCLIP programme.

#### **Scottish Improvement Foundation Skills Programme**

This programme aims to develop individuals' skills, knowledge, and confidence to be active team members contributing to the improvement of local services. It is made up of seven virtual 90-minute sessions using MS Teams. The programme is predominantly delivered via a devolved model, with QI alumni delivering this programme in their board / organisations.

NES delivered two cohorts of SIFS in 2021, with a total of 33 graduates.

Building on success in 2020 to develop further QI capacity across Scotland, a new and interactive MS Team was created in June 2021 to share resources, online facilitation training and networking opportunities. This allows graduates of lead level QI programmes to deliver the programme to individuals within their own organisations.

These resources have been accessed by 119 staff in 2021 to support delivery in their own areas. A key development for 2022 is to further build on supporting effective local delivery of SIFS.

#### **Primary Care**

NES run a Primary Care focused version of its Scottish Improvement Foundation Skills (SIFS) programme.

The programme provides funded places to 'First 5' GPs, GPs as well as practice and cluster quality leads. The programme develops participants skills, knowledge and confidence in QI. These skills support them to play an active role in supporting positive changes in primary care delivery.

In 2020, 89 people completed the programme:

- + 52 'First 5' GPs
- + 10 GPs
- + 6 Cluster Quality Leads
- + 8 Practice Quality Leads
- + 13 Primary Care staff

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#### **Quality Improvement Zone and Suite of e-Learning Modules**

The QI Zone on Turas Learn has continued to be a hub of information for Quality Improvers with 296,000 page views between August 2020 and August 2021. The content is under constant review to ensure it is up to date, relevant and compliments content on taught programmes.

During 2021, a new set of short animations were created, aligned to each step of the Quality Improvement Journey. They provide a brief overview of key elements in each step of the journey and link to the tools on the QI Zone pages.

The five introductory e-Learning modules also follow the Scottish Improvement journey and provide the opportunity to gain more in-depth foundation knowledge.

Quality Improvement e-Learning modules	Completed in 2021	
Measurement for improvement	1341	
Understanding your system	1066	
Developing your aims and change ideas	1061	
Testing your change ideas	826	
Implementation and spread	724	
Introduction to DCAQ	379	
Realistic conversations: SDM in practice	2410	

#### **Realistic Medicine**

Activity over 2021 focussed on continuing to promote the Realistic Medicine agenda, specifically the educational resources for Shared Decision Making whilst developing new content for Turas Learn.

Analytics show that between Jan–Dec 2021, 1,202 people completed the module, with 403 staff in progress currently completing it. This takes us to a total number of 2,410 completions and 1,225 in progress since the module was first launched.

Promotion of the Realistic Medicine agenda has also included contribution to national networks and collaborative working with Scottish Government and key national leads to produce, develop and promote new or existing Realistic content nationally.

#### Value Management Collaborative

NES have the lead role on development of educational resources, provision of coaching and training for the Value Management (VM) Collaborative. This is a partnership programme of work with Scottish Government (SG) and Healthcare Improvement Scotland (HIS) which focusses the use of quality improvement to improve performance, cost and capacity in microsystems.

The work continues to progress with 40 teams across six boards, engaging, actively setting up or using Value Management.

During 2021 there were some periods of no activities being delivered but over the year the following was achieved:

- + 14 modules delivered measurement, coaching, project management, Excel
- + 35 board coaching calls held to support coaches in building capability
- + 6 virtual site visits to support site on implementation
- + 7 coach drop-in sessions
- + 5 project surgeries to share learning across boards

#### Access QI

NES have the lead role on development of educational resources, provision of coaching and training for the Access QI programme. It is a partnership programme of work with HIS which focusses the use of quality improvement to meet the challenge of delivering sustainable improvements in waiting times whilst maintaining or improving the quality of care.

Phase 2 of the Access QI programme was delivered virtually over 2021 and consisted of three parallel learning programmes for clinical team members, data analyst and QI coach. Project workshops and an Access QI toolkit were also provided to support the formal learning. Training was completed by 20 out of 24 teams – final evaluation of this is underway. Based on learning from Phase 2, funding has been allocated for 2022/23 for Phase 3, which will be delivered using a breakthrough series collaborative model.

#### **Online Facilitation Training**

The QI team responded to the needs of the system during the pandemic and provided 25 sessions on how to facilitate online learning between June and September 2020, providing training for up to 575 staff across NHS Scotland. Participants agreed that the session would enable them to facilitate online learning sessions (94%).

Supporting videos and resources were added to the QI zone to support those that unable to access the live training events and have been accessed over 700 times.

#### **Global Citizenship**

Collaboration with the Scotland Malawi Mental Health Education Project continued in 2020. The QI team have Collaboration with the Scotland Malawi Mental Health Education Project continued in 2021.

The QI team have been working virtually with two mental health teams in Malawi and Zambia in the development of quality improvement skills and the mentorship of quality improvement projects related to inventory management, patient hygiene, laundry services and health education.

#### 6.9 General Practice Returner and Enhanced Induction Programmes

The GP Returner and Enhanced Induction programmes continue to generate interest with ongoing support provided by NES from initial enquiry through to scheme completion.

