FINAL - Report on the Accreditation of The Programme of Specialist Training in Public Health Medicine

Approved by ETC 10 September 2020

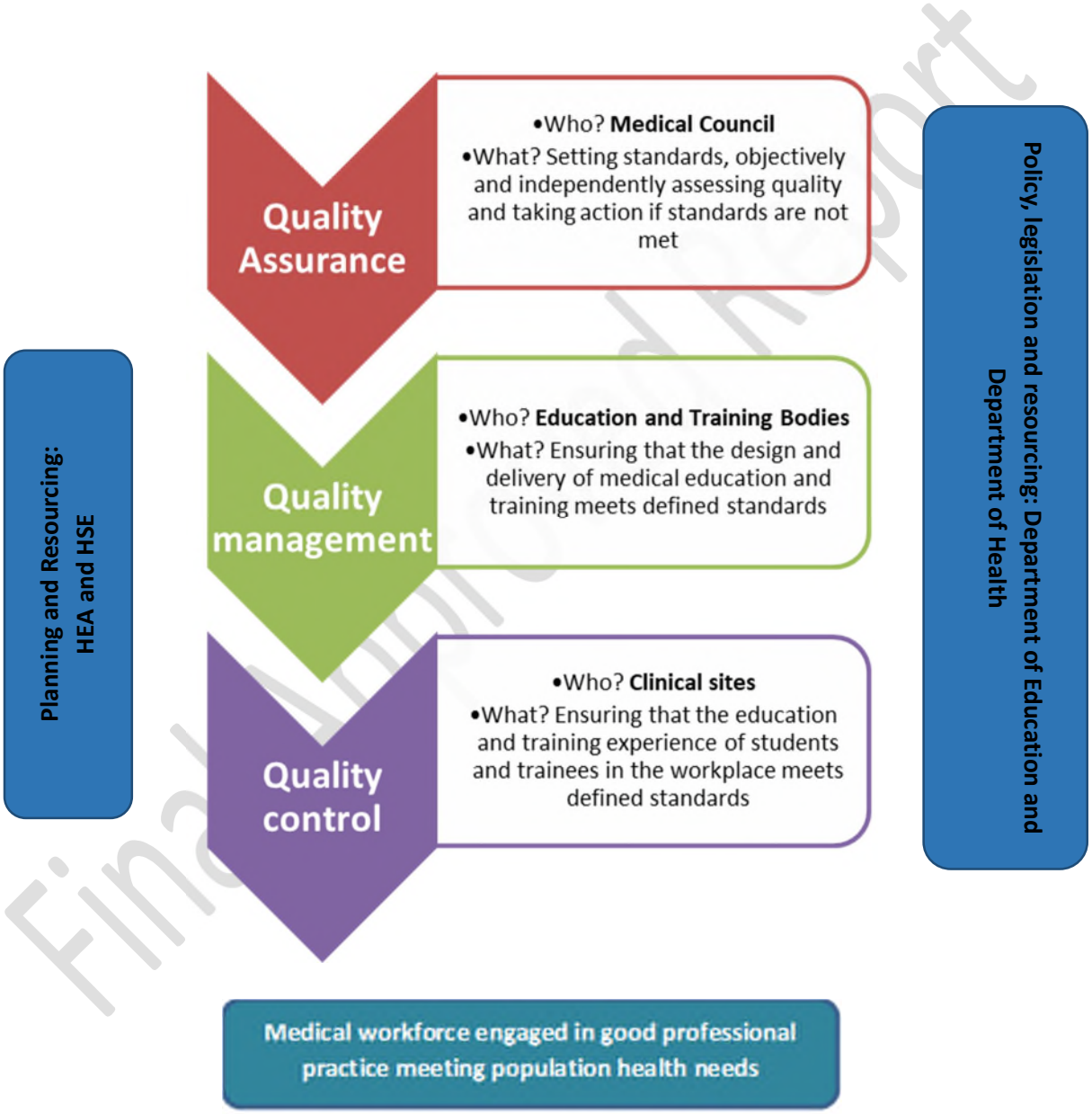
Ministerial Approval 02 October 2020

Comhairle na nDochtúirí Leighis
Medical Council

Contents

1. Role of the Medical Council under Part 10 of the Medical Practitioners Act 2007

Ensuring the quality of medical education and training in Ireland is a collaborative effort between the various bodies responsible for quality assurance, quality management and quality control:



The Medical Council is responsible for quality assuring medical education and training in Ireland across the continuum, which spans the undergraduate, intern and specialist training stages of professional

development[1]. This includes the approval of programmes of medical education leading to the award of a basic medical degree, specialist training programmes and the medical schools and postgraduate training bodies which deliver those programmes. Included in the Medical Council's responsibilities for quality assuring medical education and training, is the inspection of places with approved posts for intern and specialist training. The aim of these inspections is to monitor compliance with Council's standards and guidelines for training and experience.

Hereinafter any reference to "accreditation" of a programme and / or Body, means approval by the Medical Council of a programme / Body within the provisions of sections 89(3)(a)(i) and (ii) of the MPA 2007.

A Body which was recognised under the previous Medical Practitioners Act 1978 for the purpose of granting evidence of satisfactory completion of specialist training[2] was, on commencement of the 2007 Act, deemed to be a Body approved under the 2007 Act for the same purposes. The Medical Council now undertakes a process of formal accreditation of such bodies under section 89 (3) of the 2007 Act. The aforementioned accreditation standards are used as the benchmark to determine whether a Body and its associated programmes of specialist training are fit for purpose and of the requisite quality.

In 2011, amendments made to the Medical Practitioners Act 2007 initiated an accreditation process involving 13 Postgraduate Training Bodies.

Under Section 89(3) of the MPA 2007, the Council, with consent of the Minister has a number of options available to it in respect of accreditation:-

I. *"approve;*

II. *approve subject to conditions attached to the approval of;*

III. *amend or remove conditions attached to the approval of or*

IV. *Withdraw the approval of – "*

- programmes of specialist training in relation to that medical specialty, and
- the bodies which may grant evidence of the satisfactory completion of specialist training in relation to that medical specialty.

