QUALITATIVE ANNUAL RETURNS: SPECIALIST TRAINING IN 2022-2023

Comhairle na nDochtúirí Leighis
Medical Council

12 bodies and 34 programmes took part in the Qualitative Annual Return.

Conditions

34 conditions attached to 25 programmes were reviewed.

15% of conditions were successfully addressed including:

- Cardiothoracic Surgery
- Neurosurgery
- Radiology
- Radiation Oncology

Recommendations

- **332 recommendations were reviewed.**
- **30% were implemented.**
- **Updates on the remaining 70% of recommendations will be provided in the next Annual Return.**

Six key themes emerged across programmes as areas of priority:

1. **Protected time for those involved in the delivery of training, including Trainers.**
2. **Training and professional development of Trainers.**
3. **Monitoring quality of clinical training sites.**
4. **Enhancing curriculum and assessment.**
5. **Need for input of members of multidisciplinary teams and patients.**
6. **Flexible training.**

Qualitative Annual Returns Report for Programmes of Specialist Training for the 2022-23 academic year

Highlight Report

Introduction

The Annual Returns Process (ARP) is the primary means by which the Medical Council monitors approved Postgraduate Training Bodies (bodies) and programmes of specialist medical education and training (programmes) in Ireland. It aims to ensure that each body is actively managing and developing the quality of programmes in line with the Medical Council's Accreditation Standards for Postgraduate Medical Education and Training and working towards achieving full compliance with our standards. It's also an opportunity for bodies to flag areas that need additional support or may be a cause for concern. 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.

In the qualitative ARP, the Executive seeks details from bodies on:

- Basic information, such as qualifications awarded and contact information;
- An update as to how programmes are addressing conditions and implementing recommendations made in the most recent Medical Council accreditation reports and
- Whether any significant changes have been made to the programme(s).

Participating Programmes

Twelve bodies and thirty-four programmes took part in the 2022-2023 qualitative ARP. This represented a marked increase, from twenty-three programmes in the last Return, or a 49% rise, and 240% compared to when the process began. This is attributed to the recent accreditation cycle.

Nineteen of the programmes had participated in the Return for the previous academic year and therefore were only required to report on conditions and recommendations that had not been fully implemented or addressed. Fifteen additional programmes entered the qualitative ARP. Programmes which have not previously been, or which are in the process of being accredited were not required to submit qualitative Return forms.

Method

As with previous years, the Executive critically reviewed each submission, and prepared clear and constructive individualised feedback for bodies in relation to all conditions and recommendations. In 2023, the postgraduate team piloted a more collaborative approach on a sample of programmes and owing to its success, rolled it out to all programmes in 2024. This involved meeting with each body to discuss the updates provided in the qualitative forms submitted by the 34 programmes.

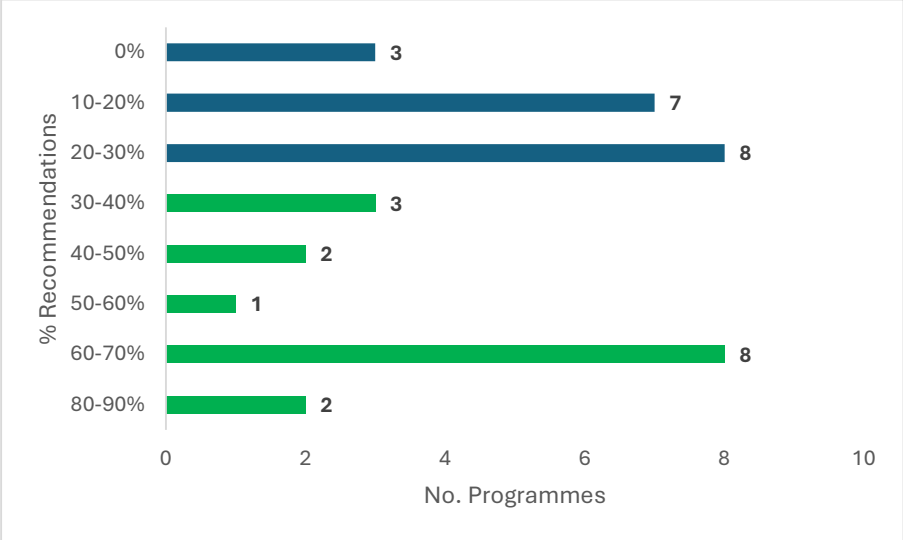
Progress Report

The qualitative ARs illustrate how training bodies in Ireland are responding to and implementing the recommendations outlined in the most recent Medical Council accreditation reports for these programmes. These reports were published between 2016 and 2022.

Twenty-five of the thirty-four programmes in the 2022-23 qualitative ARs had conditions attached. Fifteen percent of the total number of conditions were completed while 29 – or 85% - remain outstanding.

