

St George's University Hospitals NHS Foundation Trust

Histopathology

Risk-based Review (focus group)



Quality Review report

27 March 2018

Final Report

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Quality Review details

Background to review	<p>St George's University Hospital NHS Foundation Trust received poor results in the 2017 General Medical Council National Training Survey (GMC NTS). The GMC NTS revealed a significant number of red outliers for histopathology in the following areas:</p> <ol style="list-style-type: none"> 1. Teamwork 2. Supportive environment 3. Adequate experience 4. Study leave <p>Histopathology also received pink outliers in the following areas:</p> <ol style="list-style-type: none"> 1. Induction 2. Educational governance 3. Educational supervision 4. Regional teaching <p>Health Education England (HEE) conducted an Education Lead Conversation (ELC) on 12 September 2017 to discuss and address these issues with the departmental and educational leads. Therefore, HEE felt that it was necessary to undertake a Risk-based Review (focus group) to meet with the trainees in order to follow up on the outcomes and assess progress following the previous ELC.</p>
Training programme / learner group reviewed	The quality review team met with histopathology trainees at ST2 to ST4 levels, and locum appointment for service (LAS) doctors.
Quality review summary	HEE was pleased to learn that there were no serious concerns or learning environment issues reported by the trainees during the review. The trainees described a supportive training environment; with excellent curriculum coverage, training opportunities and good educational supervision. HEE commended the Trust's and the education leads' efforts in significantly improving the trainee experience and environment. Consequently, the two outstanding actions from the 2017 ELC were closed during the review.

Quality Review Team

HEE Review Lead	Dr Martin Young, Head of School of Pathology for London and the South East, Health Education England	External Clinician	Professor Peter Wilson, Consultant Microbiologist, Clinical Microbiology & Virology, UCLH NHS Foundation Trust
Deputy Postgraduate Dean	Dr Anand Mehta, Deputy Postgraduate Dean, Health Education England, South London	HEE Representative	Andrea Dewhurst, Quality, Patient Safety & Commissioning Manager, Health Education England (London and the South East)
Lay Member	Kate Rivett, Lay Representative	Scribe	Adora Depasupil, Learning Environment Quality Coordinator, Health Education England (South West London and the South East)
Observer	John Marshall, Learning Environment Quality Coordinator, Health Education England (North Central London and the South East)		

Findings

1. Learning environment and culture

HEE Quality Standards

1.1 The culture is caring, compassionate and provides safe and effective care for patients, service users, carers and citizens and provides a supportive learning environment for learners and educators.

1.2 The learning environment and organisational culture value and support education and training so that learners are able to demonstrate what is expected in order to achieve the learning outcomes required by their curriculum or required professional standards.

1.3 The learning environment provides opportunity to develop innovative practice, engage in research activity and promotes skills and behaviours that support such engagement.

1.4 The learning environment delivers care that is clinically or therapeutically effective, safe and responsive, and provides a positive experience for patients and service users.

1.5 The learning environment provides suitable facilities and infrastructure, including access to quality assured library and knowledge services.

1.6 The learning environment and culture reflect the ethos of patient empowerment, promoting wellbeing and independence, prevention and support for people to manage their own health.

Ref	Findings	Action required? Requirement Reference Number
H1.1	<p>Appropriate level of clinical supervision</p> <p>The trainees and locum appointment for service (LAS) doctors reported that the department was very well supervised. The quality review team heard that clinical supervision was conducted in a way that benefitted the trainees' education and learning experience.</p>	
H1.2	<p>Rotas</p> <p>The trainees reported that they had a dedicated rota organiser in the department and that all trainees had been rostered to rotate through the different specialties, maximising training opportunities.</p>	
H1.3	<p>Work undertaken should provide learning opportunities, feedback on performance, and appropriate breadth of clinical experience</p> <p>The quality review team heard that the teaching environment on a day-to-day basis had improved significantly in comparison to the trainees' previous experience within the department. The trainees reported a high turnover of different cases, which meant that they were able to look at various cases together with the consultants.</p> <p>The trainees reported that the department had been able to meet their training needs. For instance, the trainees reported that they had been able to select cut-up work based on their preference and training needs and that they had spent a maximum of two hours a day doing cut-up work. The quality review team heard that the local teaching sessions had been rescheduled by an hour and so there was no conflict with the timetables when trainees were undertaking cut-up work. The quality review team heard that the trainees had been exposed to a high volume of autopsies, which had benefitted their education and preparation for assessments.</p>	