The Medical Council's Team's findings are based on the programme and Body's adherence to the rules, criteria, guidelines and standards approved by Council as specified in Sections 87(3), 88(1)(a), 88(4)(b), 88(4)(d) and 89(3) of the Medical Practitioners Act 2007.

[1]Part 10 of the Medical Practitioners Act 2007 as amended (MPA 2007)
[2]MPA 2007, Section 89(3)(a)(ii)

Freedom of Information Act 2014 and General Data Protection Regulation (GDPR) and Data Protection Acts 1988-2018.

The Medical Council is subject to requirements of the Freedom of Information Act and of the General Data Protection Regulation ('GDPR') and the Data Protection Acts 1988 – 2018. Further information on both Freedom of Information and Data Protection legislation is available on our website at:

https://www.medicalcouncil.ie/FOI-Data-Protection/

2. Preface

1. Context of the Accreditation Session

The Medical Council Assessor Team met with representatives of the Faculty of Public Health Medicine (FPHM) who were accompanied by members of the management team of the Royal College of Physicians of Ireland (RCPI) on 21 November 2019. The Assessor Team's remit was to assess the Programme of Specialist Training in Public Health Medicine against the '*Medical Council Accreditation Standards for Postgraduate Medical Education and Training*' (approved 1st June 2010 and revised 25th October 2011)("Standards") and to subsequently formulate a recommendation to the Medical Council's Education and Training Committee (ETC).

2. The Team

The visiting Assessor Team comprised Council members, external Assessors with a relevant background/interest in medicine and/or medical education/training; and included medically qualified and non-medically qualified persons, representing public/patient interests, and Council Executive. The Medical Council Assessor Team is listed in Appendix One of this Report. The Council particularly appreciates the contribution of the Assessors. The Team comprised of Professor Mary O'Sullivan (Chair and Council member), Dr Aoife Hunt, Dr Robert Eager, and Dr Irfan Ghani. They brought additional expertise in quality assurance of medical education to the accreditation and generously gave of their time and expertise to help with the accreditation process.

The Medical Council also thanks the representatives from the Faculty of Public Health Medicine and the Royal College of Physicians of Ireland for their co-operation. In addition, the Medical Council wishes to thank the Trainees who met the Team on the day, and whose feedback was most helpful in formulating aspects of this report.

The Assessor Team met with members of the Faculty Executive, Specialty Training Committee and RCPI Management, and interviewed Trainee specialists participating in specialist training programmes.

3. Documentation

As part of the accreditation process, the Body was asked to complete and document a self-evaluation process based upon the Standards. This documentation along with supporting evidence was reviewed by the Team.

4. Schedule

The Accreditation Session included a private meeting of the Medical Council Assessor Team, and in-depth discussions between the Team and representatives from the Faculty of Public Health Medicine and the Royal College of Physicians of Ireland, and a separate interview with Trainees. Topics covered included: the syllabus; training methods; formative and summative assessment tools; standards; outcome measures; workforce planning consideration; flexible training; learners in difficulty; mentorship, and lifelong learning including Continuous Professional Development. Discussions were audio-recorded and later transcribed by a logger.

5. Appendices

The agenda for the Accreditation Session is attached in Appendix One. The list of supporting documentary evidence that was provided to support the self-evaluation submission under each standard is attached as Appendix Two. The accreditation standards which were applied throughout this process can be referenced found here: *Medical Council Accreditation Standards for Postgraduate Medical Education and Training.*

6. The Report

The Standards formed the basis of the evaluation of both the Faculty of Public Health Medicine and the Programme of Specialist Training in Public Health Medicine. The observations, comments and recommendations contained in this Report are grouped under the relevant sections of these standards.

3. Summary and General Assessment

1. Conclusion

Approval Status

i. **The Programme of Specialist Training in Public Health Medicine** is approved for a period of five years *with one condition*, by the Council under the terms of Section 89(3)(a)(i) of the Medical Practitioners Act 2007.

ii. **The Faculty of Public Health Medicine, RCPI** is approved for a period of five years by the Council under section 89(3)(a)(ii) of the Medical Practitioners Act as the body which may grant evidence of the satisfactory completion of Specialist Training in Public Health Medicine approved under (i) above subject to the compliance with the condition outlined below.

This approval is from the date of approval by the Education and Training Committee (10 September 2020) of the Medical Council and the Minister of Health (02 October 2020) as set out in Statutory Instrument 529 of 2010.

Condition

a. Enabling trainers to spend time undertaking activities that are essential to the long-term maintenance of the quality of the health service through supporting the education of our future medical practitioners should form part of agreements between postgraduate bodies and training sites.

The Faculty of Public Health Medicine, RCPI is required to advocate (to the Health Service Executive and other relevant employers/organisations) with appropriate stakeholders such as individual specialty organisations or other postgraduate bodies and the Medical Council for protected time for Training Programme Directors / National Specialty Directors and Trainers to enable high quality delivery of the training programme.

Condition (a) is consistent with findings in "Context of Training – Interaction with the Health Sector and "Implementing the Training Programme – Delivery of Educational Resources" of the report under standards 1.4.2 and 8.1.6.

4. Overview of Compliance Ratings for the Programme of Specialist Training in Public Health Medicine.

In this report, a condition and a number of recommendations and commendations have been made to ensure that the Faculty of Public Health Medicine complies, improves compliance and/or continues to comply with all training standards. The Faculty will be requested to develop an Action and Implementation Plan to address these recommendations and report back to the Medical Council with the proposed Plan within three months of the issue date of the final Accreditation Report.

Levels of compliance

Compliance ratings are determined based on each Assessor Team's appraisal of evidence provided for each standard. Documentary evidence considered includes the self-evaluation submissions from the Body submitted prior to accreditation, together with evidence obtained from meetings on the day of accreditation with members of the Faculty Executive and Specialty Training Committee, RCPI Management and Trainees.

The compliance ratings are:

- **Full compliance** (FC) – All requirements of a standard are adhered to
- **Partial compliance** (PC) – Parts but not all requirements of a standard are adhered to
- **Non-compliance** (NC) – No requirements of a standard are adhered to.