The programmes provide support to a return to clinical practice for GPs who have not worked in the NHS for two years or more, and for GPs trained overseas to join the workforce in Scotland.

Over 2021–22 there was again a substantial increase in interest in these programmes, possibly due to the COVID pandemic.

- Ten GP Returners have completed, ten are currently in post and there was one resignation. This compares to a total of eight completers in 2020–21. There are four confirmed starters for later in 2022.
- One El doctor is currently in post and another three have successfully completed. Two are in the process of undertaking national assessments. One will commence soon. This compares to a total of five completers in 2020–21.

We are progressing with the development of an e-portfolio. This will allow a more streamlined way to gather required evidence for a recommendation to the performers list to be made.

#### 6.10 GP Fellowships

- We recruited to two GP Health Inequality Fellowships, five Medical Education Fellowships and six GP Rural Fellowships.
- + The GP Rural Fellowships are co-funded between NES and participating Health Boards and published evidence confirms an important recruitment and retention impact on rural practice in Scotland.

The Rural Fellowships provide an important test bed for the development of a rural medical credential, which has been highlighted as one of the prioritised areas for progress in the GMC's proposals for the development of regulated credentials.

A proposal for a Rural Emergency Practitioner credential, developed from the acute care GP Rural Fellowship has been developed and is ready to be developed further once plans for implementation of regulated credentials are in place.

#### 6.11 Scottish Clinical Leadership Fellowship (SCLF)

We recruit to and employ up to 12 SCLFs; medical and dental specialty trainees that spend a year out of programme hosted in a variety of organisations including the Scottish Government, Royal Colleges, General Medical Council, and territorial and national Health Boards.

SCLFs contribute to and lead strategic work in their host organisations. NES provides a bespoke leadership and development programme for the fellows together with Pharmacy leadership fellows in this well-evaluated and flagship leadership fellowship.

Now in its tenth year, the SCLF scheme plays a major part in a shared ambition between the Government and the service to identify, develop and nurture a cadre of skilled future clinical leaders.

#### **6.12 Sexual Offences Examiner Training**

- We deliver Essentials in Sexual Offences Examination and Clinical Management (Adults and Adolescents) 1–2 times per year for doctors and nurses supporting examinations in Scotland.
- + We have as part of the Workforce and Training subgroup of the Taskforce to Improve Services for Rape and Sexual Assault Victims, been commissioned by the Scottish Government to redesign our approach to supporting the development of Sexual Offences Examiners. As a result, we have substantially reworked our Essentials course, to provide a blended learning experience and make it more flexible and accessible.
- The redesigned Essentials course has been accredited by the Faculty of Legal and Forensic Medicine and as such attendance at this course means that examiners meet the training standards described by HIS.
- + We have delivered training to Health Boards to support them with the roll out of self-referral from April 2022 and this will be incorporated into our Essentials course going forward.
- + An annual update conference was delivered in 2021 over three online sessions and was co-designed by NES and Scottish Government.

#### **6.13 Medical Appraisal and Revalidation**

#### **Appraiser Training Courses**

As part of the Scottish Government's common pathway approach to appraisal and revalidation, NES is tasked to provide appraiser training for clinicians wishing to take up the role of medical appraisers to facilitate appraisals in Scotland to ensure consistency in approach and quality.

We offer two types of appraiser training:

- + A two half-days course for anyone wishing to become a New Appraiser
- + A half-day Refresher Appraiser course for experienced appraisers with participation to be invited once every three years

The appraisal year runs from April to March and in the 2020–2021 period, after much rescheduling we were able to run ten New Appraiser courses in the new remote delivery format and 76 participants attended the training.

Full details and breakdown of the training courses can be found in the Medical Appraisal Scotland annual report: <u>appraisal.nes.scot.nhs.uk/resources/AnnualReport-20-21/</u> <u>index.html</u>

#### **Review of Appraiser Training Provision**

Due to the pandemic, all appraisal and revalidation activities in 2020–2021 were paused up to September 2020; restarting in October, with a new focus on doctors' wellbeing.

We focussed our attention on the New Appraiser course redesign to ensure successful delivery of this training. This was successfully concluded and work subsequently began on redesigning the Refresher Appraiser content.

Following feedback from the New Appraiser courses, tutors, Appraisal Leads, and also considering findings from last year's Appraisers Survey, it was determined that the one day every five years format was no longer suitable to support the development of the ongoing appraiser workforce. NES redesigned the approach into a Refresher programme of activities instead.

The new Refresher Appraiser content now consists of:

- + Online modules designed for experienced appraisers
- + Adapted from these, bitesize modules that could be used by Health Board Appraisal Leads as part of the learning aspects of their regular local appraiser group meetings
- Half-day Refresher update training, with participation to be invited once every three years
- + Webinars and adhoc training events to address latest trends

We kicked off this new programme of activities by organising webinars on the theme of 'using coaching approach in appraisals' following user feedback. These were run in October 2021 and February 2022; both sessions were well attended and received. We are looking to launch the revamped Refresher Appraiser training days in 2022.

