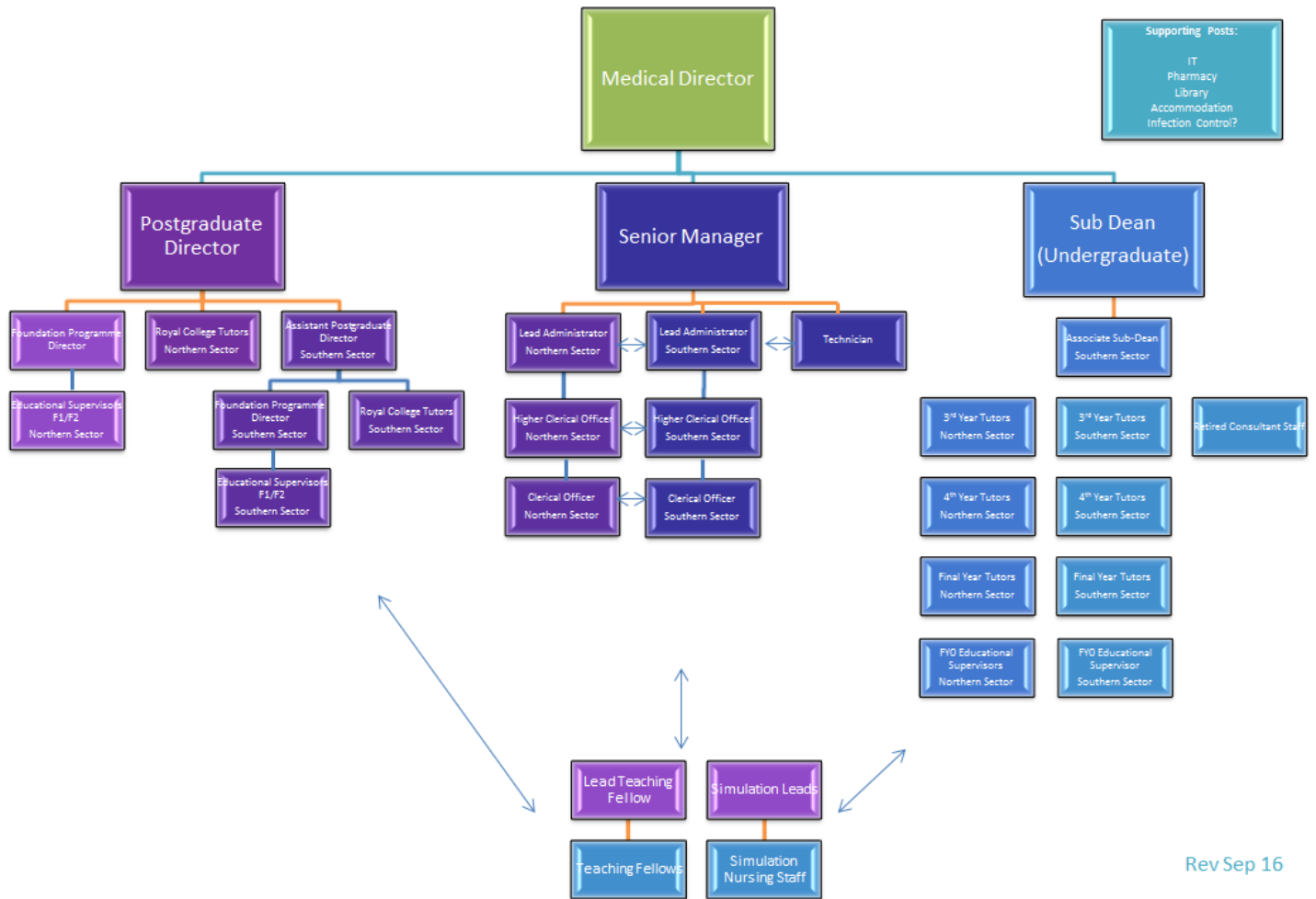


CONTENTS

MEDICAL AND DENTAL EDUCATION STRUCTURE	4
MEDICAL & DENTAL EDUCATION WHO'S WHO?	5
FOREWORD	8
DIRECTOR OF POSTGRADUATE MEDICAL AND DENTAL EDUCATION	8
FOREWORD	9
UNDERGRADUATE SUB DEAN	9
CHAPTER ONE	10
INTRODUCTION.....	10
General Medical Council (GMC).....	10
CHAPTER TWO	13
UNDERGRADUATE EDUCATION	13
Queen's University Belfast (QUB)	13
The Supplement for Undergraduate Medical and Dental Education (SUMDE).....	14
SUMDE Funding.....	15
Quality Assurance Systems and Processes	16
GMC National Student Survey.....	16
QUB Comments on Trusts' Clinical Teaching.....	16
Good Practice in Undergraduate Education	16
DOH Actions arising from 1617 Accountability Report for which Western Trust is responsible. .	18
Student feedback.....	19
QUB Visits	20
Undergraduate Teaching Fellow.....	20
Peer Assisted Learning (PAL) and OSCE Preparation.....	22
Surgical Skills Day	25
Final Year Clinical Assistantship/Workshadowing	25
Workshadowing for non-QUB Medical Students.....	28
Technology Enhanced Teaching Methods.....	28
Conferences	30
Learn International Visit.....	30
Student Elective Placements.....	30
Northern Ireland less dependent on non-UK graduates	31
Quality Assurance Systems and Processes	31
Royal College of Surgeons in Ireland (RCSI) Students	31
National University of Ireland Galway (NUIG) Students.....	31
CHAPTER THREE	33
POSTGRADUATE MEDICAL & DENTAL EDUCATION	33
Role of the Northern Ireland Medical and Dental Training Agency	33
NIMDTA Funding 2016/17	33
GMC National Training Surveys 2017	34
Local Education Provider (LEP) Report.....	36
Deanery Visits	36
Training Programme.....	38
Altnagelvin Hospital/Grangewood Weekly Teaching Programme.....	39
SWAH Weekly Teaching Programme.....	41
CHAPTER FOUR	42
FOUNDATION PROGRAMME.....	42
FY1 – Foundation Year 1.....	42
FY2 – Foundation Year 2.....	42
E-portfolio	42
Foundation Prospectus.....	42

Attract and retain trainees Strategy	42
CHAPTER FIVE	45
GENERAL PRACTICE (GP) VOCATIONAL TRAINING SCHEME	45
CHAPTER SIX	46
RECOGNITION AND APPROVAL OF TRAINERS	46
Faculty Development/Trainer Database	46
CHAPTER SEVEN	47
SIMULATION	47
Simulation/Clinical Skills	47
Simulation Development.....	47
The Northern Ireland Simulation and Human Factors Network (NISHFN) Simulation Faculty Debriefing Course – 12th May 2017	53
CHAPTER EIGHT	54
MDE DEVELOPMENTS AND EVENTS	54
MDE App	54
Induction	54
STEP (West).....	54
Postgraduate Certificate & Diploma in Clinical Skills	56
UptoDate Anywhere	56
Tracheostomy Emergencies	57
#hellomynameis.....	58
Identification of Doctors	58
National Association of Medical and Dental Education Management (NAMEM)	60
NAMEM Conference 22 nd & 23 rd September 2016	61
Medical and Dental Education Charity Fundraising	62
CHAPTER NINE	63
TRAINING/COURSES	63
Basic Colonoscopy Courses.....	63
Advanced Colonoscopy Courses.....	63
RCPI (Royal College of Physicians Ireland) Masterclass Webcasts.....	63
RCPE (Royal College of Physicians Edinburgh) Evening Medical Update Webcasts/Videolinks	63
Safeguarding Children: Recognition & Response in Child Protection.....	63
Regional Specialty Teaching	64
Lumbar Puncture Courses.....	64
Tracheostomy Emergencies	64
University of Ulster - Stratified Medicine Programme	65
Quality Improvement Showcase Event – 25 th November 2016.....	65
Ulster Medical Society	65
Trauma Care and Battlefield Medicine – 19 th January 2017	66
Effective Feedback Taster Session – 23 rd January 2017.....	66
Ulster Obs & Gynae Society Conference – 3 rd February 2017	66
Human Factors Training for Medical Staff	66
Ill Medical Patients' Acute Care and Treatment (IMPACT) Course – 13 th and 14 th April 2017	67
CCrISP NI (Care of the Critically Ill Surgical Patient) - 1 st June – Friday 2 nd June 2017.....	67
Annual Cardiology Update - June 2017.....	67
Junior Doctor Audit Competition - 6 th June and 16 th June 2016.....	68
ADEPT.....	69
PROMPT (PRactical Obstetric Multi-Professional Training)	70
CHAPTER TEN	71
MEDICAL EXAMINATIONS	71
Practical Assessment of Clinical Examination Skills (PACES)	71
Final Year Objective Structured Clinical Examinations (OSCEs).....	71

Medical and Dental Education Structure



Rev Sep 16

Northern Sector – Altnagelvin Hospital and Grangewood
 Southern Sector – South West Acute Hospital, T&F and TCH

MEDICAL & DENTAL EDUCATION WHO'S WHO?

Medical & Dental Education Administration	
Senior Manager (WHSCT)	Ms Sinead Doherty
Northern Sector – Altnagelvin and Gransha Hospitals	
Senior Administrative Co-Ordinator	Ms Alison Warke
Technical Support Officer	Mr Jonathan McCann
Higher Clerical Officer	Mrs Louise Temple
Higher Clerical Officer	Mrs Hilary McCullagh
Clerical Officer	Ms Laura McGlynn
Southern Sector – South West Acute Hospital, TCH and T&F Hospitals	
Senior Administrative Co-Ordinator	Mrs Christine McGovern
Higher Clerical Officer	Ms Catriona Johnston

Postgraduate

Designation	Name
Director of Postgraduate Medical and Dental Education	Dr Neil Corrigan
Northern Sector – Altnagelvin and Gransha Hospitals	
Foundation Programme Director	Dr Damien Armstrong
Educational Supervisor for FY1	Mr Micheal Harron
Educational Supervisor for FY1 & FY2	Dr Ene Horan
Educational Supervisor for FY2 & FY2	Dr Stephen Todd
Educational Supervisor for FY2	Dr Sandra McNeill
College Tutors	
Medicine	Dr John Corrigan
Surgery	Mr Anand Gidwani
Obs & Gynae	Dr Iris Menninger
Paediatrics	Dr Angela McIntosh
Anaesthetics	Dr Richard Laird
Pathology	Dr Iain Cameron
Radiology	Dr Katarzyna Zygan
Ophthalmology	Mr Barry Cartmill
Oral Surgery	Mr Brian Swinson
Orthodontics	TBC
ENT	Mr Neil McCluney
Orthopaedics	Mr Angel Ruiz
Emergency Medicine	Dr Paul Baylis
Psychiatry (Grangewood)	Dr Deirdre McGlennon
Southern Sector – South West Acute Hospital, OH&PCC and T&F Hospitals	
Associate Director of Postgraduate Medical & Dental Education	Mr Mark Grannell (SWAH)
Foundation Programme Director	Dr Pat Manley (SWAH & T&F)
Educational Supervisor for FY0	Mr Seamus Dolan (SWAH)
Educational Supervisors for FY1	Dr Breffni Keegan (SWAH)
	Dr Pat Manley (T&F Hospital)
Educational Supervisors for FY2	Dr Pat Manley (SWAH & T&F)

College Tutors	
Physicians	Dr Breffni Keegan
Surgeons	Mr Mark Grannell
Obs & Gynae	Mr Mageed
Paediatrics	Dr Nicholas Lipscomb
Psychiatry	Dr Stephen Moore

Undergraduate

Designation		Name
Sub Dean, Director of Undergraduate Medical and Dental Education		Dr Sandra McNeill
Northern Sector – Altnagelvin and Gransha Hospitals		
Year	Specialty	Name
3 rd	Medicine	Dr William Dickey
	Medicine – Cardiology	Dr Stephen Barr
		Dr John Purvis
	Medicine – Endocrinology	Dr Athinyaa Thiraviaraj
	Medicine – Nephrology	Dr Girish Shivashankar
	Medicine – AMU	Dr Abdul Hameed
3 rd	Medicine – Respiratory	Dr Gerard Daly
3 rd	Surgery	Ms Paula Loughlin
3 rd	MSK	Mr John Wong
		Dr Philip Gardiner
3 rd	ENT	Dr D Gupta
		Ms Susie Walls
3 rd	Ophthalmology	Ms Janet Sinton
3 rd	Haematology	Dr Feargal McNicholl
3 rd	CPC and 3rd year Pathology Tutorials	Dr Kathleen Mulholland
3 rd	SSCs:	
	<i>An Introduction to Pathology</i>	Dr Kathleen Mulholland
	<i>Inpatient Nephrology</i>	Dr Frank McCarroll
	<i>Obstetrics & Gynaecology</i>	Dr Sandra McNeill
	<i>The Face of Surgery</i>	Mr Amir Ketabchi
3 rd	<i>Rheumatology</i>	Dr Philip Gardiner
4 th	Child Health	Dr Bernie Trainor
		Dr Freda Mooney
4 th	Ageing Health	Dr Stephen Todd
4 th	Obs & Gynae	Dr Jim Moohan
4 th	POEM (A&E)	Dr Stephen Clenaghan
4 th	POEM (Anaesthetics)	Dr Cheryl Turkington
4 th	Fractures	Mr Danny Acton
4 th	Radiology	Dr Deirdre Campbell
		Dr Allam Adas

4 th	Psychiatry (Grangewood)	Dr Helen Connolly
5 th	Surgery	Mr Padraig Diggin
5 th	Cardiology	Dr Stephen Barr
5 th	Medicine	Dr William Dickey
5 th	Emergency Medicine	Dr Stephen Clenaghan
5 th	Orthopaedics	Mr Danny Acton
5 th	Final Year Assistantship Educational Supervisors	Dr Linda Irwin, Dr Louise Cousins, Dr Tanmoy Chakrabarty
Southern Sector – South West Acute Hospital and T&F Hospitals		
Year	Specialty	Name
3 rd	Medicine & Cardiology	Dr Breffni Keegan
3 rd	Surgery	Mr Essam Ghareeb
3 rd	SSC: <i>Obstetrics & Gynaecology</i>	Mr Mageed
4 th	POEM (Anaesthetics)	Dr Mada McCrea
	POEM (A&E)	Mr Tom Allen
4 th	Ageing Health	Dr Jim Kelly
4 th	Obs & Gynae	Mr Mageed
4 th	Psychiatry	Dr Stephen Moore
4 th	Child Health	Dr Nick Lipscomb
5 th	Medicine	Dr Eugene Campbell
5 th	Surgery	Mr Essam Ghareeb
5 th	Intensive Care	Dr Ronan O'Hare
5 th	Final Year Assistantship Educational Supervisor	Mr Seamus Dolan

FOREWORD

DIRECTOR OF POSTGRADUATE MEDICAL AND DENTAL EDUCATION

Once again I want to start this report with a sincere thank you to everyone involved in postgraduate education within the Trust.

The recognising trainers programme is now fully embedded with over 95% of our trainers achieving GMC recognition. We are about to conclude our cohort 2 of the exciting STEP-west training programme and next year this will be expanded to include a First Steps programme for foundation trainees. Simulation training continues to develop and this will be enhanced with the appointment of a simulation nurse lead and delivery of exciting new technology facilitating training in non-invasive surgical techniques. We continue to expand our programme of training across the specialties. Trust induction has been enhanced with our online 'PageTiger' platform allowing trainees to complete generic induction at a time that suits them and ensuring robust induction for those trainees joining the Trust outside the usual times.

We will welcome our first ADEPT trainee to medical education in September 2018 and look forward to working with him. His project will focus on recruitment and retaining medical staff by provided valuable insights to trainee perceptions and preferences regarding the WHSCT and will help us to develop and deliver a focused programme of recruitment and retention into the future. Our teaching fellow programme goes from strength to strength with excellent feedback from our undergraduate students.

I cannot fail to recognise and thank Sinead Doherty and her amazing team for their ongoing leadership and support for medical education across the Trust.

I would also like to thank our junior doctors for their care, professionalism and hard work caring for our patients and their support for both the MDE team and each-other in training to become ever better clinicians.

Year on year we are delivering better and more focused training within the WHSCT. We will continue to place innovation, engagement and professionalism at the heart of what we do, delivered with care and compassion in the knowledge that this will undoubtedly translate to better training for our doctors and better care for the patients they look after.

I wish to once again thank all of you involved in postgraduate training for your commitment, passion, skills and support over the past year and into the next.

Once again I want to start this report with a sincere thank you to everyone involved in postgraduate education within the Trust.



Dr Neil Corrigan
Director of Postgraduate Medical & Dental Education

FOREWORD

UNDERGRADUATE SUB DEAN

As the newest member of the Education Team in the WHSCT I would like to start by thanking everyone who has helped me begin to ascend what has been a fairly steep learning curve over the last year. I commenced as the UG Sub Dean in Nov 2017, and found a ship that was that was being expertly helmed by Sinead and her team, and had been left in excellent health By Dr William Dickey. Everything from the PALS (peer assisted learning), the DUCT (Developing the Undergraduate Teacher) and the FY0 assistantship programme was well organised, running smoothly and getting good feedback from the Medical Students.

Everything this year has been new, from learning the Undergraduate Curriculum, attending meetings with my counterparts from the other trusts at QUB and the Medical Students Management group within the Department of Health. I have had to learn who is who and who does what but as I enter my second year I hope I am beginning to build good connections and relationships and consolidate my learning.

I am keen to build a theme of The West is Best, when it comes to both Undergraduate and Postgraduate Education. Along with Dr Neil Corrigan and Dr Damien Armstrong I believe that medical education is a continuum from the first year at medical school, though Undergraduate clinical placements and examinations, though to foundation training and onwards into Speciality training. Whilst I recognise that we face unique challenges in the Western Trust due to our relative geographical isolation, I believe that we have a sense of camaraderie and belonging to the local community that larger institutions may not benefit from.

We need to harness that enthusiasm for education and learning by being slightly different to the other Education providers by offering additional opportunities for our UG and PG students and doctors. If we can give them a truly positive experience here in the WHSCT at an early stage in their career we may hopefully encourage them to return to us as our bright new future doctors both in primary and secondary care.

I think we are quite far down this journey; the Teaching Fellows have been a great success. Simulation in UG Education is going from strength to strength. I believe we have great team of UG clinical leads who are enthusiastic teachers. We are working alongside the Trusts strategic management with regard to upgrading our students and junior doctor accommodation. I am optimistic that the future is bright.

I would like to thank all the UG clinical leads and those who do the face to face teaching on the wards, you make me proud to represent UG Education for the Western Trust, I could not do my job without your dedication and professionalism.

I would like to thank on behalf of the undergraduate committee, Sinead Doherty who as Senior Manager, Medical and Dental Education, continues to drive services onwards and deal with providers and consumers alike with efficiency and enthusiasm. Thanks also to the administration staff Alison Warke, Christine McGovern, Louise Temple, Hilary McCullagh, Laura McGlynn, Jonathan McCann and Catriona Johnston who deal on the ground with the students, co-ordinating timetables and scheduling teaching.