The Medical Council has nine specialist training standards under the following headings:

1. Context of Training
2. The Outcomes of the Training Programme
3. The Education and Training Programme – Curriculum Content
4. The Training Programme – Teaching and Learning
5. The Curriculum - Assessment and Learning
6. The Curriculum – Monitoring and Evaluation
7. Implementing the Curriculum -Trainees
8. Implementing the Training Programme and Delivery of Educational Resources
9. Continuing Professional Development.

Summary table of compliance for the programme of specialist training in Public Health Medicine

MEDICAL COUNCIL'S ACCREDITATION STANDARDS FOR POSTGRADUATE MEDICAL EDUCATION AND TRAINING	PUBLIC HEALTH MEDICINE COMPLIANCE RATING PER STANDARD												
1. Context of Training	*1.1.1*	*1.1.2*	*1.1.3*	*1.2.1*	*1.2.2*	*1.2.3*	*1.3.1*	*1.3.2*	*1.4.1*	*1.4.2*	*1.5.1*		
2. The Outcomes of the Training Programme	*2.1.1*	*2.1.2*	*2.2.1*	*2.2.2*	*2.2.3*	*2.2.4*							
3. The Education and Training Programme – Curriculum Content	*3.1.1*	*3.2.1*	*3.2.2*	*3.3.1*	*3.3.2*	*3.4.1*	*3.4.2*	*3.5.1*					
4. The Training Programme – Teaching and Learning	*4.1.1*	*4.1.2*	*4.1.3*										
5. The Curriculum - Assessment and Learning	*5.1.1*	*5.1.2*	*5.1.3*	*5.2.1*	*5.2.2*	*5.2.3*	*5.3.1*	*5.4.1*					
6. The Curriculum – Monitoring and Evaluation	*6.1.1*	*6.1.2*	*6.1.3*	*6.2.1*	*6.2.2*								
7. Implementing the Curriculum -Trainees	*7.1.1*	*7.1.2*	*7.1.3*	*7.1.4*	*7.1.5*	*7.2.1*	*7.3.1*	*7.3.2*	*7.3.3*	*7.4.1*	*7.4.2*	*7.4.3*	*7.4.4*
8. Implementing the Training Programme and Delivery of Educational Resources	*8.1.1*	*8.1.2*	*8.1.3*	*8.1.4*	*8.1.5*	*8.1.6*	*8.2.1*	*8.2.2*	*8.2.3*	*8.2.4*	*8.2.5*		
9. Continuing Professional Development	*9.1.1.*	*9.1.2*	*9.1.3*	*9.1.4*	*9.1.5*	*9.1.6*	*9.2.1*	*9.3.1*					

Fully Compliant
Partially Compliant
Non-Compliant
Not Applicable

5. Evaluation of Compliance with Medical Council Standards

Training Body: Faculty of Public Health Medicine, RCPI
Programme of Specialist Training: Public Health Medicine

The Team has found the following standard to be non-compliant for the programme of specialist training in Public Health Medicine.

8. IMPLEMENTING THE TRAINING PROGRAMME – DELIVERY OF EDUCATIONAL RESOURCES (Supervisors, Assessors, Trainers and Mentors) – *8.1.6* *Organisation and development of trainers – instructional activities must be included as responsibilities in the work schedules of trainers and their relationship to work schedules of trainees must be described.*		
FINDING	**RECOMMENDATION**	**COMPLIANCE**
8.1.6 The Team heard that there is a lack of adequate protected time for Trainers with time for instructional activities not included in job plans. The Faculty stated that Trainers continue to go to efforts to balance their roles as specialist Public Health physicians with that of Trainers. However, in line with the standard, there should be time put aside for consultant trainers in their weekly job plan within the consultant contract for a minimum of one hour a week. It was confirmed in the interview with the Team that RCPI is engaging in the process of developing MOUs with training sites and the Team encourages completion of this process. The Team supports the RCPI's efforts to include protected time for Trainers as part of the MOU. This finding is also reflected in standard 1.4.2.	The National Specialty Directors and Trainers require adequate protected time in order to effectively fulfil their roles.	**Non-Compliant**

The Team found the following standards to be partially compliant for the programme of specialist training in Public Health Medicine.

1.CONTEXT OF TRAINING – INTERACTION WITH THE HEALTH SECTOR - 1.4.2 *The training organisation works with healthcare institutions to facilitate clinicians employed by them to contribute to high quality teaching and supervision, and to foster peer review and professional development.*		
FINDING(S)	**RECOMMENDATIONS**	**COMPLIANCE**
1.4.2 The provision of supporting documentation e.g. a Memorandums of Understanding between the Faculty and employing institutions would provide further clarity on this standard. The Team found elements of this standard to be fulfilled with the exception of protected time. As outlined in 8.1.6, the Team heard that protected time for the instructional activities of Trainers is not adequately recognised and believes that formal recognition in MOUs with training sites would help to better support Trainers.	The Faculty should develop MOU's with training sites. This should include the provision of protected time for Trainers in so far as possible.	**Partially Compliant**

STANDARD 2 – THE OUTCOMES OF THE TRAINING PROGRAMME – 2.2.2 *The outcomes address the broad roles of practitioners in the discipline as well as technical and clinical expertise.*		
FINDING	**REQUIREMENT / RECOMMEDATION**	**COMPLIANCE**
2.2.2 Although outcomes per se are not defined in the current curriculum, objectives, knowledge, skills, assessment, learning methods and minimum requirements are identified for each module. 'Generic' and 'technical' skills are also delineated. The Team recognises that outcomes may be more expressly defined in the new curriculum. There seems to be a consensus that graduates should be proficient in the four domains of Public Health Medicine (PHM), but the curriculum is less specific in how this can be achieved. The Faculty informed the Team that it is satisfied with the range of training and learning	With the move to the implementation of Outcomes Based Education, the Faculty should ensure a more balanced approach to each of the four domains.	**Partially Compliant**

opportunities provided to Trainees, including experience of regular outbreaks, major weather events and multidisciplinary simulations, and that training sites tend to be very busy. The Faculty also advised the Team that if a Trainee were to identify a gap in their training experience that it would organise simulations and would raise the issue during the review of the curriculum. While Trainees acknowledged that they enjoy the diversity of the specialty and the variety of placements available, they also suggested that this variability between sites contributes to inconsistent exposure to the four domains of PHM. Trainees reported that in practice, the learning experience has an over-emphasis on one of the domains, health protection.		

