



Medical Education Committee

NOTES OF MEETING 3rd October 2024 via MsTeams

Members			
	embers Designation		Initials
ndranil Chakravorty	Director of Medical Educatio	n & Co-Chair of meeting	IC
Nicholas Gosling	Associate Director of Education (Interim) & Head of GAPS		NG
Atefa Hossain	Associate Director of Medical Education (Surgery)		AH
Navneet Singh	Associate Director of Medical Education (MedCard)		NS
Robert Bramwell	Medical Education Manager		RB
loyce Popoola	Clinical Sub-Dean		JP
Robert Nagaj	Deputy course director for MBBS		RN
lane Runnacles	Clinical Directors of Undergraduate Education (CWDT)		JR
Annabel Little	Education Business Manager		AL
Elwina Timehin	SAS/LED/IMG Lead		ET
Ewa Zatyka	IMTs TPD		EZ
Helen Jones	IMTs TPD		HJ
Charlotte Huddy	Foundation TPD		СН
Sarah Tang	CSTs TPD		ST
Sue David	NHS and Liaison Manager		SD
Veronica Parisi	NHS and Liaison Manager		VP
Katarzyna Lukomska	PGME Team Leader		KL
Andrea Cavalcanti	UG Team Leader		AC
Ruth Austin	Wellbeing Fellow for Internal Medicine Training South West London		RA
Mikaela Carey	Physician Associates Lead		MC
Andrew Wan	Educational Lead		AW
Anthony Pereira	ony Pereira Educational Lead		AP
David Barnes	Educational Lead		DB
Gordon Jackson-Koku	don Jackson-Koku Educational Lead		GJK
Katia Prime	Prime Educational Lead		KP
Mital Desai	al Desai Educational Lead		MD
Nisha De Silva	De Silva Educational Lead		NDS
Rao Kondapally Seshasai	o Kondapally Seshasai Educational Lead		RKS
Richard Griffiths	Educational Lead		RG
Samuel Thayalan	Educational Lead		ST
Sree Kondapally	Kondapally Educational Lead		SK
lessy Zhang	JDF Co-Chair		JZ
Apologies			
Luci Etheridge	Sophie Vaughan	Rosy Wells	
Robin Sunderland	Audrey Tan	Philippa Tostevin	
Mussarat Rahim	Robert Hagger	Elspeth Bird	
Malika Mohabeer	Catherine Ann Cox	Yingying Peng	
Chorouk Boureq	Nicola Walters	Joseph Hetherington	
Zoe Berger	Qusai Ali	. 5	
Quorum The quorum o	of this masting shall be a minim	ım of the Chair, Deputy and a representati	vo of cash s

1	OPENING ADMINISTRATION
1.1	Apologies for Absence
	Apologies noted.
1.2	Notes from Last Meeting
	Approved.

2 AGENDA ITEMS 2.1 Indranil Chakravorty (DME) update:

1.GMC National Training Survey (NTS) 2024 Results:

- IC highlighted the Trust's significant progress, reducing open actions from 55 in 2019 to fewer than 5 currently. This improvement reflects the extensive efforts by all departments and the PGME team.
- Steady improvement was noted in areas such as governance, culture, the learning environment, and support for international medical graduates.
- The need to address ongoing concerns about infrastructure limitations and workforce shortages was discussed, along with plans to improve trainer support and ensure adequate job planning time for training responsibilities.
- The committee will continue to work on improving rotas, workload, and space challenges, while fostering innovation to use technology more efficiently.

Actions:

- Departments with red or pink flags (e.g., medical oncology, dermatology) will continue addressing the areas of concern, with follow-up discussions scheduled.

2.2 Finance update:

- AL provided an overview of the education funding and the expected reduction in undergraduate income.
- A reduction of approximately £2.5 million in education income for 2024-2025 compared to the previous year is anticipated. This is partly due to changes in the undergraduate medical tariff, driven by a shift towards more Community-based placements, which affects Secondary Care placements.
- Discussions centred around how to manage the reduced income, particularly in departments like Surgery where there is a high demand for Teaching Fellows. Each Fellow costs around £70,000 annually, requiring careful financial planning.
- The postgraduate medical and dental income was discussed, with an emphasis on expanding opportunities for simulation training and ensuring that the available funding is fully utilized.

