

Quality Management in Academic Training – A consensus statement from the Integrated Academic Training Advisory Committee (InterACT)

The academic training pathway starts at Foundation level and moves through Academic Clinical Fellow (ACF) posts, doctoral training and Out Of Programme Research (OOPR) into Clinical Lecturer (CL) posts finishing following acquisition of the certificate of completion of training (CCT). These posts are funded by, and employed through, different organisations (foundation schools, LETBs, Universities, external funding bodies) which each have their own specific frameworks and expectations.

Trainees need to be supported to develop the right professional and clinical skills to succeed as clinical academics. Quality management attempts to ensure a consistency of approach and when applied to training should focus not only on what training is being delivered but how it is being delivered. A high quality academic training programme should have clear lines of communication between LETB and University programme leads with an organisational framework to allow development of high quality integrated academic training programmes across a wide range of specialities. Given the diversity of academic training in the UK a fixed approach to measuring quality would be limiting. These guidelines seek to identify common themes which indicate best practice and to support the quality management process of academic training.

Theme 1: Leadership

The GMC recommends that there should be a lead for overseeing the quality management of both the academic and clinical components of Academic programmes.

Recommendation: We support the need for local leadership of this process and note that the budget for NIHR Integrated Academic Training Programmes contains a component for ‘programme management’ which can be used to fund this activity.

Theme 2: Assessment

Assessment is an important part of this quality management process to ensure consistency and performance improvement and should be evidence based. Given the variation in level of academic trainee (including those on an OOPR), clinical speciality, and research methodologies used, a universal set of quality standards in academic training cannot be defined. Instead trainees should be able to demonstrate development of skills and experience as well as progress towards the next stage of an academic career and ultimately becoming an independent researcher as appropriate. Progress should be determined during using trainee and supervisor feedback at ARCP review.

Recommendation: We support the use of the guidelines produced by the Academy of Medical Sciences and The Conference of Postgraduate Medical Deans (CoPMed) to assess academic progress. These should contribute to the academic ARCP for all trainees (including those who are on an OOPR), which should be undertaken in accordance with the guidance provided in the Gold Guide.

Theme 3: Interface with clinical practice

Being able to balance clinical and research work is a vital skill for academics. It is not the role of the academic programme to ensure the quality of any clinical placements but evidence should be presented for good communication between the academic and clinical components such that both

academic and clinical training are supported (e.g. through appropriately designed training programmes and rotas, as recommended by the GMC).

Recommendation: Relationships between Clinical and Academic Programme leads should enable joint planning of rotations.

Under the GMC quality assurance review of academic training key findings included a requirement for clear return to clinical practice processes in place for those returning to clinical training from research, if they have been out of clinical practice for more than 3 months. Consideration and planning of this should sit jointly with the trainee, the clinical Training Programme Director, and the LETB.

Recommendation: This is not specific to academic trainees and should be managed under standard processes by the LETB.

Theme 4 : Academic Training Programme report

An overview of Training Programme activity is helpful to facilitate review and quality management.

Recommendation: to avoid duplication schemes should consider generating an annual summary of the Academic Training Programme activity for both the LETB and the University. Evidence to underpin the report could be drawn from examples below but the examples should not be seen as prescriptive, may not be relevant to all training programmes and (for smaller rotations) care will be needed to protect trainee confidentiality.

Evidence for this should be drawn from both trainee experience and programme management.

Trainee Experience:

Evidence should be collected within their portfolio including both outputs and annual review. This should be Gold Guide compliant and follow the guidelines produced by the Academy of Medical Sciences and should result in a single form or area of the portfolio where the academic representative on an ARCP panel can easily view activities and achievements each year, to support formative rather than summative assessment.

Trainee activities which may inform a Programme Activity report could include

- Research methods training
- ARCP outcomes
- Academic outputs
- Progression to next post
- Destination after completion of academic training post

Programme Management Reports

Evidence to support training quality could include:

- a) Number, level and speciality spread of academic training posts
- b) Training configuration eg:
 - how posts are assigned to specialties
 - interaction with between University Academic Supervisors, Training Programme Directors, the LETB and NIHR
 - how these posts are managed within the local workforce planning system
 - structure of posts,

- arrangements for protected research time
 - provision of trainee support and mentoring
 - operational management including lay and trainee representation, external peer review.
 - Institutional support including administrative support.
- c) ARCP process and management, including arrangements for joint ARCP
- d) Areas of good practice, including
- information on equality and diversity
 - trainee experience including trainee perspective of programme, networking events etc
 - trainee survey/ GMC national training survey
- e) Areas of concern eg:
- recruitment challenges
 - clinical workload issues
 - problems with protecting academic time
- f) Action plan for quality improvement

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