2. THE OUTCOMES OF THE TRAINING PROGRAMME - GRADUATE OUTCOMES – 2.2.4 *The training organisation makes information on graduate outcomes publicly available.*		
FINDING	**REQUIREMENT / RECOMMEDATION**	**COMPLIANCE**
2.2.4 The Team noted that the Faculty has published some basic data on its website regarding the number of graduates annually and the positions where they are employed and considers this a good first step. The Faculty noted that while it currently, as a small specialty, has personal and anecdotal knowledge of graduate outcomes, this method of information gathering will become less feasible as Trainee numbers increase. The Team supports the Faculty's intent to gather more formal data on the career pathways of its Trainees and this is reflected in a recommendation under 6.2.1.	The Faculty should publish more in-depth data on graduate attributes and qualifications i.e. specialist interests and research expertise of graduates on completion of training, etc.	**Partially Compliant**

STANDARD 3 – THE EDUCATION AND TRAINING PROGRAMME – CURRICULUM CONTENT - ***3.4.1*** *The programme structure and training requirements recognise part-time, interrupted and other flexible forms of training.*		
FINDING	**REQUIREMENT / RECOMMEDATION**	**COMPLIANCE**
3.4.1 The programme offers national flexible training options such as the HSE NDTP Supernumerary Flexible Training Scheme and job sharing, and the Team had sight of these policies. The Team notes that the Faculty received an award from the HSE NDTP for its performance in this area. The Team also heard of Trainees being facilitated regarding maternity and parental leave. The Faculty informed the Team that it also operates a personalised approach to flexible training within the Faculty. It has an informal policy for less than full time posts whereby Trainees are facilitated to work 80% of normal working hours. The Team found a lack of clarity with regards to flexible training due to a number of policies and practices across the Faculty and HSE. There is no written policy in place detailing its informal arrangement and Trainees advised the Team that they were not aware of the informal option. Greater clarity should be provided to Trainees at the start of the training programme with regards to flexible training and the options available to them.	A flexible training document should be developed detailing formal and informal flexible training arrangements and should address processes, opportunities, benefits and impact on Trainee progression. This should be provided to Trainees when developed and thereafter, to all Trainees commencing the training programme.	**Partially Compliant**

STANDARD 3 – THE EDUCATION AND TRAINING PROGRAMME – CURRICULUM CONTENT - **3.5.1** *The training organisation contributes to articulation between the specialist training programme and prevocational and undergraduate stages of the medical training continuum.*		
FINDING	**REQUIREMENT / RECOMMEDATION**	**COMPLIANCE**
3.5.1 In its self-evaluation submission, the Faculty states that Public Health Medicine and Epidemiology is taught in Undergraduate Medicine courses in UCD, RCSI, UCC and NUIG. However, the Faculty also recognises that PHM is taught at different stages at undergraduate	The Faculty should organise a series of annual meetings with medical schools to identify challenges and potential solutions	**Partially Compliant**

level and thus the focus may differ. The Team was informed that PHM is also promoted at career days. The Faculty has supported the development of a proposal by leaders in academic Public Health and Epidemiology for joint clinical and academic posts in PHM. The Team heard that the proposal was presented to the Department of Health and the Faculty is awaiting a definitive outcome. The Team agrees that there should be greater communication and linkages with Medical Schools at undergraduate level to highlight and promote Public Health Medicine's curriculum content and Public Health as a potential career. The Team notes the workshop the Faculty ran in September 2019 on the Faculty's new model of Public Health Medicine which was open to Trainees, Members and Fellows. The Team considers this a good initiative and supports further collaboration with a range of academic institutions in promoting Public Health Medicine as a career option.	in relation to curricula and delivery of education programmes.	

STANDARD 4 – THE TRAINING PROGRAMME – TEACHING AND LEARNING - *4.1.2* *The training programme includes appropriately integrated practical and theoretical instruction.*		
FINDING	**REQUIREMENT / RECOMMEDATION**	**COMPLIANCE**
4.1.2 In its self-evaluation submission, the Body noted that due to the nature of PHM, opportunities for practical instruction cannot be predicted in advance. Although the Trainees recognised that the curriculum includes integrated practical and theoretical instruction, it was reported that additional structured formal teaching sessions across all domains of PHM would be welcomed e.g. simulation. The Team heard that the domain of health protection tends to be the principle focus of the Irish workplace with opportunities in the other domains varying by scheme.	The Faculty should ensure a more balanced approach to each of the four domains in terms of both practical and theoretical instruction. E.g. climate change, epidemiology, obesity, non-communicable diseases, simulation, responding to emergency planning scenarios.	**Partially Compliant**

STANDARD 4 – THE TRAINING PROGRAMME – TEACHING AND LEARNING - ***4.1.3*** *The training process ensures an increasing degree of independent responsibility as skills, knowledge and experience grow.*		
FINDING	**REQUIREMENT / RECOMMEDATION**	**COMPLIANCE**
4.1.3 Although provided with the curriculum and accompanying competency log, the Team notes insufficient evidence that Trainee independence increases over the course of the programme. The Team would have liked to have some concrete examples in the documentation of how this is being achieved. The Team heard from some Trainees that the demand of service provision can mitigate against gaining an increasing degree of responsibility, such as taking on a strategic or leadership role. It was noted that there is an appetite among Trainees for opportunities to practice leadership as they progress through training.	The Faculty should ensure that final year Trainees experience independent learning at an appropriately senior level in preparation for appointment to roles in Public Health Medicine.	**Partially Compliant**

STANDARD 5 – THE CURRICULUM – ASSESSMENT OF LEARNING - ***5.3.1*** *The training organisation has a policy on the evaluation of the reliability and validity of assessment methods, the educational impact of the assessment on trainee learning, and the feasibility of the assessment items. It introduces new assessment methods where required.*		
FINDING	**REQUIREMENT / RECOMMEDATION**	**COMPLIANCE**
5.3.1 In the self-evaluation submission and in the interview with the Team, the Faculty highlighted challenges regarding the assessment of the validity and reliability of assessment tools in the programme. The Faculty stated that a quantitative examination of the performance of the assessment tools over time is difficult owing to the small size of the Trainee cohort. The Team notes the Faculty's ongoing activity in relation to this standard – for example, it has recently reviewed its Part II exam reducing the number of public health reports from three to	The Faculty should develop an explicit policy on the evaluation of the reliability and validity of assessment methods.	**Partially Compliant**

two. The Faculty is currently reviewing its oral examination and is developing a toolkit for assessments. The Team heard that such reviews regularly involve Trainee feedback. The Faculty also stated that it performs an independent scoring of exams for reliability purposes, for example, there is input from an external Examiner, and Trainers who are also Examiners do not examine their own Trainees. However, the Team saw no evidence of a policy document in relation to the evaluation of the reliability and validity of assessment methods.		

