**The Scotland Deanery – Foundation Training Quality Management in General Practice**

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| **Process** |
| The process for Quality Managing Foundation Training in General Practice in Scotland comprises an evaluation of evidence from different sources* Practice self-submission document
* Trainee feedback from Scottish Training Survey ([STS](http://about.scottishtrainingsurvey.org/)), GMC National Training Survey([NTS](http://www.gmc-uk.org/education/surveys.asp)) and pre-approval trainee questionnaires.
* Foundation Programme Director Feedback

 Visits to Practices * to all practices making a new application to host Foundation Trainees
* Scheduled visiting (either desktop review or actual visit) every 5 years thereafter
* Targeted Visits to Practices in response to concerns raised through feedback, including Foundation Programme Directors and Trainees, or in response to a declaration of major changes within the practice to the Deanery.
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| **Standards**  |
| The Scotland Deanery is entrusted by the General Medical Council (GMC) to ensure that its Foundation Training Practices provide an appropriate educational environment, meeting GMC standards. The standards for Specialty Training, including Foundation training are defined by:* The General Medical Council (GMC) in ‘[Promoting Excellence: Standards for medical education and training’](http://www.gmc-uk.org/education/postgraduate/standards_and_guidance.asp) Each section is referenced to the requirements set out in this document.

Foundation GP Training Practices in Scotland also require an understanding of and compliance with:* [NHS Education for Scotland (NES) Systems to support Trainees](https://www.scotlanddeanery.nhs.scot/trainer-information/professional-support-unit/)
* [Foundation Programme Training in General Practice – Scotland Deanery Guidance](https://www.scotlanddeanery.nhs.scot/trainee-information/scottish-foundation-school/current-trainers/general-practice-foundation-programme-information/)
* The [Working Time Regulations](https://www.gov.uk/browse/employing-people/contracts) (WTR)
* [Data Protection Act 1998](http://www.legislation.gov.uk/ukpga/1998/29/data.pdf)
* [UK General Data Protection Regulation (GDPR)](https://ico.org.uk/for-organisations/guide-to-data-protection/guide-to-the-general-data-protection-regulation-gdpr/)
* [Freedom of Information Act 2000](https://www.gov.scot/about/contact-information/how-to-request-information/)

Foundation Training Practices must meet the statutory requirements of the General Medical Services Contract ([GMS contract](https://www.gov.scot/publications/gms-contract-scotland/)). To ensure that you are aware of the breadth and detail of the standards Practices must meet, we would ask you to complete the declaration below. |
| *I/We have read, understood and agree to act in accordance with the:** *GMC Standards for Specialty Training*
* *Foundation Programme Training in General Practice – Scotland Deanery Guidance*
* *NES Systems for Supporting Trainees*
* *Working Time Regulations*
* *Data Protection Act 1998 and GDPR*
* *Freedom of Information Act 2000*
* *GMS contract or salaried Health Board contract*
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| *Confirmation*  | **Yes or No** |
| *Name of Educational Supervisor making the declaration* |  |
| **Disclosure**  |
| *I/We consent to sharing of information in this document within the NES Quality Management team and with the relevant Director of Medical Education if required.*  |
| *Confirmation* | Agreement |
| *Name of Educational Supervisor/s making the declaration* |  |

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| **Practice Information** |  |
| Name of Practice  |  |
| Health Board Number |  |
| Address |  |
| Telephone number |  |
| First application as host practice | **Yes or No** |
| Date of Application | Click or tap to enter a date. |
| Practice Manager |  |
| Practice manager’s E-mail address |  |
| Name of person/s completing application |  |
| Name/s of Foundation Educational Supervisor/s and GMC number |  |
| Other Training taking place in the practice | GP Retainer scheme | Yes or No |
| Undergraduate teaching | **Yes or No** |
| Other learners supported in the practice e.g., pharmacy, ANPs, paramedics etc.  |  |
| Practice list size |  |
| Describe the practice and patient demographics. These might include split site, branch surgery, degree of deprivation, rurality, nursing homes etc.  |  |
| List any significant changes in the practice since last approval including change of doctors, managers, premises and plans for training succession if appropriate.  |  |
| Is the practice in dispute with the Health Board over any issues (e.g. property, contractual) which may have an impact on the delivery of FY Training? | **Yes or No** |
| If yes, please describe |  |
| Please confirm that the practice leaflet and/or website contains information that patients may been seen by doctors in training | **Yes or No** |
| **Doctors in the practice** |
| Name | Status:Partner/Salaried/Retainer/locum | Weekly sessional commitment to practice |
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| Are any doctors who undertake trainee supervision in the practice working under GMC imposed conditions or restrictions on their license to practice? | **Yes or No** |
| If yes, please confirm the practice has adapted supervision to meet the requirements for safe and effective trainee clinical supervision? | **Yes or No** |
| List and report progress on requirements/recommendations from previous visit if applicable |  |