	The quality review team heard that trainees and LAS doctors received regular feedback on their performance as part of their day-to-day interaction with the consultants in the department, which they found useful and motivating.	
H1.4	<p>Protected time for learning and organised educational sessions</p> <p>The trainees reported that the department had provided three hours of protected teaching each week. The quality review team heard that the teaching sessions included trainee-led haematology and cytology and a consultant-led black box case session to concentrate on one specialty. The trainees stated that they rotated around the different specialties based on what they wanted and needed to learn, which they reported helped build their confidence in learning as well as writing reports for different specialties.</p> <p>The trainees further reported that the department had always ensured that they were able to attend regional training days. The quality review team also heard that the trainees had been able to access protected research time as part of their training.</p>	
H1.5	<p>Adequate time and resources to complete assessments required by the curriculum</p> <p>The trainees reported that the old equipment in the department had been replaced; and that there were no longer major concerns regarding the computers or information technology (IT) systems within the department.</p> <p>The trainees also indicated that they had been well supported during their preparation for assessments. The quality review team heard that trainees received various material recommendations from different consultants and they had been provided with valuable advice on balance and allowances of workload before the exams as additional support.</p>	
H1.6	<p>Organisations must make sure learners are able to meet with their educational supervisor on frequent basis</p> <p>The trainees reported that they felt engaged with the consultant body through regular meetings with their supervisors, and that they had been able to participate in the improvements made in the histopathology department.</p>	

2. Educational governance and leadership

HEE Quality Standards

2.1 The educational governance arrangements continuously improve the quality and outcomes of education and training by measuring performance against the standards, demonstrating accountability, and responding when standards are not being met.

2.2 The educational, clinical and corporate governance arrangements are integrated, allowing organisations to address concerns about patient and service user safety, standards of care, and the standard of education and training.

2.3 The educational governance arrangements ensure that education and training is fair and is based on principles of equality and diversity.

2.4 The educational leadership ensures that the learning environment supports the development of a workforce that is flexible and adaptable and is receptive to research and innovation.

2.5 The educational governance processes embrace a multi-professional approach, supported through appropriate multi-professional educational leadership.

H2.1	Organisation to ensure access to a named educational supervisor	
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	The trainees reported that they all had allocated educational supervisors and had been able to meet with them to discuss their curriculum needs and agreed plans on how to achieve their educational objectives.	
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3. Supporting and empowering learners

HEE Quality Standards

3.1 Learners receive educational and pastoral support to be able to demonstrate what is expected in their curriculum or professional standards and to achieve the learning outcomes required.

3.2 Learners are encouraged to be practitioners who are collaborative in their approach and who will work in partnership with patients and service users in order to deliver effective patient and service user-centred care.

H3.1	<p>Behaviour that undermines professional confidence, performance or self-esteem</p> <p>All of the trainees the review team met with reported that the histopathology department in St George's University Hospitals NHS Foundation Trust (SGH) had provided an excellent training environment. The quality review team heard that the trainees had not encountered any inappropriate or undermining behaviour during their training placement in SGH. The trainees and LAS doctors stated that the working environment in histopathology had been highly supportive and that they had been treated with respect at all times by all staff members.</p>	
H3.2	<p>Access to study leave</p> <p>The trainees reported that study leave had been highlighted as an issue in the 2017 General Medical Council National Training Survey (GMC NTS) due to mandatory training days and regional training days falling under study leave. However, the trainees reported that this had been resolved and was no longer an issue. The trainees reported that they had no issues attending regional training days and that they were encouraged by their supervisors to do so.</p>	
H3.3	<p>Regular, constructive and meaningful feedback</p> <p>The quality review team heard that the department provided formal feedback to trainees through written feedback forms, which were documented and delivered in a supportive way. It was also reported that the consultants critiqued and provided suggestions and advice on a day-to-day basis to trainees, in relation to the different specimens that the trainees had been able to work with.</p>	

4. Supporting and empowering educators

HEE Quality Standards

4.1 Appropriately qualified educators are recruited, developed and appraised to reflect their education, training and scholarship responsibilities.