STANDARD 6 – THE CURRICULUM – MONITORING AND EVALUATION - *6.2.1* *The training organisation maintains records on the graduates of its training programme, is developing methods to measure outcomes of training and is collecting qualitative information on outcomes.*		
FINDING	**REQUIREMENT / RECOMMEDATION**	**COMPLIANCE**
6.2.1 As outlined in 2.2.4, the Faculty noted that while it currently, as a small specialty, has personal and anecdotal knowledge of graduate outcomes, this method of information gathering will become less feasible as Trainee numbers increase. The Team supports the Faculty's intent to gather more formal data on the career pathways of its Trainees.	The Faculty should develop more formal ways of gathering data on graduate outcomes.	**Partially Compliant**

STANDARD 7 – IMPLEMENTING THE CURRICULUM – TRAINEES - 7.1.2 *The processes for selection into the training programme*

- *are based on the published criteria and the principles of the training organisation concerned*
- *are evaluated with respect to validity, reliability and feasibility*
- *are transparent, rigorous and fair*
- *are capable of standing up to external scrutiny*
- *include a formal process for review of decisions in relation to selection, and information on this*
- *process is outlined to candidates prior to the selection process.*

FINDING	REQUIREMENT / RECOMMEDATION	COMPLIANCE
7.1.2 Although the Masters in Public Health (MPH) remains a desirable requirement for selection to the programme, the Team is concerned that it is disadvantaging a cohort of potential applicants by becoming a competitive requirement. Trainees informed the Team that in their view, successful acceptance to the programme was more likely upon completion of the MPH in advance of application. The Team noted that although a Masters in Public Health (MPH) is a mandatory component of the training, it is only partially funded. The Team notes Trainees partial self-funding of the MPH as an additional barrier to recruitment and supports the Faculty's endeavours to seek additional funding to address this issue.	The Team recommends that the Faculty monitors and analyses the recruitment process to ensure that those who do *not* have a Masters in Public Health prior to application are not disproportionately disadvantaged. Potential applicants should be informed of the process in place for the completion of the MPH during the programme, including the six-month extension of training.	**Partially Compliant**

STANDARD 7 – IMPLEMENTING THE CURRICULUM – TRAINEES - 7.3.2 *The training organisation provides clear and easily accessible information about the training programme, costs and requirements, and any proposed changes.*

FINDING	REQUIREMENT / RECOMMEDATION	COMPLIANCE
7.3.2 According to the Faculty's self-evaluation submission, information about the training programme is provided through the RCPI website, training handbook, the Physicians' Network,	The Faculty should improve communication with Trainees, including	**Partially Compliant**

and RCPI and Public Health Medicine induction days, including an SpR to SpR presentation. Information is also provided to candidates at interview. Trainees indicated the need for greater clarity in relation to the standard necessary for the Part II exam, for example, publishing previous exemplars of MFPHMI Part II reports would be an asset to Trainees. The Team also heard examples of a lack of regular updates regarding changes to exam processes. The Team welcomes the Faculty's plans for merging a series of documents to make information more transparent.	guidance to facilitate the successful completion of MFPHMI.	

STANDARD 8 – IMPLEMENTING THE TRAINING PROGRAMME – DELIVERY OF EDUCATIONAL RESOURCES - *8.1.3* *The training organisation routinely evaluates supervisor and trainer effectiveness including feedback from trainees and offers guidance in their professional development in these roles.*		
FINDING	**REQUIREMENT / RECOMMEDATION**	**COMPLIANCE**
8.1.3 Ongoing assessment of trainer effectiveness is largely based on Trainee feedback and Trainees confirmed that their feedback is sought. In its self-evaluation submission, the Faculty lists the following methods in which Trainer effectiveness is currently evaluated – reports completed by Trainees at annual evaluations, Trainee feedback at site inspections, and tracking Trainer activity in Trainee e-portfolios. Although Trainees emphasised the approachability of their Trainers, the Team heard instances of a lack of knowledge among Trainers in relation to revisions and updates to the curriculum and assessments thus impacting on Trainee progress. Trainees also informed the Team that a number of Trainers are not familiar with the elements of how to complete the new e-portfolio.	The Faculty should develop a process of regular updates to Trainers in relation to changes to the training programme.	**Partially Compliant**

STANDARD 8 – IMPLEMENTING THE TRAINING PROGRAMME – DELIVERY OF EDUCATIONAL RESOURCES - *8.2.1* *The training organisation has a process and criteria to select and recognise hospitals, sites and posts for training purposes. The accreditation standards of the training organisation are publicly available.*		
FINDING	**REQUIREMENT / RECOMMEDATION**	**COMPLIANCE**
8.2.1 The Faculty's self-evaluation submission notes that there are currently sixteen approved clinical sites in Ireland which support the delivery of specialist training in Public Health Medicine. This number of sites has increased by six since the last accreditation report in 2012. The Team heard that the Faculty has criteria for the selection of sites but that the standards required of sites needs to be formalised. The Body stated that it is currently reviewing the inspection process which will include the development of accreditation standards. The Team had sight of RCPI's hospital inspections policy for the selection and recognition of training posts but did not see the accreditation standards. The accreditation standards are not made publicly available.	The Faculty should publish the accreditation standards for site selection, training sites and training posts.	**Partially Compliant**

