

## **Anatomy Department Inspection Report: University College Dublin, 7<sup>th</sup> December 2017**

In attendance:

Professor D. Ceri Davies – Inspector of Anatomy  
Ms Katharine Bulbulia – Medical Council Member  
Ms Aoise O'Reilly – Accreditation Manager  
Ms Poppy Nolan – Accreditation executive

License holder: Professor James Jones

### **SECTION 1 – ORGANISATIONAL CAPACITY AND CAPABILITY**

#### **1. LICENSING, AUTHORITY, RESPONSIBILITY AND ACCOUNTABILITY**

The lead individual holding the license for Anatomical Examination at UCD (Professor James Jones) has not changed since the 2016 inspection and the required annual returns have been made to the Medical Council. Staff changes during 2016 notified to the Medical Council in the annual return for to the Medical Council and staff changes in 2017 will be reported in the annual return for 2017. The 2017 return will include the 'Named Person' responsible for the day to day running of the satellite Clinical Anatomy Centre at the Mater Misericordiae University Hospital and the names of Anatomy Teachers working there.

#### **2. GOVERNANCE AND QUALITY SYSTEMS**

The Team met with Professor Jones and senior technical and administrative staff for the purposes of the inspection. There is a clear line of management within the Belfield Department and its members understand their responsibilities in relation to their role in Anatomical Examination. This line of management extends to the satellite Clinical Anatomy Centre that operates under the same governance structure as the Anatomy Department on the Belfield Campus. All staff are appropriately qualified and trained for their work. UCD has appropriate annual performance management and development appraisals. Appropriate risk assessments of the practices and processes related to Anatomical Examination together with Standard Operating Procedures are in place and hard copies are now available in the appropriate locations. Agreed protocols and Standard Operating Procedures are in place for the transfer of donors between Belfield Campus and the satellite Clinical Anatomy Centre and the operation of the Clinical Anatomy Centre. Hard copies of these should be made available in the Clinical Anatomy Centre. Corrigan & Sons are responsible for the transport of donors between the Belfield Campus and the satellite Clinical Anatomy Centre. A service level agreement between the Dublin Medical Schools (including UCD) and their undertakers, Corrigan & Sons is now in place and discussions are ongoing about a similar agreement with the Glasnevin Trust.

There is a Pathology / Anatomy Museum that students enter via the library. The external doors to the Museum are alarmed and monitored by CCTV. Each

specimen in the Museum is catalogued, given a QR code and tagged so that an alarm sounds if an attempt is made to remove it from the Museum.

## SECTION 2 – RECOMMENDED PRACTICES

### 1. CONSENT

UCD 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 Belfield 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. The security of the undertaker's entrance is good and monitored by CCTV. The swipe card access to the dedicated body lift is now functional. The embalming and preparation facilities are in good operative condition. The storage of cadavers and retained parts is appropriate and secure, cadaveric material is transferred from the embalming / storage facility to the Dissecting Room via 'through' storage fridges. Mold contamination problems have been eliminated, by regular steam cleaning, disinfection and inspection. Air quality in the embalming / preparation and Dissecting Rooms appeared good and 15 air changes per hour were reported. The Dissecting Room doors are alarmed and monitored by CCTV, as is the entrance to the body lift. Student entrance into the Dissecting Room is controlled by scanning the bar codes on their ID cards. The signage in and around the dissecting room is appropriate. The plastination suite is functional and secure, but currently not in use.

The premises, facilities and equipment at the satellite Clinical Anatomy Centre at the Mater Misericordiae University Hospital, were inspected from the entrance point of the donor to the teaching facility. The undertaker's entry can be closed during donor delivery and entry into the building is by restricted swipe card access into the mortuary area. The trolley lift to the floor of the Clinical Anatomy Centre can be 'locked down' to prevent inadvertent entry. The corridors from the lift to the Clinical Anatomy Centre cannot be 'locked down' and therefore, an agreed 'out of hours' delivery protocol has been developed. Entrance to the Surgical Skills Centre is by restricted swipe card access and the entrance and exits are monitored by CCTV and relayed to the main hospital security control centre. Within the Surgical Skills Centre, entry into the Clinical Anatomy Centre is also restricted by swipe card. The facilities and equipment within the Clinical Anatomy Centre are appropriate for purpose for short-term storage of embalmed anatomical specimens, Anatomical Examination and basic surgical skills training. The signage at the entry points to the Clinical Anatomy Centre

must be improved to emphasize restricted access and the prohibition of mobile phones and cameras. A daily record of the users of the Clinical Anatomy Centre must be kept.

### 3. RECORD KEEPING / TRACEABILITY

Electronic storage of donation records is now complete. The information is stored on a stand-alone computer in a secure room and is backed-up on an external hard drive. Paper copies of the donation records are stored in a secure fire-proof cabinet. A record is kept of all donor transfers to and returns from the satellite Clinical Anatomy Centre. Embalmed donors transferred from the Belfield campus to the satellite Clinical Anatomy Centre, are accompanied by paper copies of their donation records. There is an inventory of retained parts that is hyper-linked to the cadaver and donation records. An audit of traceability was successfully conducting by selecting some retained parts and tracing them back to the cadavers they were derived from and the consent form and other records. Some plastinated anatomical specimens were found to be uncatalogued; this must be remedied.

### 4. SENSITIVE DISPOSAL

The donation information booklet provides full information about the options available for disposal of the donors' remains. Donor's remains are cremated or buried at Glasnevin Cemetery or returned to their relatives. Donors transferred to the satellite Clinical Anatomy Centre are returned to the Belfield campus prior to disposal.

### 5. LOAN / TRANSFER OF CADAVERIC MATERIAL

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



D. C Davies  
Inspector of Anatomy

6/1/18