Dr Sandra McNeill
Undergraduate Sub Dean, Medical & Dental Education

CHAPTER ONE

INTRODUCTION

Welcome to the Annual Report produced by Medical and Dental Education. Medical education and training are being delivered in a changing environment. The Western Trust continues its long-standing tradition of providing excellent education and training for medical students, doctors in training and continuing professional development for consultants. The Trust continues to cultivate the strong on-going relationships with Queen's University Belfast, (QUB) and the Northern Ireland Medical and Dental Training Agency (NIMDTA) and the General Medical Council (GMC).

Training is expensive and at a time when money is tight, it is more important than ever that expenditure can be accounted for and protected. The Department of Health and Social Care, Northern Ireland has made clear its expectations of accountability for medical and dental educational resources against educational outcomes and funding must follow the medical students and the trainees. The key role of medical education and training is in supporting good medical practice.

The Trust has recognised the importance of teaching, education and training and the value of supporting committed clinical teachers across all five of its hospital sites and has shown its commitment through transparent funding for medical education and training to include education contracts for lead posts and an appropriately robust governance framework for medical and dental education.

Overall medical education is in a good place. We have grown rapidly and we are the victims of our own success! We are particularly proud of our Step-West programme (trainee leadership and QI programme) that was inaugurated last year; the MDE APP that received positive mention from the GMC as good practice; Developing the Undergraduate Clinical Teacher (DUCT) programme that is run by trainee teaching fellows who empower FY1s as teachers; Teaching Fellows are competitive posts that attracts a half day within the MDE and funding of the QUB certificate/diploma in medical education; Up-to-Date Everywhere where trainees and undergraduates can access the up-to-date clinical support database from their own devices at any time.

Simulation continues to be the focus this year with the cutting edge equipment and an exciting developing programme including insitu training within the clinical setting; as well as the Junior Doctor induction with the use of a new digital platform (Page Tiger) and embedded video talks that ensure both access and quality within the process.

This year the Trust had a GMC review as part of the regional review and this was largely positive. The visit recognised many areas of good practice including governance structures and relationships with the senior management team. The National Training Survey (NTS) results for 2017 were excellent and the GMC Recognised Trainers initiative has been very successful with 170 plus trainers within the WHSCT successfully completing the programme and gaining GMC recognition as trainers.

The undergraduate and postgraduate education committees meet twice a year to ensure the effective management of all activities central to the effective operations of the Medical & Dental Education department. A joint strategy meeting also takes place.

General Medical Council (GMC)

The GMC is responsible for regulating all stages of medical education in the UK, for setting standards and training as well as covering continuing professional development (CPD). These are

set out in the Promoting excellence: standards for medical education and training, which replaces the 'standards for delivery of teaching, learning and assessment for undergraduate medical education' in *Tomorrow's Doctors* (2009), and the 'standards for postgraduate training' in *The Trainee Doctor* (2011).

Promoting Excellence sets out ten standards, the standards and requirements are organised around five themes.

The ten standards

THEME 1

Learning environment and culture

- S1.1 The learning environment is safe for patients and supportive for learners and educators. The culture is caring, compassionate and provides a good standard of care and experience for patients, carers and families.
- S1.2 The learning environment and organisational culture value and support education and training so that learners are able to demonstrate what is expected in *Good medical practice* and to achieve the learning outcomes required by their curriculum.*

THEME 5

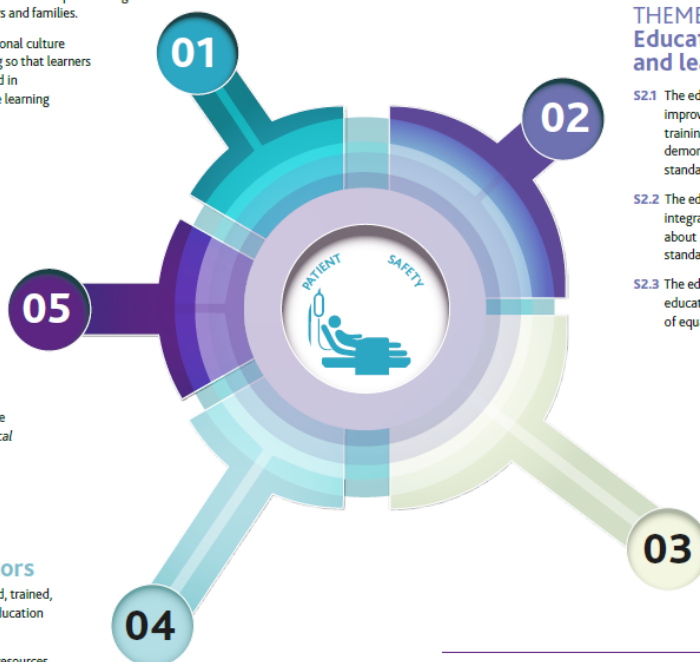
Developing and implementing curricula and assessments

- S5.1 Medical school curricula and assessments are developed and implemented so that medical students are able to achieve the learning outcomes required for graduates.
- S5.2 Postgraduate curricula and assessments are implemented so that doctors in training are able to demonstrate what is expected in *Good medical practice* and to achieve the learning outcomes required by their curriculum.

THEME 4

Supporting educators

- S4.1 Educators are selected, inducted, trained, and appraised to reflect their education and training responsibilities.
- S4.2 Educators receive the support, resources and time to meet their education and training responsibilities.



THEME 2

Educational governance and leadership

- S2.1 The educational governance system continuously improves the quality and outcomes of education and training by measuring performance against the standards, demonstrating accountability, and responding when standards are not being met.
- S2.2 The educational and clinical governance systems are integrated, allowing organisations to address concerns about patient safety, the standard of care, and the standard of education and training.
- S2.3 The educational governance system makes sure that education and training is fair and is based on principles of equality and diversity.

THEME 3

Supporting learners

- S3.1 Learners receive educational and pastoral support to be able to demonstrate what is expected in *Good medical practice* and to achieve the learning outcomes required by their curriculum.

* For undergraduate education, the learning outcomes for graduates (*Tomorrow's Doctors*)² and for postgraduate training, the curriculum approved by the General Medical Council.

Patient safety is at the core these standards. Just as good medical students and doctors make the care of their patients their first concern, patient safety is at the centre of all Trust activities. Undergraduate and postgraduate education is a vital process in furthering safe patient medical care.

GMC Northern Ireland National Review 2017

GMC Education Associates visited the Northern Ireland region during February, March and April 2017 to Quality Assure (QA) all sites where medical education and training is delivered for both undergraduates and postgraduates. All five Trust local education providers (LEPs) were visited by the GMC team to triangulate information from medical students and doctors in training. Other visits will be arranged to meet with Faculty at both NIMDTA and QUB.

GMC Visit

The GMC visit took place on 28th February 2017. The GMC team were impressed with the Trust's commitment and engagement with the process. There were lots of positives regarding education and training in the WHSCT and there were also a number of areas that require improvement.

The Trust will take on board all of the concerns raised and act to change and improve accordingly. The Trust values the input and feedback of staff in this process and hope that

together we can make the WHSCT an example of excellence in undergraduate and postgraduate training.

GMC Enhanced Monitoring

The GMC publish quarterly updates on their website in relation to the progress of Enhanced Monitoring cases. The following summaries were published in relation the following items:

Supervision Out of Hours for Foundation doctors in training at South West Acute Hospital

“As part of the Northern Ireland national review, the GMC visited Western Health and Social Care Trust on the 28 February 2017, at which the team raised a serious concern with supervision out of hours for foundation doctors in training. This issue had previously been identified by NIMDTA and was reported to the GMC via the Dean's Report process and was being monitored. We found that foundation Year 2 doctors at South West Acute Hospital (SWAH) to be the most senior doctors out of hours on the acute medical take. They were able to call consultants who were off site, but did not have access to on-site supervision, and we heard examples where doctors in training were left in vulnerable situations. Western HSCT and NIMDTA provided an action plan which is being monitored by NIMDTA. A GMC supported deanery revisit is scheduled for March 2018. We will continue to provide NIMDTA with enhanced monitoring and support until we have evidence that the issues have been resolved and the changes are sustainable.”

Obstetrics & Gynaecology Training at Altnagelvin Area Hospital

“During a GMC check to Altnagelvin Area Hospital in October 2014 we found concerns relating to unacceptable professional behaviour from some members of senior medical staff within the obstetrics and gynaecology unit. This issue was escalated to enhanced monitoring and there was a GMC supported deanery visit to the hospital in May 2015 where significant improvements were seen. However, a further visit in May 2016 found that undermining was still occurring in the department. GMC and NIMDTA agreed to work more closely with SMT at the LEP to provide support in addressing issues. A further GMC supported deanery revisit took place in May 2017 and issues were still not fully resolved. The issue will now be addressed with the consultant body as a whole by the trust and NIMDTA, and a meeting will be arranged for early summer 2018. We will continue to provide NIMDTA with enhanced monitoring and support until we have evidence that the issues have been resolved and the changes are sustainable.”

CHAPTER TWO

UNDERGRADUATE EDUCATION

Queen's University Belfast (QUB)

QUB and the Western Trust work collaboratively to achieve high quality education in medicine. Each year they develop and implement an appropriate clinical placement schedule that ensures the adequate provision of high quality teaching to enable students to acquire the skills and knowledge specified in the Medical School's learning objectives for both core and students selected elements of the course.

The Department of Health (DoH) acknowledged that the Trust demonstrated a commitment to delivering high quality clinical teaching for students in their 2016/17 report and that the Sub Deanery structures are now well established and this staff network is critical to the success of organising, delivering and resolving problems for all aspects of undergraduate teaching. The report also highlights that teaching innovations are emerging. Facilitating the development and roll-out of these across the region will be a priority.

The Department of Health, Northern Ireland, is responsible for supporting the delivery of the five years of clinical training for medical and dental students undertaking the University's degree programmes. The Trust supports the delivery of training to years three, four and five.

The medical students rotate through a variety of specialties during their placements at the Trust. The table below summarises undergraduate teaching delivered by our hospitals.

Year	Specialty	Northern Sector	Southern Sector
3	General Medicine	YES	YES
3	Cardiology	YES	YES
3	Endocrinology	YES	YES
3	General Surgery	YES	YES
3	Musculoskeletal	YES	
3	Ophthalmology	YES	
3	Otorhinolaryngology	YES	
3	Haematology	YES	
3	CPC	YES	YES
3	Mechanisms of Disease Tutorials	YES	YES
4	Ageing & Health	YES	YES
4	Obstetrics and Gynaecology	YES	YES
4	Healthcare of Children	YES	YES
4	POEM – Anaesthetics	YES	YES
4	POEM - Emergency Medicine	YES	YES
4	Fractures	YES	
4	Radiology	YES	YES
4	Psychiatry	YES	YES
5	Cardiology	YES	YES
5	General Medicine	YES	YES
5	General Surgery	YES	YES
5	Accident & Emergency	YES	
5	Intensive Care		YES
5	Orthopaedics	YES	
5	Final Year Clinical Assistantship	YES	YES

In phase three students must undertake two Student Selected Components (SSC) at the beginning of each semester. Components consist of a three week period of supervised study. They have been designed to encourage a diversity of approach and provide students with the choice and opportunity to explore particular interests in more detail. SSCs also develop attitudes and practical skills appropriate for the practice of medicine.

Thanks to the interest and dedication of consultant staff in various specialties the Trust offered a number of SSCs in various disciplines which have been well received. These included:

Western Trust – 2016-2017				
Monday, 5 – Friday 23 September 2016				No
1	Altnagelvin	Dr Amir Ketabchi	The Face of Surgery	4
2	Altnagelvin	Dr Kathleen Mulholland	An Introduction to Pathology	8
3	Altnagelvin	Dr Stephanie Bolton	Inpatient Nephrology	2
4	Altnagelvin	Dr Sandara McNeill	Obstetrics & Gynaecology	1
5	South West Acute Hospital	Mr Abdelrahman Mageed	Clinical Skills in Obs & Gynae	2
Semester Total for September 2016			Number of SSCs	5
			Number of students	17
Monday, 9 – Friday, 27 January 2017				No
6	Altnagelvin	Dr Kathleen Mulholland	An Introduction to Pathology	4
7	Altnagelvin	Dr Frank McCarroll	Inpatient Nephrology	2
8	Altnagelvin	Dr Philip Gardiner	Rheumatology	4
9	Altnagelvin	Dr Sandara McNeill	Obstetrics & Gynaecology	2
10	Altnagelvin	Mr Amir Ketabchi	The Face of Surgery: An Insight into Maxillo-Facial Surgery	4
Semester Total for January 2017			Number of SSCs	5
			Number of students	16
Total SSC Numbers for Western Trust for 2016-2017			Number of SSCs	10
			Number of students	33

The Supplement for Undergraduate Medical and Dental Education (SUMDE)

The SUMDE SLAs are tripartite agreements between DoH, Trusts and Queen's. They set out the framework for delivery of undergraduate medical education within the Health Service.

SUMDE is used to offset the cost to the Health Service of having undergraduate medical students present in the clinical environment, It is not a payment for teaching. The SUMDE Medical Accountability Report is commissioned by the Department of Health (DoH). It sets out the activity and outcomes contributing to the way in which Trusts use SUMDE to support medical undergraduate teaching

SUMDE funds the delivery of clinical teaching for up to 236 medical students per year of study per annum. Student numbers are reported annually through the Accountability Report to inform medical workforce data, to monitor critical fluctuations in the student cohort which may impact on SUMDE allocations and to identify important trends in entry criteria and progression.

It is normal to have some students temporarily suspended from the course in-year. This may be due to ill-health, exam failure or for personal reasons. A very small number of students withdraw permanently from the course. This results in the student cohort deviating from the commissioned number of 236. However, progression and retention rates were generally high across the programme.

The number of students enrolled in each cohort at the beginning of Academic Year 2016-17 is presented in Table 2. International Medical University (IMU) students enter the course in Year 3, form part of the international cohort and are included in the international student numbers.

Students Enrolled in Academic Year 2016-17			
Year	Home/EU	International	(of which IMU)
Year 3	240	36	(10)
Year 4	226	31	(9)
Year 5	208	32	(11)

Table 2 - Students enrolled in Academic Year 2016-17

The undergraduate medicine programme attracted students with excellent A Level grades and graduates with 2:1 or First Class Honours degrees.

238 students graduated at the end of Academic Year 2016-17. The number of students graduating with honours is comparable to other institutions.

SUMDE Funding

A total of £32.3m Medical SUMDE was awarded in Financial Year 2016-17, an increase of £42.5k from Financial Year 2015-16. In Financial Year 2016-17, Trusts received the sums set out in Table 1.

Trust	SUMDE 2016-17
Belfast	£17,426,388
Northern	£1,811,079
South Eastern	£1,918,648
Southern	£1,939,530
Western	£2,290,484
Total	£25,386,130

Table 1 - Distribution of SUMDE to Trusts in Financial Year 2016-17

Remaining money (£6.9m approx.) was awarded as Dental SUMDE, University costs and teaching in General Practice. Teaching in General Practice received an additional £350k to reflect the increased clinical teaching activity in Primary Care.

Queen's received £464,507 SUMDE to partially offset the running costs of CSEC. SUMDE spend for CSEC was detailed in the Annual Statement of Expenditure which is reviewed by DoH as part of the annual SUMDE Accountability Report process.

While emphasis was placed on clinical teaching outcomes, the trust is still expected to observe the correct management of SUMDE and in particular, that costs attributed to SUMDE reflected

undergraduate activity and that proportionate funding was drawn from service and postgraduate budget lines where applicable.

Quality Assurance Systems and Processes

The quality management process continues to develop with the revision and refining of underpinning standards, specifications and procedures, though a more focused and planned approach. This allows the Trust, in collaboration with Queen's University Belfast (Queen's), to ensure that they are clear on their obligations under the SUMDE Service Level Agreement (SLA). This in turn will assure DoH that SUMDE is being used to deliver appropriate outcomes in the support of undergraduate medical education.

Student satisfaction with the medicine course was gauged through various questionnaires and surveys. As approximately 60% of the course is delivered within the Health Service sector and funded by SUMDE, the importance of high satisfaction levels with Health Service clinical teaching cannot be overstated.

GMC National Student Survey

National Student Survey (NSS) in Academic Year 2016-17 indicated that students were satisfied with all eight domains. Student feedback of the programme remains above the sector average and six out of the eight domains scored over 80%. The overall student satisfaction rating for the programme in 2016-17 was 93%, similar to 2015-16.

The NSS scoring for Assessment and Feedback has increased from 72% in 2015-16, to 76% in 2016-17 – the best result for this domain to date. During Academic Year 2016-17, academic portfolio mentors from Years 2 to 5 discussed each student's academic transcript during mentoring meetings. Centre for Medical Education (CME, Queen's) is planning to offer training in effective feedback techniques to Trust staff involved in undergraduate teaching in 2017-18.

QUB Comments on Trusts' Clinical Teaching

Queen's submitted a detailed analysis of student feedback to the trust, highlighting positive and negative comments from questionnaires, in-year Clinical visits to Trusts and from Staff Student Consultative Committees (SSCC) held at the University.

Queen's will monitor teaching for the specialties presented in Table 2. These specialties were selected due to low quality of teaching ratings or where students had highlighted a specific issue requiring resolution.

Trust	Hospital	Year	Specialty
Western	Altnagelvin Hospital	5	Surgery
Western	SWAH	4	Obstetrics & Gynaecology

Table 2 – Specialities to be monitored by Queen's for Academic Year 2017-18

Good Practice in Undergraduate Education

- Employment of Teaching Fellows was continued in both sectors of the Trust. A Lead Teaching Fellow was recruited.
- Teaching Fellows supplemented and supported clinical teaching in all years. They also created additional programmes to enhance learning particularly in Medicine and Surgery.
- The Teaching Fellows also facilitated Mock OSCEs in the evenings prior to exams. These were supported by junior doctors and students in other year groups.

- Teaching Fellow provided a Psychiatry Day for Finals examination. This was well received with enquires about attendance coming from students not attached to Western Trust.
- Medical and Dental Application Software (the MDE App) was available to students. It offered a range of features including teaching updates, class scheduling, room booking, opportunity to chat to colleagues, maps, timetables, key documents. This enhanced the learning culture and provides solutions in a student-friendly and modern way.
- Recruitment of a Simulation Lead and Clinical Nurse for education was agreed by the Trust.
- Additional Simulation equipment was purchased. Equipment-awareness sessions for students were provided by a Technical Support Officer.
- Medical Staff delivered 'SimMan' teaching for Year 4 and Year 5 Emergency Medicine students. Feedback was very positive. This demonstrates an innovative teaching approach in a specialty which, due to the nature of service provision, can be difficult to deliver to students in a consistent manner.
- In preparation for Foundation Year, Final Year students were invited to the Trust Managing Tracheostomy Emergencies course. Students reported very useful teaching and increased confidence.
- Multi-professional Simulation sessions with nursing staff were undertaken by medical students. This developed team working skills.
- The PAL teaching continued with Foundation Doctors teaching Final Year students. This work won a GAIN/RQIA prize in October 2015 and was presented at ASME in November 2016.
- Following Final Exams, Year 5 students led on the PAL programme delivery to Year 3 students.
- A number of students were supported by the Trust to attend the INMEDs conference in Belfast Hilton to showcase their project on Year 3 Mock OSECs. This stimulates interest in teaching and builds capacity for future teachers in the Health Service.
- Assistantship students participated in the Trust-wide Quality Improvement Day. Students presented their work orally or as posters. Topics included audit, teaching programme development and research and quality improvement. Prizes were awarded for best project.
- The huge efforts of staff in planning, coordinating and delivering the Assistantship Programme was highlighted. Skills in audit and quality improvement were also developed during this period through assigned projects.
- The Pharmacy Workshop, including prescribing and preparing injectable medicines continued to run. Student feedback is used to evaluate and refine the Pharmacy programme.
- Identifying Good Practice for Western Trust, Queen's described that students felt part of the clinical team in all specialties in SWAH and that they appreciated the additional clinical skills teaching offered by junior medical staff out of hours in Altnagelvin.

