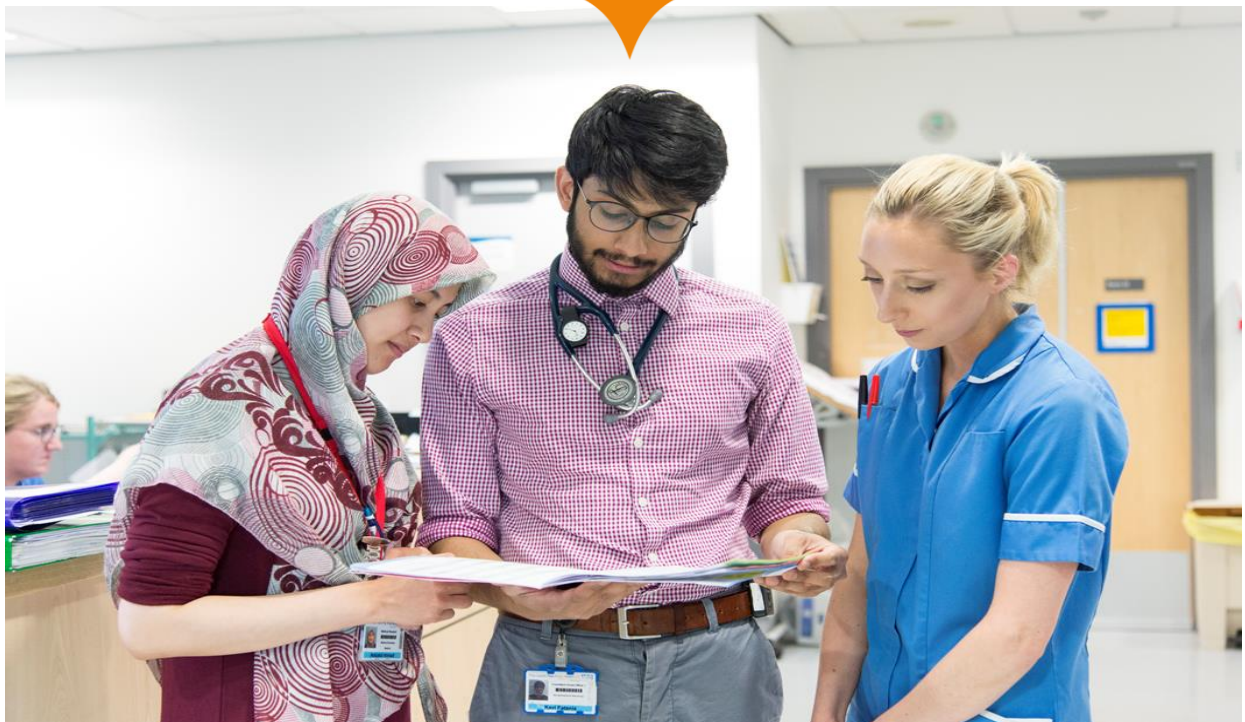


HEE Quality Interventions Review Report

London North West University Healthcare NHS Trust Rehabilitation Medicine Educator Review



London – North West London

22 July 2020

Review Overview

Background to the Review:	A training holiday was introduced in January 2020 following concerns raised. A trainee placement is due to be reinstated in August 2020. A risk-based Educator Review was organised to gain assurance that there were concrete plans in place to address and measure progress made against the concerns raised.
Training Programme/Learner Groups Reviewed:	Rehabilitation Medicine
Who we met with:	Director of Medical Education Deputy Director of Medical Education Professor of Rehabilitation Medicine Consultant of Rehabilitation Medicine
Evidence utilised:	No evidence was requested prior to the review.

Review Panel

Role	Job Title / Role
Quality Review Lead	Dr Orla Lacey, Deputy Postgraduate Dean, Health Education England (HEE)
Specialty Expert	Dr Jonathan Birns, Deputy Head of School of Medicine
External Specialty Expert	Dr Ajoy Nair, Training Programme Director
HEE Quality Representative	Emily Patterson, Learning Environment Quality Coordinator, Health Education England (HEE)
Supportive roles	Chloe Snowdon, Learning Environment Quality Coordinator, Health Education England (HEE) – observing Nicole Lallaway, Learning Environment Quality Coordinator, Health Education England (HEE) – observing

Executive summary

The Educator Review was scheduled following the introduction of a training holiday in January 2020. The progress the department had made, and the current pressures and challenges faced were discussed.