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| **GMC Themes 1-3*** **Learning Environment and Culture**
* **Educational Governance & Leadership**
* **Supporting Learners**
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| **Induction**  |
| **Organisational**: GMC Standards: Practices must ensure that trainees have an induction in preparation for each placement that clearly sets out their duties and supervision arrangements, their role in the team, how to gain support from senior colleagues, workplace policies they must follow and how to access clinical and learning resources [1.13] Practices and their staff must have a reliable way of identifying learners at different stages of education and training, and make sure all staff members take account of this, so that learners are not expected to work beyond their competence. [1.10] |
| Describe the FY trainee **organisational** induction to the practice. Please also attach your induction programme. This should detail clinical supervision, IT and reporting arrangements. You may include other relevant supporting documentation. [1.13] |  |
| Within the practice how are staff members made aware of the stage of training for each trainee and that trainees work within their competence? [1.10] |  |
| **Educational**: GMC Standards: The Practice ensures that trainees have undertaken appropriate educational induction. [1.13, 5.9] |
| Describe the **educational** induction for trainees. Provide examples of how ES’s assess trainee’s educational needs. |  |
| **Supervision, Workload and Adequate Experience** |
| GMC Standards: Trainee responsibilities for patient care must be appropriate for their stage of training. Supervisors must determine a trainee’s level of competence, confidence and experience and provide appropriate graded level of clinical supervision. [1.9] Practices must make sure there are enough staff members who are suitably qualified so that trainees have appropriate clinical supervision for patients to receive care that is safe and to a good standard while creating the required learning opportunities. [1.7, 1.8]. **Supervision** *- The Educational Supervisor must allow trainees, when suitably competent and appropriately supervised, to take graduated responsibility for care appropriate to the needs of the patient.* |
| **Please describe Supervision arrangements for each of the following and how this is adapted across the 4-month placement** |
| Consulting including appointment duration and by telephone |  |
| Home visits |  |
| Prescribing  |  |
| Referrals  |  |
| **Trainee Workload and Timetable –** *The Educational Supervisor must provide protected time for teaching & learning to include debriefing after every clinical session, protected time for SLEs and arrangements to attend the local FY2 educational programme. The working week timetable must comply with WTR taking into account OOH arrangements* |
| GMC Standards: Practices must design rotas that make sure trainees have appropriate clinical supervision, support trainees to develop relevant knowledge, skills and behaviors, provide learning opportunities, provide access to educational supervisors and minimise the adverse effects of fatigue and workload. [1.12]. Trainees must have protected time for learning while they are doing clinical work and for attending organised educational sessions and other learning opportunities to meet the requirements of the curriculum. [1.16]. The working week timetable should also comply with the Working Time Regulations. |
| Please complete the typical trainee working week timetable provided (Form 7). This must demonstrate 8.5 clinical, 1 educational and 0.5 personal development sessions or less than full time equivalence. There must be a minimum of 2 hours of teaching time and a maximum 40 hour working week. Please confirm this has been attached. | **Yes or No** |
| Please confirm compliance with Working Time Regulations and that adjustments are made (if required) regarding Trainee’s OOH sessions. | **Yes or No** |
| Please confirm that FY2 does not undertake duty doctor sessions or work on their own in other locations out with the practice | **Yes or No** |
| **Teaching, Feedback and Assessment** |
| GMC Standards: Trainees must have protected time for learning while they are doing clinical work and for attending organised educational sessions and other learning opportunities to meet the requirements of the curriculum. [1.16]. Doctors in training must be able to take study leave appropriate to their curriculum or training programme. [3.12] Practices must make sure that work undertaken by trainees provides learning opportunities and feedback on performance, and gives an appropriate breadth of clinical experience. [1.15] |
| Describe the arrangements for formal teaching in the practice, how this is designed to meet the needs of the trainee and who in the team contributes. |  |
| Describe how you observe and provide feedback to your trainees. [1.15, 3.13] |  |
| Please confirm that appropriate arrangements are made for supporting trainee study leave and attendance at mandatory teaching. [3.12] | **Yes or No** |
| Please confirm the practice provides equipment to the trainee other than a stethoscope.  | **Yes or No** |
| Describe the arrangements for carrying out SLE’s for trainees. Who carries these out? [1.18] |  |
| **Teamwork and Leadership** |
| GMC: Practices must support every trainee to be an effective member of the multi-professional team by promoting a culture of learning and collaboration. [1.17] |
| Describe meetings that take place in the practice, who is involved and how trainees attend and contribute.  |  |
| **Safety, Raising concerns and feedback to the practice**  |
| GMC Standards: Practices should demonstrate a culture that allows trainees to raise concerns about patient safety, and the standards of care or of education and training, openly and safely [1.1]. Practices must demonstrate a culture that investigates and learns from mistakes and reflects on incidents and near misses [1.3]. Practices must demonstrate a learning environment and culture that supports trainees to be open and honest with patients when things go wrong and help them to develop the skills to communicate with tact, sensitivity and empathy [1.4]. Practices must demonstrate a culture that seeks and responds to feedback from trainees [1.5]. Good handover requires that all GPs in the practice produce high quality, contemporaneous written notes on patient consultations [1.14]. |
| Describe how trainees can raise concerns re standards of patient care, education & training and how the outcome of this would be fed back to the trainee. |  |
| Describe the safety culture and team learning from events – SEA/LEA, complaints review etc. |  |
| Describe practice Quality Improvement Activity & Trainee involvement |  |
| Describe support provided to trainees when things go wrong |  |
| How is feedback from trainees sought and used to develop training, providing examples? |  |
| How are active issues regarding patients of concern shared with clinicians to support high quality care. |  |
| Please confirm there is ongoing monitoring of the quality of patient records made by clinicians to allow safe ongoing care for patients. [1.14] | **Yes or No** |
| Please confirm that the practice is aware that the Deanery requires to be notified of any complaints received by the practice in which a trainee is named. | **Yes or No** |
| **Wellbeing and Professionalism** |
| GMC Standards: Practices should support trainees to develop the professional values, knowledge, skills and behaviors required of all doctors [1.12]. Trainees must be supported to meet professional standards and guidance that uphold the medical profession [3.1]. Trainees must be encouraged to take responsibility for their own health and wellbeing [3.2]. Practices must have processes to identify, support and manage trainees when there are concerns about professionalism, progress, performance, health or conduct [2.16 & 3.14]. Trainees must not be subjected to, or subject others to behaviours that undermines professional confidence, performance or self-esteem [3.3]. Trainees must receive information to support them move between different stages of education and training [3.5]  |
| How does the practice instill Professional values and skills in trainees? |  |
| How are Trainee progress issues, performance or health concerns identified and managed and what support would be provided? |  |
| How does the practice support trainee wellbeing and resilience? |  |
| How does the practice value and support inclusivity and diversity and ensure the environment is free from undermining behaviours? |  |
| How does the practice support reasonable adjustments e.g. LTFT, religious observation and return form career break? |  |
| What support is provided for transition to next career stage? |  |