#### SOAR

NES also supports medical appraisal in Scotland by the continued provision and support of SOAR (Scottish Online Appraisal Resource), an online system used by all doctors working in Scotland.

SOAR was developed by NES and has been running since 2005, with data maintained by its users and local Health Board admin teams to facilitate the appraisal process. SOAR users are supported via a helpdesk system managed by the Medical Appraisal Scotland team at NES.

We had plans to further develop SOAR to integrate the appraiser training details, but this has been reprioritised with NES Digital colleagues working on various COVID related projects.

#### **Conferences and Other National Meetings**

Following the cancellation of the annual conference the year before, NES organised its first virtual event for the Scottish Medical Education Conference (SMEC). We ran the Scottish Medical Appraisers Conference as part of SMEC on 27 May 2021. The event was supported by the EICC making use of online conferencing platforms.

It was an ambitious undertaking as it was the first time we had ran an event of this nature at this scale. There were over 1,600 delegates for SMEC, with an average of around 250 attending the Appraisers Conference sessions. Back when we ran in-person conferences, our conference workshops usually average 30–40 maximum per session.

Some attendees did have technical difficulties on the day and were not able to experience some of the more interactive aspects of the webinars (e.g. break outs, polls etc.), but those who were able to engage did provide positive feedback. All webinars and the plenary were recorded and the videos, along with slides used and resource / reference materials, are all available from the Medical Appraisal Scotland website: <u>appraisal.nes.scot.nhs.uk/i-want-access-to/appraiser-</u> <u>conferences/20212022</u>

We also continued to facilitate National Appraisal Leads and National Appraisal Administration meetings to support all the Appraisal Leads and Local Admin teams within the Health Boards, giving them a platform to discuss and inform on significant issues and share best practice. 6

#### Medical Appraisal & Revalidation QA Report

As sponsored by the Scottish Government, NES had been producing the Medical Appraisal & Revalidation Quality Assurance (MARQA) report reviewing submissions from all designated bodies in Scotland for the year since 2017.

Due to the impact of the pandemic, the Scottish Government and the national stakeholders group agreed to postpone the annual reviews to ease pressures on the Health Boards.

#### New Opportunities in the Pandemic

The pandemic has left a lasting but positive impact on our training courses. As mentioned above, our training for New Appraiser courses were redesigned for online delivery. We have created seven online modules for participants to complete prior to attending the training and thus far the feedback has been overwhelmingly positive. Many commented at their surprise at how well Teams worked in the training environment created; others commented on the usefulness of the online modules. We have also enjoyed higher attendance rates as a result of remote training.

Logistically this has also represented a significant cost saving allowing us to explore other training opportunities. This included the provision of webinar sessions on 'using coaching approach in appraisals' mentioned before. We are also exploring the provision of further training in this area following positive feedback from those attended.

The flexibility offered by remote training has allowed us to have more engaged discussions during the training courses and expand on what we used to offer. Going forward we aim to continually adapt our approaches (with user feedback) and explore how we can better support our appraiser workforce in their recovery.

### 6.14 The Specialty Doctor and Associate Specialist (SAS) Development Programme

- Now established for nine years, the SAS Development Programme has continued to build on its shift to online delivery for both our national educational sessions and local events.
- + Our first ever virtual SAS National Conference of 17th June 2021, proved our most popular event to date with 222 attendees. Sessions covered topics including Advanced Care Planning, leadership, civility in healthcare, peer support, and the development and future of the SAS grades.
- The 5th SAS National Conference has been scheduled for Friday 17th June 2022 as a virtual event, with further session on 24th March 2022 on the Language of Leadership, featuring guest speaker Gina London; 184 SAS have registered so far.
- The Programme placed a stronger focus on organising interactive virtual workshops this year, including two on Bullying, Harassment and Discrimination, and (facilitated by the GMC), two on Professionalism, two on Consent and Decision-making, and one on CESR applications. In total, 173 SAS attended.
- + Further webinars and online workshops are being scheduled throughout 2022, including reiterations of all the above topics in line with SAS interest.

- + SAS Development has continued to offer bespoke webinars for SAS-grade doctors and dentists, including a session on Leadership, Wellbeing and Culture and for the dental audience, a session on Dento-legal considerations for remote consultation. Total attendance at these Scotlandwide webinars is 72.
- + A series of eight local SAS educational events and drop-ins for SAS in their regional Health Boards were organised by the local SAS Education Advisers, with 203 SAS attending in total. Of these events, only one was offered in-person, with the others run online. These included tailored Active Bystander training sessions on skills to challenge unacceptable workplace behaviours, organised by region, of which three more sessions are to run over March–April 2022.
- The move to online learning has afforded the Programme the opportunity to record and share events with SAS unable to attend or who wish to revisit the content. There have been 345 total views of the recorded webinars and events added since April 2021.
- + The SAS Development Programme continues to receive high-quality applications with an ongoing focus on online learning, save for clinical training secondments which continue to run in-person when available. Feedback from recent applicants and their clinical directors confirms the success of the SAS Programme in developing individuals and improving service delivery and patient care.

