

## Board of Directors (in public)

### Item 4.4a

**Subject:** DME Report - GMC Training Survey 2025  
**Date of Meeting:** Tuesday 23rd September  
**Prepared by:** Dr Clare Quarterman, DME  
 Mr Manoj Kuduvalli, Medical Director  
**Presented by:** Dr Clare Quarterman, DME

BAF Ref	Impact on BAF
1	Assurance on the training of junior doctors through the national GMC trainee survey
6	Assurance on the experience of Trust employed doctors via locally administered survey

<b>Level of Assurance (please tick)</b> To be used to provide the Board / Committee with a guide on the extent of assurance and evidence of assurance provided within the report		<input checked="" type="checkbox"/>
Level of Assurance	Description	
High	There is a strong system of internal control which has been effectively designed to meet the system objectives, and that controls are consistently applied in all areas reviewed.	<input type="checkbox"/>
Substantial	There is a good system of internal control designed to meet the system objectives, and that controls are generally being applied consistently.	<input checked="" type="checkbox"/>
Moderate	There is an adequate system of internal control, however, in some areas weakness in design and/or inconsistent application of controls puts the achievement and some aspects of the system objectives at risk.	<input type="checkbox"/>
Limited	There is a compromised system of internal control as weaknesses in the design and / or inconsistent application of controls puts the achievement of the system objectives at risk.	<input type="checkbox"/>
No	There is an inadequate system of internal control as weaknesses in control, and/or consistent non-compliance with controls could/has resulted in failure to achieve the system objectives.	<input type="checkbox"/>

## 1. Executive Summary

LHCH is committed to providing high quality medical education at all stages of training, undergraduate through to post-graduate and subspecialty. A number of approaches are taken throughout the year to quality assure the training provided including local surveys and feedback via our internal education network and information gathered from national surveys, particularly the GMC National Training Survey. The 2025 GMC National Training Survey report was recently released and the results and associated action plans are presented.

## 2. Background

The results of the 2025 GMC National Training Survey were received in August and the aggregate report for the Trust is shown below. 91.8% of resident doctors employed in training posts completed the survey during the 7-week period it was open from 18<sup>th</sup> March to 7<sup>th</sup> May 2025. Results for the Trust as a whole are, in the majority, within the average range. Results for individual specialty groups are then further summarised in greater detail below, with action plans as proposed by the relevant specialty training lead.

## 3. Trust-wide Actions

Trust-wide Actions	Responsibility/ Timeframe	Progress (RAG)
Continue engagement with resident doctors via MESS meetings – ensure trainee links appointed in all specialties	Educational Leads	Complete
Establishment of Trust-wide education program – multi-specialty and accessible to all members of the MDT	DME, starting Sept 2025	Complete – program for first 2m in place
Continue program of internal local training surveys to supplement feedback year round – next October 2025	DME, Oct 25	Next survey to be disseminated October 2025

## 4. 2025 GMC National Training Survey – Responses and Action Plans by Specialty

### Anaesthesia

Responses received for anaesthesia have shown a significant reduction compared to previous years across all categories. On a detailed review of responses at question level, the majority of responses were within the positive range with a minority of significant outliers. On review of responses received for Post Speciality and Programme Group, areas requiring immediate attention were:

- Handover
- Feedback

Areas highlighted as being within Q1 but not below included:

- Overall satisfaction
- Clinical supervision
- Clinical supervision out of hours
- Supportive environment
- Teaching

Results of the NW Deanery Quality Panel for Anaesthesia are awaited at the time of writing this report, but information gleaned from those present during the meeting suggest handover was also highlighted as an area of concern along with some challenges regarding incivility in some clinical areas.

Action	Responsibility/ Timeframe	Progress (RAG)
Review of handover process with change to full unit handover at start of night shift	RCoA College Tutor, Clinical Leads for Anaesthesia and Critical Care, August 25	Complete
Review of approach to feedback across consultant body	RCoA College Tutor, August 25	In progress – results disseminated, options for consultant training feedback in development
Appoint new trainee link	RCoA College Tutor	Complete

### Respiratory Medicine

Results continue to stand out as positive outliers for this specialty group. Unfortunately due to sickness, community-based teaching sessions that had led to the improved 2024 scores are no longer taking place and so the ongoing challenges of a small number of trainees and accommodating regular meaningful sessions have returned.

Action	Responsibility/ Timeframe	Progress (RAG)
Review approaches to local teaching requirement alongside Trust-wide sessions	Clinical Lead Respiratory Medicine, Oct 25	
Review requirement for educational lead within department to focus on delivery of specialty specific teaching	DME, Clinical Lead for Respiratory Medicine, Sept 25	

### Cardiothoracic Surgery (CTS)

Results for cardiothoracic surgery have continued to move in an improving direction. There has been a significant improvement in Post Specialty results, reflecting the experience of all working within cardiothoracic training posts, regardless of their programme group. There has also been improvement across the Programme Group report with a continual improvement in the aggregate scores, and whilst not reflected as positive outliers they indicate the improving experience of those with a formal CTS training number.

Improvements in post-specialty scores have been particularly noted in

- Clinical supervision
- Teamwork
- Educational governance
- Rota design
- Facilities

In the programme group scores, there are notable improvements in the rating for local teaching, now sitting within the interquartile range for other units and a significant improvement in experience of clinical supervision out of hours which was previously a negative outlier.

