

Annual Quality Assurance Summary

This summary provides an overview of how an organisation is meeting our standards for medical education and training as detailed in [Promoting excellence: standards for medical education and training](#). It provides an overview of the QA activities undertaken over the course of a year and an overview of findings including any areas of notable practice or requirements and recommendations we have set. The summary is published.

Organisation	NHS England – Wessex (NHSE Wessex)
Review period	December 2024 – December 2025 (Year 1 of second cycle)

Overview of findings

Overall findings statement
From the SAQ submission, and the clarification of some points during the SAQ meeting, we consider that NHSE Wessex is meeting the standards set out in the GMC’s <i>Promoting excellence: standards for medical education and training</i>. The QA activities that we have carried out in this annual cycle have provided good opportunities to observe how NHSE Wessex meets our standards in themes 1 (learning environment and culture), 2 (educational governance and culture), 3 (supporting learners), 4 (supporting educators) and 5 (developing assessment and curricula).

Quality Activity undertaken

	Activity	Date	Summary
1	SAQ submission	5 March 2025	The SAQ was submitted on time and covered all five themes of <i>Promoting excellence</i> . The submission

			included a list of planned NHSE Wessex activities that we could observe for quality assurance purposes. We are satisfied that where further information and/or clarification is still required that this can be provided in the next SAQ submission.
2	SAQ feedback meeting	24 April 2025	This meeting was held to provide feedback to NHSE Wessex on its 2024/25 SAQ submission, and to seek clarification and additional information on the submission where required. We also discussed potential QA activities we could undertake in this annual cycle. These activities were selected to improve our understanding of NHSE Wessex processes. We did not identify areas of risk during the SAQ meeting. Following this meeting, NHSE Wessex was provided with written feedback on the SAQ submission.
3	Observation of Educator Development - Induction for Educational Supervisors and Clinical Supervisors session	13 January 2025	Following their application to be educational and clinical supervisors, educators must complete an induction course. This course consists of two parts: e-learning (providing the theory) and a group learning session which provides the opportunity to embed the theory into practise through discussions led by two experienced course facilitators. We observed an all-day group learning session. The session covered: the roles and responsibilities of an educational supervisor, initial meetings, career support (what can be provided to doctors in training), mid-term meetings, giving feedback, writing an educational supervisor report and final meetings. We felt that by observing this activity, we could explore NHSE Wessex's processes for supporting educators and ensure they are working effectively. We were pleased to see that the facilitators encouraged engagement from all attendees which made all the discussions collaborative. The facilitators kept to time despite a packed agenda for the day. We felt that the duration of the discussions (no longer than 90 minutes) supported in keeping the attendees engaged and ensured all topics were covered. We

			found that the session acted as a good opportunity for the sharing of ideas by getting the attendees to think about what they would do in certain scenarios to prepare them for the role and manage their expectations.
4	Annual quality engagement meeting	20 November 2025	The annual quality engagement meeting was attended by members of the GMC's education QA team and the NHSE Wessex Quality team. We had a helpful discussion regarding National Training Survey (NTS) results, comments, themes and sites of interest. NHSE Wessex maintains a good awareness of the NTS results and training environment in the region. We heard how NHSE Wessex has been working to address potential risks raised in the NTS. We are assured by how NHSE Wessex is managing risk across the region with items being added to the risk register when appropriate.
5	Equality, Diversity and Inclusion action plan (including differential attainment)	20 November 2025	We ask all postgraduate training organisations to submit an updated action plan on an annual basis detailing how they are working to address the attainment gap in their region. We discussed the action plan during our annual engagement meeting with NHSE Wessex. The purpose of this discussion was to explore the interventions in the action plan, to understand why they were selected and how the impact will be measured and evaluated. Following this meeting, NHSE Wessex was provided with written feedback on their action plan, which includes the areas where we would like to receive an update in the next submission. In our meeting, we asked if NHSE Wessex could summarise the progress made in their EDI work and action plan over the last year. We were pleased to hear that despite the changes to NHS England, NHSE Wessex's DA work has so far been unaffected. However, we heard that the reduction in staffing and resources will limit capacity in future. We were pleased to hear that NHSE Wessex are assured there is accountability for EDI within their

			organisation. We were told that there is a dedicated EDI lead, Associate Dean for EDI, IMG fellows and an IMG Champions Network delivering this work. We will follow-up with NHSE Wessex on progress against the action plan through our proactive quality assurance process, and we will require an updated action plan alongside the next SAQ submission in 2026.
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Quality Reporting System (QRS)

We use the QRS to monitor concerns raised by organisation when they identify that our standards are not being met in an education and training environment. Concerns are managed locally by the responsible organisation until resolution.

Activity	Date	Summary
Quality Reporting System (QRS)	Ongoing	NHSE Wessex have 5 open items on the QRS. NHSE Wessex is engaged with the QRS system and continue to provide frequent and detailed updates. We are assured that our thresholds for reporting via the QRS are embedded and adhered to.

Enhanced Monitoring

Enhanced monitoring is used to promote and encourage local management of concerns which adversely affect patient or trainee safety, doctors' progress in training, or the quality of the training environment. During enhanced monitoring, the GMC provides an increased level of monitoring and participates in activities organised by the NHSE local office. We tailor our support to each enhanced monitoring case to help address the concern(s) and develop a sustainable solution. We have summarised the enhanced monitoring activity this organisation has undertaken over the last 12 months below. For further information on enhanced monitoring please [visit our website](#).

Activity	Date	Summary
Enhanced monitoring activities	Ongoing	NHS England currently have one open enhanced monitoring case within the Wessex region. NHSE Wessex follows the GMC's enhanced monitoring process appropriately, updating the GMC on live cases. They also update the GMC on potential cases and include the GMC in decisions regarding escalation to and de-escalation from enhanced monitoring.

		Further information on enhanced monitoring visits can be found on the GMC website.
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Next steps

The GMC's responses to the information submitted in the SAQ gives feedback on each theme to help NHSE Wessex complete the updates to the questionnaire in the next annual cycle. These include:

Theme two – We would like an update on the review NHSE Wessex is doing of their feedback mechanisms (EGL2-09)

Theme three – We would like an update on the work NHSE Wessex is doing in supporting doctors experiencing sexual misconduct (SUL1-01).

Theme four – We would like an update on how NHSE Wessex is exploring how to meet equality, diversity and inclusion responsibilities on interview panels for educators (SUE1-01).

Further to this, and based on our findings from the quality activities we have undertaken, in the next cycle we would like to learn more about some areas highlighted in their DA action plan. This includes:

- The IMG welfare support service;
- The Linear Sequential Unmasking (LSU) project;
- Who at NHSE Wessex collates information submitted under section 5 of the self-assessment questionnaire from Trusts in the region and monitors it?
- The process for raising EDI related concerns that are identified from the self-assessment questionnaire and how these concerns are managed;
- Exam preparation support, for example the exam upskilling workshops;
- Support after unsuccessful attempts at exams; and
- Feedback on performance in exams.

Organisation's response

The organisation has the right to reply to the AQAS; if they have responded it will be included below.

Organisation's response

Thank you for providing us with this feedback and for the discussions at the annual quality engagement meeting.

We will consider the feedback under next steps and will include updates in our next return.