FINAL Report on the Accreditation of The Programme of Pain Medicine

APPROVED BY ETC 30 MAY 2023

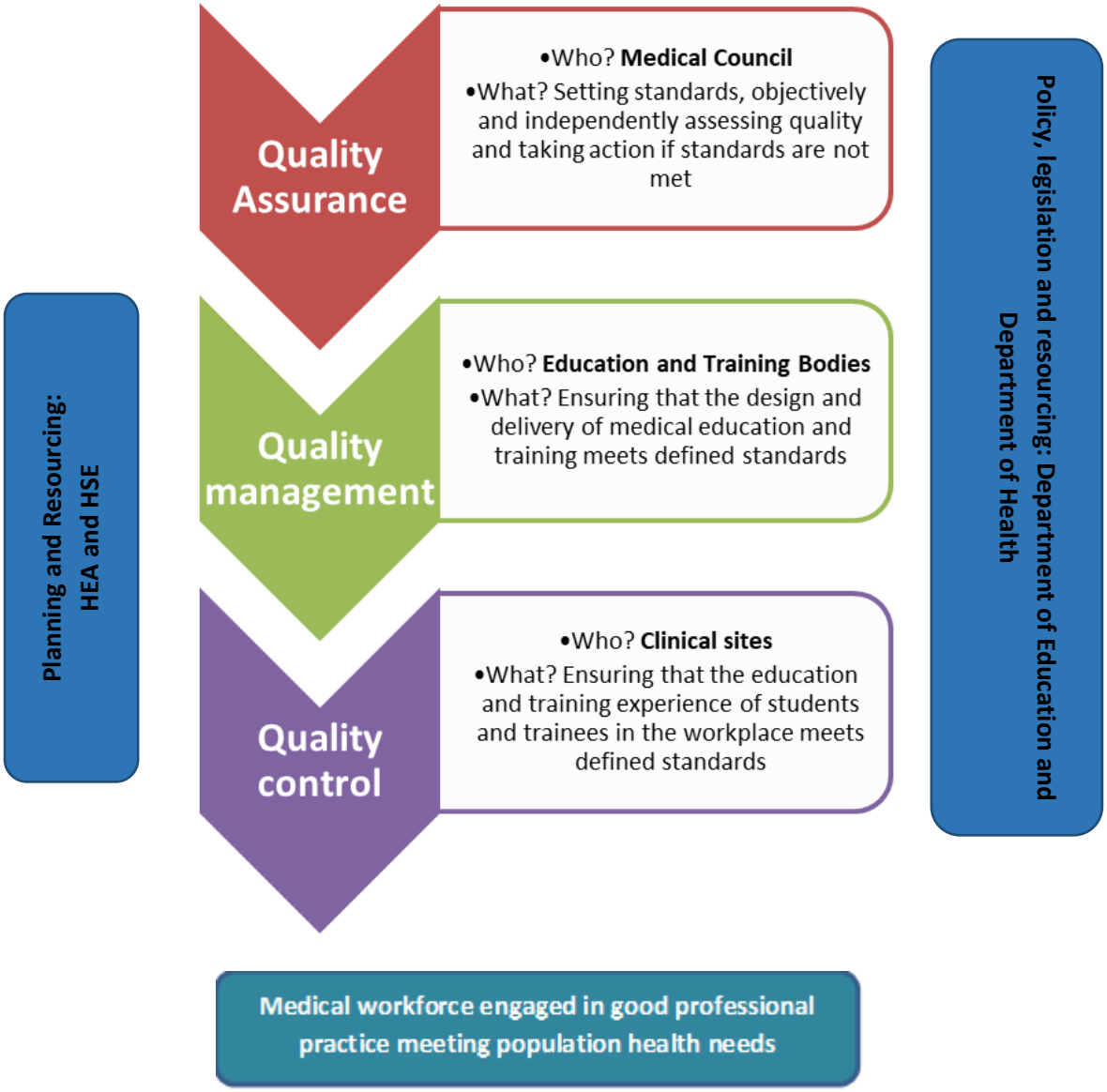
MINISTERIAL APPROVAL ON 16 JUNE 2023

Comhairle na nDochtúirí Leighis
Medical Council

Contents

1. Role of the Medical Council under Part 10 of the Medical Practitioners Act 2007 (as amended)

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 (as amended). 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.

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

The Medical Council's Team's finding is 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 (as amended).

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 (the Assessor Team) met with representatives of the Faculty of Pain Medicine and College of Anaesthesiologists of Ireland (CAI) on 18 October 2022. The Assessor Team's remit was to assess the Programme of Specialist Training in Pain 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 of one Council member, 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 Assessor Team is listed in Appendix One of this Report. The Medical Council particularly appreciates the contribution of the Assessors. The Team comprised of Professor Barry Lewis, Ms Teresa Bulfin, Dr Ailís ní Riain and Dr Douglas Natusch. They brought additional expertise in the 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 CAI and the Faculty of Pain Medicine for their co-operation. In addition, the Medical Council wishes to thank the Trainers and Fellowship graduates who met the Team on the day, and whose feedback was most helpful in formulating aspects of this report.

The Assessor Team met with the Training Body management including representatives from the Faculty of Pain Medicine and the College of Anaesthesiologists and interviewed Supervisors and Trainers in the Pain Medicine Fellowship and Fellowship Graduates completing the Pain Medicine Fellowship. The invitation to attend the accreditation interviews went out to all Trainers and Fellowship Graduates.

Pain Medicine has been a recognised specialty in Ireland since 2014. Although the Higher Specialist Training (HST) programme in Pain Medicine has not commenced, there is currently a Fellowship

programme in Pain Medicine which will be transposed to form the HST programme. The Fellowship programme and Graduates were key sources for the accreditation and enabled the triangulation of most Medical Council accreditation standards. This is also the reason why Fellowship Graduates are referenced throughout the findings rather than Trainees.

3. Documentation

As part of the accreditation process, the Faculty of Pain Medicine 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 an in-depth discussion between the Assessor Team and representatives from the CAI and the Faculty of Pain Medicine, Trainers and Graduate Fellows.

5. Appendices

The attendance record for the accreditation session, including details of the visiting Assessor Team, are attached in Appendix One. The list of supporting documentary evidence that was provided to support the self-evaluation under each standard is attached as Appendix Two. The accreditation standards which were applied throughout this process can be 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 Pain Medicine (CAI) and the Programme of Specialist Training in Pain 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 Pain Medicine** is approved for a period of two years with 4 conditions, by the Council under the terms of Section 89(3)(a)(i) of the Medical Practitioners Act 2007 (as amended).

II. **The Faculty of Pain Medicine, CAI** is approved for a period of two 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 Pain Medicine approved under (i) above subject to the compliance with the conditions outlined below. This approval is from the date of approval by the Education and Training Committee (30th May 2023) of the Medical Council and the Minister of Health (16 June 2023) as set out in Statutory Instrument 529 of 2010.

III. A certificate of satisfactory completion in specialist training (CSCST) in Pain Medicine is the title and designation of qualification granted in the State, by the Medical Council, to enable a medical practitioner to secure registration in the Specialist Division of the register, under the terms of Section 89(2) of the Medical Practitioners Act 2007.

Conditions:

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 Pain Medicine, CAI 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 Directors of Training, Tutors, Trainers and Supervisors 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

b. The first full training cycle must be completed leading to the award of a Certificate of Satisfactory Completion of Specialist Training to each successful graduate of the programme.

