

Bart's Health NHS Trust (Newham University Hospital)

Foundation Surgery

Risk-based Review (Education Leads
Conversation)



Quality Review report

11 June 2019

Final Report

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Quality Review details

Training programme	Foundation Surgery
Background to review	<p>The Risk-based Review (education leads conversation) was organised following the Trust's internal processes highlighting areas of concern which were discussed at the Senior Leads Conversation in October 2018. It was agreed that a Risk-based Review (on-site visit) would be organised on 26 February 2019 to explore the issues. During the visit, several concerns were reported by trainees in induction, supervision, teaching, workload, consultant ward rounds, handover and clinical governance amongst other issues with the support and learning environment.</p> <p>A follow up trainee meeting was arranged with Foundation School Director and Quality team in April 2019, which found many of the same issues were still being reported. HEE therefore agreed with the Trust's own recommendation that in order to facilitate a systematic overhaul of the learning environment, supporting firm structures, governance and undertake transformational work, it would be prudent to arrange a 'training holiday' for the department. So, a decision was taken to move the foundation trainees to alternative training locations within the Trust, with effect from 11 June 2019. This change would also affect the Core Surgical Trainee post within the department.</p> <p>The aim of this visit was to agree (a) terms of a training holiday, (b) alternative clinical placements for the affected trainees, (c) standards required to be met to improve learning environment before trainees can be considered for return.</p>
HEE quality review team	<ul style="list-style-type: none"> • HEE Review Lead - Dr Indranil Chakravorty, Deputy Postgraduate Dean, Health Education England (North East London) • Foundation Representative – Dr Keren Davis, Director of NCEL Foundation School • GMC Representative – Samara Morgan, Principal Education Quality Assurance Programme Manager, Health Education England (London) • HEE Representative – Paul Smollen, Deputy Head of Quality, Patient Safety and Commissioning Team • HEE Representative – Andrea Dewhurst, Quality, Patient Safety and Commissioning Manager

Trust attendees	<ul style="list-style-type: none"> • HEE Representative – Tolu Oni, Learning Environment Quality Coordinator, Health Education England (London)
	<ul style="list-style-type: none"> • Helen Parker, Deputy Director of Medical Education • Lisa Niklaus, Divisional Director for Emergency Care • Lois Whittaker, Managing Director for Education Academy • Sarah Nunn, Foundation Training Programme Director (FY2) • Mohammed Kanji, Foundation Training Programme Director (FY1) • Martyn Clark, Deputy Director Education and Quality (Medical & Dental) Education Academy

Conversation details

GMC Theme	Summary of discussions	Action to be taken? Y/N
FS1	<p><u>Background</u></p> <p>The Trust outlined the steps it had taken to improve the issues around education and training for foundation doctors within the general surgery department following the on-site visit in February 2019, the trainee focus group in March 2019 and the trainee meeting in April 2019 with HEE London.</p> <p>The Deputy Director of Medical Education (DDME) reported that feedback they had received suggested a level of trainee unhappiness with how the foundation general surgery posts were structured and supported. The issues included inadequate induction, poor clinical supervision, little or no dedicated educational input from consultants, unclear firm structure, lack of regular ward rounds, unclear arrangements for escalation of deteriorating patients, little or no access to theatres or clinics and lack of adequate supervision while working out-of-hours. The experience in Emergency and Breast surgery was notably better. It was also noted by the DDME that out of hours (OoHs) work was considered particularly challenging due to the inadequate clinical support and supervision received from their locally appointed middle-grade doctors.</p> <p>The review team heard that the Trust had undertaken several interventions to support the surgical department in addressing these issues, particularly noting the recruitment efforts made by the DDME in filling two new substantive roles to supplement the consultant workforce in the department. It was also heard that a consultant led teaching program had been initiated on Monday mornings along with in-situ simulation teaching sessions organised on a weekly basis.</p> <p>Despite this, it was clear to the review team that the interventions undertaken so far were insufficient to develop a sustainable improvement in the overall learning environment and the support provided to junior trainees. The Trust senior management team had reached a conclusion that a root and branch review would need to be undertaken at Newham, as part of a Trust wide surgical transformation strategy. While this was being developed, it would be prudent to recommend a 'training holiday' for the department and reallocate the trainees to suitable alternative placements.</p> <p>HEE had agreed with the Trust recommendation for a 'Training Holiday' for the department of General Surgery. This training holiday would include Foundation (Y1&2) as well as Core Surgical Trainee (x1) in the department.</p>	

	<p><u>Interim Arrangement and Emergency Surgery Pathway (ESP)</u></p> <p>HEE team discussed the interim arrangements for the redistribution of trainees. There were four foundation year one (FY1) trainees and one foundation year two trainee (FY2) in the General Surgery department. There were 2 additional FY2 training posts in Trauma & Orthopaedics and 1 Core Surgical Training post in Urology who were part of the General surgical on-call rota.</p> <ul style="list-style-type: none"> • Three of the FY1 trainees had been placed at the Emergency Department Clinical Decision Unit (EDCU) with the fourth FY1 trainee continuing training within the Psychiatric Liaison department. • While based in the CDU, the foundation doctors would focus on the management of the emergency surgical presentations under the supervision of the Emergency Surgical consultant (Locum) as part of a new 'Emergency Surgery Pathway'. • Educational supervision would remain with the ED Consultants and overseen by the Foundation TPDs weekly. • This would involve attending consultant led ward rounds, theatres and clinics. • There would be access to consultant led surgical teaching, simulation-based learning and quality improvement projects within the weekly time-table. • There would be no involvement in out-of-hours work within the surgical inpatient bed-base. • Following consultation with the breast surgery consultants and the FY2 trainee it was recommended that this trainee may be able to continue training within the Breast Surgery firm participating in clinics, theatres and consultant led ward rounds. • The specific arrangements for the FY2 doctors in T&O and General Surgery will be agreed at the next meeting on 2 July 2019. 	<p>Yes, please see FS1</p>
<p>FS2</p>	<p>Improvement Plan Arrangement Post August Rotation or Improvement Plan for August</p> <p>HEE team discussed the arrangements for the new Foundation doctors due to start in August 2019. The new Emergency Surgical Pathway and the implementation of the placement of the FY trainees in ED/CDU will need to be developed and reviewed within 2 weeks of its implementation following the transfer on 11 June 2019. This review by the Foundation School Director will include detailed discussion with trainees and their supervisors on the full scope of the education and training provided within the agreed interim arrangements. This review will also include an assessment of the supervision, access to planned activities (theatres, clinics, ward rounds) and educational activities.</p> <p>The Trust senior management provided cast-iron reassurance that full support would be provided to the Emergency Medicine department and to the Emergency Surgical Consultants in providing adequate supervision and high-quality training environment to the transferred trainees.</p>	

