

BUSINESS PLAN 2010 -2011

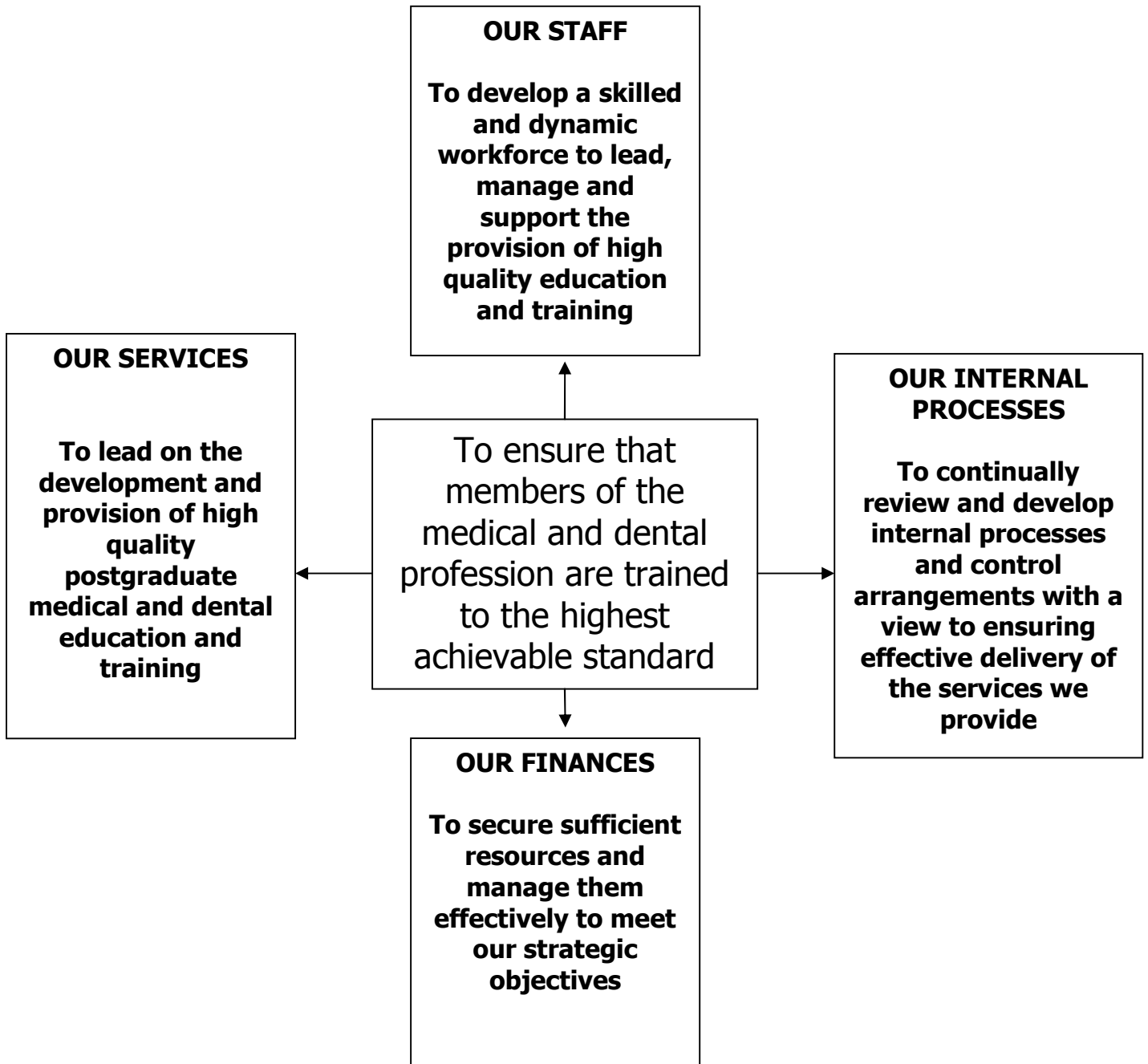
Introduction

The Business Plan provides details of the postgraduate activity to be undertaken by the Northern Ireland Medical and Dental Training Agency during the period 1 April 2010 to 31 March 2011 and focuses on the key business objectives. The Business Plan may require amendment in year to reflect any changes to the organisational structure or in-year priorities. All activities will be prioritised according to educational need and will be bound by the resources available. We are aware of the stewardship responsibilities in relation to the resources allocated to us and the planning required to ensure that the Agency achieves 3% efficiency savings identified for 2010-2011.