Condition (b) is consistent with findings in "the Education and Training Programme – Curriculum Content of the report under Standard 3.2.2

c. The role of a Trainer is an important one and as such all Trainers must be appropriately trained for their roles, which may be through a Train the Trainers / Essential Skills course specific to Pain Medicine that should include trainee mentorship and communication skills in relation to this specialty. Trainers must be registered, i.e. on the specialist division of the Medical Council Register and appointed to the role through a transparent process. This condition must be addressed within **6 months** of the final report.

Condition (c) is consistent with findings in "Implementing the Training Programme – Delivery of Educational Resources" under standard 8.1.2

d. In order to monitor the effectiveness of and to provide appropriate support, the CAI must develop a formal performance management system / method for assessing the effectiveness for both Supervisors and Trainers. This must include feedback from Trainees and the provision of guidance relating to professional development in these roles. This condition must be addressed within **6 months** of the final report.

Condition (d) is consistent with findings in "Implementing the Training Programme – Delivery of Educational Resources" under standard 8.1.3

4. Overview of compliance ratings for the Programme of Specialist Training in Pain Medicine

In this report, a number of recommendations and commendations have been made to ensure that the Faculty of Pain Medicine, CAI complies, improves compliance and/or continues to comply with all training standards. The Body 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 of the Assessor Team's appraisal of evidence provided for each standard. Documentary evidence considered includes the self-evaluation submission from the Body submitted prior to accreditation, together with evidence obtained through meetings on the day of accreditation with Management, Graduate Fellows and Programme Directors.

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

Not Assessable (NA) – This standard cannot be assessed until such time as the Higher Specialist Training (HST) programme in Pain Medicine commences and evidence of implementation can be demonstrated.

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 -Graduate Fellows
8. Implementing the Training Programme and Delivery of Educational Resources
9. Continuing Professional Development. *

*Standard 9 is no longer assessed as part of the postgraduate accreditation process. It is now monitored by the Medical Council's Professional Competence Directorate.

Please note standards rated as fully compliant for the Faculty of Pain Medicine, CAI and the programme of specialist training in Pain Medicine contained in this report are based on the documentary evidence provided (listed in Appendix 2) and discussions with the CAI and Faculty of Pain Medicine Executive, Trainers and Fellowship Graduates. In some instances, it was considered that the speciality is meeting the standard and has been rated as fully compliant, however a recommendation may have been added to encourage improvement.

Summary table of compliance for the programme of specialist training in Pain Medicine

MEDICAL COUNCIL'S ACCREDITATION STANDARDS FOR POSTGRADUATE MEDICAL EDUCATION AND TRAINING	AND 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 -Graduate Fellows	*7.1.1*	*7.1.2*	*7.1.3*	*7.1.4*	*7.1.5*	*7.2.1*	*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*		

Fully Compliant
Partially Compliant
Non-Compliant
Not Assessable

Commendations

- The PM Fellowship Supervisors and Trainers who showed great dedication and commitment to the Pain Medicine HST programme.
- The commitment and enthusiasm of the Graduate Fellows.
- The Faculty's proactive approach and work in developing a framework for service delivery
- The Faculty is commended for the production of an upcoming educational module promoting less than full-time training

5. Evaluation of Compliance with Medical Council Standards

Training Body: Faculty of Pain Medicine, College of Anaesthesiologists
Programme of Specialist Training: Pain Medicine

The following standards were found to be non-compliant for the programme of specialist training in Pain Medicine

STANDARD 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	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
8.1.6 In its self-evaluation, the Faculty of Pain Medicine outlined its role as setting the training responsibilities of Trainers and Supervisors and the hospital / HSE role as one of implementing standards and facilitating training. It stated that through the CAI, it continues to seek improvements by way of ongoing dialogue with the hospitals, the HSE and Graduate Fellows in Pain Medicine. It is important that the Faculty accepts overall responsibility and oversight for the training of its Trainees. This is addressed under **standard 8.2.3** and is accompanied by a recommendation. At the accreditation meeting, it was heard that the CAI will meet with the HSE and the Medical Manpower managers regarding Memoranda of Agreement with clinical sites to set out protected time for training for Trainers in particular, to make sure that the contractual arrangements that have been agreed are followed through.	Protected time so far as possible should be provided for Tutors, Trainers and Supervisors and Chair of Training. This is not criticism for work being carried out, but to be fully able to deliver effectively in their roles the Tutors, Trainers and Supervisors require adequate protected time.	**Non-Compliant with CONDITION (a) attached**

At the accreditation meeting with the current Supervisors and Trainers of the Fellowship programme, it was reported that within the Fellowship programme, Trainers are given additional time for individual training and teaching sessions in Pain Medicine.		

The following standards were found the following standards to be partially compliant for the programme of specialist training in Pain Medicine

STANDARD 1. CONTEXT OF EDUCATION AND TRAINING - GOVERNANCE – 1.1.2 *The governance structures describe the composition and terms of reference for each committee, and allow all relevant groups to be represented in decision-making.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
1.1.2 The composition and terms for each Committee were provided as supporting documentation. It was noted that external representation is limited or absent varying according to the Committee. At the meeting with the Faculty, it was heard that while leaders of physiotherapy, nursing and psychology groups had input as part of the development of the programme, with the exception of a General Practitioner, there is no external representation on the Faculty's board.	The Faculty should ensure that there is non-medical representation as well as representation from the Pain Multi-Disciplinary Team on Committee structure. This representation should include Allied Health Professionals and those with a consumer interest focus.	**Partially Compliant**

STANDARD 3 – THE EDUCATION AND TRAINING PROGRAMME – CURRICULUM CONTENT - 3.1.1. *For each of its education and training programmes, the training organisation has a framework for the curriculum organised according to the overall graduate outcomes. The framework is publicly available.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**

3.1.1 The curriculum is compliant with this standard with the exception that it is not publicly available. It was noted in the self-evaluation submission that the curriculum for the Pain Medicine HST training programme is currently in draft form pending the outcome of the Medical Council accreditation and agreement of programme start date. It was found that the curriculum presented maps competencies to the Medical Council's Eight Domains of Good Professional Practice in Part A. Part B lists 17 clinical areas of Pain Medicine to be covered in the taught program and the competencies to be achieved. The curriculum is set out in a format linking each item to the form of assessment both in the FFPMCAI examination and Workplace Based Assessments (WBAs). A summary of total number and type of Workplace Based Assessment is clearly expressed in each section. This was confirmed in discussions with Faculty and Trainers.	The Pain Medicine curriculum should be made publicly available once approved.	**Partially Compliant**

STANDARD 3 – THE EDUCATION AND TRAINING PROGRAMME – CURRICULUM CONTENT - 3.2.1. *For each component or stage, the curriculum specifies the educational objectives and outcomes, details the nature and range of clinical experience required to meet these objectives, and outlines the syllabus of knowledge, skills and professional qualities to be acquired.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
3.2.1 The curriculum outlines indicative numbers of interventional pain procedures to be carried out and the Faculty clarified in the accreditation interview that sign off of Trainees will be based on competency in these procedures. Until such time as the Trainee has achieved competence in the required competencies, they do not progress. This should be made explicit in the curriculum. The curriculum has a defined structure which clearly outlines the expectations and expected outcomes for Fellowship Graduates during the course of the Programme.	The Faculty should seek assistance from members of the Pain Medicine Multidisciplinary Team with expertise in psychiatry and mental health to develop mental state assessment training and training in communication skills relevant to Pain Medicine.	**Partially Compliant**

Fellowship Graduates are exposed to multidisciplinary teams (MDTs) including mental health professionals, but it was found that there was a lack of formal training in mental state assessment. The Faculty advised that Fellowship Graduates are expected to present a detailed history of a patient and undertake a mental state exam in the presence of psychiatrist or psychologist. This is examined on a regular basis as part of the WBA and is a recurring question in the exam. The Fellowship Graduates stated that the training was excellent overall with good exposure to the clinical case mix and opportunities to work with multiple consultants. They reported that while they do not have formal training in mental health assessment, they liaise with those specialists available within the department. They have sat in on multidisciplinary team meetings and have been involved in the process of making referrals to psychology colleagues.	The Faculty should modify the draft curriculum to clarify that the numbers of interventional procedures identified are indicative and ultimately, it is competency which is being assessed and signed off.	

