

## 8. DME Action Plan: GIM RIE

### Requirements - Issues to be Addressed:

Ref	Issue	By when	Owner	Action(s)	Date Completed
8.1	The current rota must be reviewed and revised to ensure better access to training opportunities, including formal teaching sessions (with bleep-free attendance).	21 October 2019	CD	<ul style="list-style-type: none"> <li>The rota is reviewed every 4 months</li> <li>Current review of rota to see if we can reduce 12 hour shifts but continue team aspect of the rota.</li> <li>Access to teaching is supported through allocated time off</li> <li>Educational lead is providing sessions in situ to support impromptu teaching without removing trainees from the ward</li> </ul> <p>Update 09/19 The ST rota was surveyed using the PCAT tool in July 2019 and the results discussed within the department. Rota redesign as of 08/19 to ensure teaching opportunities can be readily attended. Feedback at end of rotations (12/19 and 02/20 will be sought)</p>	<p>Ongoing CD</p> <p>CD</p> <p>CD</p> <p>CD</p>
8.2	The current rota must be reviewed and revised to ensure sufficient access to outpatient clinic training opportunities. We commend the introduction of rostering of clinics for CMTs.	21 October 2019	CD	<ul style="list-style-type: none"> <li>Working in co-operation with ward rota masters to ensure CMTs have allocated clinic time</li> </ul> <p>Future considerations –</p> <ul style="list-style-type: none"> <li>Asking CMTs to let us know pre starting their block how many clinics they have done and how many they require to support those who need more access</li> <li>Plan to accommodate further changes for the IMT curriculum –</li> </ul>	<p>CD</p> <p>1/4/19</p> <p>1/4/19</p>

				<p>with either clinic weeks on the rota vs. Ambulatory care for the trainees – as numbers expected to increase to 80 clinics, and also a need for number of patients they should see per clinic which will impact these requirements</p> <p>Update 09/19 Work ongoing to look at IMT. Plans to incorporate clinic block in to 4/12 block with ICM/HDU Current Registrar cohort have had Clinics rota'd in to their timetable.</p>	
8.3	The current rota must be reviewed and revised to address difficulties in accessing study leave and annual leave.	21 October 2019	CD	<p>Rota sent out at 7 weeks with annual leave preferences and accommodate over 75% of top 3 choices All study leave reviewed with the aim to accommodate all except night cover Night cover reviewed when Study Leave is felt to be crucial to trainees development Monitor all study leave requests and have second review of any requests denied.</p> <p>Update 09/19 See 8.1. Rota redesign as of 08/19 should allow more flexibility for annual and study leave.</p>	
8.4	Trainers within the department must provide more regular informal 'on the job' feedback, particularly in regard to trainees' decisions around their management of acute medical admissions.	21 October 2019	CD	<ul style="list-style-type: none"> <li>• Informal feedback encouraged</li> <li>• Discussion at consultant meetings</li> <li>• Support feedback from nightshifts</li> <li>• Support consultant attendance at impromptu teaching workshops</li> </ul> <p>Update 09/19</p>	CD Ongoing

				<p>DiT comments fed back to Consultant team who will increase efforts to give real time specific feedback.</p> <p>CD/ADME looking to investigate numbers of WPBA completed by each Consultant.</p>	
8.5	A process must be put in place to ensure that any trainee who misses their induction sessions (to hospital and department) is identified and provided with induction.	21 October 2019	CD	<p><b>Trainees asked to identify if they are unable to attend induction</b></p> <p><b>Alternative dates offered prior to attendance</b></p> <p><b>Nightshift induction provided by consultant on AMU</b></p> <p>Update 09/19</p> <p>All induction materials for GIM are available on the hospital intranet and on the MED website</p> <p><a href="https://www.med.scot.nhs.uk/trainee-doctors/foundation/guide-to-your-post/rie/general-medicine">https://www.med.scot.nhs.uk/trainee-doctors/foundation/guide-to-your-post/rie/general-medicine</a> (password protected). There is a single point of contact for all doctors rotating so that any concerns around attending induction can be raised early.</p> <p>Hospital induction is also available on the MED website</p> <p>(<a href="https://www.med.scot.nhs.uk/hospitals/rie/information/induction">https://www.med.scot.nhs.uk/hospitals/rie/information/induction</a> ) and the ADME holds monthly drop in sessions if there are any issues or queries.</p>	1/4/19