The objectives set for 2010-2011 are designed to support the Northern Ireland Medical and Dental Training Agency in achieving its overall mission, which is to provide:

"Excellence in learning, ensuring outstanding patient care"

We have identified a set of corporate goals to guide us over the three years commencing April 2010. They will be the drivers of our future performance. The goals relate to our services, our internal processes, our staff and our finances.



Business Plan for Northern Ireland Medical and Dental Training Agency – 2010 -2011

STRATEGIC OBJECTIVE	GP OBJECTIVE	KEY ACTIONS	PERFORMANCE INDICATOR	LEAD	TIMESCALE	
To ensure that structures and processes are in place to enable the standards required by the regulatory bodies to be demonstrated for all training programmes and trainees	Introduce a framework for educational supervision	Provide training for educational supervisors	Annual assessment against PMRTB standards	Ann Little	August 2010	
		produce guidance for the completion of educational supervision reports and ARCP panel process	PMETB reports	Ann Little	August 2010	
		Re-accreditation of training practices	Minutes of GP Training Committee & reports to Senior Management and the Board	Colin Kenny	September 2010	
		Conduct review of Out of Hours training provided		Colin Kenny	December 2010	
	Lead on the delivery of the PPI agenda	Involve ST3 trainees in practice visiting and the accreditation and re-accreditation of practices	Consultation Scheme		Claire Loughrey	August 2010
			Minutes of GP Training Committee & reports to Senior Management and the Board		Claire Loughrey	December 2010
Conduct ST2 pilot of 'expert patient' project						
	Ensure training in equality screening for senior staff	Training Records		Claire Loughrey	August 2010	

To ensure that the requirements set out in approved curricula are delivered and assessed and the systems in place for assessing competence are fit for purpose	Put process in place for monitoring of progress and participation in e-portfolio	Provide administrative support within GP Department	ARCP/RITA outcomes	Linda Craig	August 2010
		Develop and roll out appraisal process for GP specialty training	Annual assessment against PMETB standards	Colin Kenny/ Ann Little	August 2010
		Review induction materials	Minutes of GP Training Committee	Claire Loughrey/ Ann Little	August 2010
	Review leadership curriculum	Map leadership curriculum onto GP training curriculum	Annual assessment against PMETB standards	Claire Loughrey	August 2010
		Integrate GP trainees into the management programme	Records of Training/Certificates of Attendance	Claire Loughrey	August 2010
To ensure that careers information and advice is easily accessible and that support systems are in place for doctors and dentists in difficulty and those with disabilities or special needs	Develop support systems for the management of the GP trainee in difficulty	Ongoing provision of careers advice and counselling	Record of appointments	Claire Loughrey/ Grainne Bonnar/Ann Little/ Colin Kenny	August 2010
		Develop advanced training practices and support for experienced trainers	Data base of LTFT trainees and doctors and dentists in difficulty	Grainne Bonnar	August 2010
		Organise trainer development days	Trainee surveys, annual assessment against PMETB standards and PMETB inspection reports	Claire Loughrey	August 2010
		Provide training in mentoring			

To ensure that medical and dental practitioners and dental care professionals are supported in their learning and development	Review CPD provision and ensure it is fit for purpose	Review of all courses provided using traffic light system	Minutes of GP Training Committee	Gerry Burns/ Linda Craig	August 2010
		Review of Service Level Agreement with the new HSC Board	Reports to senior management and the Board	Claire Loughrey/ Grainne Bonnar	April 2010
		Review GP Tutor role and job description		Claire Loughrey/ Grainne Bonnar/ Gerry Burns	Ongoing
		Work collaboratively with other stakeholders in CPD		Claire Loughrey/ Grainne Bonnar/ Gerry Burns	Ongoing
		Review implementation of Intrepid Course Management System		Linda Craig/Gerry Burns	Ongoing
		Seek new vehicles to deliver CPD and research and evaluate new projects		Gerry Burns	August 2010