- There were 36 applications made to the SAS Development Fund since April 2021, supported by local SAS Education Advisers – 94% were approved. While a small number of in-person learning opportunities were able to proceed under COVID, there was continued focus on online learning and study. Examples of training which deliver new or improved services in the various Health Boards include: PG Certificate in Dental Education, PG Diploma in Palliative Care, ChM in Trauma & Orthopaedics, Clinical Certificate in Psychopharmacology, as well as in-person training secondments in performance of outpatient vasectomies, Anaesthetics and Neonatal Paediatrics.
- + Where sufficient demand is identified, the SAS Programme works with course providers to facilitate places for groups of SAS on specific topics. There are 11 SAS being supported this Financial Year to undertake a 'Train the Clinical Trainer' course with the RCPSG, and three SAS dentists to undertake their Dental Cone Beam 2A course. There were also 26 SAS supported to take the University of Edinburgh's Clinical Research Methodology course.
- For the first time, the SAS Programme were pleased to arrange a three day in-person bespoke Internal Medical Training (IMT) Bootcamp to enhance the clinical skills of 12 SAS doctors from across Scotland, in collaboration with the NHSS Scottish Centre for Simulation in Larbert.

+ As part of its efforts to support SAS interested in the CESR route to joining the Specialty Register, a Microsoft Teams group was established for CESR Peer Support and Mentorship, which has now grown to 120 members. Three current or former SAS who have achieved CESR personally have offered live presentations for the group to share their experience and guidance on successfully applying.

#### Looking Ahead

Given the level of interest in CESR, we anticipate the demand for top-up training to increase as clinical backlogs ease off and training opportunities are able to be offered to SAS again.

The SAS Development Programme has continued to develop predominantly online learning to support the changing needs of Scotland's NHS, with an increased focus on virtual interactivity and networking.

### 6.15 Safety, Skills and Improvement

#### Awareness Raising and Introductory Resources

Introduction to Human Factors module
 Entry-level e-learning produce by NES, HEE, CIEHF
 and Loughborough University

#### + Learning briefs

Creation of 12 learning briefs describing and highlighting the potential impact of a Human Factors approach in different areas of health and care, including procurement, Quality Improvement, system safety, and occupational health and wellbeing. The target audience are senior leaders, educators and strategic decision-makers.

+ Guidance on the Safety Engineering Initiative for Patient Safety (SEIPS) Framework

Developed with NHS England / Improvement and CIEHF related train-the-trainers guidance in production.

#### + Structured handover project

'Train the trainer' sessions for regional Health Boards continue. Remote, foundation-level, learning module with scenarios in GP and secondary care nearing completion.

- Enhanced Significant Event Analysis module
  Enhanced SEA module launched on Turas
   converted from Dundee University site.
- Pre-recorded webinars

Twenty webinars that focus on specific Human Factors and Safety Science topics such as:

- Design of safety procedures
- Task analysis
- Systems thinking
- 'Independent' double checking of resources
- SEIPS
- Safety clutter
- Walk-Through-Talk-Through analysis

Aim to increase awareness, promote learning and signpost other developmental resources.

#### Professional Development of Risk and Safety Advisors

- Analysis of learning needs of risk and safety advisors
  Qualitative study exploring the professional development and career aspirations of NHS Risk, Governance and Safety
   Leaders and Advisors (commencing February 2022)
- + Safety Investigation good practice guide

Guidance documentation for those who lead Incident and Safety Investigations – to highlight and promote a systems-based Human Factors approach.

- + Training resources to support risk and safety advisors
  - Guidance on BowTie Analysis
  - Guidance on Walk-Through-Talk-Through (WTTT) Analysis
  - Safety Science seminar series learning on Relevant Topics and Debating Controversies with NES and Other Experts (commencing March 2022)
  - Summary guidance on Embedding a Restorative Just Culture
  - Human Factors Masterclass (Train-the-Trainer), piloted March 2021; delivery face-to-face to start when this is allowed

#### **Resources for Organisations and Teams**

+ Safety Science Challenge Cards

Reflective prompt cards are based on Systems Thinking for Organisational Safety and Challenge Appropriate Leaders, and Advisors Around Existing Policies, Practices and Education with the goal of modernising where appropriate.

+ Safety Culture Cards

Promote team reflection and learning on Safety Culture – adapted and undergoing final content validity testing.

- Traps to Avoid: A Study of Language Bias, Blame, Counterfactual Reasoning and Safety Misunderstandings:
  - Learning summaries
  - IRLS data content
  - Policy documentation
  - Educational curricula
  - Ombudsman reports
- A document analysis of adverse event reports and guidance

Dissemination using various strategies including learning briefs, full technical report and NES Deanery Newsletter article. Paper submitted for journal publication.

#### **Design of Mass COVID-19 Vaccination Centres**

SKIRC led a coalition of UK and international partners in providing specialist guidance to leaders and designers of global COVID-19 vaccination programmes on integrating Human Factors principles and methods to support related safety and efficiency.

Worked in partnership with NHS Ayrshire and Arran and Public Health Scotland to undertake Human Factors based design analysis of vaccination facilities.

Report disseminated worldwide and translated into five languages.

