NES_Curve_grey3

Scotland Deanery

Quality Management Visit Report

|  |  |  |  |
| --- | --- | --- | --- |
| **Date of visit** |  | **Level(s)** |  |
| **Type of visit** |  | **Hospital** |  |
| **Specialty(s)** |  | **Board** |  |

|  |  |
| --- | --- |
| **Visit panel** | |
|  | Visit Chair |
|  | Programme Representative |
|  | Foundation Representative |
|  | General Practice Representative |
|  | Associate Postgraduate Dean – Quality |
|  | Quality Improvement Manager |
|  | Trainee Representative |
|  | Lay Representative |
| **In attendance** | |
|  | Quality Improvement Administrator |

|  |  |  |  |
| --- | --- | --- | --- |
| **Specialty Group Information** | | | |
| Specialty Group | |  | |
| Lead Dean/Director | |  | |
| Quality Lead(s) | |  | |
| Quality Improvement Manager(s) | |  | |
| **Unit/Site Information** | | | |
| Non-medical staff in attendance |  | | |
| Trainers in attendance |  | |  |
| Trainees in attendance |  | |  |
| Feedback session: Managers in attendance |  | | |

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| Date report approved by Lead Visitor |  |

**1. Principal issues arising from pre-visit review**

**2. Introduction**

**3.1 Induction (R1.13)**

**3.2 Formal Teaching (R1.12, 1.16, 1.20)**

**3.3 Study Leave (R3.12)**

**3.4 Formal Supervision (R1.21, 2.15, 2.20, 4.1, 4.2, 4.3, 4.4, 4.6)**

**3.5** **Adequate Experience (opportunities) (R1.15, 1.19, 5.9)**

**3.6. Adequate Experience (assessment) (R1.18, 5.9, 5.10, 5.11)**

**3.7. Adequate Experience (multi-professional learning) (R1.17)**

**3.8. Adequate Experience (quality improvement) (R1.22)**

**3.9. Clinical supervision (day to day) (R1.7, 1.8, 1.9, 1.10, 1.11, 1.12, 2.14, 4.1, 4.6)**

**3.10. Feedback to trainees (R1.15, 3.13)**

**3.11. Feedback from trainees (R1.5, 2.3)**

**3.12. Workload/ Rota (1.7, 1.12, 2.19)**

**3.13. Handover (R1.14)**

**3.14. Educational Resources (R1.19)**

**3.15 Support (R2.16, 2.17, 3.2, 3.4, 3.5, 3.10, 3.11, 3.13, 3.16, 5.12)**

**3.16 Educational governance (R1.6, 1.19, 2.1, 2.2, 2.4, 2.6, 2.10, 2.11, 2.12, 3.1)**

**3.17 Raising concerns (R1.1, 2.7)**

**3.18 Patient safety (R1.2)**

**3.19 Adverse incidents (R1.3)**

**3.20 Duty of candour (R1.4)**

**3.21 Culture & undermining (R3.3)**

**3.22 Other**

**4. Summary**

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| **Is a revisit required?**  **(please highlight the appropriate statement on the right)** | **Yes** | **No** | **Highly Likely** | **Highly unlikely** |

**5. Areas of Good Practice**

|  |  |  |
| --- | --- | --- |
| **Ref** | **Item** | **Action** |
| 5.1 |  |  |

**6. Areas for Improvement**

|  |  |  |
| --- | --- | --- |
| **Ref** | **Item** | **Action** |
| 6.1 |  |  |
| 6.2 |  |  |
| 6.3 |  |  |

**7. Requirements - Issues to be Addressed**

|  |  |  |  |
| --- | --- | --- | --- |
| **Ref** | **Issue** | **By when** | **Trainee cohorts in scope** |
| 7.1 |  |  |  |
| 7.2 |  |  |  |
| 7.3 |  |  |  |
| 7.4 |  |  |  |