STANDARD 3 – THE EDUCATION AND TRAINING PROGRAMME – CURRICULUM CONTENT – FLEXIBLE TRAINING – 3.4.1 *The programme structure and training requirements recognise part-time, interrupted and other flexible forms of training.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
3.4.1 It was confirmed in both the self-evaluation submission and at the accreditation interview that less than full-time training is supported by both the CAI and the Faculty. The CAI and the NDTP have produced a range of options, for example, half-time, part-time. While that is currently for anaesthesiology only, the principle would also apply to Pain Medicine once the HST programme is up and running. At the accreditation meeting, the College stated that it had applied for funding from NDTP to produce an educational module for Supervisors of training, heads of department, and	The CAI and Faculty of PM should ensure that flexible training opportunities enable Trainees to fully participate in flexible training and are responsive to Trainee needs. These opportunities should be made clear to Trainees before the training placements	**Partially Compliant**

leaders in the CAI, which would challenge traditionally-held beliefs and offer practical solutions to obstacles to less than full-time training. The Fellowship Graduates were not aware of any obstacles in relation to flexible forms of training.	commence as well as during the training.	

STANDARD 4 – THE TRAINING PROGRAMME – TEACHING AND LEARNING – 4.1.2 The training programme includes appropriately integrated practical and theoretical instruction.		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
4.1.2 In its self-evaluation, the Faculty of Pain Medicine described a range of settings where Fellowship Graduates have opportunities for practical training and stated that they will encourage self-directed learning also. The Fellowship Graduates reported that they got a lot of hands-on practical experience, and a lot of the teaching was in real time with impromptu tutorials rather than formal courses. It was suggested that a course in basic surgical skills would be beneficial to prepare them for Pain Medicine. Faculty representatives, Trainers and Fellowship Graduates described cadaver courses provided by the Faculty two days a year. There was no further evidence of a plan to integrate practical and theoretical instruction.	The Faculty should clearly lay out the training programme to illustrate the integration of practical and theoretical instruction in line with training outcomes and the clinical sites where training is delivered. Practical and theoretical instruction should be mapped for each Trainee in the programme according to their prior learning and achieved competencies (e.g., in basic interventional pain skills).	**Partially Compliant**

STANDARD 6 – THE CURRICULUM – MONITORING AND EVALUATION – ONGOING MONITORING - 6.1.1. *The training organisation regularly evaluates and reviews its training programmes. Its processes address curriculum content, quality of teaching and supervision, assessment and Trainee progress.*

FINDING	REQUIREMENT/RECOMMENDATION	COMPLIANCE
6.1.1 There was no evaluation or description of the evaluation method provided for the Fellowship programme currently delivered. There was also no evaluation plan presented for the 2-year HST programme in PM beyond attrition/exam success and fellowship award. The Faculty stated in its self-evaluation submission that it intends to carry out a full review of the HST programme after five years. In the meantime, competency content will remain under regular review and will evolve under the supervision of the Faculty and the CAI Training Committee to ensure that it continues to reflect current practice and knowledge. It is crucial that the Specialty regularly evaluates and reviews the programme in Pain Medicine once it is up and running and does so in a standardised way. In the meeting with the Faculty and CAI, it was heard that the curriculum is an evolving document where there will be a five-year evaluation process which begins midterm. It was reported that teaching and supervision will be evaluated as part of the training site inspection process. This is addressed under **standard 8.1.3** and is accompanied by a recommendation.	The Faculty should develop a mechanism for evaluating and reviewing the HST training programme. This should address curriculum content, quality of teaching and supervision, assessment, Trainee progress and outcomes.	**Partially Compliant**

STANDARD 6 – THE CURRICULUM – MONITORING AND EVALUATION – ONGOING MONITORING - 6.1.2 *Supervisors and Trainers contribute to monitoring and to programme development. Their feedback is systematically sought, analysed and used as part of the monitoring process.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
6.1.2 In the self-evaluation submission, it was noted that the Faculty maintains ongoing dialogue with its Supervisors during each six-month rotation to ensure progression is monitored appropriately. As described under **standard 5.2.2**, Supervisors and Trainers will provide feedback to Trainees through the In-Training Assessment process and WBAs. At the accreditation meeting with the CAI and Faculty, it was reported that were there a disagreement between the Trainer and the Trainee about progression, the Director of Training would monitor progression with constant feedback from the Supervisor. There is a process in place to move the Trainee to another site if necessary, where they would have a different Supervisor. The self-evaluation submission also identifies the Faculty's intention to introduce annual Supervisor of Training workshops to provide the opportunity give feedback using a structured format. This will assist the Faculty in evaluating and monitoring the Programme and to support future programme development.	As part of the monitoring and evaluation of the curriculum and programme, the Faculty should develop a system to facilitate the contribution and feedback of Supervisors and Trainers. This should encompass how feedback is sought, analysed and used.	**Partially Compliant**

STANDARD 6 – THE CURRICULUM – MONITORING AND EVALUATION – ONGOING MONITORING – 6.1.3 *Trainees contribute to monitoring and to programme development. Their confidential feedback on the quality of supervision, training and clinical experience is systematically sought, analysed and used in the monitoring process. Trainee feedback is specifically sought on proposed changes to the training programme to ensure that existing Trainees are not unfairly disadvantaged by such changes.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
6.1.3 In the self-evaluation submission, it was noted that the Fellowship Graduates had a significant role in the writing of the clinical component section of the draft curriculum. The Fellowship Graduates confirmed that the draft curriculum was circulated to them, and submissions were sought. They also reported that they were asked for feedback from the CAI at the end of each training site rotation. Overall, they felt that their opinion mattered. In its submission, the Faculty also identified the governance structures on which Trainees will sit including the Faculty Board and Committee of Anaesthesiology Trainees, a discussion forum for Trainees at CAI educational meetings and an end of rotation survey. Trainee feedback will also be sought through the CAI accreditation model. **Standard 6.1.1** addresses the absence of an evaluation or description of the evaluation method provided for the Fellowship programme currently delivered or the HST programme.	Feedback from Trainees should be systematically sought. Feedback should address quality of supervision, training and clinical experience and proposed changes to the training programme. Efforts should be made to ensure confidentiality of feedback.	**Partially Compliant**

STANDARD 6 – THE CURRICULUM – MONITORING AND EVALUATION – OUTCOME EVALUATION - 6.2.2. *Supervisors, Trainees, Health care administrators, other health care professionals and consumers contribute to evaluation processes.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
6.2.2 In the self-evaluation submission, it was noted that Supervisors and Fellowship Graduates contribute to the evaluation process by means of regular interaction with Faculty members and CAI Committees. However, no evidence was presented of service users or other health care professionals making a structured contribution to evaluation processes. At the accreditation interview, it was heard that the Faculty liaises directly with the Chronic Pain Ireland, which is the pain patient support group and with Arthritis Ireland and some of the other groups that overlap with Chronic Pain. They are in the process of appointing the Chair of Chronic Pain Ireland as a lay member on the Faculty Board.	The Faculty should develop a mechanism to incorporate feedback from health care professionals, administrators and consumers as part of the curriculum and monitoring evaluation process, such as Multi Source feedback.	**Partially Compliant**