#### **Specific Projects**

- Asynchronous Consulting in General Practice
  Published evaluation of e-Consult use in Ayrshire
  and Arran
- + General Practice IT systems Evaluation of GP IT systems underway using the System Usability Score
- Human Factors in Paramedic Practice
  Co-authored three chapters (Systems Thinking, Safety
  Culture, and Learning from Incidents) in a book entitled,
  Human Factors in Paramedic Practice

#### + Science in Parliament article

Why is the NHS still harming patients? Taking a Professional Approach to Patient Safety for COVID-19 and beyond; S. Hignett, P. Bowie

#### Future Healthcare article

The Contribution of Human Factors and Ergonomics to the Design and Delivery of Safe Future Healthcare; M. Sujan, L. Pickup, P. Bowie, S. Hignett, F. Ives, H. Vosper, N. Rashid

### 6.16 Clinical Skills Managed Education Network (CSMEN)

Our network continues to grow and in 2021 we grew our membership to over 700.

Funding was secured for six endoscopy simulators and after a competitive application process were distributed to six Health Boards (NHS Highland, NHS Greater Glasgow and Clyde, NHS Grampian, NHS Lanarkshire, NHS Lothian, and NHS Golden Jubilee) to help with additional training capacity.

#### **Educational Resources**

We have established a Multi-professional 'Once for Scotland' e-skills group with 34 members re-presenting ten territorial Health Boards, five specialist boards and five Higher Educational Institutes. This group meets six times a year and has reviewed and updated existing CSMEN resources for Suturing, Intramuscular Injections and is currently completing a review for Intravenous Medicines Administration.

In 2022, a new learning programme was published, Faculty Development Tier 2, which has had over 120 people complete the modules.

Online resource	Number of users
Chest drain	43
Ear care	182
Intra-muscular injections	1209
Intra-osseous cannulation	61
Lumbar puncture	33
Suturing skills	59
COVID-19 – Unit A	7380
COVID-19 – Unit B	2839
COVID-19 – Unit C	5551
COVID-19 – Unit D	483
COVID-19 – Unit E	281
Intravenous medicines administration	1058
Faculty Development Tier 1	233
Faculty Development Tier 2	128

Our five COVID resources have continually been reviewed every three months to ensure they are relevant and up to date:

+ Self-Protection (Unit A)

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- + Protecting your Workplace (Unit B)
- + Assessment and Management (Unit C)
- + Procedural Skills Development (Unit D)
- + Rehearsing Immersive Simulation Scenarios (Unit E)



#### **Delivery Units**

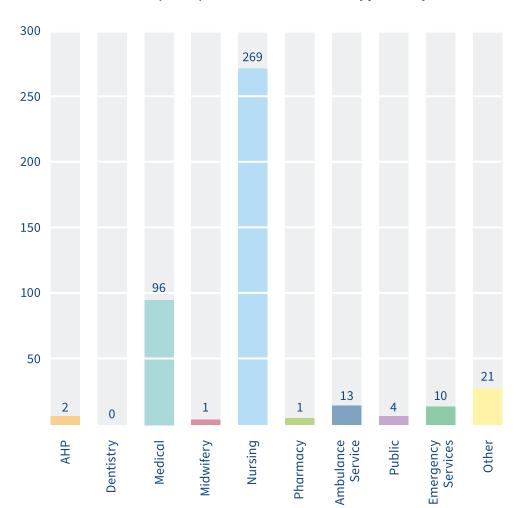
Our four main delivery units continue to deliver skills and simulation training to the NHS workforce in accordance with NES Face-to-Face training guidelines. Additionally, Dundee Institute for Healthcare Simulation delivered Core Surgical Skills courses on the MSU at Stornoway, Western Isles and Dumfries and Galloway.

The Scottish Centre for Skills and Clinical Human Factors continue to develop faculty and delivered six faculty development courses for the MSU, including one course on location at Stornoway, Western Isles.

BASICS for Scotland ran a range of Portfolio courses including Cardiac, Trauma and Paediatric courses on the MSU at Fort William, Highland and Benbecula, Western Isles.

The MSU had a total of 14 visits (including five Faculty Development courses at Forth Valley and one at Western Isles) to six Health Boards. These visits covered approximately 115 training sessions to over 400 physically distanced people.

Number of participants trained on the MSU by job family 2021



#### **Medical Simulation Training Programme**

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A new Medical Simulation Training Team has been created to develop and grow simulation training for Improve Surgical Training, Internal Medical Training, Higher Surgical Training – General Surgery and Core Psychiatry in 2022.

Improve Surgical Training is now in its fourth year. Implementation of the components for CT1 has seen 100% attendance at induction days in East and West and at the fourday boot camps in Inverness.

The inclusion of a critical care course in the programme was important, but proved problematic due to a national shortage of places and exacerbated in Cohorts 2 and 3 by the COVID-19 pandemic. However, by commissioning as many places as possible from the Royal Colleges, together with a new alternative simulation-rich course from Royal College of Surgeons Edinburgh, and our own 'in-house' teaching, demand is now being met.