Actions:

- Departments were encouraged to work closely with AL to ensure that education funds are allocated appropriately and align with educational activities.

2.3 Physician Associates Governance Policy update:

- The Trust Board approved a new Physician Associates (PA) governance document, making the Trust one of the first in the country to have such a policy.
- Focus areas include defining PA roles and ensuring access to both clinical and educational supervision.
- Concerns were raised about including PA supervision in consultant job plans.

Actions:

- Attendees were asked to review the PA governance document and provide feedback. Further clarity on incorporating supervision into job plans and ensuring adequate resources will be pursued.

2.4 Medical Oncology and Dermatology Feedback:

1. Medical Oncology:

- NS shared feedback from the GMC survey, which revealed several red flags in medical oncology, including concerns about governance, workload, teaching, and supervision.

- Plans include improving IT infrastructure, expanding office space, creating a new educational timetable, and improving handover processes between departments.

2. Dermatology:

- Staffing issues and a lack of an educational lead were identified as key areas for improvement. An educational lead has been appointed, and induction processes are being improved.

3. HEE Feedback:

- The Health Education England (HEE) team is satisfied with the initial self-assessment reports from these departments, but ongoing monitoring will continue.

2.5 Well-being and Support for Trainees:

Ruth Austin, the newly appointed Well-Being fellow for Internal Medicine Trainees, discussed key areas of focus:

- **Rotas and Workload**: The well-being of trainees is closely linked to rota arrangements, and ongoing work is being done to address these challenges.
- **Physical Environment**: Improvements are being sought in the physical environment where doctors work to enhance their well-being.
- **Psychological Support**: The importance of peer support and psychological well-being was discussed. Occupational Health psychiatry is now available, and feedback from trainees will help shape future initiatives.

Actions:

- A formal survey will be conducted to gather data on trainee needs, and projects will be developed to address these.

2.6 Educational Supervision for Locally Employed Doctors (LEDs):

- ET provided an update on progress in ensuring supervision for locally employed doctors, aligning with national guidelines.
- The Trust is aligning its supervision of locally employed doctors with national guidelines from the GMC and Royal College of Physicians (RCP).
- Some departments face resistance to incorporating educational supervision for locally employed doctors into job plans. Discussions with care group leads will be necessary to ensure compliance with supervision requirements.

Actions:

- Continued work to raise awareness and ensure that supervision is provided and reflected in job planning.

2.7 Undergraduate Education Updates:

- JP updated the committee on the development of a unified job description for undergraduate education leads, aiming for consistent standards across departments.
- The development of a unified job description for undergraduate education leads was discussed. This aims to standardize expectations and responsibilities across departments, ensuring consistent delivery of educational services.
- Plans are underway to hold regular meetings with the entire undergraduate faculty to foster development and consistency.

Actions:

- JP will circulate dates for these meetings and continue working with departments to implement the new job descriptions.

2.8 Integration with GESH Group:

- NG discussed the ongoing integration of medical education with the GESH group, highlighting the challenges and opportunities of restructuring medical education teams across hospitals.
- The integration of medical education with the GESH group (Epsom and St. Helier) is progressing. The education directorates will move from the HR directorate to the medical directorate under the Chief Medical Officer.
- A careful balance is being sought to preserve the strengths of the current system while exploring potential savings and improvements across the group. There is concern about maintaining a unified education team across different hospitals.

	TBA via Ms Teams (January 2025)	
3	DATE OF NEXT MEETING	
	14 Educational Lead reports and other supportive documents have been distributed prior this meeting for review and discussion.	
2.9	Educational Leads reports/update	
	Actions: - The next steps will involve formal consultation and restructuring, with timelines to be communicated to all staff.	