		<p>Source appropriate venues for the delivery of CPD in line with Departmental guidance</p> <p>Develop 'toolkits' for GP practices to use for Practice Based Learning days</p> <p>Work with and commission GPs with special interests to deliver practice based learning days (eg Forensic Medicine)</p> <p>Provide a GP Returner Scheme in collaboration with the LHSCB (dependent on recurrent funding stream)</p>		<p>Linda Craig</p> <p>Gerry Burns</p> <p>Gerry Burns/ Claire Loughrey</p> <p>Claire Loughrey/ Grainne Bonnar</p>	<p>Ongoing</p> <p>August 2010</p> <p>Ongoing</p> <p>August 2010</p>
	Ensure standards for revalidation of medical educators are met	Implement Faculty Development Pilot - peer review of GP appraisers and trainers	<p>Database of trainers and levels attained</p> <p>Training records</p>	<p>Anne Marie Harney/ Ann Little/Gerry Burns</p>	<p>August 2010</p>

		<p>Implement appraisal for all Medical Educators Develop quality assurance process for appraisal</p> <p>Deliver the PPI agenda in GP appraisal through the introduction of lay involvement to sit on the Central Board of Management</p> <p>Collaborate with the RCGP to implement their on-line appraisal system</p>	<p>Minutes of GP Committee and Central Board of Management</p> <p>Reports to Senior Management and the Board</p>	<p>Anne Marie Harney</p> <p>Claire Loughrey</p> <p>Anne Marie Harney</p>	<p>August 2010</p> <p>December 2010</p> <p>August 2010</p>
To work in partnership with key stakeholders to manage the recruitment and selection of doctors/dentists in training	<p>Monitor and observe recruitment processes as agreed by the National Recruitment Office and the UK Foundation Programme Office</p>	<p>Review process for allocation of foundation and specialty training posts</p> <p>Source appropriate venues for assessment centres and the management of recruitment</p>	<p>Annual assessment against PMETB standards</p> <p>Deanery Visit and QAFP Reports</p>	<p>Claire Loughrey/Ann Little</p> <p>Linda Craig</p>	<p>August 2010</p> <p>Ongoing</p>
To provide assurance to the Department of Health, Social Services and Public Safety that identified weaknesses have been addressed and that controls are operational across the organisation	<p>Maintain and update a risk register and review significant events</p>	<p>Review processes within the GP Department for the management of complaints and the identification of risks</p>	<p>Minutes of Senior Management and the Board</p> <p>Audit Reports</p> <p>Compliance with Controls Assurance Standards</p>	<p>Claire Loughrey/ Grainne Bonnar</p>	<p>Ongoing</p>

	Ensure that staff in the GP Department adhere to the Agency's policies and procedures	Review policies and procedures in Specialty Training	Audit Reports	Claire Loughrey/ Grainne Bonnar	August 2010 Ongoing
To review and develop the Agency's information systems	Review information systems and the processing and storage of personal and sensitive information	Ensure staff complete on-line CETIS courses (Information Security, Data Protection, Freedom of Information, Records Management) and comply with procedures Implement Course Management and on-line payment system Ensure information is available on request and in compliance with FOI and Data Protection procedures	Compliance with records management controls assurance standards Evaluation of on-line system Publication Scheme	Claire Loughrey Gerry Burns/ Linda Craig	Ongoing August 2010
To strengthen capacity and capability within the Agency in line with its range of work and professional requirements	Review roles and responsibilities and performance of staff within the GP Department	Calibrate performance of GP Appraisers Agree GP Appraiser curricula for training - new appraiser and established appraiser programmes Ensure implementation of KSF Appraisal and Personal Development Review	Record of appraisal documentation including personal development plans Compliance with HR Controls Assurance Standard and Terms and Conditions Audit	Anne Marie Harney Anne Marie Harney Claire Loughrey	August 2010 August 2010 August 2010