Results have been reviewed in detail by the CTS education team who have identified the current areas of focus as workload – scores are within the IQR but the responses reflect that resident doctors do find their workload challenging – and local teaching. Local teaching scores have improved in the last 12 months but are still in the lowest quartile. Renewed focus from the education team alongside the new Trust-wide program will hopefully lead to an improvement in this area.

Alongside feedback returned from the GMC Training Survey, the surgical division has organised an internal review of training culture and practices. This will be used to develop the action plan and so will be shared in due course.

Action	Responsibility/ Timeframe	Progress (RAG)
Await feedback from internal review of training culture and develop plan for education	Outcome expected Sept/Oct 25	Ongoing
Plan to develop training tracker to monitor staff participation in key development activities and to maintain visibility of progress across the team	October 2025	In progress
Implement peer-led monthly knowledge and reflection sessions	November 2025	Sessions beginning September 2025

### Clinical Radiology

Overall results were received positively by the radiology team. Although the overall trainee satisfaction has seen a drop from 98% last year to 85% this year, the department have maintained improved scores when compared to previous years when the overall satisfaction rates were 75% in 2022 and 66% in 2023. There also continue to be no significantly negative outliers, although regional teaching continues to be an area of concern.

Dr Ahmed Kharabish will be taking over as the Radiology Education Lead from 1<sup>st</sup> Sep 2025, and Dr Linu Kuruvilla will be moving on to the Cardio-Thoracic Radiology Curriculum Lead role with the North-West School of Radiology (NWSOR). Together as a department, there are plans to conduct more practical cardiac CT teaching sessions at LHCH for all the trainees in the NWSOR very soon. The LHCH education team have supported acquisition of imaging systems which will be used for these practical sessions. This will build on the cardiac CT theory course we delivered at LHCH in January 2025 for all ST2 Radiology trainees in the region, which was very well received. This will continue to support regional teaching efforts with the aim of supporting improvement in the regional teaching scores which have rated poorly for several years.

Action	Responsibility/ Timeframe	Progress (RAG)
Regional teaching – increase delivery of practical cardiac CT imaging sessions at LHCH	Specialty Tutor Radiology and NWSOR	Plan developed, review progress with implementation in 6m

### Intensive Care Medicine (ICM)

Scores for intensive care medicine are presented for post-speciality only, comprising in the majority Internal Medicine Trainees, allocated to work in ICU according to their rotation. There were a number of areas reviewed in detail in response to results, in particular overall satisfaction, induction, adequate experience, educational governance and feedback.

On detailed review of responses, the majority felt well supported by clinicians of suitable experience however several felt that better bedside teaching could be provided which could in turn lead to improved feedback which many trainees felt was lacking in an informal sense. For doctors in internal medicine, they are not working towards a career in intensive care medicine, and so for

those without an interest in an acute specialty the requirement to complete a 3 month placement in critical care can be viewed unfavourably, particularly when compared to the national average which will comprise in the majority doctors formally training in ICM. Induction has been a challenging area previously and whilst still a result in Q1 but not an outlier, aggregate scores have slowly improved and informal feedback on the approach to induction has been positive.

Action	Responsibility/ Timeframe	Progress (RAG)
Disseminate results of survey to consultant body, particularly those working on a regular basis with IMT doctors in critical care. Focus particularly given to encouraging increased bedside teaching on ward rounds and provision of feedback.	Specialty Tutor IMT-ICU, Aug 25	Complete
Introduction of formal practical simulated training in central venous line insertion with industry support	Sept 25	Complete – all IMT-ICU resident doctors will have completed training by end of first week in September

### Cardiology

Post-specialty scores have maintained a steady state within the average range and scores in this area will include internal medicine trainees and those on GP training programmes that join LHCH for 3 month placements. For programme-group, reflecting trainees training specifically in cardiology, there have been reductions in scores with 3 areas in Q1 although not significantly negative outliers. On review of the responses, the cardiology education team note that there has been a requirement to support a number of resident doctors in difficulty over recent months, leading to some difficult conversations. Whilst there are no specific actions, there is a commitment within the team to ensure a supportive environment is maintained and improve access to the specialty tutor as required.

### Internal Medicine

LHCH receives Internal Medicine Trainees for attachments within Cardiology, Respiratory Medicine and Intensive Care Medicine. Overall results continue to be very positive with several positive and strongly positive outliers, particularly in Workload, Local Teaching and Rota Design.

A new RCP Associate Clinical Tutor has recently been appointed.

## 5. 2025 GMC Trainer Survey Feedback

Alongside the GMC National Training Survey, registered trainers with the GMC were also invited to provide feedback via the National Trainer Survey. The 2025 survey was completed by 69.5% of consultant staff recognised as trainers with the GMC, a sustained increase compared to returned in 2023 and 2024. Results for LHCH are positive overall and can also be viewed according to specialty.

## 6. Conclusion

The results of the 2025 GMC National Training Survey are largely encouraging regarding the

current position of postgraduate training at LHCH. Responses have allowed teams to develop action plans to take forward over the coming months and progress against them will be reviewed regularly and tested with an ongoing program of internal surveys.

## **7. Recommendations**

The Board is asked to note the report and the planned actions to support postgraduate training at LHCH.