Witness Name: Jacqueline Hayden

Statement No.: WITN7254001

Exhibits: WITN7254002 -

WITN7254005

Dated: 11/10/2022

INFECTED BLOOD INQUIRY				
WRITTEN STATEMENT OF JACQUELINE HAYDEN				

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 08 September 2022.

I, Jacqueline Hayden, will say as follows: -

Section 1: Introduction

1.	I am Professor Jacqueline Hayden, born	GRO-C	1950, current address GRO-C
	GRO-C		GMC number GRO-C . I
	qualified in Medicine from St George's Ho	spital Medi	cal School in 1974.
	I hold the following qualifications:		
	MB BS		
	FRCP		
	FRCGP		
	FRCPE		
	FRCPsych Hon		
	FAcadMEd Hon		
	FSFFMLM		
	I hold three honorary doctorates and was a	awarded the	e CBE in 2013 for services
	to postgraduate medical education.		

- 2. I am the President of the Academy of Medical Educators. In that role I am responsible for chairing the Council and Trustees of the Academy, including determining policy and its implementation.
- 3. The Academy of Medical Educators (The Academy), established in 2006, is a charitable organisation which exists to advance medical education for the benefit of patients and the public. It is the professional organisation for all those involved in the training and education of doctors, physician associates, dentists and veterinary surgeons. The Academy is the standard setting body for medical educators in the UK. Its *Professional Standards* [WITN7254002] defines the level of competence that medical educators should achieve at each point in their careers. The Standards provide a recognised framework for professionals to demonstrate expertise in medical education through accreditation as a medical teacher. Recognition by the Academy demonstrates skills and competence when applying for revalidation, promotion and approval as a trainer. The Academy has over 1100 members across the UK and beyond, who benefit from: access to a network of medical educators at every level of career progression; regular newsletters, mailings and updates via the online community; a programme of academic meetings and events, including the annual Calman Lecture and national spring and autumn conferences; special interest groups; Academy awards and prizes.
- 4. Although the Academy is responsible for setting standards for medical educators, it is not a regulatory body and membership is voluntary. Our Standards have been used to inform the General Medical Council's Standards for Trainers set out in Promoting Excellence² [WITN7254003].
- 5. I have been a member of the following organisations relevant to the Inquiry:

https://www.medicaleducators.org/write/MediaManager/Documents/AoME Professional Standards 4 th edition 1.0 (web full single page spreads).pdf

https://www.gmc-uk.org/-/media/documents/promoting-excellence-standards-for-medical-education-and-training-2109 pdf-61939165.pdf

¹ Available at

² Available at

Member of the Council of the Royal College of General Practitioners (RCGP) 1986-2012

Member Trustee Board RCGP 2010-2012

Regional Adviser in General Practice North Western Regional Health Authority 1991-1996

Chair of the Committee of Regional Advisers in England 1994-1997

Postgraduate Medical Dean North West England 1997-2016

Lead Dean for Dermatology 1998-2016

Lead Dean for Psychiatry 2003-2016

Lead Dean for Care of the Elderly 1998-2003

As Postgraduate Medical Dean, I also held honorary appointments at Manchester, Lancaster and Liverpool Universities.

Education Associate for the General Medical Council 2010 current.

Director of Postgraduate Clinical Training University of Nicosia 2016-2019

Member Council then President of the Academy of Medical Educators 2012current.

Member of the Council of the Faculty of Medical Leadership and Management 2016-2021.

Non-Executive Director University Hospitals Plymouth 2016-current

Committee Member of the Medical Practitioner Tribunal Service 2016-current

President of the Academy of Medical Educators 2017-current

6. I can confirm that I have not provided evidence or been involved in other inquiries, investigations or criminal or civil litigation relating to human immunodeficiency, hepatitis B, hepatitis C or Creutzfeldt Jakob disease.