There were a total of three hundred and thirty-two recommendations across 34 programmes. Thirty percent (101 recommendations) were successfully closed, and seventy percent (232) remain outstanding. Sixteen programmes had above the average (>30%) number of recommendations closed and eighteen programmes had below average progress. As illustrated in Figure 1, there was great variation across programmes in terms of the breakdown of progress achieved:

Figure 1. Number of Programmes + Percentage of Receommendations closed in 2022-23 Return



Programmes with below average progress in terms of number of recommendations closed in 2022-23 Return.

Programmes with above average progress in terms of number of recommendations closed in 2022-23 Return.

Significant Changes

In 2024, no bodies notified the Executive of any significant changes made or proposed to postgraduate programmes or bodies. This process is open all year round with information available on the website.

Conclusion

Based on the review of the qualitative Return in 2024, six key areas were identified for priority focus across programmes.

1. Protected time for those involved in the delivery of training, including Trainers.
Twenty-five programmes in the qualitative Return have a condition and two recommendations relating to protected time. These requirements address advocating for and providing protected time, and inclusion of protected time in agreements between bodies sand sites and in consultant contracts.

It is crucial that Trainers have time within their roles to provide adequate supervision, carry out the necessary assessments, deliver constructive feedback during practice, actively listen to and support Trainees, and monitor performance and progression. When the role of Trainer is not reflected in work schedules or accessible in practice, it puts an enormous and unreasonable amount of pressure on Trainers.

The quality of training and supervision provided by Trainers and received by Trainees impacts the competence of future specialist doctors and potentially has an impact on the delivery of safe patient care.

2. Training, professional development and effectiveness of Trainers.
Twenty programmes had requirements relating to Trainers. Conditions and recommendations around the theme of Trainers included developing training and refresher training for Trainers, making both mandatory, monitoring and promoting participation, ensuring the inclusion of certain elements in training such as mentoring and communication skills, awarding Continuous Professional Development points for training and evaluating Trainer effectiveness.

Appropriate training and support, and opportunities for continuous professional development for the role of educator help ensure high standards of training are delivered.

3. Monitoring quality of clinical training sites.
There were five conditions, and thirteen recommendations attached to twenty-two programmes relating to the postgraduate training environment. These centered around bodies completing accreditations of clinical training sites, monitoring compliance with the European Working Time Directive to ensure a safe working environment for Trainees, and ensuring sites have adequate infrastructure to support training.

At postgraduate level, the vast majority of training takes place in clinical training sites. As well as gaining knowledge, experience and competence in their specialties, Trainees play an essential role in the delivery of the health service. It is crucial that the quality and appropriateness of the experience and support offered at each site is monitored on a regular basis.

4. Enhancing curriculum and assessment.
Five conditions and twenty-three recommendations across sixteen programmes were around curriculum assessment. They ranged from transitioning to Outcomes Based Education (OBE), embedding the Medical Council's Eight Domains of Good Professional Practice (Eight Domains') within curricula and programmes, establishing clearer development and progression points for Trainees, and specialty specific requirements relating to curriculum and assessments, as well as curriculum review.

Medical education and training curricula and assessment methods must enable Trainees to develop and progress in their specialties and prepare Trainees for consultant roles. Similarly, clinical placements and quality supervision should facilitate Trainees to meet all curriculum and assessment requirements and learning outcomes.

5. Flexible training.
Five recommendations across five programmes relate to flexible training. Requirements encompass communicating and promoting flexible training options to processes to support Trainees returning to work after a period of flexible training.

Doctors increasingly want access to flexible training and practice. The positives are clear - accommodating work / life balance, facilitating more family friendly arrangements, safeguarding against stress and burnout which will ultimately help to improve the retention of doctors in Ireland. The enhancement of doctors' wellbeing will have a positive impact on the quality of patient care.

6. Need for input of members of multidisciplinary teams and patients.
Fifteen programmes received twenty-two recommendations which relate to seeking or formalising the contribution of Allied Health Professionals, multidisciplinary teams and / or patients in programmes. This ranges from the provision of multi-source feedback, contributing to the evaluation of programmes, to inclusion on governance structures.

The input of multidisciplinary teams and patients provides a more well-rounded view of a Trainee, especially in terms of non-clinical skills such as communication and professionalism. Communication and professionalism are also an extremely important part of a doctor's development and growth across the continuum of education and practice. Furthermore, "opportunities to learn with, from and about other health and social care professionals and patients are provided to support collaborative practice" features in the new suite of Medical Council standards to be launched.

The six key areas identified will be closely monitored. Bodies will continue to provide updates on progress towards the implementation of outstanding conditions and recommendations in the next Return. In the next AR, they have also been asked to identify areas of good practice and the main challenges in achieving completion of requirements.