DOH Actions arising from 1617 Accountability Report for which Western Trust is responsible.

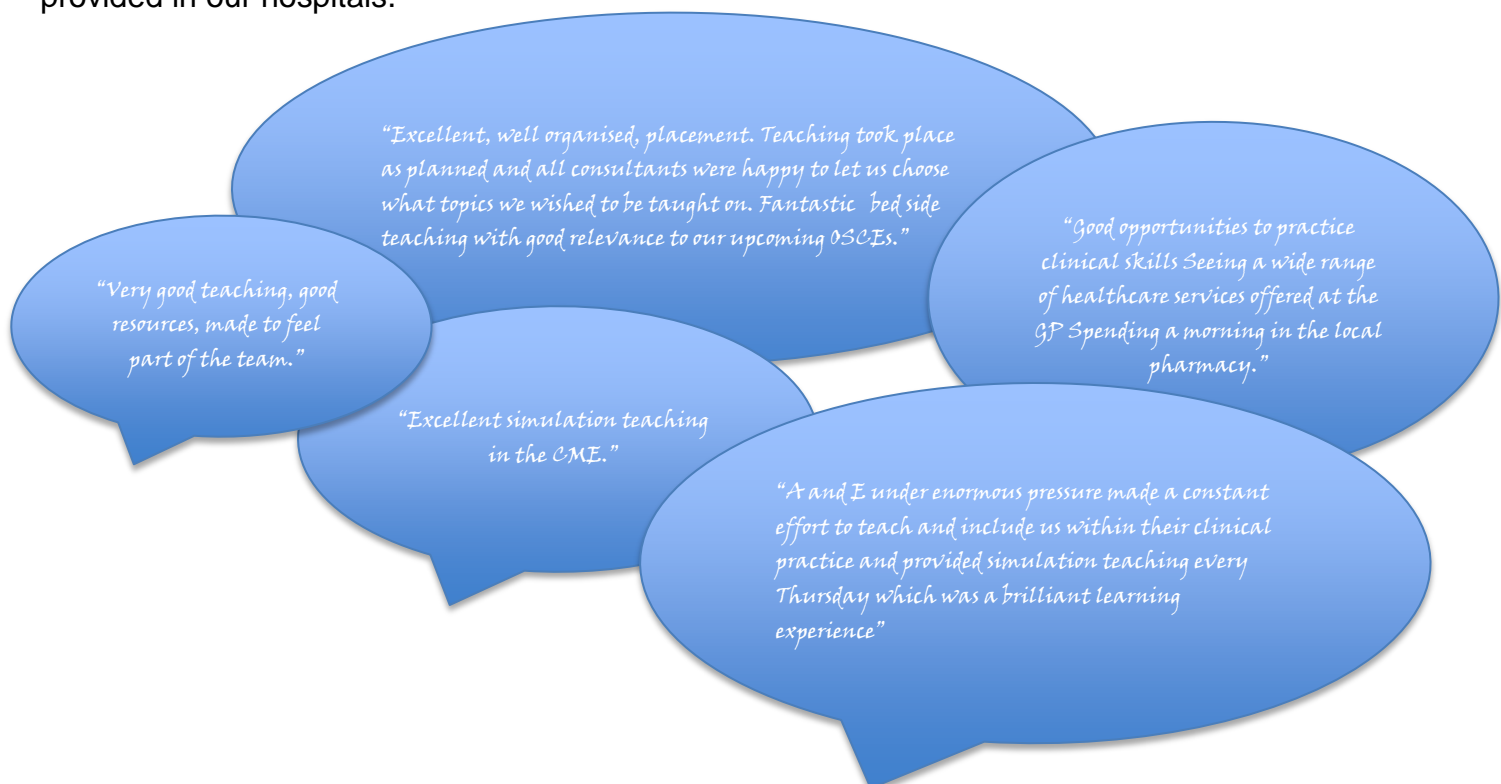
Report	1617 Recommendation	Major/Minor Recommendation
<p>The General Medical Council (GMC) inspects all medical courses, including the activity within the Health Service, to determine compliance with agreed standards. Results of inspections are published to enhance public confidence that graduates will be well prepared and suitably trained for practice. The GMC visited Queen's and Trusts in April 2017. The report will be published in autumn 2017.</p>	<p>The Trust should report on how recommendations relating to clinical placements from the GMC visit in 2017 have been implemented.</p>	<p>Minor– report in next AR</p>
<p>Year 4 Obstetrics & Gynaecology at SWAH received poor student feedback. The Trust provided an acceptable action plan for 2017-18.</p>	<p>The Trust should continue to monitor student feedback in 2017-18 to ensure student satisfaction continues to improve.</p>	<p>Minor - local resolution as is being monitored by Queen's and Trust</p>
<p>Year 5 Surgery at Altnagelvin Hospital received poor student feedback mainly based on lack of teaching sessions. The Trust provided an acceptable action plan for 2017-18.</p> <p>Year 5 feedback from surveys and discussions at Clinical visits in 2016-17 indicated that students wished for more formal teaching. It was agreed at the meeting of CME/Sub Deanery/Foundation Director Working Group that Year 5 students in 2017-18 would receive two hours formal teaching per week during attachments.</p>	<p>The agreement to provide two hours formal teaching per week during Year 5 attachments is noted.</p> <p>Queen's and Trusts should make clear the extent of formal teaching to be expected in Year 5.</p>	<p>Minor – clarification for students. Could be worked in as a preamble to the Feedback question.</p>
<p>Recruitment of a Simulation Lead and Clinical Nurse for education was agreed by the Trust.</p>	<p>The Trust should report on progress with these appointments.</p>	<p>Minor – report in next AR</p>

Report	1617 Recommendation	Major/Minor Recommendation
Students should raise issues locally so that Trusts have the opportunity to address concerns immediately. The Trust asked that Queen's encourage students to report issues locally	Queen's and Trusts should highlight the importance for students to raise issues locally as part of the induction (i.e. whilst on clinical attachment to the Clinical Lead or responsible teacher) so that Trusts have the opportunity to address concerns immediately at a local level.	Minor – clarification for students.
The Trust upgraded Wi-Fi provision in Altnagelvin accommodation during 2016-17. There were some initial operational issues. Further upgrades for Altnagelvin and SWAH have been proposed for Academic Year 2017-18.	The Trust should ensure that the upgrades in Academic Year 2017-18 to the Wi-Fi connection on both sites meet students ICT access requirements whilst on placement.	Major

Student feedback

Infrastructure for students on clinical placement was monitored through student feedback. Findings, actions taken and outcomes were recorded. In general, outcomes were good. Some complaints relating to issues with internet access were continually raised. High quality, reliable information and Communications Technology (ICT) access is a key component for the delivery of medical education. It is important that the Trust continues to invest in this area to keep abreast of ICT developments.

The Trust received very positive feedback from medical students in relation to the teaching provided in our hospitals.



"We had plenty of variety in our timetable between clinics, ward rounds and tutorials. We had teaching in all of the key areas and everyone was so willing to teach us on the ward and in the community. Everyone was so friendly and willing to accommodate us when we visited the ward as well. I haven't heard of any other attachment that was as good as ours"

"Staff welcomed us to the department and were keen to teach. We were included as part of the clinical team, and had opportunities to see and examine a variety of patients. The opportunity to practice these skills proved useful as revision for our final exams."

QUB Visits

The annual QUB visits by Professor McKeown & Mairead Boohan to Altnagelvin and SWAH took place in November 2016 and March 2017. The themes for the visit were:

- Induction and orientation for students on arrival for clinical placements
- Opportunities for interviewing patients
- Opportunities for examining patients
- Arrangements for ensuring students receive feedback on performance

QUB reported that the visits were very enjoyable. Overall, the visits were very productive, which provided a good opportunity for discussion between all those attending and it was clear that students are generally well pleased with the quality of educational opportunities and supervision which they receive during the placements in the Trust. The students highlighted the excellent support provided by the Sub Deanery/Medical Education staff.

Undergraduate Teaching Fellow

Medical Education was able to expand on the highly successful undergraduate teaching fellow programme with eight trainees fulfilling this role.

Name	Grade	Specialty
Lead ALT		
Dr Linda Irwin	CT3	Psychiatry
Lead SWAH		
Dr Eamon McCarron		Medicine
Dr Lauren Hackney	CT1	Surgical
Altnagelvin		
Dr Carolynne Doherty	ST6	Neurology Reg
Dr Louise Cousins	ST3	General Surgery
Dr Tanmoy Chakrabarty	ST4	General Paediatrics 5
Dr Andrew Walls	ST4	Trauma & Orthopaedics
Dr Dermot Linden	ST4	Respiratory Reg

The Teaching Fellows continued to provide assisted learning to years three and five medical students, as well as Foundation level trainees.

Aims of the role:

- Providing a senior medical presence for undergraduate students
- Someone who would be consistent

- Point of contact for students
- Someone able to manage and develop clinical as well as non-clinical skills
- Someone who would look at the overall holistic concerns of students

The role has involved assisting in both third year Surgery and third year Medicine placements, identifying additional learning needs and improving on basic skills like cannulation, ABGs, etc. utilising the new training ward and simulation and clinical skills equipment.

However, the most crucial part of the role has been to assist final year students throughout their year with a variety of tutorials and a Psychiatry day in the run-up to finals organised by the Lead Teaching Fellow, Dr Linda Irwin:

Psychiatry Teaching Day for Final Year Medical Students 18/1/17

09:00-09:30	Registration
09:30-09:45	Session 1
Dr Irwin	Introduction
09:45-10:30	Session 2
Dr Duffy	Psychopharmacology
10:30-11:15	Session 3
Dr Kelly	Mental Health Order NI, Capacity, Managing aggression, Alcohol Dependence
11:15-11:30	Tea break
11:30-12:15	Session 4
Dr Hutchinson	Psychosis- Schizophrenia
12:15-13:00	Session 5
Dr Irwin	Mood Disorders
13:00- 14:00	Lunch
14:00-15:00	Session 6
Dr Forgie	Psychiatry of Old Age, Dementia, Delirium
15:00- 15:30	Session 7
Dr Duffy	Eating Disorders Personality Disorders
15:30-15:45	Tea Break
15:45-16:15	Session 8
Dr Irwin	Anxiety Disorders, ADHD, Autism
16:15-16:30	Questions/Feedback

Feedback below speaks for itself!



Teaching Fellow Review

"I enjoyed my role. The role allowed me to develop simulation within Altnagelvin and allowed me to use the American models of simulation feedback in paediatrics. I loved the easy access to video feedback, huge benefit in Altnagelvin!"

I feel speciality teaching fellows should concentrate on developing their own field...looking at the medical education evidence and developing curriculums out of this in both post and undergraduate teaching. 'on the job' learning in a relatively controlled environment and has the potential to get more staff involved.

This teaching fellow post allowed me to take on big teaching projects with excellent equipment at hand and make use of the literature in doing so. Being able to have a set afternoon a week meant this didn't affect clinical duties (rarely). I'm glad I was able to augment the Queens set teaching.

Genuinely enjoyed the role and highly recommend it to others interested in medical education.

Thank you Neil & Sinead, the funding your department provided me, helped me to pass my MSc in clinical education at QUB with distinction. Without your funding, this would not have been possible".

(Dr Jonny Henderson)

Peer Assisted Learning (PAL) and OSCE Preparation

The PAL programme continues to grow and develop year on year. F1 trainees provide assistance to final year students in the form of a PAL programme and mock OSCEs. This programme works extremely well as final year pressures and expectations are still fresh in the minds of F1 trainees and they are able to draw on their experience of teaching and exams during their last year at university.

The F1 delivered programme began in October and involved twice weekly lunchtime teaching for final year students. These sessions are evaluated to enable F1 trainees to provide evidence of teaching in their e-portfolios. This role was assisted by a programme led by teaching fellows, called the DUCT programme (Developing the Undergraduate Clinical Teacher) for F1 trainees. This programme is in its second year and provides F1 trainees with skills to enhance teaching offered to final year students.

Altnagelvin Hospital F1 to Final Year Programme:

Date	Time	Topic	Presenter
10/10/2016	12.30pm	PAL introduction	Dr Phil McCaughey
12/10/2016	12.30pm	Diabetes	Dr Linda Doherty
19/10/2016	12.30pm	Medical emergencies for finals	Dr Daniel Harbinson/Dr Mark McFerran
24/10/2016	12.30pm	Interpretation of CXR	Dr Laura McFaul
26/10/2016	12.30pm	ACS and valvular disease	Dr Sam Lockhart
31/10/2016	12.30pm	Fractures	Dr Aisling Devine
02/11/2016	12.30pm	ECG interpretation	Dr Sam Lockhart
09/11/2016	12.30pm	Hyperkalaemia	Dr Clare Toner
14/11/2016	12.30pm	AKI and CKD	Dr Sam Lockhart
16/11/2016	12.30pm	Paediatrics	Dr Emma Philson/Dr Shauna Wilson
21/11/2016	12.30pm	Blood Transfusions	Dr Kate O'Hara
23/11/2016	12.30pm	ABGs for dummies	Dr Kavi Manektalla
28/11/2016	1-5pm	OSCE Practice	Dr McCorkell/Dr Abigail Nelson
30/11/2016	12.30pm	Obs and gynae for finals	Dr Bernadette Kevin
05/12/2016	12.30pm	Stomas & Pancreatitis	Dr Sarveen Maniarasu
07/12/2016	12.30pm	Ophthalmology	Dr Caoimhe Henry

12/12/2016	12.30pm	Neurology for finals	Dr Daniel Harbinson/Dr Mark McFerran
14/12/2016	12.30pm	Rheumatology	Dr Daniel Harbinson/Dr Mark McFerran
15/12/2016	6-9pm	Mock OSCE Evening	Dr Emma Philson/Dr Shauna Wilson
11/01/2017	9am-5pm	Surgery for Finals	Dr Man Chi Lau
18/01/2017	9am-5pm	Psychiatry for Finals Day	Dr Linda Irwin
23/01/2016	12.30pm	Ophthalmology/Dermatology	Dr Caoimhe Henry
25/01/2017	12.30pm	Psychiatry for finals	Dr Bernadette Kevin
25/01/2017	5-8pm	Mock OSCE Evening	Dr Sam Lockhart/Dr Phil McCaughey
30/01/2017	12.30pm	Acute Abdomen	D Phil McCaughey

South West Acute Hospital F1 to Final Year Programme:

Date	Time	Topic	Presenter
14/09/2016	5.00 pm	Cardiology - Endocarditis	Dr Nathan McSorley F1
19/10/2016	5.00 pm	Hyperkalaemia & Fluid balance	Dr Brona Walsh
25/10/2016	5.00 pm	Peripheral vascular disease	Dr Christine Loughran
26/10/2016	4.30pm	Basic Life Support	Dr Laura MacDonnell & Dr Ellen Toner
27/10/2016	1.00 pm	Insulin prescribing and scale	Dr Michael Corr
01/11/2016	4.00pm	Sepsis	Dr Michael Corr
03/11/2016	5.00 pm	Cardiovascular Examination	Dr Gillian King & Ellen Toner
18/11/2016	12 Noon	Respiratory	Dr Nathan McSorley F1
17/11/2016	2.00pm	Bedside Teaching	Dr Laura MacDonnell
17/11/2016	4.30pm	Basic Life Support	Dr Laura MacDonnell & Ellen Toner
01/12/2016	5.00pm	Stroke	Dr Aaron Johnston
01/12/2016	3.00pm	Surgical Ward Lessons & Communication Test	Dr Michael Corr
02/12/2016	11.30am	Abdominal X-rays	Dr Lauren Hackney CT1
15/12/2016	2.30 pm	OSCE Session for 5th years	Dr Eamon McCarron & F1's
21/12/2016	5.00pm	Mock OSCE Session for 3rd years	Dr M Corr, Dr MacDonnell, Dr McGartland, Dr Toner, Dr Cairns, Dr Donnelly, Dr King, Dr Sin, Dr Walsh
19/01/2017	5.00pm	Mock OSCE Session for 5th years	
01/02/2017	3.00pm	Rheumatology	Dr Gillian King F1
02/02/2017	6.00pm	OSCE Session for 5th years	Drs Christine Loughran/Cathal Donnelly/Jerry Sin/Laura McGartland/Laura MacDonnell/Catriona Jordan/Michael Corr/Gillian King
03/02/2017			Dr Jessica Mulholland F1
08/02/2017	2.30pm	Bedside Teaching	Dr Michael Corr

The teaching took place during the F1s trainees' own time and was very gratefully received by final year students. Medical and Dental Education would also like to thank the trainees for their generosity and professionalism.

This programme has proved so popular in recent years that the concept has become embedded in final year students who, in turn, developed a programme to make use of their final year experience (having just completed their final written exams and OSCEs) to pass on proficiency to third and fourth years to practically assist in preparation for their end of year exams.

The Final Year Clinical Assistantship delivered programme was led by two final year students and involved twice weekly lunchtime teaching for third year students.

Peer Assisted Learning (PAL): 5th year to 3rd year

Abstract

Peer assisted learning (PAL) has been identified as "the development of knowledge and skills through active help and support among status equals or matched companions" [1]. Through this small project we assessed if PAL did indeed enhance student confidence and skills in a range of clinical topics. Through the use of a simple likert scale questionnaire before and after the teaching programme, we found a significant positive correlation between confidence and skills after PAL sessions. Students were also very satisfied with how the course was delivered in terms of presenters and location.

While this was a relatively low-powered study, feedback and review of the scheme would allow easy roll-out across all trusts to improve undergraduate education for third year students, thus increasing confidence and competence as they prepare for their written and clinical examinations

Introduction

During our Assistantship programme in Altnagelvin we established a PAL scheme with the third year medical students on placement in the hospital. A standard cohort of 16 students, comprising those on general medical and surgical attachments, plus additional students on short placements, e.g. 3 week musculoskeletal attachments were invited to participate in the scheme.

As two final year students with a keen interest in medical education this scheme afforded us the opportunity to develop our own skills, both in teaching and organisation, alongside the standard F0 programme. By undertaking teaching and training we are adhering to the GMC guidelines outlining the duties of a doctor, in that we should be "prepared to contribute to teaching and training of doctors and students". [2]

Through the PALs scheme we hoped to:

- Promote medical education through peer teaching
- Develop the knowledge, skills and confidence of third year medical students
- Improve and enhance the educational experience of the students involved
- Increase and improve our own teaching and communication skills

Third year students wishes for the programme:

- "More tailored teaching towards exams and better opportunity to ask questions"
- "Clinical skills teaching"
- "Confidence; knowing what level of knowledge is expected"



Methods and Materials

The PAL scheme was conducted over 5 weeks, with twice weekly one-hour sessions in the the Centre for Medical Education. In general, one session per week focused on clinical theory, and the second on relevant clinical skills.

An initial questionnaire was distributed to the group to establish a baseline of how the group currently felt about a range of topics, with a free text box to highlight any specific areas they would be keen to cover.