STANDARD 7 – IMPLEMENTING THE CURRICULUM – GRADUATE FELLOWS – ADMISSION POLICY AND SELECTION – 7.1.1 *A clear statement of principles underpins the selection process, including the principle of merit-based selection.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
7.1.1 The self-evaluation submission outlined the application criteria for the HST Programme. The Programme will be open to Trainees who have completed specialist training in Anaesthesiology (and to those who satisfied the requirements to gain entry to the Specialist register for Anaesthesiology). The Faculty stated that it will adhere to CAI's recruitment principles which were not provided in the documentation.	The interview evaluation form should be reviewed to ensure that it better meets the requirements for merit-based selection. The evaluation of "global suitability" is considered subjective and therefore should be amended to better	**Partially Compliant**

The CAI stated at the accreditation meeting that the recruitment and selection policies are in line with the HSE's advice. They provide feedback to the candidates, publish the criterion, revert to the HSE in relation how many people applied, how many people were selected, and the gender breakdown. It was found that it is difficult to judge merit-based selection in the absence of existing/previous Trainees and of CAI's recruitment principles referenced above. It was heard at the accreditation meeting that an interview evaluation form had been developed and will be used by the Faculty in the selection of Trainees. It was not clear that the interview evaluation form submitted would best allow for merit-based selection. There was a reliance (20 marks for a candidate, determined by the interviewers as a group score) in the evaluation form for "global suitability". This can be subjective and therefore should be amended to better reflect specific elements that can be marked. This will allow for more transparency for candidates, better training of interviewers leading to more transparent merit-based selection of candidates.	reflect specific elements that can be marked transparently.	

STANDARD 7 – IMPLEMENTING THE CURRICULUM – GRADUATE FELLOWS – ADMISSION POLICY AND SELECTION – 7.1.2 *The processes for selection into the training programme* *o are based on the published criteria and the principles of the training organisation concerned* *o are evaluated with respect to validity, reliability and feasibility* *o are transparent, rigorous and fair* *o are capable of standing up to external scrutiny* *o 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/RECOMMENDATION**	**COMPLIANCE**

7.1.2 In the self-evaluation submission it stated that selection of candidates for entry to the Programme is by competition, including interviews, and will be based on the published criteria as outlined in the Curriculum). It described the eligibility criteria required for entry onto the training programme. Recruitment to the Programme will be managed by the FPM Administrator and applications will be invited through advertisement on the FPM website, usually in September for appointment the following November/December with commencement of the programme in July. The curriculum also states that the criteria will be reviewed annually by the Board to ensure it is fair and transparent. Any request for the review of a recruitment decision will be directed to the Board and a full and open response will be made available to the applicant involved. At the accreditation interview with the CAI and Faculty it was heard that the CAI has an appeals process whereby if a candidate is unhappy that they were unsuccessful in getting onto the programme, they can make an appeal within a specified timeframe. An external person and two people from the Council of the CAI who were not involved in the interview process would undertake the assessment. The CAI would also interview all the interviewers who would provide their reasoning on the marks that they awarded the candidate. Although the College appeals process was described at the accreditation meeting, there was no evidence that the process was documented for candidates. The "Trainee Appeals Process" described in Appendix 5 does not specifically reference an appeal at the selection stage of the process.	The Faculty should ensure that the interview process is transparent, rigorous and fair. As such, the "Trainee Appeals Process" should be reviewed and amended to include reference to an appeal at the selection stage of the process. The appeals process should be made known to candidates at the time of application.	**Partially Compliant**

STANDARD 7 – IMPLEMENTING THE CURRICULUM – GRADUATE FELLOWS – ADMISSION POLICY AND SELECTION – 7.1.3 *The training organisation documents and publishes its selection criteria. Its recommended weighting for various elements of the selection process, including previous experience in the discipline, is described. The marking system for the elements of the process is also described.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
7.1.3 The Faculty stated in its self-evaluation submission that selection criteria will be included in the advertisement for training posts on an annual basis, but it was eligibility rather than selection criteria that were described. As a result, it was not clear what selection criteria will be applied to eligible candidates. It also stated that the marking system will be published on the website. The Faculty provided the Interview Evaluation Form as supporting documentation. However, it is not clear if the interview evaluation form will be sent to candidates at the time of application or if they see the form at any stage in the process. At the accreditation interview, it was confirmed that prior to the interview process, the interview panel has a meeting to ensure everyone is aware of the requirements. However, no formal training was described. Fellowship Graduates are also ranked at interview and may choose from the available rotations according to their ranking, subject to the approval of the Faculty. The Fellowship Graduates reported that they all got their first preference.	The Faculty should differentiate between eligibility and selection criteria for PM candidates. It should also clearly describe the marking scheme for all selection criteria. The selection criteria and associated marking scheme should be shared with the eligible candidates. Any interviewers for the PM programme should have undertaken a formal training course.	**Partially Compliant**

STANDARD 7 – IMPLEMENTING THE CURRICULUM – GRADUATE FELLOWS – RESOLUTION OF TRAINING PROBLEMS AND DISPUTES – 7.4.4 *The training organisation has a process for evaluating de-identified appeals and complaints to determine if there is a systems problem.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**

7.4.4 The Faculty stated that it will use the hospital accreditation process to evaluate the outcome of appeals and complaints. The outcome of all inspections is notified to the Faculty, CAI Training Committee and Council to ensure that any systems problems are identified and addressed in a timely manner. However, no specific details were provided relating to issues, complaints or appeals relevant to the Faculty as opposed to the hospital the Trainee is assigned to. At the meeting with the CAI, it was heard that if a Trainee remains dissatisfied with the outcome of an appeal in relation to their training, then they have a right to appeal the outcome to the Council of the CAI. In the self-evaluation submission, the Faculty stated that the CAI has developed a Protected Disclosures Policy in conjunction with legal advisers. This Policy has been approved by the CAI Training Committee and was provided as supporting documentation.	The Faculty should clearly describe the process for evaluating de-identified appeals and complaints of Trainee related decisions to determine if there is a systems problem.	**Partially Compliant**

STANDARD 8. IMPLEMENTING THE TRAINING PROGRAMME – DELIVERY OF EDUCATIONAL RESOURCES – SUPERVISORS, ASSESSORS, TRAINERS AND MENTORS – 8.1.2 *The training organisation has processes for selecting Supervisors who have demonstrated appropriate capability for this role. It facilitates the training of Supervisors and Trainers.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
8.1.2 In its self-evaluation submission, the Faculty of Pain Medicine stated that the minimum criteria and duties of Supervisors are outlined in in the draft curriculum. It stated that they will be appointed by the Faculty. However, the process for selection is not described. Plans to hold a Supervisor training/information day in March 2022 were described in the meeting with the Trainers and in the self-evaluation. It will be held annually, and	Ongoing Supervisor and Trainer development is required to ensure the quality of the programme delivery and should be mandatory. Supervisors and Trainers must be trained in the areas of supervision, assessment and feedback, and in supervising and supporting	**Partially Compliant with CONDITION (c) attached**

attendance will be mandatory. It also mentioned other forms of training which will include relevant modules at the CAI's Annual Scientific Meeting. Supervisor and Tutor training was clearly outlined but no evidence of training for Trainers who were not Supervisors was provided either in the submission or at the accreditation interview. In discussion with the Trainers, it was heard that the position of Supervisor rotates within a site. As part of the new two-year programme, it is intended to appoint two Supervisors per site.	educational progress throughout the curriculum. There must be evidence of professional development of the Trainers. The CAI is required to develop minimum standards for Trainers and to develop the means by which Trainers are supported in attaining and maintaining these. The CAI must provide systematic, regular ongoing training for Consultant Trainers to include training in advance of taking up the role. The Faculty should clearly describe the process for the selection of Supervisors and other roles relevant to training.	