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| **GMC 4 & 5 - Supporting Educators, Implementing curricula and assessments** |
| All Educational Supervisors require up to date Equality and Diversity Training that must have taken place within the last 3 years. *[Training should be high level via e-modules with a certificate of completion, workshops with learning outcomes including evidence of learning points and how it could be applied to trainees].* |
| Please tell us the date of your most recent E&D training? | Click or tap to enter a date. |
| GMC Standard: Assessments must be carried out by someone with appropriate expertise in the area being assessed, and who has been appropriately selected, supported and appraised. They are responsible for honestly and effectively assessing the doctor in training’s performance and being able to justify their decision. Educators must be trained and calibrated in the assessments they are required to conduct [5.11]. |
| Please provide evidence of familiarity on use of Foundation e-portfolio and details of participation in SLE calibration exercises. |  |
| Are you a recongnised educational supervisor through recognition of trainers and is this recognition up to date? | **Yes or No** |
| Please state the date of your last NHS Appraisal | Click or tap to enter a date. |
| Can you confirm that your educational roles were discussed at appraisal? | Yes or No |
| Are there items in your current PDP related to developing your role as a Foundation ES? | **Yes or No** |
| List the elements in your agreed PDP relevant to your role as a FY Educational Supervisor. |  |
| GMC Standard: Trainers must have enough allocated time to allow them to meet their educational responsibilities so that they can carry out their role in a way that promotes safe and effective care and a positive learning experience [4.2]. |
| Describe how practice time is allocated to you for your training responsibilities. |  |

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| **Educational Supervisor and Training Development** |
| How do you plan to further develop training in your practice or develop your personal educational skills? |  |