		Review resource provision to ensure that the GP Department is supported in the delivery of its aims and objectives	Minutes of Senior Management and the Board	Claire Loughrey	August 2010
To create a culture which facilitates openness and honesty, provides a harmonious and safe working environment and supports staff through organisational change	Improve collaborative working between departments	Ongoing review by senior management of departmental business plans in line with corporate objectives Ensure arrangements are in place to facilitate discussions on matters relating to staff Identify staff to sit on the IiP project team	Minutes of senior management, Team Leader meetings, departmental staff meetings and Joint Working Group Staff satisfaction surveys Health and Safety Risk Assessments Staff Turnover Sickness Absence Reports	Claire Loughrey	Ongoing
To ensure that the Agency achieves a break-even position in the context of its business and budgetary plans	Ensure that decisions taken meet value for money and affordability considerations and demonstrate proper use of public money	Ensure compliance with policies and procedures and Departmental requirements Review funding streams in GP Department	Audit Reports	Claire Loughrey	August 2010

STRATEGIC OBJECTIVE	DENTAL OBJECTIVE	KEY ACTIONS	PERFORMANCE INDICATOR	LEAD	TIMESCALE
<p>To ensure that structures and processes are in place to enable the standards required by the regulatory bodies to be demonstrated for all training programmes and trainees</p>	<p>Training to meet the standards set by the General Dental Council</p>	<p>Design study programme around trainees needs as determined historically and in response to workplace based assessments and with reference to "A Curriculum for UK Foundation Programme Training"</p> <p>Quality manage the continuing education programme for dentists and dental care professionals (DCPs)</p> <p>Deliver an appropriate training programme in the area of enhanced duties for DCPs</p>	<p>GDC, Faculty and Deanery visit reports</p>	<p>Neale Armstrong/ Adrian Farquharson</p> <p>David McCarter</p> <p>David McCarter</p>	<p>June 2010</p> <p>Ongoing</p> <p>Ongoing</p>
<p>To ensure that the requirements set out in approved curricula are delivered and assessed and the systems in place for assessing competence are fit for purpose</p>	<p>Initiate implementation of foundation training in dentistry in line with developments in the rest of the UK</p>	<p>Agree and submit a business case to the Department for the introduction of foundation training with a view to the implementation of a foundation Pilot from August 2010</p>	<p>Minutes of Senior Management and the Board</p>	<p>David Hussey</p>	<p>April 2010</p>

	Evaluate assessments of VT/GPT trainees	<p>Report to senior management on</p> <ul style="list-style-type: none"> work-place based assessment outcomes (DOPs, TABs, PAQs and CBDs) Quarterly review process by the Assessment Review Panel and the response of trainers and trainees <p>Present outcomes of study at the Association for Dental Education Europe</p> <p>Review sessional commitment of VT/GPT Advisers</p>	<p>Reports of assessment outcomes</p> <p>Minutes of General Dental Practice Committee, Senior Management and the Board</p>	<p>David Hussey</p> <p>David Hussey</p> <p>Terry McMurray/ David Hussey</p>	<p>August 2010</p> <p>August 2010</p> <p>April 2010</p>
To ensure that careers information and advice is easily accessible and that support systems are in place for doctors and dentists in difficulty and those with disabilities or special needs	Ensure support systems are in place for dental professionals returning to the workforce and dental trainees failing to thrive	<p>Develop a policy of retraining for dentists returning to the workforce</p> <p>Develop guidelines for trainees "in difficulty" or "failing to thrive" based on feedback from the Celtic Deanery event and in line with corporate policy.</p> <p>Develop procedures for the facilitation of dental care professionals returning to work</p>	<p>Minutes of General Dental Practice Committee, Senior Management and the Board</p>	<p>David Hussey/ David McCarter</p> <p>Neale Armstrong/ Adrian Farquharson</p> <p>David Hussey/ David McCarter</p>	<p>March 2011</p> <p>August 2010</p> <p>March 2011</p>