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/RECOMMENDATION**	**COMPLIANCE**

8.1.3 In its self-evaluation, the Faculty of Pain Medicine stated that the evaluation of Supervisor and Trainer effectiveness is part of the hospital evaluation and accreditation process which is conducted every five years at a minimum with follow up evaluation (of items identified for improvement) occurring as necessary in the interim period. It also stated that Supervisors, Trainers and Fellowship Graduates report back to the Faculty and to CAI regularly via its Committees and its varied training and examination functions during the year. However, such reporting is not necessarily focused on Supervisor and Trainer effectiveness. **Standard 8.1.2** describes the need for the training of Supervisors and Trainers. In tandem with this, there must be a process for monitoring the effectiveness of those in supervisory roles which includes feedback from Trainees and the provision of guidance on professional development.	In line with **standard 6.1.3**, the Faculty should develop a process to regularly evaluate the effectiveness of Supervisors and Trainers which includes feedback from Trainees. The Chair of Training must undergo development to enable evaluation of the effectiveness of educators, assessors and clinical Supervisors.	**Partially Compliant**

STANDARD 8. IMPLEMENTING THE TRAINING PROGRAMME – DELIVERY OF EDUCATIONAL RESOURCES – SUPERVISORS, ASSESSORS, TRAINERS AND MENTORS – 8.1.5 *The training organisation has processes to evaluate the effectiveness of its assessors/examiners including feedback from Trainees, and to assist them in their professional development in this role.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
8.1.5 In its self-evaluation, the Faculty of Pain Medicine stated that it seeks feedback from Fellowship Graduates at the end of each six-month rotation and uses this to help it to identify any supervision issues arising at specific training sites. It also reviews the outcome of every exam with the assistance of the CAI's Psychometrician. Apart from these methods,	The Faculty should develop a more robust system of providing clear feedback to assessors / examiners to assist them to make improvements and	**Partially Compliant**

it was found that the Faculty does not have a defined process to evaluate the effectiveness of its assessors and examiners.	to assist in their professional development.	

The following standards were found to be not assessable for the programme of specialist training in Pain Medicine. These standards cannot be rated until the HST programme commences.

STANDARD 1. CONTEXT OF EDUCATION AND TRAINING - GOVERNANCE – 1.1.3 *The training organisation's internal structures give priority to its educational role relative to other activities*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
1.1.3 It was stated in the self-evaluation submission that those with overall responsibility and accountability for the provision of the medical education programme are appropriately supported and qualified and provide educational leadership. Members of the training and education team work closely with subject matter experts to develop educational material and research studies. It was heard at the accreditation interview with the Faculty that that all Committee members would be able to fulfil their roles as it expands into a training programme despite having other roles in the wider CAI as well as clinical and training responsibilities. However, evidence demonstrating the application of this standard can only be assessed when Trainees commence the HST programme.	The Faculty should ensure that Pain Medicine representatives on governance structures, who are also representing other specialties, are not inhibited by their dual responsibilities and are adequately serving the interests of the specialty of PM.	**Not Assessable**

STANDARD 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	REQUIREMENT / RECOMMENDATION	COMPLIANCE
1.4.2 It was found all elements of this standard are being fulfilled with the exception of protected time. Please refer to the finding in **standard 8.1.6**.	There should be provision in the Consultant contract for protected time for training activities and sufficient time should be put aside for Consultant Trainers, Supervisors and Tutors in their weekly job plan to undertake the role.	**Not Assessable**

STANDARD 2. THE OUTCOMES OF THE TRAINING PROGRAMME - GRADUATE OUTCOMES – 2.2.2 *The outcomes address the broad roles of practitioners in the discipline as well as technical and clinical expertise*		
FINDING	**REQUIREMENT / RECOMMENDATION**	**COMPLIANCE**
2.2.2 The aims of the Programme were detailed in the self-evaluation submission. The outcomes identified in the curriculum address the broad roles of the practitioners including that of leadership, advocate for patients, and innovation. However, evidence demonstrating the application of this standard can only be assessed when Trainees commence the HST programme. This was supported in discussion with Faculty, Fellowship Graduates and Trainers.	The Faculty should monitor training experience in the programme once it's established to ensure that it addresses the broad roles of practitioners in the discipline as well as technical and clinical expertise.	**Not Assessable**

STANDARD 2. THE OUTCOMES OF THE TRAINING PROGRAMME - GRADUATE OUTCOMES – 2.2.4 *The training organisation makes information on graduate outcomes publicly available.* **STANDARD 6 – THE CURRICULUM – MONITORING AND EVALUATION – OUTCOME 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/RECOMMENDATION**	**COMPLIANCE**
2.2.4 & 6.2.1 The Faculty stated in its self-evaluation submission that it intends to make information on graduate outcomes publicly available through the CAI Annual Report. The Annual Report is available in printed form and published on the CAI website. The CAI Annual Reports for 2019 and 2020 provide the names of those who graduate in the specific years and so too the names of all doctors who are awarded the CSCST in Pain Medicine will also be listed. Evidence of this should be provided once the first Trainees graduate from the HST programme. In its Service Level Agreement with the HSE, the Faculty has committed to an exchange similar to the annual returns to the Medical Council where graduate outcomes will be tracked. At the accreditation interview, the CAI reported that the final phase of the digital transformation programme which is this members' database, went live. They are currently working on a new website as part of this programme which will provide the CAI with an enhanced view of what their alumni are doing.	The Faculty should develop a plan for gathering, analysing and publishing data on graduate outcomes. This should include roles taken up, attrition rates and research interests. Once the first Trainee graduates from the HST programme, information on graduate outcomes should be made publicly available in the CAI Annual Report (e.g., number graduating/receiving CSCST). Anonymised data of aggregate graduate outcomes should be made publicly available (e.g., attrition rates, number taking up consultant positions, etc).	**Not Assessable**

STANDARD 3 – THE EDUCATION AND TRAINING PROGRAMME – CURRICULUM CONTENT – CURRICULUM STRUCTURE, COMPOSITION AND DURATION – 3.2.2 *Successful completion of the training programme must be certified by a diploma or other formal award.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**

3.2.2 The title and designation of the qualification granted in the State, by the Medical Council, to enable a medical practitioner to secure registration in the Specialist Division of the Register in Pain Medicine under Section 89(2) of the Medical Practitioners Act 2007 (the "Act"), is a CSCST in Pain Medicine. The Faculty of Pain Medicine confirmed in its self-evaluation form that a "CSCST in Specialist Pain Medicine Training will be awarded". The CSCST will state "a fellow of this CAI by Examination completed the approved programme of Specialist Training on (date) in Pain Medicine to the satisfaction of the Council of the CAI given under the CAI Seal."	Upon successful completion of the training programme in Pain Medicine, a practitioner must be awarded a Certificate of Satisfactory Completion in Specialist Training in Pain Medicine.	**Not Assessable with CONDITION (b) attached**

STANDARD 3 – THE EDUCATION AND TRAINING PROGRAMME – RESEARCH IN THE TRAINING PROGRAMME - 3.3.1. *The training programme includes formal learning about research methodology, critical appraisal of literature, scientific data and evidence-based practice, and encourages the Trainee to participate in research.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
3.3.1 In its self-evaluation submission, it was stated that Graduate Fellows are encouraged to participate in both clinical and basic science research. They are given the opportunity to present their research findings at the Pain Medicine Clinical Research Medal Competition. It was also heard from the Fellowship Graduates that they are encouraged and expected to present at the Congress of Anaesthesia to demonstrate their interest in research and scholarship. At the meeting with the Faculty, it was noted that while not supporting higher degrees on the two-year training programme that research opportunities will be offered to Trainees where available. Short intensive courses on critical appraisal of the literature are being developed by the CAI and the material from these courses will form a repository of	The Faculty should ensure that Pain Medicine Trainees complete the research methodology course if they haven't already done so in another specialty programme in Ireland. Evidence should be provided of the programme and attendance (of PM Trainees) at the course.	**Not Assessable**

material on clinical research methodology. The course will be mandatory and will be delivered for the first time in November 2022.		