The review team identified several areas of good practice, including:

- The review team acknowledged that given the nature of rehabilitation medicine the department could be a challenging place to work, however, it was recognised to have good training potential with a wealth of learning opportunities.
- The review team commended the department and Postgraduate Medical Education Department on the progress made since the training holiday was introduced in January 2020.

The review team also noted the following areas requiring improvement:

- The department to ensure there is a robust plan in place to monitor a trainee in difficulty and to establish a protocol as to how these concerns would be escalated.
- The department and Trust to continue to provide further support for supervisors to ensure the trainees' learning objectives and workplace-based assessment requirements are being met.
- The department to ensure learning opportunities are not lost due to them occurring outside of normal working hours, whilst ensuring compliance with the working time directive.

No Immediate Mandatory Requirements were issued on the day, a full list of Mandatory Requirements can be found at the end of this report.

Review Findings

Not all the Quality Framework standards have been included within the tables below. The standards included are where the quality interventions are expected to have a direct operational impact on the quality of the learning environment. The other standards are still expected to be reviewed for each organisation and will be undertaken through different tools than the Quality Interventions identified within Table 2.1

Identify the review findings for each of the relevant standards below and remove the standards where there is no comment to be made.

Domain 1 - Learning environment and culture		
<p>1.1. Learners are in an environment that delivers safe, effective, compassionate care that provides a positive experience for service users.</p> <p>1.2. The learning environment is one in which education and training is valued and learners are treated fairly, with dignity and respect, and are not subject to negative attitudes or behaviours.</p> <p>1.3. There are opportunities for learners to be involved in activities that facilitate quality improvement (QI), improving evidence-based practice (EBP) and research and innovation (R&I).</p> <p>1.4. There are opportunities to learn constructively from the experience and outcomes of service users, whether positive or negative.</p> <p>1.5. The learning environment provides suitable educational facilities for both learners and educators, including space, IT facilities and access to quality assured library and knowledge.</p> <p>1.6. The learning environment promotes interprofessional learning opportunities.</p>		
HEE Standard	HEE Quality Domain 1 - Learning Environment & Culture	Requirement Reference Number
	Not discussed during the review.	

Domain 2 – Educational governance and leadership		
<p>2.1. The educational governance arrangements measure performance against the quality standards and actively respond when standards are not being met.</p> <p>2.2. The educational leadership uses the educational governance arrangements to continuously improve the quality of education and training.</p> <p>2.3. The educational governance structures promote team-working and a multi-professional approach to education and training where appropriate, through multi-professional educational leadership.</p> <p>2.4. Education and training opportunities are based on principles of equality and diversity.</p> <p>2.5. There are processes in place to inform the appropriate stakeholders when performance issues with learners are identified or learners are involved in patient safety incidents.</p>		
HEE Standard	HEE Quality Domain 2 – Educational Governance and Leadership	Requirement Reference Number
2.1	<p>Impact of service design on users</p> <p>Trust representatives reported that a number of family and best interest meetings occurred out of hours, due to the working commitments of the patients' families. It was reported that there were usually two standard meetings a week that occurred during normal working hours, at 14:00 and 15:30. The review team heard that at the beginning of the placement a discussion would take place with the trainee on what hours would work for them and their learning priorities. It was advised that a collaborative review of</p>	R2.1

	<p>these priorities would occur every four to five weeks.</p> <p>Ethical considerations around the withdrawal of artificial nutrition and hydration and the potential impact of this on trainees was discussed. Trust representatives advised that a discussion with trainees would take place at the beginning of the placement, their beliefs respected, and their level of involvement accommodated. It was discussed that conversations around the withdrawal of artificial nutrition and hydration would not occur without a consultant presence and would only occur to the agreed level of trainee involvement.</p>	
2.2	<p>Appropriate systems for raising concerns about education and training</p> <p>The review team enquired as to what mechanisms were in place to recognise when a trainee was struggling and how these concerns were escalated. It was advised that communication between the trainee, educational and clinical supervisor was fundamental to this monitoring.</p> <p>It was discussed that the nature of work was emotionally demanding. In order to support staff, regular debrief sessions with a Psychologist were built in and additional sessions established when a patient passed away or there had been a difficult event. Psychology sessions were offered as both all staff and 1:1 sessions.</p>	R2.2

Domain 3 – Supporting and empowering learners

- 3.1. Learners receive educational and pastoral support to be able to demonstrate what is expected in their curriculum or professional standards to achieve the learning outcomes required.
- 3.2. Learners are supported to complete appropriate summative and formative assessments to evidence that they are meeting their curriculum, professional standards or learning outcomes.
- 3.3. Learners feel they are valued members of the healthcare team within which they are placed.
- 3.4. Learners receive an appropriate and timely induction into the learning environment.
- 3.5. Learners understand their role and the context of their placement in relation to care pathways and patient journeys.