A broad range of topics were chosen including: cardiovascular theory and clinical skills, respiratory theory and clinical skills including CXR and ABG teaching, fluid prescribing, sepsis and hyperkalaemia. Students were keen to discuss these topics in relation to how they might be presented in both the written paper and in an OSCE setting.

A second questionnaire was circulated at the end of the five week programme to assess if students felt any better prepared for their exams, and to allow us to establish any correlation between PAL teaching and student confidence.

Results

Using a Likert scale (Table 1) we assessed how the students felt following their PALs teaching. All students either "Agreed" or "Strongly Agreed" with each question.

Each subject covered in the PALs scheme was assessed, and comparisons made with pre- and post-course confidence (Chart 1). Statistically, the results are significant, with a p value of <0.0001, confirming that there is a significant difference in confidence of third year medical students after engaging in a PAL scheme

Table 1. Evaluation results post PAL

	SD	A	SA
The Presenters			
The presenter communicated the information clearly			100%
The presenter engaged the audience			100%
The presenter made the subject matter compelling	7%	93%	
The PAL Sessions			
The session was relevant to me	7%	93%	
The session was interesting			100%
The session content was meaningful for me	7%	93%	
The session met my purpose for attending			100%
The session was related to skills and knowledge I needed	7%	93%	
The session motivated me to take action	7%	93%	
The session was well organised	7%	93%	
The hand-outs and supporting material were useful			100%
The Venue/ Equipment			
The venue was conveniently located	7%	93%	
The venue was well equipped	7%	93%	
The venue was appropriate for the learning session	7%	93%	
The duration of the session was right for me	7%	93%	

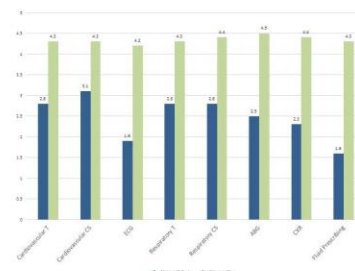


Chart 1. Confidence by clinical topic before and after PAL

Discussion

Overall the PAL scheme was very successful. Students were given the opportunity to comment in the questionnaire. Some comments we received included:

- "Excellent preparation for OSCE's & revision for written exams"
- "Really nice of you to help us, thanks very much"
- "Great teaching especially because it came from senior students"

The statistically significant results from confidence evaluation confirm that a PAL scheme is an excellent way at improving student skills and belief in themselves when preparing for written exams and OSCEs.

For further development, comments were again welcomed from the third year students; these included:

- "More sessions"
- While the programme was limited to five weeks with the constraints of F0, potential for development of sessions earlier in the year is being considered for future years, potentially with the involvement of F1 doctors.

Conclusions

Overall the PAL scheme had a very positive outcome, with statistically significant findings. The power of the project however, was relatively low due to both time constraints and the number of third year students available to participate. In future we would recommend the same project being run as students, both final year and third year benefit greatly from it.

The project format is easily replicated and could potentially be rolled out across other trusts to give all students the same opportunities prior to exams, and allow final year students overall to improve their presentation and teaching skills in line with GMC recommendations. This is mirrored in the feedback for how the scheme could be improved.

Overall, we found the scheme to be very worthwhile, and increased our confidence as teachers and presenters with such positive comments from the students participating.

Contact

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References

1. Topping KJ: The effectiveness of peer tutoring in further and higher education: A typology and review of the literature. Higher Education (Historical Archive). 1996, 32: 321-345.
2. GMC Duties of a Doctor

Surgical Skills Day

A new addition to the final year teaching this year included a Surgical Skills mock OSCE day in Altnagelvin:

Final Year OSCE Revision 11.1.2017

Course Organiser: Ms Man-Chi Lau

Deputy Organiser: Ms Hannah Anderson-Ong

Faculty Members: Dr Jessica Wauchope, Dr Ben Kelly, Dr Matthew McCall

	09:00	Introduction					
AM session (09:15-11:15) (4 groups of 6)	09:15	Circuit 1			Circuit 2		
		Group A	History	Group C	Unmanned stations 1		Group D
			Comm skills		Unmanned stations 2		
		Group B	Comm skills				
	10:15	Group C	History	Group A	Unmanned stations 1		Group B
			Comm skills		Unmanned stations 2		
		Group D	Comm skills				
			History				
	11:15	BREAK					
	11:30	Answers to unmanned stations					
	12:15	LUNCH					
PM SESSION (13:00-17:00) (6 groups of 4)	13:00	Station 1	Station 2	Station 3	Station 4	Station 5	Station 6
	13:40	Group A	Group B	Group C	Group D	Group E	Group F
	14:20	Group F	Group A	Group B	Group C	Group D	Group E
	15:00	Group E	Group F	Group A	Group B	Group C	Group D
	15:40	Group D	Group E	Group F	Group A	Group B	Group C
	16:20	Group C	Group D	Group E	Group F	Group A	Group B
	17:00	Group B	Group C	Group D	Group E	Group F	Group A
		Recap of station 6 and close					

Feedback from this day was hugely positive and we pass on our thanks to Dr Man-Chi Lau who organised the day for final years.

Final Year Clinical Assistantship/Workshadowing

A student assistantship is a type of clinical placement. It is designed to increase the preparedness of the medical student to start practice as an F1. Although some direct care of patients is implicit and necessary, it is primarily an educational experience that provides a number of hands-on learning experiences that allow the medical student to gain experience of working within clinical settings and practise clinical skills. Medical students are integrated into a clinical team while on a student assistantship.

The main aim of the final year Clinical Assistantship is to facilitate the safe transition from medical student to Foundation Year One doctor (FY1). The final year student will become an integrated member of the ward team, linked with an FY1. The programme took place for nine weeks from March 2017 to include a one week in GP practice.

All final years have a Trust appointed supervisor who conduct regular meetings to check progress and complete supervisor reports. Under direct supervision they will be involved in: clerking patients, practical procedures, managing acutely ill patients, prioritising patients and tasks, working shifts (including out of hours), managing patients' paperwork, prescribing on a facsimile. They also carry out Mini-CEX (Mini Clinical Evaluation Exercise) and DOCPs (Direct Observation of a Core Procedure).

Final years cannot sign forms, requests or prescriptions, cannot perform procedures without the patient's consent and supervision by a competent supervisor.

For the third consecutive year, Medical and Dental Education have organised an Undergraduate Symposium for Final Year Clinical Assistantship students to enable them to get involved in QI projects in anticipation of their F1 year starting in August. This year's Symposium continued to be a great success:

Undergraduate Symposium
Thursday 11th May 2017

1.30pm – 4.00pm

Running Order:

Number	Site	Students	Project title
1	ALT	Sarah O'Donnell Jack McCartie Paddy McCourt	<i>Simulation</i>
2	ALT	Michael Hodkinson Catherine Conway	<i>Fluid Balance Project</i>
3	SWAH	Sean McMahon Hollie Wilson Joseph McConville	<i>How we can reduce opioid-induced constipation by co-prescribing laxatives prophylactically</i>
4	ALT	Samara Fleville John Gill Naomi Burns	<i>Improving Anticoagulation Safety</i>
5	ALT	Fiona Hamill Paul Traynor	<i>Peer Assisted Learning (PAL): 5th year to 3rd year</i>
6	SWAH	Sarah Brown Laura-Jane Mahon	<i>Laparoscopic skills in core surgical trainees in South West Acute Hospital</i>
7	ALT	Emma Samouelle Amy O'Neill Eimear Reel	<i>Pregnancy Tests for Female Surgical Patients of Childbearing Age</i>
8	ALT	Aine Canavan Maliyah Mohamad Binti	<i>DNAR</i>
9	SWAH	Alan McCrorie Muhammad-Aizaz Chaudhry	<i>Exam Simulation: Creation of 4th Year Single Best Answer Questions for End-of-Year Exam Preparation</i>
10	ALT	Caroline McCusker Michael Grant Natalie Atalla	<i>Fluid teaching and the 3rd OSCE</i>
11	ALT	Emma McAuley Aodhan McGillian	<i>Antibiotic prescribing on the Kardex</i>
12	SWAH	Ashley Carvalho Angelica Kelly Laura Carroll	<i>Setting standards in surgical site infections in the South West Acute Hospital</i>
13	ALT	Cathal O'Hagan Sarah White	<i>Audit of Venous Thromboembolism Risk Assessment for Hospitalised Adults</i>
14	ALT	Kermon Kahlon Maureen Kevin Chris McCloone	<i>A study looking at how confident and prepared the 4th year students are for the end of year OSCE</i>
15	ONC ALT	Michael Grant	<i>Standardised Oncology MDM Referral Forms: a project to improve information completeness</i>
16	ALT	Catriona Crilly Maeva Durand	<i>Fluid balance: Improvement of Monitoring using Traffic Light System</i>

Winners:

Best Project



From left: Dr Linda Irwin, Lead Teaching Fellow, with Best Project Winners: John Gill, Naomi Burns, Samara Fleville.

Best Audit



From left: Best Audit Winners: with Dr Linda Irwin, Lead Teaching Fellow.

Best Poster



From left: Dr Linda Irwin, Lead Teaching Fellow, with Best Poster Winners: Naomi Burns, Samara Fleville, John Gill.

WHSCOT Final Year Assistantship 2017!



The workshadowing/assistantship programme has been going from strength to strength in the Trust. Final year students found their time on the Assistantship to be very valuable and the programme increased both their confidence and competence before commencing work as FY1 doctors. The Trust is delighted to have secured an additional 11 Foundation Year 1 (FY1) doctors that will join us in August 2016, which will bring the total complement to 45 FY0/FY1 doctors and an additional 15 FY2 doctors in August 2017.

Workshadowing for non-QUB Medical Students

Selection of posts for F1 doctors is a national process and the results of which were not known until April 2017 (several weeks after the beginning of the Assistantship). Therefore, it was not possible to guarantee placement of final year students in the hospital in which they would commence their F1. The Trust therefore facilitated an additional workshadowing programme in July for two weeks for new F1 trainees who have not been able to avail of the QUB Assistantship, as they were not placed in a Trust hospital or because they have not attended QUB.

The aim is to prepare new F1 doctors for their new role in a Trust hospital but also to create an F1 team ethos for their mutual support during a demanding and challenging year. The new F1 trainees come to the Trust from various universities all over the UK and Ireland and Medical and Dental Education use this two week workshadowing programme in July to bring all new F1 trainees together.

All incoming F1 trainees are offered workshadowing experience with outgoing F1 trainees for two weeks prior to handover. Most new F1s welcome this opportunity to refresh skills, get involved in ward duties and also complete practical requirements like haemovigilance assessment, IT training, etc.

Technology Enhanced Teaching Methods

Dr Athinyaa Thiraviaraj, 3rd Year Endocrinology/Diabetes Tutor

Since November 2016, diabetes modules have been delivered using technology enhanced (socratic) teaching sessions. The learning experience is facilitated using discussion questions that students can answer anonymously using their smart phones. A series of 8-10 questions are used to guide students through relevant learning points. The experience leverages adult learning styles and is designed to be engaging without intimidation of direct questioning. It also encourages inherent curiosity among the participants. Unexpected benefit has also been signals of healthy competition among participants where they compare their results against class 'average'.

Feedback on the teaching structure was sought from 15 participants (3rd year students) across three groups and summarised below.

Feedback Question 1:

How well did you understand today's content? Options:

- a) Totally got it
- b) Pretty well
- c) Not very well
- d) Not at all.

Conferences

Medical and Dental Education continues to fund FY1 doctors to attend Scholarly Educational Research Network (SERN), GAIN Annual Health and Social Care Quality Awards and the Irish Network of Medical Educators to show case their projects.

Learn International Visit

In March 2017, Learn International visited the Centre for Medical & Dental Education & Training in Altnagelvin Hospital. Learn International is a study abroad programme for 19 students and two faculty members from America studying healthcare at undergraduate and graduate level. The students come from a background of Nursing, Dental Hygiene, Physical Therapy, and Doctoral Nursing. The academic goals of the programme are to compare and contrast the NHS and HSE so, that students global knowledge expanded beyond the US healthcare system. Students also practice interprofessional teamwork and communication, while engaging in service learning/community service with a community centre in Donegal.

While visiting the CMDET, the students toured the facilities and participated in some simulations. The simulation technician was very helpful and guided the students thoroughly; he was wonderful. Later, they were given an information session so students could learn more about the NHS and hospital administrative operations in Northern Ireland. This learning experience was a highlight for the students and also, the faculty. They learned a lot and have another visit planned. Such an amazing experience. They absolutely loved it!



Student Elective Placements

The Trust continues to enjoy a good reputation for teaching medical students from other universities, from (local) students studying elsewhere in the United Kingdom, and from overseas students.

2016:

- Altnagelvin Hospital facilitated 22 placements.
- South West Acute Hospital facilitated 14 placements.

2017:

- Altnagelvin Hospital facilitated 21 placements.
- South West Acute Hospital facilitated 15 placements.

"I have thoroughly enjoyed my 2 weeks elective at Altnagelvin with Athinyaa, Frank and their teams. It has been a great experience. I would like to thank all of you for your time and effort for making this a very enjoyable and memorable experience for me.

I have attached a draft case report of an extremely interesting patient which I encountered during my time and hope this is a start for both me, the Endocrinology and Nephrology teams to hopefully produce a case report for publication.

I understand there is a lot of information still to be added and some more research to be done into the topic but I look forward to working with my supervisors on this project case report."

The Trust is only in a position to accommodate elective placements when QUB medical students are not residing with us due to pressures on accommodation and also the impact of the nine week Final Year Clinical Assistantship programme. We are grateful to the medical staff who supervised the elective placements.

We would also like to express our thanks to Dr Rodney Gamble and his Occupational Health department for their hard work in occupational screening all the elective placements.

Northern Ireland less dependent on non-UK graduates

Northern Ireland is less dependent on non-UK graduates than other countries and regions, with only 14% of licensed doctors having gained their primary medical qualification outside the UK. This is consistent with Northern Ireland training and retaining a greater proportion of its medical workforce, potentially due to its geographic separation from mainland UK and other factors.

Quality Assurance Systems and Processes

Student satisfaction with the medicine course was gauged through various questionnaires and surveys. As 60% of the course is delivered within the Health Service sector and funded by SUMDE, the importance of high satisfaction levels with Health Service clinical teaching cannot be overstated.

Royal College of Surgeons in Ireland (RCSI) Students

SWAH continues to provide high quality education to students from RCSI in third fourth and final year. Returning feedback reports are invariably of a very high and complimentary standard. SWAH and RCSI held another educational study in Respiratory Medicine in October 2017 with highly prestigious international speakers giving talks on various respiratory conditions. There was a great attendance from many disciplines within the Trust as well as those in the allied respiratory health services. It is hoped that this will follow on next year in 2018 with a similar meeting dedicated to cardiology. This venture continues to evolve and blossom and grow from strength to strength.

National University of Ireland Galway (NUIG) Students

The South West Acute Hospital continues to offer placements to students from NUIG in Galway completing the Junior Internship Training Programme with Dr Keegan as the Co-ordinator.

Students attended for three week allocations, spending time in Surgical and Medicine wards. Feedback from the students is always positive.

POSTGRADUATE MEDICAL & DENTAL EDUCATION

Role of the Northern Ireland Medical and Dental Training Agency

The Northern Ireland Medical and Dental Training Agency (NIMDTA) are sponsored by the DHSSPS to train postgraduate medical and dental professionals for Northern Ireland. NIMDTA commissions, promotes and oversees postgraduate medical and dental education and training. Its role is to attract and appoint individuals of the highest calibre to recognised training posts and programmes to ensure the provision of a highly competent medical and dental workforce with the essential skills to meet the changing needs of the population and health and social care in Northern Ireland. NIMDTA organises and delivers the recruitment, selection and allocation of doctors and dentists to foundation, core and speciality training programmes.

NIMDTA is accountable to the General Medical Council (GMC) for ensuring that the standards are set by the GMC for medical training, educational structures and processes are achieved. They assess the requirements and standards through a variety of methods:

- GMC National Training Survey (NTS)
- Deanery Visits to Local Education Providers (LEP)
- GMC visits and check visits
- Annual Review meeting
- Annual Review of Trainees' Progress (ARCP)

NIMDTA Funding 2016/17

Foundation and specialty training posts	£5,304,743
Non-recurrent full-time training posts	£418,782
Less than full-time training posts	-
Reduction for ancillary training costs incurred by NIMDTA	-£25,525
Reduction for Access NI fees	-£2,805
Non-pay costs (excess travel in lieu of removal)	£192,202
Administrative Costs	£35,020
Total	£5,922,417

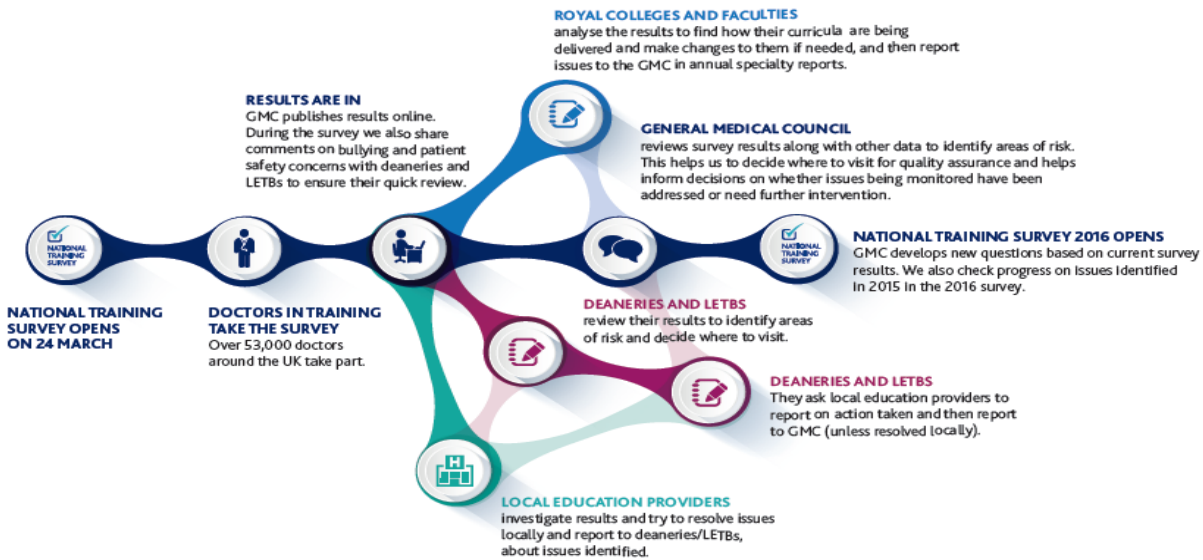
(Salary costs include employer NIC costs and employer superannuation costs based on 16.3%, there is no allowance for out of hours costs)

Additional NIMDTA funding of £342K was provided for GMC Trainer Recognition.

GMC National Training Surveys 2017

The national training survey is a unique opportunity for the whole trainee population to report back on their training. As part of the survey, trainees can also raise concerns they might have about patient safety or undermining. These aren't published, but are shared with deaneries/LETBs who review and share these with Trusts so they can investigate the issues raised.

How the national training survey helps to improve medical training – an overview



The results of the NTS 2017 post specialty by site and programme group by site are identified below.

