

Email: craig.white@gov.scot

Dear Craig

Letter from Jeane Freeman, Cabinet Secretary for Health and Sport

In response to Jeane Freeman's letter of 5 September, please see below responses to the questions raised:

Supervision of Junior Medical Staff:

Junior medical staff are allocated a named Educational Supervisor and a Clinical Supervisor while they are training with NHS Dumfries & Galloway. This is usually a Consultant, but can be another senior doctor such as an Associate Specialist. The Educational Supervisor is responsible for keeping an overview of the trainee's education progress. The Clinical Supervisor is responsible for more day to day supervision. Trainees meet with their supervisors regularly.

All Educational and Clinical Supervisors must undergo training to carry out their role and are approved as such by NES and ultimately the GMC. Through the appraisal process, trainers must provide evidence of ongoing professional development in 7 key areas to maintain their trainer status. These areas are:

1. Ensuring safe and effective patient care through training
2. Establishing and maintaining an environment for learning
3. Teaching and facilitating learning
4. Enhancing learning through assessment
5. Supporting and monitoring educational progress
6. Guiding personal and professional development
7. Continuing professional development as an educator

One of the advantages of a relatively small Board such as Dumfries & Galloway is that the junior medical staff are not anonymous members of huge medical teams. Consultants in their specialty get to know them well and even if they are not a named supervisor they do still ensure trainees are supervised and supported appropriately.

If any trainee doctors are involved in reported incidents then their supervisors are informed to allow appropriate feedback and support to be offered.

Trainers meet with the DME approximately quarterly, but more often if required, to discuss trainees and highlight any concerns. If required, local plans are put in place to offer support and all interventions are managed in line with the NES Doctor's in Difficulty policy.

NHS Complaints:

NHS Dumfries and Galloway does not currently have an electronic mechanism for capturing clusters of complaints about clinicians as the name is not captured within Datix. However our processes are such that complaints are investigated and responded to by the local teams. Our system provides for the directorate general manager and their team to have an oversight of all complaints being made within the system and given our size and geography means that a cluster of complaints would be recognised without difficulty.

We are moving towards a system using the Health Care Analysis tool and qualitative analysis that would allow us as a system to identify developing clusters within an area (though not on name specific clusters) and lead to closer investigation of the same. This approach would lead to a more systemic level of assurance. It is anticipated that this will be in place by the end of March 2019

Surgical Safety and M&M Reviews:

NHS D&G follow an extended WHO checklist with regards to pre-operative marking. The First Check is pre-operative with the patient awake and involved. This is led by the Senior Nurse in that Theatre and the surgeon and anaesthetist are present. Patient name, CHI and procedure (along with radiology) and reviewed and confirmed. The site is marked and agreed by all, including patient. The Second check is immediately prior to knife - to - skin and the same details are checked and it is ensured that everyone is happy to proceed.

The Acute Management Team have a weekly meeting to review theatre lists, list size, theatre equipment required, radiology input etc. This meeting is attended by Senior Charge Nurses and Clinicians along with managers.

The Surgical Team have protected time every Friday morning to discuss cases and perform Morbidity and Mortality Reviews.

The Acute Management Team are currently reviewing high frequency on-call rotas and their effectiveness and are assessing how these may run in partnership with other boards.,

Openness and Transparency:

All staff are encouraged to report any behaviours from colleagues that are not consistent with NHS D&G and NHS Scotland Values. They would do this by speaking to their line manager. If they do not feel that the response is appropriate then they are encouraged to escalate their concerns to their General Manager, Clinical Director, Associate Medical Director or the Board Medical Director. A fair approach will be taken to assessing why that individual may have behaved in such a manner and whether this is a 'one-off' or part of a theme.

All high level incidents and complaints are reviewed at our Patient Safety Group on a weekly basis. This group is comprised of the Nurse Director, Medical Director, Deputy Nurse Director and Associate Medical Directors along with representatives from each Directorate. Any themes in behaviour or outcome will be identified by this group and acted upon.

Yours sincerely

A handwritten signature in blue ink, appearing to read 'J. Ace', is written over a light blue rectangular stamp.

Jeff Ace
Chief Executive