HEE Standard	HEE Quality Domain 3 – Supporting and empowering learners	Requirement Reference Number
3.2	<p>Time for learners to complete their assessments as required by the curriculum or professional standards</p> <p>Trust representatives reported that previously trainees were given a couple of months to adjust to the placement before undertaking workplace-based assessments. It was discussed that on reflection this had been difficult for trainees who were on shorter placements. It was advised that going forward the clinical supervisor and trainee would have a weekly check in to ensure workplace-based assessment compliance. It was further reflected that it may be difficult for a senior trainee to come into the placement and be assessed on an area that may be new to them. It was discussed that a conversation between the clinical supervisor and trainee was required, setting expectations that the trainee was being assessed against an area that was likely to be new to them and the importance of constructive criticism.</p>	R3.2

Domain 4 – Supporting and empowering educators

- 4.1. Those undertaking formal education and training roles are appropriately trained as defined by the relevant regulator or professional body.
- 4.2. Educators are familiar with the curricula of the learners they are educating.
- 4.3. Educator performance is assessed through appraisals or other appropriate mechanisms, with constructive feedback and support provided for role development and progression.
- 4.4. Formally recognised educators are appropriately supported to undertake their roles.

HEE Standard	HEE Quality Domain 4 – Supporting and empowering educators	Requirement Reference Number
4.3	Educational appraisal and continued professional development Trust representatives advised that trainees received supervision from an educational supervisor outside of the department. The named clinical supervisor within the department had received a full educational appraisal conducted by the Director of Medical Education. A member of the consultant body was also in the process of undertaking the official educational supervisor accreditation with the Royal College of Physicians.	

Domain 5 – Delivering curricula and assessments

- 5.1. The planning and delivery of curricula, assessments and programmes enable learners to meet the learning outcomes required by their curriculum or required professional standards.
- 5.2. Placement providers shape the delivery of curricula, assessments and programmes to ensure the content is responsive to changes in treatments, technologies and care delivery models.
- 5.3. Providers proactively engage patients, service users and learners in the development and delivery of education and training to embed the ethos of patient partnership within the learning environment.

HEE Standard	HEE Quality Domain 5 – Developing and implementing curricula and assessments	Requirement Reference Number
5.1	Placements must enable learners to meet their required learning outcomes The Trust representatives provided an overview of the rehabilitation service and the unique learning opportunities available to trainees. The review team heard that it was the only hyperacute service in London, providing a tertiary service and supporting other units and specialist nursing homes with outreach. A prolonged consciousness service and a neuro-palliative care service was also provided, where trainees had the opportunity to learn from complex best interest discussions and decisions. Research and audit projects were undertaken within the department and the department led on the development and maintenance of the national UK Rehabilitation Outcomes Collaborative (UKROC) database. The review team heard that a number of structured and un-structured learning opportunities had been put in place for the prospective trainee starting in August 2020. Structured opportunities included formal multidisciplinary teaching every Tuesday, ward rounds and one hour of 1:1 supervision per week with a member of the consultant body. It was discussed that given the nature of the role not all learning opportunities could be structured, but that there was a variety of unstructured learning opportunities available, including best interest meetings and bedside teaching. In the first	R5.1

	week of training it was advised that the trainee would be presented with a timetable highlighting the learning opportunities available. It was suggested that the agreed learning objectives and opportunities could make up the trainee's personal development plan at the beginning of the placement.	
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Domain 6 – Developing a sustainable workforce		
<p>6.1. Placement providers work with other organisations to mitigate avoidable learner attrition from programmes.</p> <p>6.2. There are opportunities for learners to receive appropriate careers advice from colleagues within the learning environment, including understanding other roles and career pathway opportunities.</p> <p>6.3. The organisation engages in local workforce planning to ensure it supports the development of learners who have the skills, knowledge and behaviours to meet the changing needs of patients and service.</p> <p>6.4. Transition from a healthcare education programme to employment is underpinned by a clear process of support developed and delivered in partnership with the learner.</p>		
HEE Standard	HEE Quality Domain 6 – Developing a sustainable workforce	Requirement Reference Number
6.1	Not discussed during the review.	