STANDARD 3 – THE EDUCATION AND TRAINING PROGRAMME – CURRICULUM CONTENT – FLEXIBLE TRAINING – 3.4.2 *There are opportunities for Trainees to pursue studies of choice, consistent with training programme outcomes, which are underpinned by policies on the recognition of prior learning. These policies recognise demonstrated competencies achieved in other relevant training programmes both here and overseas, and give Trainees appropriate credit towards the requirements of the training programme.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
3.4.2 It was detailed in the self-evaluation submission that leave from the two-year Fellowship programme to pursue training outside of Ireland is not normally available. This will be the same for the two-year HST programme. Exceptions may be considered where an opportunity arises for a Trainee to undertake a Fellowship overseas in an area of specialist interest not currently available in Ireland. The submission also states that because PM is a two-year programme whereby a specialist qualification in Anaesthesiology (which contains modules in PM) is an entry requirement, no further retrospective recognition will be allowed for experience in Pain Medicine gained prior to entry into the programme i.e., the full minimum two years training in Ireland must be completed for all applicants appointed. The CAI reported at the accreditation meeting that medical practitioners on the anaesthesiology specialist register in Ireland can apply for the PM programme. Similarly, if an applicant from the EU or outside the EU applies to the Medical Council and is deemed	The Faculty should undertake curriculum mapping to ensure that anaesthesiology specialists trained in other jurisdictions have the appropriate competencies in PM (in line with CAI anaesthesiology specialist training in Ireland). If the Faculty wishes, or health service demand requires, to widen recruitment from specialties other than anaesthesiology, the Faculty should undertake curriculum mapping with potential source curricula to ensure basic competencies are met before entry to the programme.	**Not Assessable**

suitable for entry onto the specialist division of the register in anaesthesiology, then they may apply for recruitment to the training programme. At the Faculty presentation during the accreditation, it was reported that at present and as the programme establishes itself, the entry requirement is at the request of the HSE. However, the CAI stated that it is open to expanding entry to applicants in other specialties should the framework for service delivery change.		

STANDARD 4 – THE TRAINING PROGRAMME – TEACHING AND LEARNING – 4.1.1 *The training is practice-based involving the trainees' personal participation in relevant aspects of the health services and, for clinical specialties, direct patient care.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
4.1.1 In its self-evaluation, the Faculty of Pain Medicine described how each Trainee will be allocated to an accredited teaching hospital (4 x 6month rotations). It also provided examples of clinical activity and described the proposed Clinical Case Series where the Trainee will identify three patients to follow through from initial consultation to eventual outcome. The Trainee will prepare a report which will be assessed by means of interview conducted by members of the Board of the Faculty. This was corroborated by the Graduate Fellows in the existing programme. Evidence demonstrating the application of this standard can only be assessed when Trainees commence the HST programme.	The Faculty should demonstrate that training is practice-based involving the Trainees' personal participation in relevant aspects of the health services and, for clinical specialties, direct patient care.	**Not Assessable**

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/RECOMMENDATION**	**COMPLIANCE**
4.1.3 In its self-evaluation, the Faculty described the responsibility of both Trainers and Fellowship Graduates in the level of independent responsibility that will be assigned to the Trainee. At the accreditation meeting with the Trainers, it was reported that feedback is sought from Trainers and the multidisciplinary team to determine that the Fellowship Graduates are ready to move onto more independent elements of practice. However, the practice of seeking feedback from colleagues outside of medicine is not formalised. This involves Trainers convening a meeting of Trainers to discuss how Fellowship Graduates are progressing. If there is unanimous agreement among Trainers, the ITA is carried out and the Supervisor engages with the Fellowship Graduate. They then agree on the increasing degree of independent responsibility and undertaking more complex procedures. This progression to independent practice is described in the curriculum and was confirmed by the Fellowship Graduates. However, evidence demonstrating the application of this standard can only be assessed when Trainees commence the HST programme.	The Faculty should ensure that Trainees are facilitated with an increasing degree of independent responsibility as they progress through the programme. The Faculty should also ensure that Trainees experience independent learning at an appropriately senior level in preparation for appointment to roles in Pain Medicine.	**Not Assessable**

STANDARD 5 – THE CURRICULUM – ASSESSMENT OF LEARNING – ASSESSMENT APPROACH - 5.1.3 *The training organisation has policies relating to disadvantage and special consideration in assessment, including making reasonable adjustments for trainees with a disability*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**

5.1.3 It was noted in the self-evaluation submission that the CAI has a dedicated Wellbeing Committee to monitor health and wellbeing and hosts regular Trainee wellbeing events and seminars. At the meeting with the CAI and Faculty, it was reported that the Disability Policy had just been approved and was ready for publication. It will cover both the application stage as well as issues that arise during training.	The Faculty should provide evidence of the disability policy and its implementation including its communication. Trainees and Trainers need to be made aware of the disability policy and implementation of same. This policy should also be made publicly available.	**Not Assessable**

STANDARD 5 – THE CURRICULUM – ASSESSMENT OF LEARNING – FEEDBACK AND PERFORMANCE - 5.2.2 *The training organisation facilitates regular feedback to trainees on performance to guide learning*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
5.2.2 The feedback process is described in the self-evaluation submission taking place at intervals during assessment. The In-Training Assessment (ITA) ensures that Fellowship Graduates are provided with timely feedback at the defined early, middle and end of rotation meetings. Under this process, the Fellowship Graduate is provided with a written account of their performance using the e-Portfolio and both Supervisor and Fellowship Graduate are required to 'sign off' the e-document. It also stated that as well as the defined early, middle and end of rotation meetings, Fellowship Graduates are provided with the opportunity of seeking direct feedback using the Work Based Assessment (WBA) tools. Evidence demonstrating the application of this standard can only be assessed when Trainees commence the HST programme.	The Faculty should demonstrate that it facilitates regular feedback to Trainees on performance to guide learning.	**Not Assessable**

STANDARD 5 – THE CURRICULUM – ASSESSMENT OF LEARNING - ASSESSMENT QUALITY- 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/RECOMMENDATION**	**COMPLIANCE**
5.3.1 In the self-evaluation submission, the Faculty stated that it engages with and is a member of the CAI Training and Examinations Committees to ensure that the Faculty's assessment methods are always evolving with best practice. Part of the process is the Fellowship of the Faculty of Pain Medicine CAI Examination (FFPMCAI). It is outlined as having a written (MCQ/ Single best Answer) section, two structured Oral Examinations and a clinical case. The Faculty described the use of the CAI exam standard setting. The Faculty plans to use the workplace-based assessment tools currently used in their current Pain Medicine Fellowship which they consider to be valid and reliable. The Faculty recognised the difficulty of standardising the assessment of a small number of candidates. They proposed an external examiner from abroad consistent with the process for the existing fellowship exam. The Fellowship Graduates found the exit examination to be rigorous and fair.	The Faculty should demonstrate the use of an external examiner in the process of standard setting for the examination.	**Not Assessable**