Ensure that medical and dental practitioners and dental care professionals are supported in their learning and development	Develop and implement a project plan to support delivery of CPD for dental professionals	Evaluate and review planned activities and continually monitor through needs assessment Assess the impact of the introduction and management of DCPs CPD on the Dental Continuing Education Department	Course evaluations Minutes of senior management and the Board	David McCarter David Hussey	Ongoing August 2010
	Develop and agree processes for the accreditation of courses, approval of fees and evaluation of courses	Set up a Working Group of representatives from Dental, GP and Hospital training to agree a consistent approach to the charging of course fees Develop criteria and a process for the accreditation of dental CE courses and approval of the CPD allowance Agree a mechanism for reporting to SMT and the Board on course evaluations Investigate the feasibility and cost of introducing a swipe card for course attendance Establish an e-library of course materials and upload onto NIMDTA website	Minutes of senior management and the Board	David McCarter David McCarter David Hussey David McCarter	August 2010 August 2010 April 2010 August 2010

		Modify the on-line course evaluation form to incorporate training and development needs as a mandatory field		David McCarter/ Brid Hendron	August 2010
				Lesley Whan	April 2010
	Develop a process that gives the Dental Department flexibility to develop a VT/GPT study in line with NIMDTA's business objectives	Agree arrangements with senior management to ensure that the study programme for 2010/11 is developed in a timely manner, is fit for purpose and is deliverable.	Minutes of SMT meetings	David Hussey	April 2010
To work in partnership with key stakeholders to manage the recruitment and selection of doctors and dentists in training	Evaluate the effectiveness of changes to the dental trainer/trainee recruitment processes	Review processes for the recruitment of trainers and trainees to the VT and GPT training schemes	Minutes of CVT and General Dental Practice committee meetings	Neale Armstrong/ Adrian Farquharson	Ongoing
	Design and implement researcher under-representation of female trainers	Present and publish outcomes of research conducted	Publication Annual Report	David Hussey	August 2010
To provide assurance to the Department of Health, Social Services and Public Safety that identified weaknesses have been addressed and that controls are operational across the organisation	Ensure that the risks associated with decisions and actions taken in relation to the management of the VT and GPT Schemes are identified, assessed, managed and reported to the Agency Board	Update dental risk register and ensure actions are put in place to manage risk	Minutes of senior management and the Board	David Hussey	Ongoing
		Report to senior management and the Board		David Hussey	April 2010

<p>To review and develop the Agency's information systems</p>	<p>Review information systems and the processing and storage of personal and sensitive information</p>	<p>Ensure staff complete on-line CETIS courses (Information Security, Data Protection, Freedom of Information, Records Management) and comply with procedures</p> <p>Implement Course Management and on-line payment system</p> <p>Ensure information is available on request and in compliance with FOI and Data Protection procedures</p>	<p>Compliance with records management controls assurance standards</p> <p>Evaluation of on-line system</p> <p>Publication Scheme</p>	<p>David Hussey</p> <p>David McCarter/ Lesley Whan</p>	<p>Ongoing</p> <p>August 2010</p>
<p>To strengthen capacity and capability within the Agency in line with its range of work and professional requirements</p>	<p>Review roles and responsibilities and performance of staff within the Dental Department</p>	<p>Review resource provision to ensure the Dental Department is supported in the delivery of its aims and objectives</p> <p>Ensure implementation of KSF Appraisal and Personal Development Review</p>	<p>Record of appraisal documentation including personal development plans</p> <p>Compliance with HR Controls Assurance Standard and Terms and Conditions Audit</p>	<p>David Hussey</p> <p>David Hussey</p>	<p>Ongoing</p> <p>August 2010</p>
<p>To create a culture which facilitates openness and honesty, provides a harmonious and safe working environment and supports staff through organisational change</p>	<p>Improve collaboration between internal departments within NIMDTA</p>	<p>Establish links of common purpose with GP Department</p> <p>Consider viability of a central events administrator</p>	<p>Minutes of senior management, Team Leader meetings, departmental staff meetings and Joint Working Group</p>	<p>David McCarter/ Gerry Burns</p> <p>David Hussey/ Claire Loughrey</p>	<p>Ongoing</p> <p>August 2010</p>