24 Green Flags (19 Altnagelvin 5 SWAH) denoting excellence and **9 Red Flag (6 SWAH 3 Altnagelvin)** identifying areas of concern for the Trust.

An action plan for the Trusts' 'red flag' issues was formalised with ongoing quality monitoring from NIMDTA as part of the Quality Management Framework.

No Undermining & Bullying issues in any of the specialties had been identified.

Cardiology Altnagelvin		<ul style="list-style-type: none"> • Supportive Environment • Induction
Emergency Medicine Altnagelvin		<ul style="list-style-type: none"> • Team work • Handover • Supportive Environment • Educational Governance • Local Teaching
General Medicine SWAH	<ul style="list-style-type: none"> • Clinical Supervision • Clinical Supervision - OOH • Workload • Regional Teaching • Study Leave 	
General Psychiatry Altnagelvin		<ul style="list-style-type: none"> • Teamwork
General Psychiatry T&F		<ul style="list-style-type: none"> • Clinical Supervision OOH • Reporting Systems • Teamwork • Supportive Environment • Education Governance
General Surgery SWAH	<ul style="list-style-type: none"> • Regional Teaching 	
Geriatric Medicine Altnagelvin	<ul style="list-style-type: none"> • Clinical Supervision • Supportive Environment 	
O&G		<ul style="list-style-type: none"> • Local Teaching

Altnagelvin		
Eyes Altnagelvin	<ul style="list-style-type: none"> • Regional Teaching 	
Paediatrics Altnagelvin		<ul style="list-style-type: none"> • Reporting Systems • Teamwork • Handover • Supportive Environment • Adequate Experience • Curriculum Coverage • Educational Governance
Urology/ALT		<ul style="list-style-type: none"> • Overall Supervision • Reporting Systems • Teamwork

Local Education Provider (LEP) Report

The Trust completed and Local Education Provider (LEP) report and forwarded to NIMDTA. The annual Local Education Provider Reporting forms a key component of the Northern Ireland Deanery's Quality Management Framework.

The aims of the reports are to reassure the Deanery that Foundation and Specialty training across Northern Ireland meets GMC standards and to inform an on-going process of quality improvement in education and training.

The Trust and the Deanery (NIMDTA) work closely together to provide support and to ensure that systems for delivery of education and training are consistent across specialities and throughout the Trust. The Trust and the deanery meet regularly throughout the year.

The Trust is deeply committed to the highest standards of postgraduate education and each department has a structured programme in addition to the hospital wide opportunities. All junior doctors are expected to participate in Postgraduate education and their attendance is recorded. This will form part of their appraisal.

Deanery Visits

Deanery Visiting is a standard part of the quality assurance methodology to assess clinical and educational governance concerns.

During the visit the visiting team catalogues the finding into the following categories:

- Good Practice
- Areas for Improvement
- Areas of concern
- Areas of significant concern

- Areas for clarification

The team will determine the impact of each area of improvement or concern and will give consideration to recommendations for improvement. This will assist the Quality Management Group (QMG) with decisions in relation to the visit grade:

- A1 – Excellent
- A2 – Good
- B1 - Satisfactory
- B2 - Satisfactory(with conditions)
- C – Borderline
- D - Unsatisfactory –Not able to assess
- E – Unsatisfactory – Urgent action
- F – Unsatisfactory Unsafe training environment

NIMDTA (Northern Ireland Medical & Dental Training Agency) carried out visits to the WHSCT in the following specialties from May 2016 to June 2017 with the following outcomes:

Date	Specialty	Site	Type	Grade
5 May 2016	O&G	Altnagelvin	Enhanced Monitoring	E -unsatisfactory
6 May 2016	Paediatrics	Altnagelvin	Deanery	C Borderline
24 June 2016	Paediatrics	SWAH	Deanery	D1 : Unsatisfactory - Urgent Action.
26 Jan 2017	Ophthalmology	Altnagelvin	Deanery	A2 - good
23 Feb 17	Histopathology	Altnagelvin	Deanery	A2 - good
18 May 17	Obs&Gynae	Altnagelvin	Enhanced Monitoring	D1 Unsatisfactory
19 May 17	Psychiatry	Altnagelvin	Deanery	C Borderline

An action plan is provided on each of the specialty visits and reported into the NIMDTA quality management group.



SHAPE OF TRAINING

Professor Sir David Greenaway published a report (October 2013) recognising that medical training in the UK must adapt to changing patient need; equipping all doctors with the skills, competencies and aptitudes to work within new models of healthcare delivery. His report concluded that there is a clear need for change and made 19 recommendations. How these recommendations would translate into tangible actions, the implications for each country, and timescales for implementation now forms the basis of a new report from a UK Steering group led by Professor Ian Finlay in August 2017. In response, UK Health Ministers convened the UK Shape of Training Steering Group (UKSTSG) to consider the review and its recommendations and to bring forward policy proposals as to how it could be implemented.

Across the UK, Governments have responded by publishing strategic plans that differ in detail but with the common theme that more care requires to be delivered by integrated teams in the community. There is a transformational agenda that is well underway. It is timely therefore to

review whether medical education and training is producing the type of doctor that patients and service providers need, and to ensure that the training of the doctors of tomorrow remains relevant and fit for purpose.

Training Programme

The Trust provides lunchtime training and education each weekday as part of its foundation and postgraduate programmes. These are attended by medical students and medical staff of all grades.

Altnagelvin Hospital/Grangewood Weekly Teaching Programme

The postgraduate weekly teaching programme is emailed to all medical staff and interested staff in the Northern Sector and includes what's on during each week from below:



MEDICAL AND DENTAL EDUCATION AL TNAGELVIN AREA HOSPITAL

WEEKLY POSTGRADUATE MEDICAL EDUCATION PROGRAMME For Altnagelvin Hospital and Grangewood

Monday 12.00noon	Meeting Room Grangewood	PSYCHIATRY TEACHING (held weekly)
Monday 1.00pm	Seminar Room Ward 41	AMU TEACHING (held weekly)
Monday 3.00pm	Anaesthetic Office	CRITICAL CARE & ANAESTHETICS JOURNAL CLUB (held weekly)
Monday 6.30pm	Lecture Theatres 1&2 Centre for Medical & Dental Education	QUB POSTGRADUATE CERTIFICATE IN CLINICAL EDUCATION (held monthly)
Tuesday 12.45pm	Lecture Theatres 1&2 Centre for Medical & Dental Education	FOUNDATION FORUM (held weekly)
Tuesday 12.45pm	WEF Sept 17 moving to Seminar Room 2 Centre for Medical & Dental Education	OPHTHALMOLOGY TEACHING (held weekly)
Tuesday 5.00pm	Lecture Theatre 3 Centre for Medical & Dental Education	TRAUMA & ORTHOPAEDIC'S TEACHING (held weekly)
Tuesday 6.30pm	Lecture Theatres 1&2 Centre for Medical & Dental Education	RCPE EVENING MEDICAL UPDATE WEBCAST (held monthly)
Wednesday 10.00am	Seminar Room Ward 46	OBS & GYNAE DRCOG TEACHING (held weekly)
Wednesday 11.45am	Seminar Room Ward 46	PERINATAL OR OBS & GYNAE M&M/JOURNAL CLUB/AUDIT MEETING (held weekly in rotation)
Wednesday 12.45pm	WEF Sept 17 moving to Seminar Room 2 Centre for Medical & Dental Education	OPHTHALMOLOGY TEACHING (held weekly)
Wednesday 12.45pm	Anaesthetic Office	CRITICAL CARE TEACHING (held weekly)
Wednesday 1.00pm	Seminar Room 1 Centre for Medical & Dental Education	DOCTORS WEEKLY TEACHING VIDEOLINK FROM SWAH (held weekly when applicable)
Wednesday 5.30pm	Lecture Theatres 1&2 Centre for Medical & Dental Education	RCPI MASTERCLASS WEBCAST (held monthly)
Wednesday 5.45pm	Lecture Theatres 1&2 Centre for Medical & Dental Education	STEP WEST PROGRAMME (held monthly)

Wednesday 5.45pm	Lecture Theatres 1&2 Centre for Medical & Dental Education	FIRST STEP PROGRAMME (to start in Sept 17 - to be held monthly)
Thursday 12.45pm	Lecture Theatres 1&2 Centre for Medical & Dental Education	POSTGRADUATE FORUM (held weekly)
Thursday 2.00pm	Seminar Room 2 Radiology Department	STROKE NEURORADIOLOGY MEETING (held weekly)
Thursday 2.00pm	Seminar Room 2 Centre for Medical & Dental Education	GP/ST1 TEACHING (held monthly)
Thursday 3.00pm	Seminar Room 1 Centre for Medical & Dental Education	NEPHROLOGY TEACHING (held weekly)
Friday 8.00am	Anaesthetic Office	ANAESTHETIC TEACHING (held weekly)
Friday 12.15pm	Seminar Room CCU	CARDIOLOGY TEACHING (held weekly)
Friday 12.45pm	Seminar Room Ward 42	GERIATRIC MEDICINE TEACHING (held weekly)
Friday 1.00pm	Seminar Room Ward 31	POSTGRADUATE SURGERY TEACHING (held weekly)
Friday 1.00pm	Seminar Room in the North West Cancer Centre	ONCOLOGY TEACHING (held weekly)
Friday 12.30pm	Seminar Room 1 Centre for Medical & Dental Education	PAEDIATRICS TEACHING: PICU VIDEOLINK (held monthly)
Friday 1.00pm	Seminar Room 1 Centre for Medical & Dental Education	PAEDIATRICS TEACHING: NICU VIDEOLINK (held monthly)
Friday 2.00pm	Seminar Room 2 Centre for Medical & Dental Education	REGIONAL OPHTHALMOLOGY TEACHING VIDEOLINK (to start in Sept 17 - to be held weekly)
	Seminar Room 2 Centre for Medical & Dental Education	ENT TEACHING (held monthly)
	Seminar Room 2 Centre for Medical & Dental Education	OMFS CLINICAL GOVERNANCE (held monthly)
	Seminar Room 2 Centre for Medical & Dental Education	REGIONAL PAEDIATRICS TEACHING VIDEOLINK (held as per specialty programme)

	Seminar Room 1 Centre for Medical & Dental Education	REGIONAL CORE MEDICAL TEACHING VIDEOLINK <i>(held as per specialty programme)</i>
	Lecture Theatre 3 Centre for Medical & Dental Education	REGIONAL UROLOGY TEACHING <i>(held as per specialty programme)</i>
	Lecture Theatre 3 Centre for Medical & Dental Education	REGIONAL EMERGENCY MEDICINE TEACHING <i>(held as per specialty programme)</i>
	Seminar Room 1 Centre for Medical & Dental Education	REGIONAL GERIATRIC MEDICINE TEACHING VIDEOLINK <i>(held as per specialty programme)</i>

Director of Postgraduate Medical and Dental Education:
Foundation Programme Director:

Dr Neil Corrigan
Dr Damien Armstrong

Also Simulation Sessions when available:

Wednesday	Paeds/O&G Simulation Centre for Medical & Dental Education	OBS & GYNAE SIMULATION SESSION (session streamed into Ward, CMDET, for medical staff viewing) <i>(held as per specialty programme)</i>
	Paeds/O&G Simulation Centre for Medical & Dental Education	OBS & GYNAE TA & TV SCANTRAINER SIMULATION <i>(as required)</i>
Wednesday/ Thursday	Paeds/O&G Simulation Centre for Medical & Dental Education	ANAESTHETICS SIMULATION SESSION (session streamed into Ward, CMDET, for medical staff viewing) <i>(held as per specialty programme)</i>
Thursday	Adult Simulation Centre for Medical & Dental Education	EMERGENCY DEPARTMENT SIMULATION SESSION <i>(session will be streamed into Ward, CMDET, for viewing)</i>

Also, courses/hosting examination centre as below:

	Lecture Theatre 3 & Ward Centre for Medical & Dental Education	LUMBAR PUNCTURE COURSE <i>(held 4 times/year)</i>
	CMDET	PROMPT COURSE <i>(held 6 times/year)</i>
	CMDET	CCrISP NI COURSE <i>(held 2 times/year)</i>
	CMDET	IMPACT COURSE <i>(held once per year)</i>
	CMDET	PACES EXAMINATION CENTRE <i>(held once per year)</i>
	CMDET	OSCES EXAMINATION CENTRE <i>(held once per year)</i>

Programme issued from:

Medical and Dental Education Office, Centre for Medical & Dental Education & Training,
[Modular Building, Altnagelvin Hospital, ext 214181.](#)

Available on the MDE app under Documents, Postgraduate

Also available on Trust Intranet at: [Training, Medical and Dental Education, Postgraduate](#)

SWAH Weekly Teaching Programme

The postgraduate weekly teaching programme is emailed to all medical staff and interested staff in the Southern Sector and includes what's on during each week from below:

HSC Western Health and Social Care Trust		MEDICAL AND DENTAL EDUCATION SOUTH WEST ACUTE HOSPITAL
Weekly Postgraduate Medical Education Programme For South West Acute, Tyrone & Fermanagh Hospitals & Omagh Hospital and Primary Care Complex		
Monday 1.00pm	Room 1 Education Centre	Surgical Education Meeting
Monday 2.30pm	Cedar Villa, Tyrone & Fermanagh Hospital	Psychiatry Teaching
Monday 1.00pm	Room 3 Education Centre	Palliative Care Teaching (6 Week Programme)
Tuesday 8.30am	Seminar Room Radiology Department	Obs & Gynae MDM
Tuesday 12 Noon	Room 1 Education Centre	Respiratory Medicine Teaching
Tuesday 12.45pm	Room 1 Education Centre v/l from ALT	Foundation Forum
Tuesday 2.00pm – 5.00pm	Room 1 Education Centre	Core Medical Trainee meeting v/l from NIMDTA once a month
Tuesday 6.30pm	Room 1 Education Centre	RCPE Evening Medical Update Webcast (monthly)
Wednesday 8.30am	Seminar Room Radiology Department	Physician Radiology Clinical Meeting Medicine Department
Wednesday 10.00am	Seminar Room Maternity Unit	Obs & Gynae Teaching
Wednesday 10.00am	Seminar Room Maternity Unit	Labour Ward Forum (Held Monthly)
Wednesday 10.00am	Seminar Room Maternity Unit	Obs & Gynae Dept Mortality and Morbidity Meetings Held Monthly
Thursday/Friday 9.30 am /12.30pm	Boardroom/Room 1	Medicine Department Mortality and Morbidity Meeting Held Monthly
Wednesday 11.00am	Seminar Room Children's Ward	Paediatric Departmental Teaching
Wednesday 11.00am	Room 1 Education Centre	Perinatal Meeting Held on 3 rd Wednesday of Each Month
Wednesday 1.00pm	Lecture Theatre Education v/l to Renal Unit OHPCC (Dial 5054)	Weekly Doctors' Meeting

Weekly Postgraduate Medical Education Programme For South West Acute, Tyrone & Fermanagh Hospitals & Omagh Hospital and Primary Care Complex		
Wednesday 5.30pm	Room 1 Education Centre	Royal College Physicians Ireland (RCPI) Masterclass and Clinical Updates
Thursday 8.30am	Seminar Room Radiology Department	Paediatrics Radiology Clinical Meeting
Thursday 12.45pm	Lecture Theatre v/ from ALT	Post-Graduate Forum
Thursday 1.00pm - 2.00pm	Room 1 Education Centre v/l Renal Unit OHPCC (Dial 5054)	Medicine Journal Club
Thursday 3.00pm	Seminar Room Radiology Department	Radiology Teaching 10 week programme
Friday 8.30am	Seminar Room Radiology Department	Surgical Radiology Clinical Meeting Surgical Department
Friday 8.30am	Room 2 Education Centre	QUB 3 rd Year Medicine Student Teaching
Friday 3.00pm	Room 1 Education Centre	Stroke Teaching Held Monthly

Associate Director of Postgraduate Medical and Dental Education:
Mr Mark Grannell

Foundation Programme Directors:
Dr Patrick Manley & Dr Brettini Keegan

Programme Issued From:

Medical and Dental Education Office, Education Centre, South West Acute Hospital, ext 252710/252712

AVAILABLE ON TRUST INTRANET, TRAINING, MEDICAL & DENTAL EDUCATION, POSTGRADUATE
Available on MDE app under Documents, Postgraduate

CHAPTER FOUR

FOUNDATION PROGRAMME

The Foundation Programme is a two year general training programme, which forms the bridge between medical school and specialist/general practice training. Trainees will have the opportunity to gain experience in a series of placements in a variety of specialities and healthcare settings. Learning objectives for each stage will be specific and focused on demonstration of clinical competences.

FY1 – Foundation Year 1

The first year of the Foundation Programme builds upon the knowledge, skills and competencies acquired in undergraduate training. The learning objectives for the year are set by the GMC. In order to attain full registration with the GMC, doctors must achieve specific competences by the end of the year

FY2 – Foundation Year 2

The second year of the Foundation Programme builds on the first year of training. The F2 year main focus is on training the assessment and management of the acutely ill patient. Training also encompasses the generic professional skills applicable to all areas of medicine – team work, time management, communication and IT skills.

E-portfolio

The trainees are expected to develop an e-portfolio during their foundation years. The e-portfolio is primarily to aid self-directed learning and reflective practice. For each of the two foundation years each trainee will have an Educational Supervisor to oversee training for the year. In each clinical placement in foundation years they will also be allocated a dedicated Clinical Supervisor, whom they meet with at the start, mid-point and end of their placement.

Foundation Prospectus

The WHSCT Medical and Dental Education Department have contributed to the NI Foundation Prospectus detailing Foundation posts for use by medical students when choosing Foundation posts.

Attract and retain trainees Strategy

Information from destination surveys has shown that there is an increasing number of doctors who after Foundation training do not go on to immediately enter speciality training. As well as those doctors who leave to work in Australia for a period of time there are an increasing number of doctors who choose to work as locums or in ad hoc non training posts immediately following Foundation training.

Work is ongoing to develop a strategy to identify key factors in addressing these issues. Adding value to training posts by the promotion of good supervision and teaching, trainee support, mentoring, and the feeling of 'being part of a team' is known to play an important role in encouraging retention post Foundation training. There are initiatives such as the Step- West Programme, Adept teaching fellows and improved simulation training. It is hoped that these examples of improved training opportunities may help encourage Doctors into training and ultimately back to the Western Trust. All trainers should actively engage and create a supportive environment to support this.

Dr Damien Armstrong, Foundation Programme Director, Northern Sector

There have been significant changes to Foundation training within Altnagelvin and the Northern sector continues to be a busy but rewarding clinical environment. In August 2016 there was an increase in Foundation training numbers both at F1 and F2 level. This has allowed changes to rotas at both F1 and F2 levels resulting in more stable shift patterns and also increased weekend and out of hours cover. Improved out of hours cover can only be a good thing for patient care and safety. The increased number of trainees on the wards has also allowed changes to clinical placements which should enhance the training experience. As an example F1 trainees now routinely spend time on MAU. This is recognised as being a good clinical environment with excellent opportunities for training and is one that has been positively received by trainees. The increased numbers of trainees were distributed across those specialities that were able to demonstrate a commitment towards education and training. Although there are future plans to reduce training numbers slightly I hope that many of the positive aspects that have been demonstrated can be retained.

The Oncology Centre has been increasing in activity through 2016/2017 thus allowing care close to home for patients across the North West. As services become more established the Centre should represent another excellent training opportunity for Doctors in this area and will hopefully start to attract more staff. Foundation trainees are part of the team within the unit.