Requirements (mandatory)

Any Immediate Mandatory Requirements (IMRs) identified should be identified separately in the appropriate table below. The requirement for any immediate actions will be undertaken prior to the draft Quality Review Report being created and forwarded to the placement provider. The report should identify how the IMR has been implemented in the short term and any longer termed plans. Any failure to meet these immediate requirements and the subsequent escalation of actions to be taken should also be recorded if there is a need to.

- All mandatory requirements should be detailed in this section. The requirement reference should work chronologically throughout the report and link with the right-hand column in the 'Review Findings' section
- Requirements identified should be succinct, SMART and not include the full narrative from the detailed report
- Any Requirements should clearly relate to improved achievement of HEE Domain & Standards by the placement provider

Immediate Mandatory Requirements

Given the severity of an Immediate Mandatory Requirement, initial action must be undertaken as required within 5 days and will be monitored by HEE Quality Team. Completion of immediate requirements will be recorded below. Subsequent action to embed and sustain any changes may be required and should also be entered below with relevant timescales

Requirement Reference number	Review Findings	Required Action, timeline, evidence (to be completed within 5 days following review)
	None.	
Requirement Reference number	Progress on immediate actions	Required Action, timeline, evidence (to be completed within an agreed timeframe)
	N/a.	

Mandatory Requirements

The Quality Review Panel will consider which individual or collective findings from the intervention will be added to the Quality Reporting Register, determining the relevant risk score, ISF rating and reflecting the accepted QRR narrative conventions.

Requirement Reference number	Review Findings	Required Action, timeline, evidence
R2.1	The review team found that due to the working commitments of the patients' families, family and best interest discussions often occurred outside of normal working hours.	The department to enable trainees to attend family and best interest discussions whilst ensuring compliance with the working time directive.
R2.2	Trust representatives reflected that communication between the trainee, educational and clinical supervisor was fundamental in recognising when a trainee was having difficulty with the placement.	The department to provide evidence of a robust plan in place to monitor a trainee in difficulty and how these concerns would be escalated.
R3.2	Trust representatives discussed previous instances where workplace-based assessments had not been up to date. It was advised that going forward the clinical supervisor and trainee would have a weekly check in to ensure workplace-based assessment compliance.	The department to provide evidence that regular meetings between the clinical supervisor and the trainee are occurring and that progress against workplace-based assessments is discussed.
R5.1	Trust representatives described a wealth of training opportunities available within the placement. It was felt that following the initial meeting	The department to provide evidence of an agreed process for the establishment of, and ongoing monitoring of learning objectives.

	with the trainee the formalisation of agreed learning objectives and a plan for ongoing monitoring against the objectives would be helpful.	
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Recommendations

Recommendations are not mandatory, and they would not be expected to be included within any requirements for the placement provider in terms of action plans or timeframe. It may however be useful to raise them at any future reviews or conversations with the placement provider in terms of evaluating whether they have resulted in any beneficial outcome.

Recommendation	
Related Domain(s) & Standard(s)	Recommendation
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Good practice

Good practice is used as a phrase to incorporate educational or patient care initiatives that, in the view of the HEE Quality representatives, enable the standards within the Quality Framework to be more effectively delivered or help make a difference or improvement to the learning environment being reviewed. Examples of good practice may be worthy of wider dissemination

Learning environment / Prof. group / Dept. / Team	Good practice	Related Domain(s) & Standard(s)
Rehabilitation Medicine Department and Postgraduate Medical Education Department	The review team commended the department and Postgraduate Medical Education department on the progress made on establishing internal processes since the training holiday was introduced in January.	HEE Quality Domain 2
Rehabilitation Medicine Department	The review team acknowledged that given the nature of rehabilitation medicine the department could be a challenging place to work, however, it was recognised to have good training potential with a wealth of learning opportunities.	HEE Quality Domain 5

Report sign off

Outcome report completed by (name):	Emily Patterson
Review Lead signature:	Dr Orla Lacey
Date signed:	07/08/2020

HEE authorised signature:	 Paul Smollen Deputy Head Quality, Patient Safety & Commissioning
Date signed:	01/09/2020

Date final report submitted to organisation:	22/09/2020
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What happens next:

Any requirements generated during this review will be recorded and monitored following the usual HEE Quality Assurance processes.

As part of our intention to develop a consistent approach to the management of quality across England, Quality Reports will increasingly be published and where that is the case, these can be found on (web link) Information from quality reports will be shared with other System Partners such as Regulators and Quality Surveillance Groups