4.2 Educators receive the support, resources and time to meet their education, training and research responsibilities.

H4.1	N/A	
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5. Developing and implementing curricula and assessments

HEE Quality Standards

5.1 Curricula assessments and programmes are developed and implemented so that learners are enabled to achieve the learning outcomes required for course completion.

5.2 Curricula assessments and programmes are implemented so that all learners are enabled to demonstrate what is expected to meet the learning outcomes required by their curriculum or required professional standards.

5.3 Curricula, assessments and programme content are responsive to changes in treatments, technologies and care delivery models and are reflective of strategic transformation plans across health and care systems.

5.4 Providers proactively engage with patients, service users, carers, citizens and learners to shape curricula, assessments and course content to support an ethos of patient partnership within the learning environment.

H5.1	<p>Opportunities for inter-professional multidisciplinary working</p> <p>The trainees reported that they had been able to attend various multi-disciplinary (MDT) meetings, in which the consultants typically led the presentations. However, the trainees reported that they were encouraged to present as well with a support of a consultant. Alternatively, the trainees indicated that they had also been able to request to take part in the preparation of presentations if the presentation covered a topic that they had an interest in. The trainees reported that they had been able to confidently present during MDT meetings and described this as beneficial to their training experience.</p>	
H5.2	<p>Regular, useful meetings with clinical and educational supervisors</p> <p>The trainees reported that the department conducted a local faculty group (LFG) meeting every two weeks which were led by the trainees. The quality review team heard that one of the educational supervisors typically recorded the LFG minutes, which were then sent to all trainees by e-mail in order to obtain their feedback. Therefore, the trainees stated that they had been able to discuss any issues in a proactive way with the educational and clinical supervisors, and that they had been able to contribute to the solutions and plans of action that had been put in place to address the issues that had previously been raised.</p>	

6. Developing a sustainable workforce

HEE Quality Standards

6.1 Recruitment processes to healthcare programmes fully comply with national regulatory and HEE standards.

6.2 Learner retention rates are monitored, reasons for withdrawal by learners are well understood and actions are taken to mitigate attrition of future learners.

6.3 Progression of learners is measured from commencement to completion for all healthcare learning programmes.

6.4 First destination employment is recorded and retention within first year of employment monitored, including the recording of reasons for leaving during the first year of employment.

6.5 Transition from a healthcare education programme to employment is underpinned by a clear process of support developed and delivered in partnership with the learner.

H6.1	<p>Learner retention</p> <p>All trainees and LAS doctors the review team met with reported that they highly recommended SGH as an excellent training environment for histopathology, and that some of the trainees had already requested for training placement extension.</p>	
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Good Practice and Requirements

Good Practice	

Immediate Mandatory Requirements			
Req. Ref No.	Requirement	Required Actions / Evidence	GMC Req. No.
N/A	N/A	N/A	N/A

Mandatory Requirements			
Req. Ref No.	Requirement	Required Actions / Evidence	GMC Req. No.
N/A	N/A	N/A	N/A

Recommendations			
Rec. Ref No.	Recommendation	Recommended Actions / Evidence	GMC Req. No.
N/A	N/A	N/A	N/A

Other Actions (including actions to be taken by Health Education England)	
Requirement	Responsibility
N/A	N/A

Signed	
By the HEE Review Lead on behalf of the Quality Review Team:	Dr Martin Young
Date:	19 April 2018

What happens next?

We will add any requirements or recommendations generated during this review to your LEP master action plan. These actions will be monitored via our usual action planning process. An initial response will be due within two weeks of receipt of this summary report.