		<p>Ensure arrangements are in place to facilitate discussions on matters relating to staff</p> <p>Identify staff to sit on the IiP Project Team</p>	<p>Staff satisfaction surveys</p> <p>Health and Safety Risk Assessments</p> <p>Staff Turnover</p> <p>Sickness Absence Reports</p> <p>Compliance with HR Controls Assurance Standard</p>	David Hussey	Ongoing
<p>To ensure that the Agency achieves a break-even position in the context of its business and budgetary plans</p>	<p>Ensure that decisions taken meet value for money and affordability considerations and demonstrate proper use of public money</p>	<p>Review expenditure and income and target investment of any income generated</p>	<p>Accountability Review meetings</p>	David Hussey/ David McCarter	Ongoing
		<p>Ensure compliance with Agency procedures and Departmental requirements</p> <p>Ensure that decisions taken meet value for money and affordability considerations and demonstrate proper use of public money</p>	<p>Audit Reports</p>	David Hussey	Ongoing

STRATEGIC OBJECTIVE	HOSPITAL TRAINING OBJECTIVE	KEY ACTIONS	PERFORMANCE INDICATOR	LEAD	TIMESCALE
<p>To ensure that structures and processes are in place to enable the standards required by the regulatory bodies to be demonstrated for all training programmes and trainees</p>	<p>Work in partnership with the Directors of Medical Education (DMEs) to ensure appropriate arrangements are in place for monitoring and reviewing educational contracts and the responsibilities of both parties are clearly communicated</p>	<p>Further revise the quality management framework in line with PMETB standards</p> <p>Sign-off and monitor "Learning and Development Agreement" with the local education providers</p> <p>Ensure that annual appraisal is integrated into the assessment process for doctors in training and record, monitor and report on outcomes</p>	<p>Annual assessment against PMETB standards</p> <p>Deanery Visit Reports</p> <p>Minutes of Quality Management (QM) Group, Regional network of DMEs and meetings with local education providers (LEPs)</p> <p>Record of appraisal workshops and trainee roadshows</p> <p>ARCP/RITA/FACD Outcomes</p>	<p>Keith Gardiner</p> <p>Randal Hayes</p> <p>Keith Gardiner/Margot Roberts</p> <p>Keith Gardiner/Terry McMurray</p>	<p>August 2010</p> <p>Ongoing</p> <p>August 2010</p> <p>March 2011</p>
	<p>Work with the DMEs to develop Training Tracker for trainers and ensure they are trained in "Teaching the Teacher"</p>	<p>Set up a Faculty Development Group with a view to identifying gaps in training and target consultants/associate specialists with enhanced educational responsibilities</p>	<p>Database of "trainers"</p> <p>Records of training</p> <p>Minutes of Regional Network</p>	<p>Keith Gardiner</p>	<p>March 2011</p>

To ensure that the requirements set out in approved curricula are delivered and assessed and the systems in place for assessing competence are fit for purpose	Review foundation and specialty training assessment processes and record and monitor outcomes	Re-evaluate the ARCP process and use of lay representatives Communicate outcomes to the LEPs	Annual assessment against PMETB standards Minutes of Specialty Schools Forum, QM Group and Foundation School Board Reports on ARCP/RITA and FACD outcomes Tracking through e-portfolio	Terry McMurray Keith Gardiner/Angela Carragher Angela Carragher	August 2010 Sept 2010
	Develop leadership curriculum for all training grades	Explore options for delivering the leadership curriculum to reflect PMETB domains and implement generic skills training for Year 2 core/specialty trainees Identify costs of delivery	Annual assessment against PMETB standards	Terry McMurray	March 2011
	Identify and agree the role of the "Responsible Officer" in relation to doctors in training and in accordance with the regulatory framework for revalidation	Submit a business case to the Department for funding and development of an appropriate infrastructure		Terry McMurray	April 2010