STANDARD 5 – THE CURRICULUM – ASSESSMENT OF LEARNING – ASSESSMENT OF SPECIALISTS TRAINED OVERSEAS – 5.4.1 *The processes for assessing of specialists trained overseas are in accordance with the principles outlined by the Irish Medical Council.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
5.4.1 As the programme of specialist training in Pain Medicine is not up and running and has not heretofore been accredited by the Medical Council, there is no Service Level Agreement in place with the Medical Council for Pain Medicine.	Once accredited, the Faculty should engage with the Registration Directorate of the Medical Council to ensure that the processes for assessing specialists trained overseas are in accordance with the principles outlined by the Medical Council.	**Not Assessable**

STANDARD 7 – IMPLEMENTING THE CURRICULUM – GRADUATE FELLOWS – ADMISSION POLICY AND SELECTION – 7.1.5 *The training organisation monitors the consistent application of selection policies across training sites and/or regions.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
7.1.5 The Faculty advised in its self-evaluation submission that all recruitment will be undertaken centrally by the Faculty and the outcome of each recruitment campaign will be reported to and reviewed by the Board of the Faculty; it is also reported to the CAI Training Committee and Council. It stated that administration of the training programme and related processes including recruitment and selection will be coordinated and facilitated centrally by the CAI. Consistency will be ensured through training of staff, maintenance of policies and procedures and regular communication with stakeholders. It was reported at the meeting with Faculty and CAI that in line with the College process, there will be a meeting with the interview panel before the interview process specifying	Once the first round of recruitment for the HST programme has been completed, the Faculty should provide evidence of the monitoring of the consistent application of selection policies across training sites.	**Not Assessable**

what the candidate requirements are, suitability and appropriateness for the post and the standard expected from the candidates. Comments made on candidates' references by Trainers from their previous posts in anaesthesiology are also taken into consideration to assess suitability in terms of both interpersonal and motivational skills. The interview panel generally consists of the Dean, Vice Dean and another Faculty member as well at the Faculty Administrator. Supervisors of training are invited to participate in the process. Evidence demonstrating the application of this standard can only be assessed when Trainees commence the HST programme.		

STANDARD 7 – IMPLEMENTING THE CURRICULUM – GRADUATE FELLOWS – RESOLUTION OF TRAINING PROBLEMS AND DISPUTES – 7.4.1 *The training organisation has processes to address confidentially problems with training supervision and requirements.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
7.4.1 In the self-evaluation submission, the Faculty cited start, middle and end of rotation meetings and the assessment process as ways in which Trainees will be able to confidentially address problems with training supervision and requirements. At the accreditation meeting with Fellowship Graduates and Trainers, the practical challenges of maintaining anonymity in the context of a small training programme was referenced. This is a challenge for all small specialties. Evidence demonstrating the application of this standard can only be assessed when Trainees commence the HST programme.	The Faculty should demonstrate that it has processes to address confidentially problems with training supervision and requirements in the Pain Medicine programme.	**Not Assessable**

In discussion with Fellowship Graduates, it was reported that concerns or complaints about a Trainee or a Trainer, can be raised at a Faculty level for discussion. In this case, for confidentiality purposes, the Trainee representative would be asked to leave the meeting. **Standard 8.2.3** addresses the difficulty in defining and navigating the dual responsibilities of the training body and clinical training sites. This is also relevant in terms of processes to confidentially address problems with training supervision and requirements.		

STANDARD 8 – IMPLEMENTING THE TRAINING PROGRAMME – DELIVERY OF EDUCATIONAL RESOURCES - CLINICAL AND OTHER 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/RECOMMENDATION**	**COMPLIANCE**
8.2.1 In its self-evaluation, the Faculty of Pain Medicine states that it, jointly with CAI, has a process and criteria for recognising hospitals and posts for training. It was reported that there is an integrated inspection process with a defined, specific structure for each of the specialties. It stated that six hospitals are currently accredited for Pain Medicine training at post-CSCST/Fellowship level. Its intention is to accredit other sites to increase the geographical spread of training sites. The Guidelines for Hospital Accreditation for the National Anaesthesiology Training Programme were provided as well as the PM Hospital Accreditation Application Form. It was noted that the outcome of all inspections is reported to the CAI Training Committee and Council.	The Faculty should implement the hospital accreditation process and analyse findings and outcomes, to ensure that training sites can adequately deliver HST training in Pain Medicine. The Faculty should publish accreditation standards.	**Not Assessable**

STANDARD 8. IMPLEMENTING THE TRAINING PROGRAMME – DELIVERY OF EDUCATIONAL RESOURCES – CLINICAL AND OTHER 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/RECOMMENDATION**	**COMPLIANCE**
8.2.2 In its self-evaluation, the Faculty of Pain Medicine referred to the criteria outlined in the application process for approving sites for training which are then reviewed again at the accreditation visit. It also stated that the appropriateness of the experience at each site is assessed through both the hospital accreditation process and Trainee and Supervisor feedback. The Faculty reported that it is the intention that all sites will be visited before the commencement of the new programme. The Guidelines for Hospital Accreditation for the National Anaesthesiology Training Programme were provided as supporting documentation as well as the PM Hospital Accreditation Application Form. Although six hospitals are accredited for Pain Medicine training at post CSCST level, only one report was provided.	The Faculty should accredit/inspect all clinical training sites for PM before the programme commences.	**Not Assessable**

STANDARD 8. IMPLEMENTING THE TRAINING PROGRAMME – DELIVERY OF EDUCATIONAL RESOURCES – CLINICAL AND OTHER EDUCATIONAL RESOURCES – 8.2.3 *The training organisation's accreditation requirements cover: orientation, clinical and/or other experience, appropriate supervision, structured educational programmes, educational and infrastructure supports such as access to the internet, library, journals and other learning facilities, continuing medical education sessions accessible to the trainee, dedicated time for teaching and training and opportunities for informal teaching and training in the work environment.*

FINDING	REQUIREMENT/RECOMMENDATION	COMPLIANCE
8.2.3 In its self-evaluation, the Faculty of Pain Medicine stated that the accreditation requirements listed in this standard are included in the curriculum and PM Hospital Accreditation Application Form. It was found that accreditation requirements cover the components of this standard. In its submission, the Faculty described as a challenge its reliance on the HSE to ensure adequate facilities for Fellowship Graduates and to facilitate appropriate level of training. It states that it is clear from ongoing interactions with the relevant bodies that there is a desire on all fronts to meet the required standards. However, it is important to acknowledge that the Faculty has overall responsibility to Trainees to ensure adequate training. It is therefore necessary to agree and define the shared responsibilities towards training and this is reflected in a recommendation.	The Faculty should link with other Training Bodies – such as CAI and the RCSI – which are closely associated with the specialty to ensure that the assessment of the learning environment is coherent. The Faculty should define the respective responsibilities (and any overlap) of the clinical sites that contribute to the delivery of the training programme and the responsibilities of the Faculty of Pain Medicine and CAI to the overall provision and oversight of training. This should be included in Memoranda of Agreement with sites. This should also include processes to confidentially address problems with training supervision and requirements.	**Not Assessable**