STANDARD 8 – IMPLEMENTING THE TRAINING PROGRAMME – DELIVERY OF EDUCATIONAL RESOURCES – 8.2.2 *The training organisation specifies the clinical and/or other practical experience, infrastructure and educational support required of an accredited hospital/training position in terms of the outcomes for the training programme. It implements clear processes to assess the quality and appropriateness of the experience and support offered to determine if these requirements are met.*		
FINDING	**REQUIREMENT / RECOMMEDATION**	**COMPLIANCE**
8.2.2 According to RCPI's inspection policy which the Team had sight of, the inspection process involves interviewing hospital management, Trainers and Trainees on the training site, and reviewing some site facilities. Documentation is obtained in advance and reviewed and includes questionnaires completed by Trainees, hospital personnel and the head of the department. The	The Faculty should develop Memorandum of Understanding (MOU's) with training sites. This should include the development of robust processes to respond to negative Trainee feedback in so far as possible. This	**Partially Compliant**

Team also had sight of the PHM Department Facilities Form in which staff input information about facilities, practice and opportunities on site. The Team notes that Trainee feedback plays a big role in the assessment of each site e.g. post evaluation forms and clinical site inspections. However, the Team is concerned that the inherent time lag in the analysis of post evaluation forms may mitigate against the timely response to negative feedback obtained. The Faculty noted that there are no Memorandums of Understanding (MOU) with training sites and reported that it is working on the development of MOUs. The Team was informed that MOUs would identify criteria required of sites from the outset and would help strengthen and clarify governance and formalise training arrangements.	process should be timely and responsive to ensure Trainees can benefit from input.	

STANDARD 8 – IMPLEMENTING THE TRAINING PROGRAMME – DELIVERY OF EDUCATIONAL RESOURCES - *8.2.4* *The training organisation works with the health services to ensure that the capacity of the health care system is effectively used for service-based training, and that trainees can experience the breadth of the discipline. It uses an appropriate variety of clinical settings, patients and clinical problems for training purposes, while respecting service functions.*		
FINDING	**REQUIREMENT / RECOMMEDATION**	**COMPLIANCE**
8.2.4. Trainee feedback described inconsistent experience across the group in relation to exposure to the breadth of the discipline. The Team is not assured that Trainees have sufficient experience of the key domains of Public Health Medicine; this finding is described further in 2.2.2.	The Faculty should explore the potential benefits of shorter placements to allow Trainees to gain exposure to more training sites and more balanced experience of the specialty.	**Partially Compliant**

STANDARD 9 – CONTINUING PROFESSIONAL DEVELOPMENT - *9.2.1* *The training organisation has processes to respond to requests from the Medical Council for retraining of doctors who have been absent from practice for a period of time.*		
FINDING	**REQUIREMENT / RECOMMEDATION**	**COMPLIANCE**
9.2.1. The Faculty noted that it has limited resources to plan and oversee the retraining of doctors returning to work who have been absent for a period of time. The Faculty is, however, available to assess training needs and provide expert advice to an employee if requested.	The RCPI should advocate for sufficient resources for the development of a formal retraining programme.	**Partially Compliant**

STANDARD 9 – CONTINUING PROFESSIONAL DEVELOPMENT - *9.3.1* *The training organisation has processes to respond to requests from the Medical Council for assessment and remediation of doctors where concerns have been identified that these doctors may be under-performing.*		
FINDING	**REQUIREMENT / RECOMMEDATION**	**COMPLIANCE**
9.3.1. The RCPI does not have a specific process agreed with the Medical Council to respond to requests for the remediation of doctors who are not RCPI Trainees. However, the Body stated that it has never had such a request and noted that it would respond positively if one were made.	The RCPI should commence discussion with the Medical Council on the appropriate process and funding mechanism to explore the establishment of a programme of remediation for doctors who have difficulties	**Partially Compliant**

The Team found the following standards to be fully compliant for the programme of specialist training in Public Health Medicine. This is based on the documentary evidence provided (listed in Appendix 2) and discussions with the Body and Trainees. The Team is satisfied that the programme of specialist training in Public Health Medicine.is fully compliant with the following standards:

STANDARD 1 – CONTEXT OF EDUCATION AND TRAINING		
FINDING(S)	**RECOMMENDATIONS**	**COMPLIANCE**
1.1 Governance (1.1.1; 1.1.2; 1.1.3) **1.2** Programme Management (1.2.1; 1.2.2; 1.2.3) **1.3** Educational Expertise and Exchange (1.3.1; 1.3.2) **1.4** Interactions with the Health Sector (1.4.1) **1.5.1** Continuous Renewal (1.5.1) **1.5.1** The Team saw evidence of committees with responsibility for review including Terms of Reference for the Specialty Training Committee (STC), RCPI Advisory Committee and Finance and Oversight Committee. The Team also notes the Faculty's annual curriculum review and the regular review of assessments methods as detailed in the second paragraph of 5.3.1. It is recognised that the Crowe Howarth Report which examined the future roles of Public Health physicians in Ireland and the implications for Higher Specialist Training (HST), was published subsequent to the Faculty's paper submission to this accreditation. Therefore, the Team has not received updates on the recommendations made in relation to training in PHM or equally, the Body's response to recommendations made in the report.	**1.5.1** The Faculty should provide an update to the Medical Council in relation to the Crowe Horwarth recommendations and any implementations that arise.	**Fully Compliant**

STANDARD 2 – THE OUTCOMES OF THE TRAINING PROGRAMME		
FINDING(S)	**RECOMMENDATION**	**COMPLIANCE**
2.1 Purpose of the Training Programme (2.1.1; 2.1.2) **2.2** Graduate Outcome (2.2.1; 2.2.3)	No recommendations made.	**Fully Compliant**

STANDARD 3 – THE EDUCATION AND TRAINING PROGRAMME – CURRICULUM CONTENT		
FINDING(S)	**RECOMMENDATIONS / COMMENDATION**	**COMPLIANCE**
3.1 Curriculum Framework (3.1.1) **3.2** Curriculum Structure, Composition and Duration (3.2.1; 3.2.2) **3.3** Research in the Training Programme (3.3.1; 3.3.2) **3.3.1** The curriculum includes research within both generic and specialty competencies and the Part II exam is research based. In its self-evaluation submission, the Faculty notes a concern about the variability of access to statistical packages across sites. Trainees echoed this concern and added that access to research expertise and advice was also an issue. The Team welcomes RCPI's design of a tailored workshop for hands on training and research. **3.4** Flexible Training (3.4.2)	**3.1.1; 3.2.1; 5.1.1** The Faculty should provide the Medical Council with a copy of the new curriculum and assessment process in advance of its publication. When the new curriculum is implemented in July 2020, the Faculty should note the detail of these changes as part of the Medical Council's Annual Return Process under 'significant changes to the programme'. **3.3.1** The Team recommends the establishment of more links between the Faculty and Universities across	**Fully Compliant**

	Ireland in developing Trainees advanced research capacities. **3.3.2. Commendation** – The Team commends the Faculty for its support of those Trainees who have been accepted to the ICAT programme.	

