

**Anatomy Department Inspection Report:
Royal College of Surgeons in Ireland, 23rd October 2017**

In attendance:

Prof. D. Ceri Davies – Inspector of Anatomy
Dr. Michael Ryan – Lay Observer & Medical Council member
Ms. Chloe Ryder – Anatomy Liaison, Medical Council

License holder: Professor T. Clive Lee

SECTION 1 – ORGANISATIONAL CAPACITY AND CAPABILITY

1. LICENSING, AUTHORITY, RESPONSIBILITY AND ACCOUNTABILITY

The lead individual holding the licence for Anatomical Examination at RCSI (Professor T. C. Lee) has not changed since the 2016 inspection and the required annual returns have been made to the Medical Council. There have been staff changes during 2017 and these will be notified to the Medical Council in the 2017 annual return.

2. GOVERNANCE AND QUALITY SYSTEMS

I met with Professor Lee and senior members of academic and technical staff of the Anatomy Department. The Department is a cohesive unit and its members understand their responsibilities in relation to their role in Anatomical Examination. All staff are appropriately qualified and trained for their work and RCSI has appropriate annual performance management and development appraisals. A suitable systematic record management system that ensures data protection, confidentiality and has suitable provision for data back-up (see below), is in place. Appropriate risk assessments of the practices and processes related to Anatomical Examination are in place. A service level agreement between the Dublin Medical Schools (including RCSI) and their undertakers, Corrigan & Sons is now in place and discussions are ongoing about a similar agreement with the Glasnevin Trust.

The Simulation Suite of the new Surgical Skills Centre at 26 York Street is now operational and has been licensed to hold embalmed anatomical specimens for:

1. MRCS Part B examinations
2. Short postgraduate course teaching
3. Temporal bone dissection / drilling

However, it has yet to be used for any of the above purposes. Professor Lee retains overall responsibility for Anatomical Examination at RCSI and a named Delegate Responsible Person for cadaveric material held at 26 York Street has been identified and communicated to the Medical Council and will henceforth be named on the annual return to the Medical Council together with teachers and technicians working with the cadaveric material. The named Delegate Responsible Person will be responsible to the Licence Holder at RCSI and must

abide by the Medical Council's Code of Practice for Anatomical Examination. The facilities and security of the Simulation Suite are fit for purpose and a protocol for the transfer of cadaveric material between 123 St Stephen's Green and 26 York Street has been agreed and all material will be returned to 123 St Stephen's Green for disposal.

There is a Pathology Museum comprising retained cadaveric material at Beaumont Hospital, it is still not clear whether this falls under the jurisdiction of the Inspector of Anatomy. It is to be hoped that this will be clarified in the new Human Tissue Bill.

SECTION 2 – RECOMMENDED PRACTICES

1. CONSENT

RCSI uses the model consent form published as an appendix to the Code of Practice for Anatomical Examination. This consent form meets all of the recommendations within the Code of Practice. The information booklet for potential donors and their families gives appropriate information for the consent to be fully informed.

2. PREMISES, FACILITIES AND EQUIPMENT

The premises, facilities and equipment were inspected from the entrance point of a donor's remains, through the embalming and storage facility, to the dissecting room where teaching was in progress. Although there are building works in the region of the undertaker's entrance, security remains good as does that of the embalming / storage facility. The embalming facility continues to perform well and there has not been a recurrence of the problem of mold growth. Cadaveric material is transferred from the embalming / storage facility via a dedicated, secure lift. CCTV connected to the Porter's lodge monitors the entrances to the dissecting room and the entrance doors are only open between 9.00 am and 5.00pm and are controlled by an 'auto-shut' mechanism. The signage in and around the dissecting room is appropriate as are the facilities in the dissecting room, which has recently been redecorated. There is not any active air handling, but the height of the room and the air vents incorporated into the roof design, render this unnecessary.

3. RECORD KEEPING / TRACEABILITY

Hard copy donation records are stored in a fire-proof cabinet. The electronic database is fully operational, and consent forms and other donation records for donors accepted for Anatomical Examination are now scanned and entered into the database. Retained parts are cross-referenced to the cadaver and donation records. An audit of traceability was successfully conducting by selecting two retained parts in use during the teaching taking place at the time of inspection and tracing them back to the cadavers they were derived from and the consent

form and other records. Historical retained parts have now been entered into an electronic database on a separate drive from the donation records. A Museum Committee has been constituted to consider proposals to use material donated for Anatomical Examination for research purposes.

4. SENSITIVE DISPOSAL

The donation information booklet provides full information about the options available for disposal of the donors' remains, which are either interred in Glasnevin Cemetery or returned to their relatives. Retained parts are also interred in Glasnevin.

5. LOAN / TRANSFER OF CADAVERIC MATERIAL

RCSI does not currently loan or transfer any cadaveric material to other institutions.

A handwritten signature in black ink that reads "D. C. Davies". The signature is written in a cursive style with a large initial 'D' and 'C'.

D. C Davies
Inspector of Anatomy

4/11/17