STANDARD 8. IMPLEMENTING THE TRAINING PROGRAMME – DELIVERY OF EDUCATIONAL RESOURCES – CLINICAL AND OTHER EDUCATIONAL RESOURCES – 8.2.5 *The training organisation should monitor the working environment to ensure it is a safe environment for training.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**

8.2.5 In its self-evaluation, the Faculty of Pain Medicine stated that it sees the monitoring of the working environment to ensure a safe environment for training as being primarily the responsibility of the employer. However, all postgraduate training bodies have a responsibility to ensure that training environments are safe. The Faculty cited its hospital accreditation process, anonymised Trainee feedback as part of the accreditation process and the six-monthly Trainee feedback survey as methods to determine appropriate workloads or whether Fellowship Graduates are placed in situations beyond their clinical competence. Where such situations are identified, the Faculty works with the local Trainers and hospital authorities to remedy the situation and organises a follow up where necessary. It was heard at the meeting with the Fellowship Graduates that they try to retain their skills in Anaesthesiology and Intensive Care Medicine to avoid deskilling. However, this is very much decided on a case-by-case basis and there is an expectation that there would be not negative impact on training in Pain Medicine. Overall, Fellowship Graduates felt there was good clinical exposure in PM and that training was well organised and supported. They also confirmed that they arrange on-call for the weekend so that it does not impact on their Pain Medicine training. When the HST programme commences, the Faculty should monitor this on an individualised basis to ensure that PM training is not adversely affected.	The Faculty should monitor employment contracts and service delivery by those on the training programme to ensure that time spent outside of Pain Medicine (e.g., maintaining skills and service in Anaesthesiology and Intensive Care Medicine) does not adversely impact on the PM training.	**Not Assessable**

The following standards were found the following standards to be fully compliant for the programme of specialist training in Pain Medicine

STANDARD - 1. CONTEXT OF EDUCATION AND TRAINING - PROGRAMME MANAGEMENT - 1.2.1. *The training organisation has established a committee or committees with the responsibility, authority and capacity to direct the following key functions:* *1. planning, implementing and reviewing the training programme(s) and setting relevant policy and procedures* *2. setting and implementing policy and procedures relating to the assessment of overseas-trained specialists* ***3.*** *setting and implementing policy on continuing professional development and reviewing the effectiveness of continuing professional development activities.*		
FINDING	**REQUIREMENT/RECOMMENDATION**	**COMPLIANCE**
1.2.1 The College of Anaesthesiologists of Ireland's Training Committee ensures consistency regarding the application of policies and procedures across all CAI affiliated training programmes. The CAI Credentials Committee sets and implements policy and procedures relating to the assessment of overseas-trained specialists in Anaesthesiology and Intensive Care Medicine. The policies and procedures are not formalised for post CSCST component currently.	The Faculty should provide evidence of the activities of the Committees (CAI Training Committee, CAI Credentials Committee) in the form of minutes from their meetings once trainees are enrolled on HST programme.	**Fully Compliant**

STANDARD 3 – THE EDUCATION AND TRAINING PROGRAMME – CURRICULUM CONTENT – THE CONTINUUM OF LEARNING – 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/RECOMMENDATION**	**COMPLIANCE**

3.5.1 It was reported in the self-evaluation submission that Pain Medicine practitioners are involved in the delivery of education on acute and chronic pain to undergraduate medical students. The students are also given an opportunity to attend pain clinics and to observe pain procedure sessions as part of their practical training. The Faculty also contributes to the development of curricula for Irish medical schools in relation to components concerning Pain Medicine.	The Faculty should explore utilising the international process for teaching from Australasia called 'Essential Pain Management' which has been adapted for training medical students in other jurisdictions.	**Fully Compliant**

6. Next steps

Action and Implementation Plan

The Faculty of Pain Medicine, CAI is to develop an Action and Implementation Plan (AIP) to address all conditions made in the Medical Council's Pain Medicine Accreditation Report. The Faculty of Pain Medicine, CAI is also required to include a response to the recommendations in this AIP. The AIP must be submitted to the Medical Council no later than three months from receipt of the Accreditation Report. On receipt of the Action and Implementation Plan, key personnel from the Faculty of Pain Medicine, CAI will be requested to present the Plan to Medical Council representatives. This meeting will also provide the Faculty of Pain Medicine, CAI 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 conditions and recommendations made in the Report.

Thereafter, the Faculty of Faculty of Pain Medicine, CAI will enter the Medical Council's Annual Returns monitoring process where it will provide updates on its progress towards the implementation of conditions and recommendations. This process applies to programmes and bodies approved under the terms of Section 89(3)(a)(i) and 89(3)(a)(ii) of the Medical Practitioners Act 2007 (as amended).

It is recommended that the Training Body publishes this Accreditation Report and subsequent Action and Implementation Plan on its website and shares it with Trainers and Fellowship Graduates.

Appendix One - Attendance Record

Medical Council Postgraduate Accreditation

Faculty of Pain Medicine and College of Anaesthesiologists

Programme of Specialist Training in Pain Medicine

Tuesday, 18 October 2022

Virtual Accreditation

Team in attendance:

- Prof Barry Lewis, Assessor for the Medical Council and Chair of Accreditation Team
- Ms Teresa Bulfin, Medical Council member and Assessor for the Medical Council
- Dr Ailís ní Riain, Assessor for the Medical Council
- Dr Douglas Natusch, Specialist Assessor for the Medical Council
- Ms Marian Brosnan, Quality Assurance Manager, Medical Council
- Ms Elizabeth Molloy (Quality Assurance Executive, Medical Council
- Ms Nicole Weldon, (Zoom host) Quality Assurance Executive, Medical Council

Faculty of Pain Medicine and College of Anaesthesiologists Representation in attendance:

- Dr Hugh Gallagher, Dean, Faculty of Pain Medicine
- Prof George Shorten, President, CAI
- Martin McCormack, CEO, CAI
- Dr Camillus Power, Director of Training, CAI
- Dr Niamh Hayes, Chair of Education, CAI
- Dr Gareth Morrison, Medical Educationalist
- Dr David Moore, FPM Examinations Co-Chair, Lead for Framework for Service Delivery & Supervisor of Training Beaumont Hospital
- Dr Conor Hearty, Chair of Training FPM, Vice Dean, Supervisor of Training
- Dr Therese O'Connor, Consultant in Anaesthesiology & Pain Medicine
- Ms Jennie Shiels, Training Manager, CAI
- Ms Ann Kilmade, Senior Operations Administrator, CAI
- Ms Rebecca Williams, Senior Training Administrator, CAI

Number of Trainers in attendance: 5 Trainers in attendance.

Number of Graduate Fellows in attendance: 4 Fellowship Graduates in attendance.

Appendix Two – Overview of Documentation

List of documentation submitted by the Faculty of Pain Medicine

1	Overview of FPM/CAI submission to Medical Council
2	HSE / CAI Confirmation Letters
3	CAI Constitution
4	Proposed Framework for Service Delivery and Workforce Planning
5	Draft Curriculum for the Specialist Training Programme in Pain Medicine
6	CAI Strategic Plan 2019 - 2024
7	CAI Committee Terms of Reference
8	8a CAI 2019 Annual Report 8b CAI 2020 Annual Report
9	List of Pain Medicine Publications
10	In-Training Assessment Template (ITA
11	Trainee Feedback Survey – Pain Medicine
12	Interview Evaluation Sheet
13	CAI Guidelines for Hospital Accreditation
14	Hospital Accreditation Application Form
15	Draft Protected Disclosures Policy for CAI Trainees – Feb 2022 F
16	Flexible Training Principles - 2018

Comhairle na nDochtúirí Leighis
Medical Council