

**Anatomy Department Inspection Report:
Royal College of Surgeons in Ireland,
11th February 2016**

License holder: Professor T. Clive Lee

In Attendance

Mr D. C. Davies – Inspector of Anatomy

Mr Michael Ryan – Council Member

Ms Aoise O'Reilly – Medical Council

SECTION 1 – ORGANISATIONAL CAPACITY AND CAPABILITY

1. LICENSING, AUTHORITY, RESPONSIBILITY AND ACCOUNTABILITY

The lead individual holding the license for Anatomical Examination at RCSI (Professor T. C. Lee) has not changed since the 2013 inspection and the required annual returns have been made to the Medical Council. There have been staff changes since the last inspection, which have not been notified to the Medical Council. In order to facilitate institutions making such notifications, in future staff changes will form part of the annual return to the Medical Council.

2. GOVERNANCE AND QUALITY SYSTEMS

I met with Professor Lee and senior members of academic and technical staff of the Anatomy Department. The Department appears to be a cohesive unit and its members understand their responsibilities in relation to their role in Anatomical Examination.

All staff are appropriately qualified and trained for their work and RCSI has appropriate annual performance management and development appraisals.

A suitable systematic record management system that ensures data protection, confidentiality and has suitable provision for data back-up (see below), is in place.

Appropriate risk assessments of the practices and processes related to Anatomical Examination are in largely in place.

The service level agreements between RCSI and their undertakers, Corrigan & Sons and Glasnevin Trust, are expected to be in place in the near future. These agreements will be common to all of the Dublin medical schools.

The responses to the recommendations made following the last inspection indicate that the license holder can escalate concerns up through the College and that staff can investigate and respond to adverse events.

A new Surgical Skills Centre is being developed on York Street, opposite the main RCSI building. It is not clear what human material (if any) will be used in the centre, but the Surgical Affairs Directors have been made aware of the Code of Practice for Anatomical Examination and that any use of human tissue within the centre will fall under the remit of the license holder.

There is a Pathology Museum comprising retained cadaveric material at Beaumont hospital, it is still not clear whether this falls under the jurisdiction of the Inspector of Anatomy, or indeed anyone else.

SECTION 2 – RECOMMENDED PRACTICES

1. CONSENT

RCSI uses the model consent form published as an appendix to the Code of Practice for Anatomical Examination. This consent form meets all of the recommendations within the Code of Practice. The information booklet for potential donors and their families gives appropriate information for the consent to be fully informed.

2. PREMISES, FACILITIES AND EQUIPMENT

The premises, facilities and equipment were inspected from the entrance point of a donor's remains, through the embalming and storage facility, to the dissecting room where teaching was in progress.

The security of the undertaker's entrance remains good as does that of the embalming / storage facility. The embalming facility refurbished prior to the initial inspection in 2011 continues to perform well and the cause of the problem of mold growth recorded in the 2013 inspection report has been identified and rectified.

Cadaveric material is transferred from the embalming / storage facility via a dedicated, secure lift.

CCTV connected to the Porter's lodge has now been installed to monitor the entrances the dissecting room and 'auto-shut' has been installed on the entrance doors, which are only open between 9.00am and 5.00pm and are monitored by College security.

Student entrance into the dissecting room is monitored by written register. The signage in and around the dissecting room is appropriate as are the facilities in the dissecting room.

There is not any active air handling, but the height of the room and the air vents incorporated into the roof design, render this unnecessary.

3. RECORD KEEPING / TRACEABILITY

Record keeping and traceability have improved in line with recommendations made following the 2013 inspection. Hard copy donation records are now stored in a fire-proof cabinet.

A new purpose-designed electronic database has been installed and consent forms and other donation records for donors accepted for anatomical examination are now scanned and entered into the database.

Retained parts are now cross-referenced to the cadaver and donation records.

An audit of traceability was successfully conducting by selecting some retained parts in use during the teaching taking place at the time of inspection and tracing them back to the cadavers they were derived from and the consent form and other records.

Some historical retained parts were only traceable back to paper records and it is recommended that such records should also be scanned and entered into the electronic database.

4. SENSITIVE DISPOSAL

The donation information booklet provides full information about the options available for disposal of the donors' remains. Remains are either entered in Glasnevin Cemetery or returned to their relatives. Retained parts are also entered in Glasnevin.

5. LOAN / TRANSFER OF CADAVERIC MATERIAL

RCSI does not currently loan or transfer any cadaveric material.



Inspector of Anatomy