STANDARD 4 – THE TRAINING PROGRAMME – TEACHING AND LEARNING		
FINDING	**RECOMMENDATION**	**COMPLIANCE**
4.1 Teaching & Learning (4.1.1)	No recommendations made.	**Fully Compliant**

STANDARD 5 – THE CURRICULUM – ASSESSMENT OF LEARNING		
FINDING	**RECOMMENDATION**	**COMPLIANCE**
5.1. The Assessment Approach (5.1.1; 5.1.2; 5.1.3) **5.2** Feedback and Performance (5.2.1; 5.2.2; 5.2.3) **5.2.3** Trainers do not receive direct feedback on exam outcomes from the Faculty. It is up to Trainees to inform their Trainers of their results. The Faculty informed the Team that due to the close relationship between Trainee and Trainer, a lack of communication regarding exam outcomes has not been an issue so far. The Faculty also stated that in quarterly reviews and end of post reviews, Trainers are encouraged to ask their Trainee if they've done or are preparing for	**5.2.3** The Team recommends that Trainers are provided with feedback on Trainee exam outcomes from the Faculty.	**Fully Compliant**

exams. The Team believes that as part of their training programme, Trainers should be encouraged to engage with Trainees with regards to their exam performance. **5.4.** Assessment of Specialists Training Overseas (5.4.1)		

STANDARD 6 – THE CURRICULUM – MONITORING AND EVALUATION		
FINDING	**RECOMMENDATION**	**COMPLIANCE**
6.1 Outcomes Monitoring (6.1.1; 6.1.2; 6.1.3) **6.2** Outcomes Evaluation (6.2.2)	No recommendations made.	**Fully Compliant**

STANDARD 7 – IMPLEMENTING THE CURRICULUM – TRAINEES		
FINDING	**RECOMMENDATION**	**COMPLIANCE**
7.1. Admission Policy and Selection (7.1.1; 7.1.2; 7.1.3; 7.1.4; 7.1.5) **7.2** Trainee participation in Training Organisation governance (7.2.1) **7.3** Communication with Trainees (7.3.1; 7.3.3) **7.4** Resolution of training problems and disputes (7.4.1; 7.4.2; 7.4.3; 7.4.4) **7.4.1**. The Team had sight of the new RCPI Grievance, anti-bullying and harassment, and equal opportunity policies. However, Trainees reported that they were not aware of the policies. The Team heard of a series of informal steps which can be used before the formal grievance policy	**7.4.1** The Faculty should improve communication with Trainees to ensure that they are aware of the various policies and processes relating to the resolution of training problems and disputes, including appeals.	**Fully Compliant**

is invoked, including confidentially discussing the issue with the NSD. The Trainees confirmed that they would use a more informal common-sense process were they to have a problem. Although no Trainees reported having had any problems with their training, they described the reluctance of their colleagues to raise issues due to the challenge of anonymity within a small specialty. The Team believes there is a need to provide clearer information to Trainees in relation to the various pathways available to them to make them feel comfortable and confident in providing feedback and sharing their concerns. The various processes through which Trainees can provide feedback are listed in the finding in 8.1.3.		

STANDARD 8 – IMPLEMENTING THE TRAINING PROGRAMME – DELIVERY OF EDUCATIONAL RESOURCES		
FINDING	**RECOMMENDATION**	**COMPLIANCE**
8.1 Supervisors, Assessors, Trainers and Mentors (8.1.1; 8.1.2; 8.1.4; 8.1.5; 8.1.6) **8.1.4** The Team notes that although there is selection criteria for Examiners, it is not published. **8.1.5** It is unclear if there is a process in place for the ongoing evaluation of Assessors and Examiners as distinct from their roles as Trainers. Clarity is required as to the different roles. **8.2** Clinical and other Resources (8.2.3; 8.2.5)	**8.1.4; 8.1.5** The role of the Trainer, Assessor and Supervisor should be defined and the criteria for the selection of Examiners should be published.	**Fully Compliant**

STANDARD 9 – CONTINUING PROFESSIONAL DEVELOPMENT		
FINDING	**RECOMMENDATION**	**COMPLIANCE**
9.1 Continuing professional development programmes *(9.1.1; 9.1.2; 9.1.3; 9.1.4; 9.1.5; 9.1.6)*	No recommendations. **9.1.1 Commendation:** The Team commends the Faculty of Public Health Medicine for arranging two sessions for senior members, in addition to the Summer and Winter Scientific Meetings.	**Fully Compliant**

6. Next steps

Action and Implementation Plan

The Faculty of Public Health Medicine is to develop an Action and Implementation Plan (AIP) to address the condition and all recommendations made in the Medical Council's Public Health Medicine Accreditation Report. The AIP must be submitted to the Medical Council no later than three months of receipt of the Accreditation Report. On receipt of the Action and Implementation Plan, key personnel from the Faculty will be requested to present the Plan to Medical Council representatives. This meeting will also provide the Faculty with an opportunity to give feedback on the accreditation process. The Medical Council reserves the right to:

(a) share the Action and Implementation Plan with the Health Service Executive, Forum of Irish Postgraduate Medical Training Bodies and/or Department of Health, as it sees fit; and

(b) recommend additional or alternative measures be taken to address the condition and recommendations made in the Report.

It is recommended that the Training Body publishes this Accreditation Report and subsequent Action and Implementation Plan on its website.