To ensure that careers information and advice is easily accessible and that support systems are in place for doctors and dentists in difficulty and those with disabilities or special needs	Work with QUB and the Trusts to put in place support mechanisms for trainees	Review processes for the transfer of information, agree with LEPs contacts for receipt of information and streamline internal processes	Minutes of meetings of Foundation School Board, Regional Network, Specialty Schools, QM Group, LEPs	John Collins	August 2010
		Continue to work with the Trusts and Heads of School to support doctors and dentists who wish to work less than full-time	Compliance with agreed protocols Increase in numbers of LTFT trainees	Margot Roberts	Ongoing
		Ensure policies are available to doctors in training through induction and via the website	Annual assessment against PMETB standards	Margot Roberts	August 2010
To ensure that medical and dental practitioners and dental care professionals are supported in their learning and development	Develop and agree processes for the accreditation and evaluation of courses and the charging of course fees	Work with dental and GP colleagues to agree a common approach across all departments	Compliance with policy	Keith Gardiner	August 2010
		Agree mechanism with Heads of School for reporting annually on all course evaluations	Minutes of Specialty Schools Forum and QM Group	Keith Gardiner	August 2010
To work in partnership with key stakeholders to manage the recruitment and selection of doctors and dentists in training	Review strategy for the recruitment of core and specialty trainees	Engage with the Department and Trust representatives to address the shortage of training grade doctors	Reports to the Medical Education Policy Group (MEPG) on fill rates & vacancies	Terry McMurray	April 2010

		<p>Ensure information on unfilled posts is provided to Trusts by the end of May</p> <p>Ensure staff and members of recruitment panels are trained in recruitment and selection processes and equality and diversity</p>	<p>Records of training</p>	<p>Margot Roberts</p> <p>Margot Roberts</p>	<p>May 2010</p> <p>Ongoing</p>
<p>To provide assurance to the Department of Health, Social Services and Public Safety that identified weaknesses have been addressed and that controls are operational across the organisation</p>	<p>Implement recommendations from PMETB & internal and external audit reports</p>	<p>Review and update corporate and departmental risk registers and put in place action plans to achieve full implementation and address weaknesses in controls</p> <p>Identify key risks for consideration at meetings of the Board</p> <p>Ensure incidents and complaints are reported, recorded and appropriate action taken</p>	<p>Minutes of Board, Audit, Senior Management and Quality Management Group and Health and Safety meetings</p> <p>Compliance with controls assurance standards</p> <p>Internal and external audit reports</p> <p>PMETB approval</p> <p>Risk Assessments</p> <p>Accountability Review minutes</p>	<p>Terry McMurray</p>	<p>June 2010</p>

To review and develop the Agency's information systems	Review information systems and the processing and storage of personal and sensitive information	Complete transfer of information to the new Intrepid database including study leave module	Compliance with records management controls assurance standard	Margot Roberts	August 2010
		Update and develop the NIMDTA website Ensure information is available on request and in compliance with FOI and Data Protection procedures	Minutes of Board, Audit, Senior Management, and QM Group Publication Scheme	Margot Roberts	Ongoing
To strengthen capacity and capability within the Agency in line with its range of work and professional requirements	Review roles and responsibilities of staff involved in the administration and delivery of foundation, core and specialist training	Ensure full implementation of KSF Appraisal and Personal Development Review	Compliance with the HR Controls Assurance Standards and Terms and Conditions Audit	Terry McMurray	August 2010
		Review resource provision to ensure the Hospital Training Department is supported in the delivery of its aims and objectives		Terry McMurray/ Margot Roberts	Ongoing
To create a culture which facilitates openness and honesty, provides a harmonious and safe working environment and supports staff through organisational change	Improve collaborative working between Departments	Ensure arrangements are in place to facilitate discussions on matters relating to staff Identify staff to sit on the IiP Project Team	Staff satisfaction surveys Minutes of senior management, Team Leader meetings, departmental staff meetings and Joint Working Group	Margot Roberts	Ongoing

			<p>Health and Safety Risk Assessments</p> <p>Staff Turnover/ Sickness Absence Reports</p> <p>Compliance with the HR Controls Assurance Standard</p>		
<p>To ensure that the Agency achieves a break-even position in the context of its business and budgetary plans</p>	<p>Ensure that decisions taken meet value for money and affordability considerations and demonstrate proper use of public money</p>	<p>Administer the regional budgets for the training and study leave of doctors in training</p> <p>Ensure compliance with Agency policies and procedures and Departmental requirements</p>	<p>Minutes of Accountability Review Meetings</p> <p>Minutes of Regional Network, MEPG and meetings with LEPs</p> <p>Audit reports</p>	<p>Terry McMurray</p>	<p>Ongoing</p>