Section 2: Training

- 7. The current system for ensuring that medical educators and clinicians are kept up to date with new guidelines, guidance and best practice is through the processes that regulate medical education. These are:
 - Medical schools' quality management and quality assurance processes which include selection, appointment and development of medical

- educators associated with the organisation, including those that practise in the health care environments.
- b. Post graduate quality management and quality assurance processes in the 'deaneries'³ – the educational bodies associated with the four national health care education organisations (Health Education England, Health Education and Innovation Wales, NHS Education Scotland and Northern Ireland Medical and Dental Training Agency). This includes oversight of the appointment and development of educators practising in health care environments in association with the medical royal colleges.
- c. The General Medical Council Quality Assurance processes, which oversees and quality assures education providers, including the four health care organisations, the medical schools and the medical royal colleges.
- d. The General Medical Council conducts annual trainee and trainer surveys to determine the quality of training and undertakes a regular review of the education providers, 'deaneries' and medical schools. Medical schools and 'deaneries' are responsible for their individual audit processes. The Academy of Medical Educators does not undertake any audits on the effectiveness or otherwise of individual medical educators.
- 8. Educator roles are included in the medical annual full scope of practice appraisal.
- 9. Non-clinically qualified medical educators are quality assured through university processes.
- 10. All doctors have a duty to maintain fitness for purpose, including keeping up to date with new guidelines and best practice. The NHS and the medical royal colleges have a range of activities to monitor this, including compliance with national audits, compliance with NICE guidelines and annual appraisal which includes information on maintaining clinical competence.

³ I have used the term 'deanery' to describe the geographical patch which is managed by the postgraduate medical dean.

- 11. Throughout the NHS there is a network of Freedom to Speak Up whereby it is possible for individuals to raise concerns about another individual's practice. These processes could be strengthened if Trusts, Health Boards and health service providers gave greater recognition to the importance of medical education, ensuring that those responsible for education demonstrated fitness for purpose through recognised programmes. This could be through membership of the Academy of Medical Educators.
- 12. All Trusts, health boards and health service providers have internal activities to ensure that non-clinical senior leaders are familiar with candour, consent and effective communication. The effectiveness is monitored through the health regulatory processes.
- 13. Compliance with Duty of Candour is reported in Trust/Health Board meetings which are in the public domain.

Section 3: Response to the recommendations of the Psychosocial Expert Group

- 14. The Academy of Medical Educators is not responsible for determining and monitoring the undergraduate curricula nor is it responsible for determining the postgraduate curricula and assessment. All are regulated by the General Medical Council and the standards expected are documented in the Generic Professional Capabilities Framework⁴ [WITN7254004].
- 15. Effective patient communication does form part of medical training, this is included in the Generic Professional Capabilities Framework and is part of Good Medical Practice⁵ [WITN7254005].

⁴ Available at https://www.gmc-uk.org/-/media/documents/generic-professional-capabilities-framework--2109 pdf-70417127.pdf

⁵ Available at https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/good-medical-practice

- 16. Equality, diversity and inclusion are included in all medical training and continuing development, most EDI programmes include bias in all its forms, the individual programmes are the responsibility of the medical schools or the Trusts/Health Boards where the doctors work. It is not the responsibility of the Academy of Medical Educators to mandate or monitor EDI training.
- 17. The Academy of Medical Educators commends our standards as guiding principles for excellence in education and high quality patient care.

Statement of Truth

I believe that the facts stated in this witness statement are true.

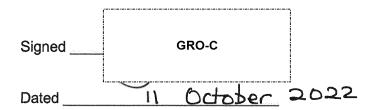


Table of exhibits

Date	Description	Exhibit number
2022	Professional Standards for medical, dental and veterinary educators, Fourth Edition	WITN7254002
2015	Promoting Excellence Standards for Medical Education and Training	WITN7254003
2017	Generic Professional Capabilities Framework	WITN7254004
2022	Ethical Guidance for Doctors, Good Medical Practice	WITN7254005