#### The courses in CT2 are:

- + BaSiCS (Basic Surgical Cadaveric Skills) in Glasgow
- Booster Camp, including Human Factors and Consultation Skills training, delivered on three sites in Glasgow, Dundee and Edinburgh

Attendance at monthly training days around the country remains higher than the target seven per year, made easier and more cost-effective by a blend of virtual and F2F (simulation) learning events. In total, 33 monthly training days have been delivered to 97 trainees:

- + 7 planned webinars
- + 12 F2F courses (online)
- + 14 F2F courses

Our portable simulation-based Deliberate Practice (DP) programmes continue to achieve full engagement and evidence of progression. The main programme is 'Incentivised Laparoscopy Practice' (ILPs) in CT1, using the eoSim laparoscopic simulators purchased at the start of the pilot. Our 2nd portable DP programme is a vascular practice station ("VASim") for CT2 trainees, using novel 3D-printed vascular models.

#### **Research and Development**

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Four simulation bulletins were published in 2021, which is a service provided by CSMEN in partnership with NES Knowledge Network. The reviews included a wide variety of topics covering: Surgery; Virtual Reality and Augmented Reality; Randomised Controlled Trials and Use of Simulation, and Reviews of Simulation-based Education. These articles may be of interest to NHS Scotland staff and may also be of use in research. The articles are reviewed and selected from those journals NES currently subscribe to.

#### **Oral presentations**

- + Singing Like a Nightingale: Creating a Collaborative Voice in the West for Simulation-based Education; J. Ker, SMEC (May 2021)
- E-Learning Support in the Time of COVID-19: The Scottish Experience; A. Baker, G. Brown, M. Moneypenny, J. Ker, DEMEC (December 2021)

#### Poster presentations

- Lockdown in the Larder: Stories from the Front Line in COVID-19; J. Ker, A. Baker, K. Willey, G. Brown, L. Hardie, L. Kenny, SMEC (May 2021)
- A Sustainable and Reliable Approach to Faculty Development in the World of Simulation; J. Ker, A. Baker, M. Moneypenny, L. Hardie, J. Morse, C. Paton, NHS Scotland Conference (2021)

- + Safe Childbirth: Why do Women Die in Childbirth and What You Can Do About It; M. Moneypenny *et al*, The RCSEd Blog (Sep 2021) <u>rcsed.ac.uk/news-public-affairs/the-rcsedblog/2021/september/safe-childbirth-why-do-women-die-inchildbirth-and-what-you-can-do-about-it</u>
- + Interprofessional Simulation Education; Simulcon, India
- + Our Children's Children: Simulation and the Apocalypse; Healthcare Patient Safety Network

#### Journal articles

- + ASPiH 2021 Conference Moving Upstream: Using Simulation to Improve Systems; M. Moneypenny *et al*, *International Journal of Healthcare Simulation* (2022 1 (Suppl 1), p1–2)
- Ergonomics: A Matter of Life and Death; M. Moneypenny et al, Surgeons' News (2021; Sep:16–18)

#### Future

Looking ahead, the CSMEN network will continue to facilitate multi-professional skills and simulation training with continued support for our delivery units and further enhancing e-skills resources. After a successful application for Advanced Technology funding, CSMEN is also developing virtually reality resources for communicating in stressful situations, such as pre-hospital care and mental health tribunals.

### 6.17 Continuing Professional Development (CPD) for Primary Care professionals and teams

Our Practice-based Small Group Learning (PBSGL) has remained popular in General Practice in Scotland with approximately 35–40% of Scotland's GPs being members of PBSGL groups.

GP Trainee numbers have seen the highest growth in the past two years. Pharmacists, Pharmacy Technicians and General Practice Nurses are the next largest group of members, meaning that increasing numbers of groups are inter-professional.

We have supported the development of PBSGL in Wales and they are attempting to roll this out more widely, offering 50% of membership costs to be paid when people join.

We have continued to offer 'A Day in the Life of a Busy General Practice' CPD webinar series across Scotland, which has seen a 116% increase in bookings since last year. We also delivered virtual events on a wide range of topics for those working in General Practice.

Through Scottish Government funding, we have significantly increased our educational opportunities for General Practice Nurses. Demand for these courses is high and they have evaluated exceptionally well. The team have redesigned some of these Learning Programmes and courses to align with national priorities and to allow them to be delivered at distance using blended learning methods. The team also provide support to and facilitate networking for GPNs through a variety of methods including a private Facebook page and Learn and Connect sessions.

Scottish Government funding has facilitated Quality Improvement and Continuing Professional Development Workshops across the country to support GPs in their preparation for appraisal. We also received significant investment from Scottish Government to educationally support GPs in their first five years since qualification. This includes PBSGL membership, dedicated webinars and online courses and research to better understand the CPD needs of this group.

The CPD Connect team have developed a new series called Preparing for GP Partnership, to support those considering this as a career option / have recently taken up partnership. This focuses on the business aspects such as HR, finance and leadership.

#### Looking ahead

We aim to increase the number of PBSGL groups / members in Scotland and to continue to increase inter-professional membership. We aim to deliver more of our training using virtual methods, to attempt to have greater reach to the professions working in General Practice; offering more blended and selfdirected options for CPD for an inter-professional audience.