One of the other challenges in 2017 was the GMC visit to Northern Ireland and to both sectors of the Western Trust. The feedback was largely positive and was on the back of a significant amount of preparation work. Although there were some concerns there were also areas of good practice which I am sure will be mentioned elsewhere in the education report.

Trainees coming here can expect to see a wide range of clinical condition and be well supported and supervised in each attachment. Teaching at the Foundation Forum has now become bleep free and this has become embedded over 2016/17. Trainees have been involved in a number of Quality Improvement projects at both FY1 and FY2 level. Many of these have been showcased at the yearly Altnagelvin Quality Improvement day and have won prizes at this event. In addition a number of trainees at both FY1 and FY2 level have had the opportunity to submit abstracts and regional, national and international meetings.

Over the last two years feedback fora have been introduced and are now an integral part of the Foundation experience. This gives the trainees opportunities to raise concerns and highlight good or bad practice in a confidential manner. A number of different issues have been raised over that time. This has allowed some changes to working patterns and within clinical environments. This continues to be a work in progress.

Foundation training continues to evolve. Each year sees different requirements for successful completion of training. It is to the credit of trainees, educational supervisors and especially consultant clinical supervisors that everything is completed in time for ARCP's. Not to forget the Medical Education administration team who work very hard to ensure trainees and supervisors are well supported. Over the last two years the Foundation ARCP process has changed to an online process and this has been an interesting process.

There have been a number of changes with the educational supervisor's team in 2016/17. With increased numbers of Foundation trainees two new supervisors were appointed in 2016 - Mr Micheal Harron and Dr Ene Horan who have settled well into the role. I would like to thank Dr Sandra McNeill for her time spent as an educational supervisor but who is now leaving to become Undergraduate Sub Dean of Medical and Dental Education at Altnagelvin. Sandra has been a

valued team member who will be missed but I am sure is looking forward to the challenges in her new post.

CHAPTER FIVE

GENERAL PRACTICE (GP) VOCATIONAL TRAINING SCHEME

Dr Derval Dolan and Dr Diane Robinson, GP Training Co-ordinators, Northern Sector
Dr Marie King, GP Training Co-ordinator, Southern Sector

GP training in the west is co-ordinated by Dr Derval Dolan, Dr Diane Robinson and Dr Marie King (in the southern sector).

This academic year we have 39 GP trainees. Twelve in ST1, 15 in ST2 and the twelve in ST3. All except one are full time trainees, additionally there are three trainees currently on maternity leave.

Although there was an increase to GP training places in NI from August 2016 in the west we have not been able to fill all the extra posts. However with further rounds of recruitment, as last year, we gained two more ST1s in February.

The ST1 cohort are rotating through a combination of General Medicine, Psychiatry and Emergency Medicine. Then the ST2 group do six months in General Practice and six months in hospital - doing either Paediatrics or Obstetrics and Gynaecology. The ST3 cohort do all twelve months in General Practice.

Teaching of the ST1 group for the Western area takes place in Altnagelvin monthly on a Thursday afternoon, with a centralised timetable for all Northern Ireland ST1 trainees of core teaching days.

The ST2 group have GP based teaching rotated among their various GP practices for their six months in practice and the ST3 group have one full day a week of GP based teaching currently at the Waterside Medical Practice. Various GP colleagues and local Consultants from Altnagelvin may help facilitate the teaching sessions.

Some changes to the structure of the day release scheme mainly in ST1 and ST2 are planned and are like to come in during the next academic year.

Recruitment to the GP training scheme, particularly in the West, is a challenge at the present time. Various initiatives are being considered with the hope that this might improve.

CHAPTER SIX

RECOGNITION AND APPROVAL OF TRAINERS

Trainers carry out a vital role in ensuring safe and effective care through good clinical supervision and in supporting and monitoring educational progress through educational supervision. It is the responsibility of the Trust to support the professional development of trainers and to ensure that training responsibilities are reflected in job plans.

From August 2016, NIMDTA has provided top-up funding of £235,920 to the Trust to facilitate one hour clinical and educational supervision per trainee per week to support this activity. A trainee may have both a clinical and an educational supervisor and in that case the programmed activity (PA) allocation would be split evenly between the 2 roles.

NIMDTA must be able to formally approve local Trainers as a result of new GMC requirements. Therefore, all relevant training needs to be attended by Trainers every five years (except Equality and Diversity which needs completed every five years) and recorded. All trainers need to be on the NIMDTA database as of July 2014 and formally approved by July 2016, and must be properly equipped for their educational role (a trainer will be someone who is either a clinical supervisor or an educational supervisor, or can be both, and who has met a minimum standard for training in that role).

The minimum requirements for being recognised as a trainer are:







1. Teaching the teacher
2. Trainee support
3. Supervisory skills
4. Equality, diversity and opportunity (EDO) training E-module







Faculty Development/Trainer Database







The Medical and Dental Education department have developed a database of training status and requirements of all clinical educators. The approval rate is over 90% of trainers listed as a Named Educational or Clinical Supervisor who meet the criteria for recognition. Recognised trainers receive a certificate from NIMDTA with a completion date for repeating the modules and continues to be reviewed on a regular basis.

Clinical educators found it difficult to attend Belfast for courses and had requested the possibility of their requirements being facilitated in the Trust. In response to this, the Medical and Dental Education department has developed their own teaching faculty to deliver Trainee Support and Supervisory Skills courses on both the acute sites. Faculty development is an important component of medical and dental education. Equipping trainers to deliver high quality training will enhance the training environment and help to ensure the safety of patients, students, and trainees.

Medical and Dental Education faculty will continue to facilitate sessions on Trainee Support and Supervisory Skills and also host NIMDTA's Teaching the Teacher on Trust sites to assist trainers gaining GMC recognition.





Specialty/ Placement	Equipment	Put to good use!
		This virtual trainer will be used in the new academic year to train all Trust Obs & Gynae trainees and will possibly be extended to non Trust trainees on an income generation basis.
Obs & Gynae	VICTORIA® S2200 - Maternal and Neonatal Birthing Simulator 	<p>These high fidelity simulators have been used by Obs & Gynae medical staff to simulate various birthing scenarios including normal delivery/breech/shoulder dystocia/etc.</p> <p>These simulators will be used by the Obs & Gynae department to provide Trust trainees and midwifery staff with PROMPT (PRactical Obstetric Multi-Professional Training) in the coming academic year with a view to running the course for other Trusts staff on an income generation basis in the following years.</p>
	SimMom 	
Anaesthetics & Emergency Medicine	SimMan 3G 	Anaesthetics and Emergency Medicine departments are using Medical and Dental Education's new SimMan 3G to run anaesthetics and emergency medicine scenarios for new Trust medical staff and medical students on POEM placements as well as Emergency Medicine scenarios for final year medical students to prepare for their F1 posts.
Paediatrics	SimBaby 	The Paediatrics department continue to run simulation training including SimBaby scenarios.
Medicine	Lumbar Puncture /Epidural trainer 	The Medicine department (AMU and Neurology) in conjunction with Anaesthetics and Clinical Biochemistry continue to use simulation to run Lumbar Puncture courses four times yearly (two per intake).
	NG Tube Trach care trainer 	This year saw the trial of a Tracheostomy Emergencies course organised and offered by two previous junior doctors using existing simulation equipment in the CMDET.

Specialty/ Placement	Equipment	Put to good use!
Rheumatology & Orthopaedics (3 rd year MSK placement teaching)	Shoulder injection trainer 	The Rheumatology and Orthopaedics department continued to use Medical and Dental Education simulation equipment for teaching for 3 rd year MSK for practising soft tissue joint injection used for the treatment of injuries and arthritis and the specialised knee model for training in the technique of synovial fluid aspiration.
	Hand & Wrist injection trainer 	
	Elbow injection trainer 	
	Knee for Aspiration simulator 	
Rheumatology & Orthopaedics (3 rd year MSK placement teaching)	3B Scientific-Leg Skeleton with hip bone 	The Orthopaedics department continued to use Medical and Dental Education simulation equipment for teaching for 3 rd year MSK for anatomical study.
	Foot models M30 Normal foot M31 Flat foot M32 Clawfoot 	

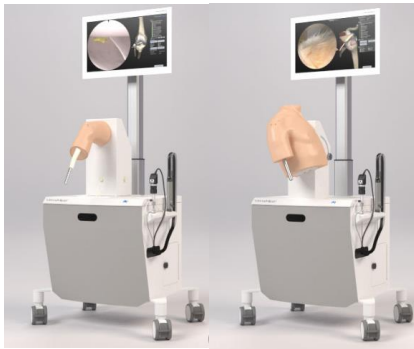
Specialty/ Placement	Equipment	Put to good use!
	Deluxe Flexible Spine Model with Femur Heads 	
Trauma and Orthopaedics	CLA Knee Joint Arthroscopy Simulator 	The Orthopaedics department used two new simulators in an in-situ simulation in a theatre setting for trainees for simulation teaching.
	CLA Shoulder for Arthroscopy 	
	Suture Kits 	The Orthopaedics department have also included suturing skills into its specialty teaching programme and use MDE equipment and facilities.
Surgery (3 rd and 5 th year Surgery placement teaching)	Arterial Puncture Wrist 	The Surgery department continued use of MDE simulation equipment for hands on simulation teaching for 3 rd and 5 th year Surgery students.
	Advanced Venepuncture Arm 	

Final year medical students have welcomed increasing availability and type of simulation equipment and facilities from MDE in their preparation for OSCEs. The use of equipment has increased to such an extent that MDE are planning further investment in the coming academic year to add to the final year OSCE simulation equipment list.

OSCE preparation (5 th year medical students)	Advanced Female Catheterisation Trainer 	Allows student to practise urethral and supra-pubic catheterisation and how to demonstrate self-catheterisation. It has accurate female urethral anatomy.
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	<p>Advanced Male Catheterisation Trainer</p> 	<p>Allows student to practise urethral and supra-pubic catheterisation and how to demonstrate self-catheterisation. It has accurate male urethral anatomy.</p>
	<p>Female Pelvic Trainer</p> 	<p>Allows student to recognise and practise anatomy and appropriate landmarks, digital vaginal examination procedure, bi-manual examination, cervical smear procedure (including use of speculum), digital rectal examination procedure</p>
	<p>Clinical Male Pelvic Trainer</p> 	<p>Allows student to recognise and practise key anatomical features of the male pelvic region including genitals, anus and pertinent internal organs, for hands-on examination for skills such as learning examination procedure, testicular examination, rectal examination of the prostate.</p>
	<p>Welch Allyn Diagnostic Set with Otoscope</p> 	<p>Allows students to practise ophthalmology and otology skills.</p>

The coming academic year will see the arrival of a simulator which represents a significant investment from Medical and Dental Education for the Trauma and Orthopaedics department:

<p>VirtaMed ArthroS VIRTAMED[®] (Knee and Shoulder Modules)</p> 	<p>VirtaMed is the world leader in high-fidelity virtual reality simulators for instructional training of minimally invasive diagnostic and therapeutic interventions in orthopedics, urology and women's health.</p> <p>The shoulder model for shoulder arthroscopy training and knee model for knee arthroscopy training have now arrived at the CMDET.</p> <p>Orthopaedic surgery requires an intensive didactic program, especially for the very specific skills needed to master arthroscopic surgery. On this simulator trainees can use original medical devices facilitating a transfer of skills to theatres.</p> <p>The Virtamed knee and shoulder modules provide:</p> <ul style="list-style-type: none"> • Knee, hip, and shoulder arthroscopy training with highly
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- realistic tactile feedback
- ABOS-mandated FAST module for basic skills training
- Original instruments such as probe, grasper, punch or motorized shaver
- Large variety of different patients and pathologies

This simulator will add to Medical and Dental department's growing availability and use of virtual training. In the coming year we hope to have a dedicated virtual training room with teaching facilities.

MDE simulation equipment has also been used to encourage entry to the medical profession at the annual Trust Year 13 Medical and Dental Information Evenings held in both sectors.

Derry Now

News Sport Obits Features Video



16:46 Thursday 23rd of March 2017

Sixth form students from across the Western Trust area hoping to follow a career in medicine, recently met and spoke with some of our top doctors and consultants.

The students attended the annual medical and dental careers evenings, held at the Medical Education Centre at Altnagelvin Hospital

The careers evening, dedicated to choosing medicine or dentistry as a profession, gave students the chance to learn about a wide range of backgrounds and specialties.

Orthodontics, Cardiology, Neurology, Psychiatry, Obstetrics & Gynaecology, Paediatrics, General Practice, Radiology and Emergency Medicine were just a few of the specialist areas that were represented on the evening.

There were also practical interactive workstations to show the students some care and treatment techniques.

The events were designed so that students could get an idea of what to expect in the initial years of medicine.

Not only did they speak to staff they spoke with junior doctors, who shared their early experiences with them.

The Northern Ireland Simulation and Human Factors Network (NISHFN) Simulation Faculty Debriefing Course – 12th May 2017

On 12th May 2017, Dr Paul Baylis, Simulation Lead, organised with the Northern Ireland Simulation and Human Factors Network (NISHFN) a Simulation Faculty Debriefing Course for Trust staff. The course is designed to provide facilitators of simulation-based education (SBE), irrespective of discipline, working within the region with a structured approach to the debriefing of simulated scenarios.



Simulation Faculty Debriefing Course

**Simulation Suite, Altnagelvin Hospital
Friday 12th May 2017**

Programme

08:00	Registration and coffee
08:15	Welcome
08:30	Introduction to Debriefing
09:00	Interactive Task
09:30	The SCSC Debriefing Model
10:00	Orientation to Simulation Suite
10:10	Coffee
10:30	Scenario 1 with debrief
11:30	Debriefing with good judgement
11:50	Scenario 2 with debrief
12:30	Lunch
13:00	Scenarios 3-6: The difficult debrief
16:00	Summary and close

For more information please contact sara.lawson@hscni.net

With thanks to:



Simulation has been defined as the imitation of the operation of a real-world process or system over time. It can be used to recreate real-life challenges while simultaneously enabling observation of participant responses and behaviours, thus promoting reflective learning.

There are many modes of delivering SBE, including the use of part-task trainers, manikins, simulated patients and virtual reality. The debriefing structure taught on this course can be used following a simulation-based scenario or as a structure to debrief learning that has occurred in a real-life situation.

Simulation scenarios should be designed with specific learning outcomes aligned to the student or trainee's curriculum. A number of models already exist to enable the debriefing of SBE scenarios. Many of these models are based upon a constructive alignment approach and the NISHFN have, with their kind permission, adapted an approach developed by the Scottish Centre for Simulation and Human Factors (SCSC^{HF}). It is this model which was introduced on this course.

CHAPTER EIGHT

MDE DEVELOPMENTS AND EVENTS

MDE App



The MDE App has been widely available from summer 2016 and provides medical trainers/trainees/students with a place to interact with each other, receive important updates and find out what courses and events are on in the area. It also provides a regularly updated list of important documents for the separate postgraduate, undergraduate and Trainer's areas. Each of these areas provide details of training events, timetables, policies and procedures, documents, etc. It continues to be successful for both students and trainees.

The Medical and Dental Education team are excited about developing this initiative and progressing the concept within the next few years and early feedback from students and medical staff on the first version is encouraging.

"The MDE app has made starting F1 that bit easier. Having all your induction materials and useful trust policies at your fingertips has been so helpful whilst settling into work. It also allows you to look ahead and see training and education opportunities you may otherwise miss. A simple, easy to use app that has been invaluable these last few weeks." (F1 – WHSCT/SWAH)

Induction

There has been considerable work carried out in the last number of years harmonising Trust induction for new trainees.

In August 2015, Medical and Dental Education introduced Trust induction in the format of two DVDs. Since this development, Medical and Dental Education have now introduced recorded generic induction which are used on Trust induction morning and also available via youtube and the new MDE App where trainees are now able to access all induction and postgraduate information, therefore not missing out on essential information when unable to attend induction.

The new format induction has proved to be successful with trainees, especially those unable to attend the induction due to working overnight shifts in other Trusts who would historically have missed Trust induction. These trainees are emailed the links to view and are then requested to inform Medical and Dental Education when viewed. It is planned to advance this to site specific and specialty inductions.

A future development for Medical and Dental Education will be the introduction of E-Induction on PageTiger. Induction will be provided online as an E-Induction Booklet and will include induction videos along with all relevant information. Trainees will be able to view the induction videos in their own time and be able to gain a certificate on completion.

STEP (West)



The Specialist Trainees Engaged in leadership Programme (STEP) project is a Leadership Skills and Quality Improvement Programme for Specialist Trainees in the Western Trust.

STEP(West) aims to develop trainees' skills in medical leadership, and provides basic training in quality improvement (QI) with each trainee undertaking a quality improvement or patient safety

initiative in their clinical areas under mentorship. It is open to ST3 and above trainees based in the Western Trust at commencement.

For certificate of completion attendance at a minimum of 70% of the teaching workshops is required (week 1-10), alongside participation in a QI project. As those delivering the sessions are giving their time voluntarily we need to allow a degree of flexibility, and as a result the timetable is subject to change. We do, however, endeavour to keep this to a minimum.

Trainees can undertake their QI project on an individual basis or in groups. Trainees undertaking STEP will be divided into groups and are encouraged to use these groups to discuss any issues. Each group has a mentor, as well as a named person from the STEP Faculty. There will also be access to other professionals within the Trust with QI experience and training that are available for additional mentorship. All trainees will be guided as to who their service manager is and they are strongly encouraged to make contact with them to arrange to meet and discuss their role a potential involvement in their improvement project.

2016-17 STEP (West) Programme:



STEP (WEST) 2016/17

Wednesday evenings 5.45pm – 7.15pm

Medical & Dental Education Centre, Altnagelvin

IHI MODULE	TITLE	DATE	TRAINER / FACILITATOR
QI 101 Intro to Health Care Improvement	Introduction to STEP	14 Sept 16	Dr Neil Corrigan
PS 104: Teamwork and Communication in a Culture of Safety and/or PS 202 Building a Culture of SAFETY QI 102: How to Improve with the Model for Improvement	Patient Safety & Quality Improvement Methodology	28 Sept 16	Mandy Gormley
QI 103: Testing and Measuring changes with PDSA Cycles and/or QI 104 Interpreting Data: Run Charts, Control charts and other Measurement tools	Project Management Skills / Measuring for Improvement	12 Oct 16	Wendy McLaughlin, Capital Planning
PS 101: Introduction to Patient Safety	Clinical Networks	26 Oct 16	Dermot Hughes/ Bridget Tourish
PS 102: Human Factors and Safety	High Performing Teams – Human Factors	9 Nov 16	Dr Catherine McDonnell
QI 105: Leading Quality Improvement and/or QI2 10 Planning for spread: from Local Improvements to System-Wide Change	Patient Experience (The Human Side of QI)	23 Nov 16	Anne Witherow
PS 104: Teamwork and Communication in a Culture of Safety	Resilience/Career Development (Teamwork & Communication)	7 Dec 16	Jeanette Hutton, Management Development Dr Dermot Hughes / Mr Alan McKinney (Joan

			Doherty to confirm)
QI 105: Leading Quality Improvement QI201 Planning for Spread: from Local improvements to system wide change	QI Project Workshop	11 Jan 17	
PS 101: From Error to Harm	QI Project Workshop	1 Feb 17	
QI 103: Testing and Measuring changes with PDSA Cycles and/or QI 104 Interpreting Data: Run Charts, Control charts and other Measurement tools	QI Project Workshop	15 Feb 17	
PS 201 Root Cause and Systems Analysis	QI Project Workshop (to include Commissioning)	1 Mar 17	
PS 105: Responding to adverse incidents	QI Project Workshop	5 Apr 17	
PFC 101: Introduction to Person and Family Centred Care	QI Project Workshop	10 May 17	
TA 103: Quality, Cost and Value in Health Care and/or TA 101 Introduction to the Triple Aim for populations An Introduction to Quality, Cost and Value in Health Care	End of Year Presentation Event	16 June 17	

Mentors - Mandy Gormley, Dr Patrick Stewart, Dr Siddhesh Prabhavalkar, Dr Stephanie Bolton, Dr Catherine McDonnell, Daryl Connolly, Brendan Moore, Dr Ciaran Flynn, Dr Deirdre McGlennon

The Step(West) programme culminated in a presentation and prizegiving session:

STEP WEST PRIZE GIVING

Friday 16th June
12:30pm

The celebration prize-giving of the STEP West (Specialist Trainees Engaged in Leadership Programme) will be taking place at 12:30pm on Friday 16th June 2017 in the Centre for Medical & Dental Education.