	<p>Impact on other trainees in Emergency department</p> <p>The DDME and the Deputy Director Education and Quality echoed that trainees working in the ESP would have access to an enhanced level of support and that there were no concerns that the new arrangement would negatively impact on the development of other trainees within the department.</p> <p>The DDEC indicated that the consultants in the Emergency Department (ED) unit running on ten whole time equivalents (10 WTE) would be able to provide the direct supervision required for the additional doctors transferred from General Surgery.</p> <p>Induction Plan for August Rotation</p> <p>The DDEC asserted that the Trust had undertaken several inductions per academic year and as such felt comfortable in delivering a robust induction. The review team was reassured that plans were underway to deliver a fit-for-purpose induction process with time-specific sign-off mechanisms for every foundation year trainee arriving post August rotation.</p> <p>Foundation Year Two (FY2) Improvement Plan for August</p> <p>Overall, the review team acknowledged that it was satisfied with the interim arrangements in place for the FY1 trainees. However, HEE team reiterated that during the 'agreed training holiday' in General Surgery, there would be no provision for continuing placement of any trainees within the department.</p>	<p>Yes, please see FS2</p>
	<p>Multiprofessional Workforce</p> <p>The DDEC updated the review team on the strategic development plan that the Trust was developing to improve surgical services across all sites. Within this plan, a review of the multiprofessional and multi-skilled workforce was being developed. This would include the recruitment into a number of physician associate (PA) roles aimed at supplementing the surgical workforce.</p>	

Next steps

<p>Conclusion</p>
<p>The review team thanked the Trust for raising concerns to HEE following its internal review, facilitating the HEE visits, and its efforts in preparing all the materials presented to the team. The review team welcomed the setting up of the innovative Emergency Surgical Pathway and commended the Trust on swiftly developing an interim plan for redistribution of FY1 trainees.</p> <p>It was agreed that the Trust would facilitate an urgent follow up quality review visit in July 2019 to assess progress made by the department within the interim placements, agree a plan for FY2 & CST posts and a robust plan for new trainees arriving in August 2019.</p>

Requirements / Recommendations

Mandatory Requirements			
Req. Ref No.	Requirement	Required Actions / Evidence	GMC Req. No.
FS1	The Trust is required to arrange a weekly oversight meeting between FY trainees and FTPD discussing all aspects of the interim placements (learning environment, supervision, safety and education).	Trust to provide data on attendance and feedback from trainees to HEE Foundation School Director on a weekly basis starting from 18 June 2019.	R1.5
FS2	The department is required to develop a robust and bespoke induction program for August entry. The induction should clearly set out the duties, expectations and supervision arrangement during on-call shifts. No trainee should be expected to be on call or out-of-hours before completing this Trust induction.	The Trust to provide evidence of implementation of an improved induction program and submitted to HEE at least 3 weeks before the next cohort of trainees starting in post. The Trust to provide data on attendance and feedback from trainees to HEE at the earliest opportunity	R1.13
FS3	The department is required to develop a detailed job description for the new placements in Emergency Surgical Pathway and accompanying job plan(s) for FY1 & 2 trainees, which includes all the elements recommended in the HEE (NCEL) Best Practice Guidance for Foundation Placements in Surgery (2017).	The Trust to submit job description and job plans to FSD as a minimum 2 weeks before arrival of the new cohort of trainees in August for approval.	R1.13
FS4	The Trust (FTPD) is required to support trainees in keeping a log book/ suitable record of educational and training activities undertaken as described in the interim arrangements (theatre sessions, clinics, teaching ward rounds, simulation, SLEs and QI). This document should be reviewed on a monthly basis by FTPD/ ES.	The Trust to confirm via minutes of FTPD liaison meetings that the activities described in the agreed job plans are being delivered for all trainees	R1.13

Recommendations			
Rec. Ref No.	Recommendation	Recommended Actions	GMC Req. No.
	None		

Other Actions (including actions to be taken by Health Education England)	
Requirement	Responsibility
<p>The Trust is required to facilitate a follow up meeting in July 2019 to</p> <p>(1) allow a review of the issues and risks pertinent to the interim arrangement for foundation year two (FY2) & Core Surgical training post,</p> <p>(2) receive trainee feedback from the interim placements for FY1 doctors implemented on 11 June 2019, and</p> <p>(3) review job plans, job schedules and induction arrangements for the new cohort of trainees due to arrive in August 2019.</p>	<p>Foundation School Director, DPGD and QPSC</p>

Signed	
By the HEE Review Lead on behalf of the Quality Review Team:	Dr Indranil Chakravorty (Deputy Postgraduate Dean North East London)
Date:	21 August 2019

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.