### **6.18 Grief and Bereavement**

#### **Learning Events**

We have continued our webinar programme this year with seven sessions hosted, covering a diverse range of bereavement topics (<u>www.sad.scot.nhs.uk/events/previous-webinars</u>). Over 1,000 multi-disciplinary health and social care professionals have registered interest in attending, from across Scotland and beyond. These sessions are now routinely recorded, edited and made available for later viewing.

This year we hosted NES' second Bereavement Education Conference (#NESBereavement2021 <u>twitter.com/hashtag/</u><u>NESBereavement2021?src=hashtag\_click</u>), a one-day virtual event, 'The Changing Face of Bereavement: Providing Care and Maintaining our own Wellbeing During the Pandemic' (<u>www.sad.scot.nhs.uk/events/2021-conference</u>). Delegate registration numbers approached 1,100, with a significant number of people joining the event live, and others being able to catch-up via session recordings. The broad and varied programme received extremely positive feedback from attendees and speakers.

#### **New Resources**

This year has also seen the launch of new bereavement-related educational film resources, including:

- + Anticipatory Grief (vimeo.com/629251076)
- The Bereavement Charter for Children and Adults in Scotland: What does it mean for health and social care professionals? (vimeo.com/592277288). The Charter Guidance Notes were also comprehensively reviewed with new sections added (sad.scot.nhs.uk/media/16745/bereavement-charterguidance-notes-updated-2021-final.pdf)
- + Ripples of Grief: Tips for looking after those who are bereaved and your own wellbeing
- + Dealing with death and bereavement at work: Perspectives from an Emergency Department team
- How to complete a paper-based Medical Certificate of Cause of Death form in Scotland

To date, NES' suite of bereavement-related film resources has gathered over 88,000 views – a 35.5% increase on views from the previous year. All of these are available on the Support Around Death website (<u>www.sad.scot.nhs.uk</u>). This year the website has seen over 27,000 users and has gathered over 72,000 page views.

Following a request from the Conference of Postgraduate Medical Deans, NES has this year been leading on a four-nation piece of work to deliver training resources to support Deanery teams and educators across the UK to deal with the sudden death of a doctor or dentist in training.

Collaborative working is underway to identify gaps, needs and priorities, and from this a training package of educational resources is now in development. Building from this will likely follow work which will consider the topic of bereavement in the workplace more broadly, as related to a wider multiprofessional audience, in a Scottish context.

We continue to host quarterly learning events for NHS Board Strategic Leads and Bereavement Coordinators.

We also continue to work with the Death Certification Review Service to update existing and develop new education resources e.g., in relation to hazards and antimicrobial resistance (<u>www.sad.scot.nhs.uk/</u> <u>atafter-death/death-certification</u>).

#### **Looking Ahead**

Looking ahead to next year, we will develop and launch new bereavement-related educational resources e.g., a Bereavement Basics e-Learning module and other materials on bereavement following suicide and managing bereavement in the workplace.

We will also be exploring the use of simulation, looking at how bereavement topics are included within undergraduate curricula, and will be continuing to host a regular webinar programme and annual conference.

### 6.19 Remote and Rural Healthcare Education Alliance (RRHEAL)

#### **RRHEAL Webinars**

We delivered 18 webinars throughout 2021, via the RRHEAL VC Education Network and our Rural General Hospital VC Education Network, across a wide variety of topics specifically tailored to meet the needs of remote, rural and island practitioners.

The focus of delivery was to multidisciplinary staff groups, participant attendance ranged from 15 to 150 people. The webinars were recorded and shared via the RRHEAL TURAS site to enable staff to have ongoing access and to look at them at a time that suits them best:

learn.nes.nhs.scot/902/rrheal/education-networks

Some examples of RRHEAL webinar topics for staff have included:

- + COVID-19
- + Psychiatry
- + Palliative care
- + Wound care
- + Near me

#### **Rural Advanced Pathways**

+ We have completed the design of a new accessible and affordable multidisciplinary rural advanced practice (RAP) education pathway for rural practitioners. It is the first programme of its kind in the UK. RRHEAL worked with the Scottish Rural Medicine Collaborative (SRMC) to establish the educational capabilities and associated competencies for this pathway in response to remote, rural and island health and social care workforce and community needs.

Turas: <u>learn.nes.nhs.scot/48411/rrheal/rural-teams/</u> <u>multidisciplinary-rural-advanced-practice-capability-</u> <u>framework-primary-and-community-care</u>

SRMC: srmc.scot.nhs.uk

- Work has been initiated to develop an accompanying Rural Supervisory Hub for rural practitioners and to develop this in compliment with NES led work to establish the Rural Credential.
- We completed our work as part of the Scottish team within the international Remote and Rural Recruitment and Retention Making it Work Project, which has produced an evidence-based Workforce Sustainability Framework and a range of practical tools: <u>rrmakingitwork.eu</u>

# Scottish Centre of Excellence for Remote and Rural Health and Care

We have led the development of a multi-agency proposal for a Scottish Centre of Excellence for Remote and Rural Health and Care (SCoE). This has been submitted it to the Scottish Government for their consideration.