Each Trainee will present a Quality Improvement project. Please join us to celebrate the success of this programme.

For catering purposes please email medical.education@westerntrust.hscni.net if you are attending.



Running Order	Name	Grade	Specialty	Project Title
12.30pm	Lunch			
12.50pm	Samantha Thompson	ST6	Paediatrics	'The Tuesday Blues' – Once weekly clinical summary review of all Neonates in SBCU in the Neonatal Unit in Altnagelvin Hospital
1.00pm	Margaret Kelly	ST5	General Adult Psychiatry	Improving the medical handover process for the junior doctors within Grangewood Crisis Service
1.10pm	Ann McLoughlin	ST4	Care of the Elderly	Acute Stroke Medical Admission Assessment
1.20pm	Timothy Martin	ST7	Medicine	Optimising weekend discharges
1.30pm	Clare McGivern	ST4	General Adult Psychiatry	Improving baseline prolactin monitoring in psychiatric inpatients
1.40pm	Joe Clarke	ST8	Paediatrics	Improving situational awareness in Paediatrics in Altnagelvin Area Hospital
1.50pm	Desmond Gibson	ST8	Trauma & Orthopaedics	Improving Patient Safety - Electronic Spinal Referral Pathway in a Regional Major Trauma Centre. (Co-Authors: Stacey Thomson, Niall Eames)
2.00pm (via Skype)	Roisin Healy	ST5	Care of the Elderly	Title: Improving anticoagulant safety – a quality improvement project

The winner was Dr Desmond Gibson - Improving Patient Safety - Electronic Spinal Referral Pathway in a Regional Major Trauma Centre (co-Authors: Stacey Thomson, Niall Eames).

Postgraduate Certificate & Diploma in Clinical Skills

Medical and Dental Education continues to fund places for medical education leads to attend QUB Certificate and Diploma courses in Clinical Education. The Certificate course continues to be facilitated on the Altnagelvin site. A number of staff also continue to be funded to complete the Masters in Medical Education.

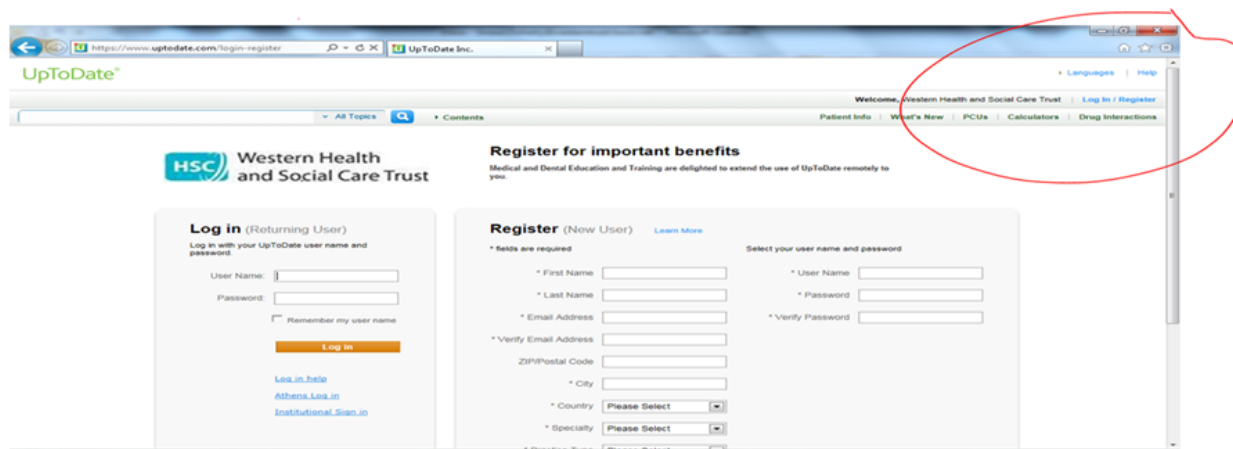
UptoDate Anywhere

Medical and Dental Education facilitated the launch of UptoDate Anywhere on 8th and 9th June 2016. UptoDate Anywhere can be accessed on a mobile app or from any computer or can be accessed via Quick Links on the Trust's intranet. UptoDate Anywhere includes more than 10,500 topics covering general internal medicine and more than 20 specialties; a select drug database and drug interaction tool; nearly 1,500 patient education topics; more than 28,000 graphics; and links to more than 400,00 references.

Dear Colleague

Medical and Dental are delighted to inform you that you can now access 'UpToDate' – the Evidence Based Clinical Support resource - directly from any internet browser – MOBILE – OFFICE – HOME – HOSPITAL.

To register for your own unique username and password go to QUICK LINKS - UptoDate - on the Trust's Intranet.



Feedback on UpToDate Anywhere has been very positive:



Tracheostomy Emergencies

In the spring of 2017, two previous junior doctors in the Trust offered to return to provide some training on Tracheostomy Emergencies that they had felt would be useful to junior trainees in the Trust. Dr Molly Carson and Dr Dominic McKenna provided training to final year medical students, Foundation doctors and junior trainees in ENT.



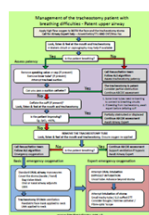
Tracheostomy Emergencies

Date: Tuesday 1st November 2016 at 1.30pm- 5pm

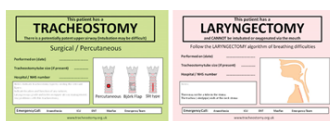
Location: Centre for Medical and Dental Education and Training

Relevant for: all nurses, doctors and medical students

Cost: Free



Half day course covering NTSP algorithms
Max group size per session is 6 – book early to avoid disappointment
Certificate of attendance provided at end of course



Management of tracheostomy emergencies course

9.00 – 9.15	Registration
9.15 – 9.30	<u>Welcome</u> , learning objectives & case
9.30 – 9.45	Types of traches
9.45 – 10.15	Algorithms
10.15 – 10.30	Humidification
10.30 – 10.45	Demo
10.45 – 11.30	Practical scenarios session 1 (Tracheostomy)
11.30 – 11.45	Break
11.45 – 12.30	Practical scenarios session 2 (Laryngectomy)
12.30 – 12.45	Summary and questions

Feedback from the courses has been excellent (see above) and Medical and Dental Education thank Dr Carson and Dr McKenna for their generosity in giving their own time to fulfill a need they felt they would have benefitted from in the Trust.

#hellomynameis

The #hellomynameis campaign was started by the late Dr Kate Granger as a way of reminding staff of the importance of introducing themselves to each patient/client. Kate started the campaign when, as a patient herself, she noted that many staff were so busy doing their work that they didn't introduce themselves.

The simple introduction she recognised was the first step to put patients at ease and provide compassionate care. Kate spread her campaign to encourage all health care workers to introduce themselves to patients across the UK and it was first launched in Northern Ireland in September 2014.

Sadly Kate passed away on 23 July 2016 following a five year illness with terminal cancer. To remember Kate on what would have been her 35th birthday on 31st October 2016, staff were available on the 1st floor foyer beside the lifts in Altnagelvin, to promote the campaign.

This campaign was used with the introduction of methods of identifying medical staff.

Identification of Doctors

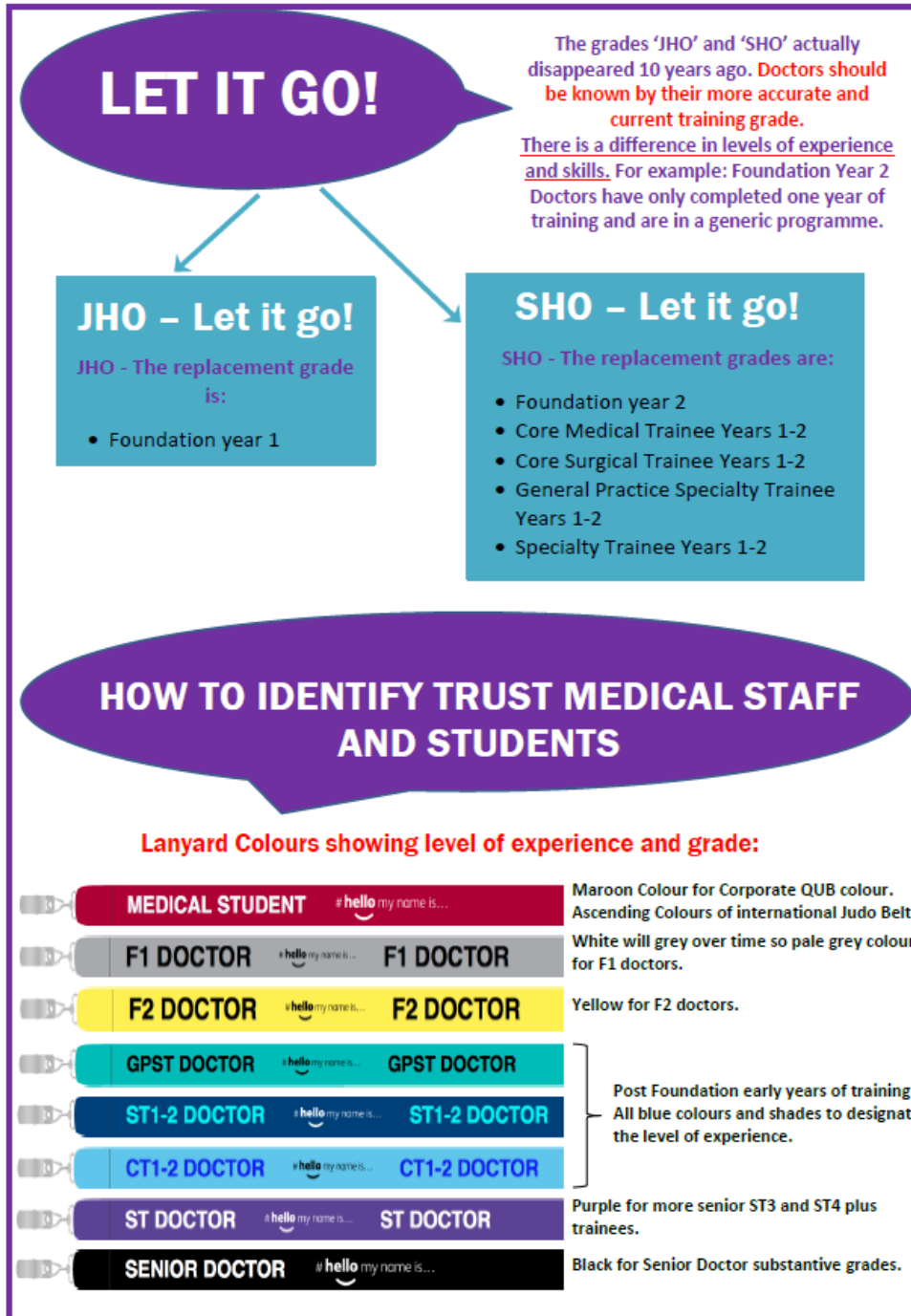


Identification of doctors in clinical settings is now more difficult since the traditional white coat has disappeared from wards in the United Kingdom. Increasingly other healthcare professionals wear coloured and readily identifiable uniforms with their role specified clearly.

Good Medical Practice requires all doctors to recognise and work within their competence. *Promoting Excellence R1.10* requires 'that organisations must have a reliable way of identifying learners at different stages of education and training, and equally they must make sure all staff members take account of this so that learners are not expected to work beyond their competence'.

Patients and the public also find it increasingly difficult to identify doctors and define their expertise and grade. There is a difference in levels of experience and skills, therefore, there has been development this year to end use of the terms JHO and SHO and to identify doctors of different stages of education and training.

Available around the Trust you will see:



Judo inspired colour coding of lanyards to denote grade and experience of doctors

Introduction

Identification of doctors in clinical settings is now more difficult since the traditional white coat has disappeared from wards in the United Kingdom. Increasingly other healthcare professionals wear coloured and readily identifiable uniforms with their role specified clearly.

Good Medical Practice requires all doctors to recognise and work within their competence.

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Innovation

In August 2014 all Foundation doctors in Northern Ireland were introduced to the 'hello my name is...' campaign started by Dr Kate Granger and branded lanyards were distributed.



In July 2015 permission was sought from Dr Granger to utilise her logo on coloured lanyards to distinguish F1 and F2 doctors. These grey and yellow lanyards were distributed to all Foundation doctors.



Innovation

The original idea utilised the concept of International Judo belt colours. The colours of Judo belts traditionally denote both junior (*Mon*) and senior (*Kyu*) skills grades and defined judo competence levels and skills ability. (www.nijudo.com)

International colours of Judo Belts....



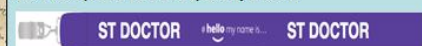
In Judo skills, ability and competence are assessed before awarding the next ascending grade of coloured belt.

Incorporation of appropriate colours for all medical training grades was proposed and circulated.

The hues of blues allow blue to signify post Foundation doctors and yet distinguish separately those in core, speciality and GP training.



The Belfast Trust have introduced this agreed colour coding to the specialty grades. The other Trusts have pledged to follow their example for core and specialty doctors.

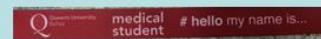


In keep with the black belt in Judo, lanyards with Senior Doctor have been distributed to those involved with the training of Foundation doctors.



Discussion

This example of sharing 'Good Practice' was taken up by Queens University Belfast Medical School when they distributed their maroon coloured lanyards in August 2016 to all their medical students.



Recognition of the expertise and grade of doctors is important for all healthcare staff. It is also important for patients and members of the public who visit and attend clinical settings for treatment and care. This may be critical in instances for patient safety.



#hellomynameis...

Dr Conor McKenna (F1 doctor in Altnagelvin) commented on his experience of the response to Dr Kate Granger's campaign as follows:

'following the media publicity of the campaign, wearing a lanyard with this logo has caused a significant number of patients to comment on how enthused they are by this initiative, ... it also has made me more mindful of introducing myself clearly to all patients. This is particularly so when patients are distressed in emergency situations and introductions can perhaps be forgotten'.

A special thanks to Ms Lucy Loughrey, QUB medical student who assisted with the design and production of this initiative.

Northern Ireland Foundation Team

Recognition of the expertise and grade of doctors is important for all healthcare staff. It is also important for patients and members of the public who visit and attend clinical settings for treatment and care. This may be critical in instances for patient safety.

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National Association of Medical and Dental Education Management (NAMEM)

The Senior Manager, Sinead Doherty represents the Trust and is the N Ireland representative for NAMEM and attends the council meetings four to five times per year.

The purpose and mission of NAMEM is to:

- Be an expert reference group for the management of medical education.
- provide a network of regional groups through which good practice is disseminated using the NAMEM representative.
- support the development of the members, and all those involved in medical education, through publications of good practice, study days, conferences, and further education.
- provide a national voice and expertise to other organisations involved in medical education GMC, HEE, COPMED, NACT and others, forging professional relationships and connections by attending meetings and promoting NAMEM.

As an organization, NAMEM has evolved in the last number of years, NAMEM continues their links with the GMC and HEE, COPMED and NACT, NAMPS (National Association Medical Personnel Specialists) and more so this year especially with NHS Employers in relation to the junior doctor contract. The senior manager will continue with this work and will take on the post of NAMEM Deputy Chair in 2017.

NAMEM Conference 22nd & 23rd September 2016

NAMEM Council would like to thank:

All presenters for their support in providing the Conference programme
Staff at the Royal Station Hotel
Sponsors:

Atrainability
BMA
BMJ
Bookwise Solutions
Cello Software
Hicom
Limbs & Things
Maguire Healthcare
MiAD
Quizdom
UpToDate

2017 Conference –
14th-15th September 2017
Brighton



22nd & 23rd September 2016

Changing Goal Posts In Medical Education



Thursday 22nd September:

11.30 Registration commences
12.15 Lunch available

Afternoon – Chair – Dr Brian Wood, Director of Speciality Training, HEE

13.15 **Welcome to Conference & Introduction** – Dr Brian Wood, Director of Speciality Training, HEE

13.45 **Trust based Training Programme - how to maximise the potential** - Dr John Hanley, DME & Consultant Haematologist

14.15 **Training v Service – Round table discussion on good practice** – Dr John Hanley to facilitate

14.45 Refreshments

15.15 **Physicians Associates (PA)** – Theresa Dowsing, Immediate Past President of the Faculty of Physician Associates at the Royal College of Physicians and PA-R in Geriatric Medicine

15.45 **PAs – Trainee and Service Perspective** – Tina Suttle-Smith, Strategic MEM, Surrey & Sussex NHS Trust
Trainee - tbc

16.15 **New Junior Doctor Contract** – Ellie Pattinson, NHS Employers

16.45 **Questions & Close**

19.30 Meet for Pre-Dinner Drinks in Balmoral Room
20.00 Dinner in the Victoria Suite, followed by entertainment from Asa Murphy

Friday 23rd September:

Morning – Chair – Professor Ian Curran, Assistant Director of Education & Standards, GMC

09.00 **Welcome & Introduction** – Professor Ian Curran

09.15 **Why do we never learn ? - Human Factors** – Trevor Dale, Retired British Airways Training Captain

10.15 A.G.M. (members only)

10.30 Refreshments

11.00 **Presentations for PG Certificate – Candidate's presentation** – Irene Balch
Mandeep Dhaliwal

11.20 **Transition into the NHS Culture & System**

11.40 **“At cross-purposes, if you get my drift” Working with non-native English Speakers** – Robert Chambers, E.F.L teacher and trainer

12.10 **GMC and the Referral System** – Helen Dolan, GMC Regional Advisor

12.40 **Summary & Close of Conference** – Professor Ian Curran, Assistant Director of Education & Standards, GMC

Lunch is available

Medical and Dental Education Charity Fundraising



This year Medical and Dental Education staff completed the Cancer Research UK Relay for Life Legenderry. Relay for Life is a team fundraising challenge bringing communities together to beat cancer. Teams of family and friends fundraise for life-saving cancer research throughout the year. Everyone then unites and joins a 24-hour celebration, taking turns to walk around a track.

To raise money MDE staff had two coffee and bake sales on the Altnagelvin Hospital site.