Comhairle na nDochtúirí Leighis
Medical Council

Medical Council Postgraduate Accreditation
Programme of Specialist Training in Public Health Medicine
Thursday 21st November 2019

Assessor Team
Professor Mary O'Sullivan, Medical Council member & Chair of accreditation Team
Dr Robert Eager, Assessor for the Medical Council
Dr Aoife Hunt, Assessor for the Medical Council
Dr Irfan Ghani, Specialist Assessor for the Medical Council
Ms Aoife Fitzsimons, Accreditation Manager, Medical Council
Ms Elizabeth Molloy, Accreditation Executive, Medical Council
Ms Marian Brosnan, Accreditation Executive, Medical Council
Mr Patrick Fitzpatrick, Stenographer.

9:30 am	**Private session of the Assessor Team**	**Venue: Resource Room, Medical Council** Wi-Fi details to be provided Tea and coffee to be provided
10:00 am – 12:00 am	**Meeting with College Representatives**	**Venue:** Resource Room, Medical Council **Attendees:** • Prof Emer Shelley, Dean of the Faculty; • Dr Deirdre Mulholland, FPHM; • Dr Derval Igoe, Honorary Treasurer FPHM; • Prof Elizabeth Keane, Immediate Past Dean FPHM; • Ms Leah O'Toole, Head of Postgraduate Training & Education, RCPI; • Ms Aisling Smith, Manager Assessment and Programme Development, RCPI; • Ms Georgina Farr, Manager Accreditation & QA Dept, RCPI; • Ms Siobhán Kearns, Senior Admin Accreditation & SDR Assessments

12.00 am – 12.30 am	**Private session of the Assessor Team**	**Venue:** Resource Room, Medical Council Tea and coffee will be provided.
12.30 am – 13.30 pm	**Meeting with Trainees**	**Venue:** Resource Room, Medical Council
13.30 pm – 14.00 pm	**Lunch break**	**Venue:** Resource Room, Medical Council Light lunch to be provided including tea and coffee
14:00pm – 16:00	**Private session of the Assessor Team**	**Venue:** Resource Room, Medical Council Discussion of findings Commence report writing
16.00 pm	**Assessor Team Depart from Medical Council**	

Appendix Two - Overview of documentation

LIST OF DOCUMENTATION SUBMITTED BY FPHM

	Title
1	HST Curriculum
2	TOR RCPI Advisory Committee (updated June 2018)
3	Forum Governance
4	Copy of Questions asked Your Vision for the Future of Public Health Medicine in Ireland Final version
5	Programme Fit for Purpose PHM Service_Oct 2_2018_Final
6	RCPI HST Guide
7	Letter to MC – revised MFPHMI Part 1 syllabus
8	Revised Syllabus Part 1 Sept 2013
9	Policy Document on the Review of Curriculum
10	Letter to Medical Council re Masters and Duration
11	Draft Terms of Reference for the MFPHMI Part 1 Review vs2
12	MFPHMI Part 1 Review and Development Group Agenda 18.09 2018
13	PHM Submission to Crowe Horwath March 2017
14	Board, Committees and Organogram
15	TOR Finance and Oversight Committee
16	ED Faculty Report 2018
17	FPHM Training Agreement HSE 2018-2019
18	Effective Feedback
19	Role and Responsibilities of the Dean of Postgraduate Specialist Education & Training
20	Role and Responsibilities of the Dean of FPHM
21	Role and Responsibilities of the Director of Examinations
22	Role and Responsibilities of the Director of Training Site Accreditation
23	Role and Responsibilities of the National Specialty Director
24	Role and Responsibilities of the RCPI Trainer
25	Terms of Reference of the STC
26	RCPI Performance Management Process for Staff
27	FPHM Proposal on Future for Public Health Medicine in Ireland
28	Consensus Statement
29	Policy Document on OBE
30	PHM Competency log
31	MFPHMI Regulations
32	MFPHMI Public Health Reports Assessment form
33	MFPHMI Public health Reports – grading criteria
34	Personal Goals Plan Template
35	HST Annual Evaluation progress and PYA
36	HST Annual Evaluation Document
37	Study Day Participant Feedback form
38	Template Training Post Evaluation
39	Sláintecare Report

40	HST Interview Panel Members Handbook 2018
41	Shortlisting Policy Process September 2017
42	RCPI Shortlisting Criteria
43	Report STC subgroup re SpR Assignment Trainer Appointment
44	Role of RCPI Trainee Lead
45	Agenda - Limerick Regional College Meeting
46	RCPI President's Bulletin - October 2018
47	HST Public Health Induction booklet 2017
48	Grievance and Disciplinary Policy – September 2017
49	Role of the Trainer, RCPI
50	Trainer Development Programme
51	Updated College By-laws 2018 (Section E 42 – 44)
52	Training Workshop for Examiners of Part 1 MFPHMI 2016
53	Training Workshop for Examiners of Part 1 MFPHMI Sept 2017
54	Invite and Agenda for Workshop
55	Hospital Inspections Policy
56	Sample Inspection Timetable
57	Public Health Department Facilities Form
58	Trainee Assessment of Post/Clinical Attachment
59	FPHM Professional Competence Report to Board March 2018
60	FPHM Programme WSM 2017 final
61	Summer Scientific Meeting 2018 programme
62	Seminar Programme March 2018
63	RCPI Guide to CPD Approval for Live Educational Events (LEE)
64	Application from for CPD Approval of Live Educational Events (LEE)
65	RCPI Policy on Industry Sponsorship and Support
66	FPHM Sample Annual Statement
67	RCPI PCS Ezine
68	Protocol for doctors returning to work after absence
69	Final Website Communication on Exam Changes
70	RCPI Grievance Policy: Postgraduate Training
71	RCPI Disciplinary Policy: Postgraduate Training
71	RCPI Equal Opportunities Policy
73	RCPI Policy Progression through Training: HST
74	RCPI Anti-Bullying and Harassment Policy: Postgraduate Specialist Training
75	RCPI Appeals Policy: Postgraduate Training
76	RCPI Conflict of Interest Policy
77	Programme for the Conference and Workshop for the New Model of Public Health Medicine
78	Presentation 'The Faculty's Contribution to Developing and Supporting Implementation of the New Model'.
79	Presentation at Conference / Workshop for the New Model of Public Health
80	Presentation on Curriculum Review Workshop Phase 3
81	Presentation on Potential Assessment Tools for Consideration by Specialist Review Groups, RCPI
82	Report from Senior Members Special Interest Group, Faculty PHM Board meeting

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