The purpose of the SCoE will be to support service improvement, sustainability, resilience, improved recruitment / retention of skilled staff, and the sharing of models of excellence for the continuous improvement of the health and wellbeing of people in remote, rural and island communities throughout Scotland.

This will be achieved through the development and delivery of socially accountable, multi-disciplinary education and training, with effective use and establishment of knowledge networks, research and digital innovation.

#### **Cooling Babies Group**

Work is underway across several NES directorates including RRHEAL and NES medical directorate working with experts from The Scottish Government's 'Cooling Babies Group' and the parent charity PEEPs: <u>peeps-hie.org</u>

This work will design and produce three unique short, animated, educational videos for neonatal practitioners. These will be the first of their kind in the UK and will support the implementation of the Neuroprotection Care Pathway for Infants with Hypoxic-Ischaemic Encephalopathy. These teaching resources will be used to help train doctors, neonatologists, paediatricians, neonatal nurses, midwives and advanced neonatal nurse practitioners and neonatal transport staff to refer and treat infants with Hypoxic-Ischaemic Encephalopathy (HIE) for crucial 'cooling treatment' at the right time. It will also support the training of good communication skills for practitioners in working with parents and carers at the time of diagnosis, providing prognosis and planning for follow up care for babies with HIE.

The content for this type of resource cannot be captured using conventional filming approaches and therefore innovative animation development will provide an enhanced teaching and learning opportunity to support practitioners to implement the Neuroprotection Care Pathway mentioned above. The three animated teaching resources will be completed by March 2022.

#### **Looking Ahead**

6

We are now looking to appoint an education provider to design and deliver the educational components that address the educational gaps between advanced practice in the UK and the requirements of the multidisciplinary rural advanced practice (RAP) role in accordance with the identified capabilities and associated competencies that support remote, rural and island workforce team members to deliver high quality person-centred care. Plans going forward in 2022 include developing a remote and rural supervisory hub to support the implementation of the new NES Rural Advanced Practitioners Qualification Programme. The hub will design and deliver educational content, guidance and support for rural supervisors and their leads

We have designed a Centre of Excellence Remote and Rural Festival of Learning, taking place from 19th September 2022 through to 30th September 2022. In-person training initiatives will take place in Skye (Portree), and online training will also be available to enable all remote and rural areas equity of access to learning resources. The website for this event will open in May 2022.

#### **6.20 Practice Manager Development**

- We continue to deliver the Practice Managers Vocational Training Scheme. Cohort 16 commenced in September 2021 with 16 participants, with Cohort 17 due to commence in January 2022. We have recruited six new Educational Facilitators to support the programme.
- + We continue to deliver a Supervisory Management in General Practice programme. Three Cohorts completed in 2021 with 95 participants in total.
- We are undertaking work on Developing Practice Manager and Administrative Staff Role to support the evolving roles of Practice Managers and General Practice administrative staff. This is supported with Scottish Government funding.
- + We delivered 24 virtual events for Practice Managers, these included both workshops and webinars.
- Local co-ordinators have organised meetings in all territorial Health Boards, engaging with Practice Managers from across Scotland and providing an opportunity to share best practice.

### **6.21 General Practice Nurse Development**

- + We are delivering:
  - Online education for two cohorts currently
  - Cohort 12 and Cohort 13 are on-going
  - Cohort 11 have submitted their portfolio and await final grades
  - Cohorts 7, 8, 9 and 10 attended their celebration event in December 2021 after successfully completing the GPN Programme
- We have plans to expand the provision on the General Practice Nurse Programme places for programmes beginning from 2022.
- Programme credit rated by QMU 60 points at Level
  10 awarded three commendations, five recommendations, no conditions. This is to be reviewed in 2024.
- + Collaborative cross directorate working continues with NMAHP around the GPN Transforming Roles programme to support the GPN refocused role.
- We have 14 Education Supervisors to support the GPN
  Programme with ongoing discussions with HR to recruit a minimum of six more nurses to the post, in the near future. There was considerable interest noted in the post.

- + We have nine GPN Education Advisors across Scotland, with ongoing work to assess refocus of the role to support the GPN role and working across the GPN Team.
- + GPN CPD is now supported by CPD Connect.
- Development of a learning resource for the Level 6 GPN in collaboration with NES NMAHP to support the refocused role of the GPN in line with the Transforming Roles paper – Developing the General Practice Nursing Role in Integrated Community Nursing. Access the learning resource here: <u>learn.nes.nhs.scot/23704/nursing-cpd/general-practicenurse-cpd</u>
- + Team undertook the revision of the Cervical Screening Education Standards supported by SG funding and this document was published in August 2021.
- + Significant social media presence of GPN Team to promote GPN professional identity and role.
- Increased social media presence supporting and connecting GPNs across Scotland to reduce isolated working through main NES accounts on Facebook – NES GPN and Twitter – NES GPN.
- NES Stars, Winner 2019 GPN Practice Nursing / CPD Connect team, 'Look ahead and be creative'.



### Postgraduate Medical Education and Training Annual Report 2022

This resource may be made available, in full or summary form, in alternative formats and community languages. Please contact us on **0131 656 3200** or email **<u>altformats@nes.scot.nhs.uk</u>** 



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