On Friday 17th February 2017, MDE staff raised £759.17.



On Tuesday 30th May 2017, MDE raised a further £1076.01!



Medical and Dental Education COFFEE MORNING IN AID OF CANCER RESEARCH UK



Medical Education Centre Staff are holding a coffee morning featuring a wide variety of home baked goods and fresh Starbucks coffee. In exchange for donations.

www.cruk.org

**10am Tuesday 30th May
TOWER BLOCK FOYER**



CHAPTER NINE

TRAINING/COURSES

The Endoscopy Unit at Altnagelvin is unique in Northern Ireland in terms of the range of diagnostic and therapeutic procedures performed within a single centre. Mannikins and a virtual reality endoscopy simulator are available which allow practice in endoscope handling before and during patient exposure.

Basic Colonoscopy Courses

The Trust continues to facilitate the Basic Skills in Colonoscopy course, mandatory for all practitioners who wish to practice colonoscopy. We provide two to three courses per year depending on demand, each lasting three days with up to four trainees and four to five trainers. The focus in these courses is on one-to-one, hands on training, and we are fortunate in having a strong local training faculty who have undergone the Training the Trainers in Endoscopy Course. Participant fees are ring-fenced and used to support courses and facilitate educational activity within Endoscopy, as well as to kick-start clinical initiatives in the gastroenterology service.

Advanced Colonoscopy Courses

A particularly high standard of practice is required for those who provide colonoscopy for the Bowel Cancer Screening Programme. All who plan to do so must undergo a two day course and perform colonoscopy under supervision. We are the only centre in Northern Ireland providing this course, which is run as required to meet recruitment needs.

We would like to thank Dr William Dickey for his continued contribution in facilitating these courses on the Altnagelvin site. Income generated from these courses support all endoscopy staff and nurses to attend courses and conferences and to complete further educational studies.

RCPI (Royal College of Physicians Ireland) Masterclass Webcasts RCPE (Royal College of Physicians Edinburgh) Evening Medical Update Webcasts/Videolinks

The South West Acute Hospital continues to provide videolinked updates of the Royal College of Physicians, Edinburgh, co-ordinated by Dr J Kelly. Altnagelvin Hospital is providing these live sessions via live webstream.

Both sites remain centres for the Royal College of Physicians of Ireland Masterclass and Clinical Update webcasts.

These educational updates aim at highlighting advances in those areas of medicine which are most important and most rapidly evolving, and are well attended and beneficial to junior doctors and QUB students alike. Attendance certificates for such meetings complement areas of trainee eportfolios.

Safeguarding Children: Recognition & Response in Child Protection

The South West Acute Hospital continues to facilitate a one-day educational programme for the doctors in training in the Education Centre, SWAH. The course was approved by the Advanced Life Support Group (ALSG) together with the RCPCH/NSPCC.

The course was facilitated by Dr Gerry Mackin and was attended by 16 doctors in training, mainly in paediatrics and accident & emergency from both Northern Ireland and the Republic of

Ireland. Paediatric Consultants from Antrim, Belfast, Craigavon and Enniskillen provided excellent training and received well-deserved feedback from the candidates.

"Good course, aimed at the right level. Highly enjoyable."

Regional Specialty Teaching

The Centre for Medical and Dental Education and Training on the Altnagelvin Hospital site and the Education Suite in South West Acute Hospital are increasing being utilised as centres for specialty regional teaching either by videolink facilities or as a regional centre. Medicine, Geriatric Medicine, Urology, and Emergency Medicine are among the specialties now using the new facilities for regional teaching with plans to begin Ophthalmology regional teaching from September 2017.

Lumbar Puncture Courses

Lumbar Puncture courses continue to be offered through the Centre for Medical and Dental Education and Training in conjunction with Dr Abdul Hameed, Consultant Physician, AMU, Dr Mark McCarron, Consultant Neurologist, Dr Mark Lynch, Consultant Clinical Biochemist, and Dr Manav Bhavsar, Consultant in Anaesthetics. The courses take place four times yearly (or more if demand requires) and take place over an afternoon session with the help of a Lumbar Puncture simulator. Feedback is consistently excellent.

"Good preparation for S&D role. Excellent course, varied speakers focussing on different aspects of procedure, minimal repetition, ample opportunity for practical practice"

"Excellent practical session. I feel that I could try to do a lumbar puncture whereas before I had very little knowledge"

Tracheostomy Emergencies

As above, two previous junior doctors in the Trust offered to return to provide some training on Tracheostomy Emergencies that they had felt would be useful to junior trainees in the Trust. Dr Molly Carson and Dr Dominic McKenna provided training to final year medical students, Foundation doctors and junior trainees in ENT. Feedback was very positive.

"Very relevant for on call"

"I now understand the theory behind tracheostomies and laryngostomies, as well as the practical aspects of dealing with emergencies. Simulation scenarios were especially useful."

"Excellent. Gained lots of knowledge about tracheostomies and now feel more confident in managing emergency situation."

"I think this was extremely beneficial. It has reduced my fear of tracheostomies"

STEP (West)



As above, the Specialist Trainees Engaged in leadership Programme (STEP) project is a Leadership Skills and Quality Improvement Programme for Specialist Trainees which began in the Western Trust this academic year.

STEP(West) aims to develop trainees' skills in medical leadership, and provides basic training in quality improvement (QI) with each trainee undertaking a quality improvement or patient safety initiative in their clinical areas under mentorship. It is open to ST3 and above trainees based in the Western Trust at commencement.

Due to the success of the project, there are plans to increase availability in the next academic year and begin a First Steps to Leadership course for Foundation trainees.

University of Ulster - Stratified Medicine Programme

The Centre for Medical and Dental Education and Training continues to facilitate the University of Ulster's Stratified Medicine Programme until C-TRIC extension is complete. Income generation helps to fund equipment and consumables.

Quality Improvement Showcase Event – 25th November 2016

On 25th November 2016, the Trust held its third Quality Improvement Showcase event in the CMDET:

Quality Improvement Showcase

The Trust held its third Quality Improvement (QI) showcase day on 25 November 2016. Nursing, medical, mental health, pharmacy and social work staff presented on their QI projects all demonstrating improvements in treatment and care for patients and clients.

Guest speaker Susan Gibson, Derry Well Women, spoke about the importance of working with the voluntary sector. As well as a panel of staff discussing their involvement in QI Microsystem coaching there were a range of posters displaying improvement projects undertaken by staff. The day ended with the audience choosing the winner of the recent Dragons Den QI competition.



Ulster Medical Society

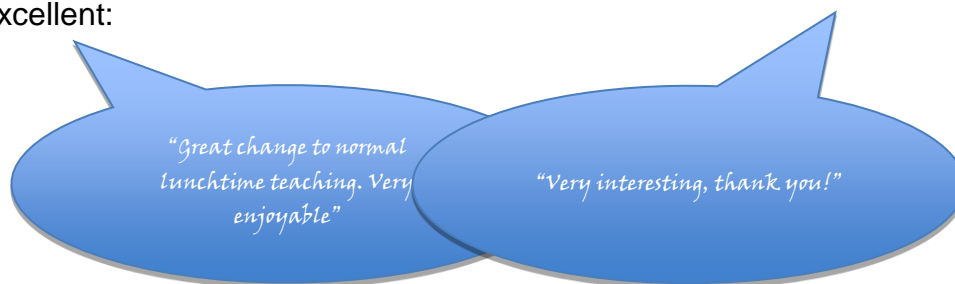
The Ulster Medical Society's Desmond Whyte memorial lecture continues to be held in Altnagelvin Hospital. This year's evening was held on Wednesday 7th December 2016 at 6pm. The topic was "Sweeping up the Leaves — New Approaches to Old Diseases" by Dr Fiona Stewart, Consultant in Genetic Medicine, N.I. Regional Genetics Service, Belfast City Hospital.

Feedback is always positive and it is always great to see retired medical staff attending this event.

Trauma Care and Battlefield Medicine – 19th January 2017

On Thursday 19th January 2017, Dr Paul Baylis, Consultant in Emergency Medicine, organised with the Territorial Army to run, in conjunction with regional Emergency Medicine teaching, Trauma Care and Battlefield Medicine stations in the CMDET, Altnagelvin Hospital, to share skills learned with Trust medical staff and regional Emergency Medicine trainees.

Feedback was excellent:



Effective Feedback Taster Session – 23rd January 2017

Ms Caroline Cutliffe from MIAD Healthcare provided a Coaching and Providing Effective Feedback Workshop in 23rd January 2017. Coaching skills are becoming an increasing part of doctors' everyday lives.

This short taster workshop involved:

- Discuss the importance of providing feedback and coaching as part of establishing and maintaining an environment for learning
- Define the GROW model and its application in the coaching environment
- Practise providing feedback
- Understanding and using your personal coaching

Participants were able to gain from the workshop:

- The time and space in which to work with other doctors in understanding and exploring many of the issues around this complex subject.
- The opportunity to develop and practise key skills with the support of colleagues and valuable input from an experienced facilitator.
- Allows access to an experienced facilitator who can guide you through the subject and explain in clear detail.

Ulster Obs & Gynae Society Conference – 3rd February 2017

The CMDET hosted the Ulster Obs & Gynae Society Conference on 3rd February 2017. This was a regional conference which took advantage of our local facilities to bring the Society to the west of the province.

The conference was very successful and feedback was very good.

Human Factors Training for Medical Staff

It must always be recognised that the vast majority of those who work in the NHS demonstrate profound levels of skill, expertise and professionalism on a daily basis. Research into human factors demonstrates that however professional and dedicated, no one is immune from making errors. The best people make some of the worst errors - dedication and academic excellence do not provide immunity against the unthinkable happening.

Following the successfully Human Factors Training in June 2016, Ben Tipney from Attrinability returned to provide training on 7th & 8th February 2017 on both Altnagelvin and SWAH sites.

The aim of the half day sessions was to increase awareness of the role human factors play in maintaining high reliability, resilient and safe practice.

The half-day introduction covered:

- how human factors relate to clinical practice
- learning from other industries & progress so far in healthcare
- human limitations - how we are all fallible & can 'miss the obvious'
- situation awareness - how to maintain a high level both as individuals & in our teams

A bespoke programme for O&G on Human Factors for multi professionals was facilitated in three separate sessions – December 2016, January 2017 and June 2017 and proved very successful. Feedback has been very encouraging. Attrinability provided a report of their findings and this was shared with the Director of Women's and Children's.

III Medical Patients' Acute Care and Treatment (IMPACT) Course – 13th and 14th April 2017

The IMPACT course is a two-day course introducing the principles and practice of acute medical care and related knowledge, skills, understanding and attitudes. Designed by the Federation of Royal Medical Colleges and the Royal College of Anaesthetists, this course is endorsed by the Resuscitation Council UK, the Intensive Care Society and the Society of Acute Medicine. IMPACT enables trainee doctors at CT1 level and above, (specifically trainee physicians) to assess and treat acutely unwell patients and where appropriate gives guidance on when to ask for help.

For the second year, Dr Siddhesh Prabhavalkar, with assistance from Medical and Dental Education and Training, organised the IMPACT course in the Centre for Medical and Dental Education and Training. Feedback from the course was extremely positive and the course will be run again in the Trust in 2018.

CCrISP NI (Care of the Critically Ill Surgical Patient) - 1st June – Friday 2nd June 2017

The first CCrISP NI course was held on Thursday 1st June – Friday 2nd June 2017 in the CMDET, Altnagelvin Hospital, and organised by Mr Roger Lawther and the Surgical department with assistance from Medical and Dental Education.

CCrISP is an interactive course that explores the skills and knowledge needed to look after surgical patients including those who are deteriorating or at risk of doing so. Expert faculty will help you develop practical, theoretical and personal skills so that you can assess and manage critical situations in a systematic way. CCrISP is relevant to all specialties, however in-course examples are predominantly taken from general surgical patients.

The course is suitable for: CT1-2 and SAS grades. Senior trainees are also welcome to attend a CCrISP course if they have not done so before (Foundation trainees are not eligible to attend this course).

Feedback from candidates and examiners was excellent who were impressed with facilities and service, so the course will run again twice in the next academic year.

Annual Cardiology Update - June 2017

Cardiac patients across the Western Trust area, Northern Ireland and further afield benefitted from a showcase 33rd anniversary Cardiology Update held in the South West Acute Hospital,

Enniskillen, June 2017.

The Western Trust in association with the Irish Cardiac Society and Northern Ireland Chest, Heart and Stroke hosted the event, which was aimed at sharing best practice in the field of cardiology and to educate, inform and inspire medical and health and social care professionals. Many topics are in areas such as congenital heart disease, inherited cardiac conditions, cardiac imaging, diabetes, ischaemic heart disease, stroke and the latest technologies, all in the context of heart disease. The conference also featured a live case demonstration from Altnagelvin Cardiac Catheterisation Suite.

This year's conference was organised by Dr Monica Monaghan, Consultant Cardiologist at South West Acute Hospital and was attended by approximately 150 cardiologists. Dr Monaghan said: "The Annual Cardiology Update provided expert insight into recent advances in key area of cardiology. The program was developed to benefit all levels of cardiology practitioners including consultants, trainees, nurses and GPs. The vision behind this conference was to provide a platform to share and exchange evidence-based best practice for the benefit of our patients."

Junior Doctor Audit Competition - 6th June and 16th June 2016

Prepare for the **Battle of the Directorates** in the

WHST Junior Doctor Quality Improvement Competition (Northern Sector) 6th June 2017

Have you undertaken a Quality Improvement Project whilst working in the WHST – if so:

Your Directorate needs YOU



Closing date for submissions to the competition is Wednesday 26th April 2017 at 1.00pm

For details on how to represent your Directorate contact the Quality Improvement & Audit Department on ext 214178/215152/ or email Deirdre.Kelly@westerntrust.hscni.net



Two very successful Junior Doctor Audit Competitions were held in South West Acute Hospital and Altnagelvin Hospital on 12th May 2017 and 6th June 2017 respectively. These annual competitions give junior doctors the opportunity to present quality improvement projects or audits they have been involved in during their time with the Trust.

All submissions across both sectors of the Trust were considered by shortlisting panels. Those successful then formally presented their projects in front of a judging panel and answered questions from the judges and the audience. All other submissions were invited to provide a storyboard of their project for display on competition day.

All formal presentations were judged on elements such as comparing performance against standards, changes in practice and closing of the audit loop. The projects presented at both competitions came from a wide range of specialties. They demonstrated on-going commitment to improving patient care and provided learning opportunities across disciplines and the Trust.

Junior Doctor Quality Improvement Competition

The annual Junior Doctor Quality Improvement Competitions were held in Altnagelvin Hospital and South West Acute Hospital in June 2017.

These competitions give junior doctors the opportunity to present quality improvement projects or audits they have undertaken whilst working within the Trust. The judging panels at both competitions comprised of the Medical Director, senior members of staff and Non-Executive Directors.

Entrants were required to answer questions from the judging panel and members of the audience following presentation of their projects.

They were then judged on factors such as the methodology used while carrying out their project and evidence of improvements to patient care. The projects presented at both competitions were highly praised by the judging panel who commented that they demonstrated ongoing commitment to improving patient care and provided valuable learning opportunities across the Trust.

Winners and runners up

Altnagelvin Hospital:
 Winner: Acute stroke admission assessment - Ann McLoughlin.
 Second place: Analgesia for neck of femur fractures - Larysa Lawrance.
 Highly commended: Tracheostomy. Emergencies Simulation Course - Molly Carson and Dominic McKenna

South West Acute Hospital:
 Winner: Improving the quality of asthma care in South West Acute Hospital - Eamon McCarron
 Second place: Stop Bang (obstructive sleep apnoea) - Catriona Jordan, Jerry Sin and Laura McGarland.
 Highly commended: RCEM 2016: Severe sepsis and septic shock in adults 2016/2017 - Laura MacDonnell.



Mrs Therese Brown (Head of Clinical Quality and Safety – Judge), Dr Ann McLoughlin (winner), Dr Demot Hughes (Medical Director – Judge), Dr Larysa Lawrance (second place), Mr Joseph Campbell (Non-Executive Director – Judge)



Dr Brian Gallen (Consultant Geriatrician – Judge), Dr Eamon McCarron (winner), Dr Demot Hughes (Medical Director – Judge)

ADEPT



The Trust in cooperation with NIMDTA have supported our first ADEPT- Clinical Leadership Fellow, Dr Aidan O Neil. This programme provides senior doctors in training with an opportunity to take time out of programme for 1 year to work in an apprenticeship model with senior leaders in the Trust to develop organisational and leadership skills. Aidan will attend formal leadership training including mentoring and coaching, and will be provided with opportunities to network and learn with healthcare colleagues.

Within this role, Aidan will be working to explore medical undergraduate and postgraduate attitudes to ‘extra-value’ training opportunities, environment, engagement and their impact on career decisions. The clinical fellow post will involve engaging students and trainees in sharing their experiences and learning, and working with trainees and fellows to further enhance their roles and impact

Aidan will have the opportunity to be actively involved in developing a Quality Improvement approach to improve a culture of medical student and trainee engagement and sense of value. Aidan will also have the opportunity to develop recommendations and solutions to address issues identified in engagement with trainees and trainers.

An update on Dr O'Neill's year in the WHSCT will follow in the 2017-18 MDE Annual Report.

PROMPT (PRactical Obstetric Multi-Professional Training)

Due to the investment in birthing simulators, it is now possible for the Obs & Gynae department to provide PROMPT courses for Trust trainees and midwifery staff in the coming academic year with a view to running the course for other Trusts staff on an income generation basis in the coming years.

CHAPTER TEN

MEDICAL EXAMINATIONS

Altnagelvin continues to host the QUB's University of Belfast OSCE Final MB undergraduate examinations and the Royal College of Physicians PACES. The Centre for Medical and Dental Education and Training continues to be the dedicated facility enabling these exams to be held without any disruption of clinical/patient care.

Practical Assessment of Clinical Examination Skills (PACES)

PACES examination consists of five clinical assessment 'Stations' where a selection of core clinical skills are tested by pairs of examiners using an objective marking system. Real patients and simulated or surrogate patients may appear and clinical skills are tested in the context of standardised problems set in a variety of systems and settings. Examiners work in pairs to set the standard for each case ('calibration'), but mark each candidate without conferring. Each candidate is asked to demonstrate seven clinical skills in eight patient encounters and is assessed by a total of ten examiners.

The PACES cycle

There are five stations above each last 20 minutes.

- Station 1 – Respiratory Abdominal
- Station 2 – History Taking
- Station 3 – Cardiovascular Neurological
- Station 4 – Communications Skills and Ethics
- Station 5 – integrated Clinical Assessment Brief Clinical Consultation 1 & 2

The PACES examinations were held on Wednesday 14th June 2017. We would like to thank the clinical co-ordinator Dr Albert McNeill, for his continued support in hosting the clinical examinations.

Final Year Objective Structured Clinical Examinations (OSCEs)

On Friday 24th February 2017 the Centre for Medical and Dental Education and Training, Altnagelvin Hospital, hosted its third OSCEs. Feedback was very positive and the Trust will continue to host these exams.

As always, we are greatly indebted to Sister Bridie McLaughlin, who co-ordinates the recruitment of patients and Sinead Doherty who organises the medical exams hosted at Altnagelvin Area Hospital. The external examiners look forward every year returning to Altnagelvin for these exams!