

Our Ref: QSBGPP

East Midlands Healthcare Workforce Deanery

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Date: 24 August 2012

Dear Head of School

RE: Quality Scrutiny Board (QSB) and Reporting Mechanisms

This autumn you will be presenting your School's Self-assessment to the first Quality Scrutiny Board. This presentation will focus on sharing your best practice and identifying risks to your Schools' education and training outcomes.

We would like to share with you the process we will follow, including the reporting of the outcomes from the Board.

The quality scrutiny process shall be as follows:

Your School will present to the Quality Scrutiny Board. This will consist of a twenty minute presentation from the School followed by a forty minute conversation with the Board members focusing on risks and good practice.

Part of the process will be for the board members to ask for clarification, and after the QSB has met we may also ask for evidence which may not have been available or covered on the day (On the school assessment form there is a column for evidence and action. We would suggest that where you have logged evidence that this will be available if called for. Also if you have rated an item as amber or red, then an action should be logged, with names responsible aligned to it.)

The QSB Chair and members will document your good practice and the risks you have identified and record those at the QSB.

The QSB Chair will document this and send back to you as Head of School for comments, accuracy and sign off within 28 working days of the Quality Scrutiny Board.

The Head of School shall return this back to the QSB Chair within 10 working days.

The QSB Chair will then present this to the Deanery Integrated Management Team (IMT) Board at the following IMT Board meeting, and this may then be shared with the LETB senior management team.

The Head of School shall present this document at their next School Board meeting.

The Head of School shall be expected to share and discuss the document with the Associate Postgraduate Deans.

In addition the information collated will be used by the Quality Team to inform the Deanery Report submitted to the General Medical Council during October and the following April (these are the reporting months for the Deanery to report annually to the GMC).

In conclusion, we would like to confirm that this is a new and development process for this year. Therefore it is not expected at the outset that all the detail required will be there. What we will do is work together so that for the next cycle we ensure that the process has improved.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Jill Guild', with a small dot at the end.

Jill Guild CMgr MCMI
Quality and Performance Manager