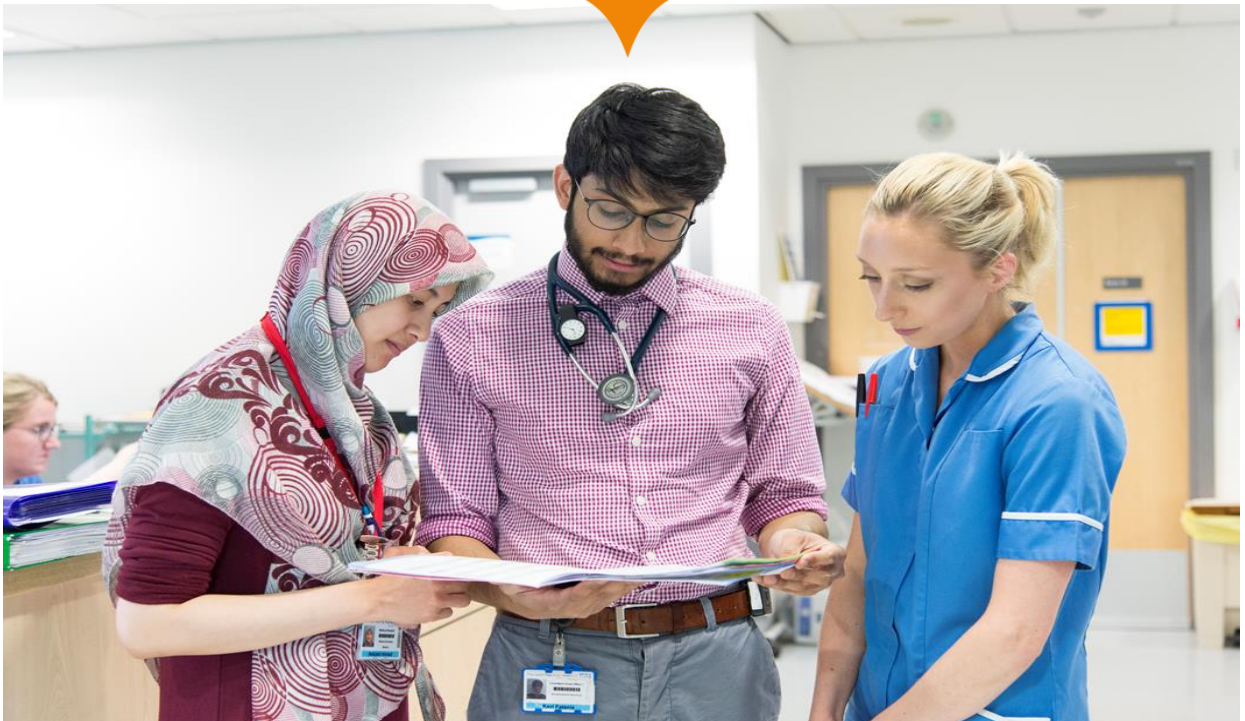


# HEE Quality Interventions Review Report

**Chelsea and Westminster Hospital NHS  
Foundation Trust (Chelsea and  
Westminster Hospital)  
Clinical Radiology  
Risk-based Review (Educator Review)**



# North West London

24 September 2020

## Review Overview

<b>Background to the Review:</b>	<p>This Risk-based review (Educator Review) was organised following a decline in results in the 2019 General Medical Council (GMC) National Training Survey (NTS). Red flags were generated for Overall Satisfaction, Clinical Supervision and Local Teaching. Pink outliers were generated for Educational Governance and Educational Supervision.</p> <p>The review was originally planned for 27 March 2020, however, was postponed due to the COVID-19 response. The intention of the review was to discuss concerns and progress made since the 2019 GMC NTS.</p>
<b>Training Programme/Learner Groups Reviewed:</b>	Clinical Radiology
<b>Who we met with:</b>	Director of Medical Education College Tutor and Training Programme Directors Consultant Clinical Radiologist
<b>Evidence utilised:</b>	Minutes –Departmental Meeting Managerial Feedback (17/01/2019) Minutes - Departmental Meeting TPD Update (17/01/2019) Minutes – Educational Supervisor Meeting (28/05/2020) Minutes – Educational Supervisor Meeting (09/07/2020) Minutes – Educational Supervisor Meeting (05/03/2020) Minutes - SpR Meeting (16/01/2020) Minutes – SpR Meeting (08/11/2019)

## Review Panel

Role	Job Title / Role
Quality Review Lead	Dr Bhanu Williams Deputy Postgraduate Dean, North West London Health Education England (London)
Specialty Expert	Dr Jane Young Head of School of Clinical Radiology Health Education England (London)
HEE Quality Representative	Emily Patterson Learning Environment Quality Coordinator Health Education England (London)
Supportive roles	Dr Louise Schofield (Observing) Deputy Postgraduate Dean, North East London Health Education England (London)

## Executive summary

The current challenges and pressures faced by the service were discussed and the review team identified several areas of good practice, including:

- The efforts shown from the Clinical Radiology Department and the Postgraduate Medical Education Department to improve the training environment following the 2019 GMC NTS. The review team commended that trainee feedback was sought to support the changes made.
- The increased level of consultant led activities and efforts in increasing accessibility of consultant support both in and out of hours.
- The prioritisation of trainee teaching and the introduction of protected teaching time in the educators' job plans.

The review team also recommended the following areas for improvement:

- To continue with plans to formalise the structure and documenting if the local faculty group meetings.
- To encourage a clinical radiology educational lead representative to participate in the Trust tutor/faculty meetings

## 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&amp;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
1.2	<p><b>Bullying and undermining</b></p> <p>Trust representatives advised that there had been historical reports of bullying and undermining behaviour within the department. However, these had been dealt with and the trainees involved had reported improvements.</p>	
1.4	<p><b>Appropriate levels of Clinical Supervision</b></p> <p>Trust representatives reported how the department had improved the levels of clinical supervision, since it was raised as a red flag in the 2019 GMC NTS. It was advised that the number of consultant supervised activities had increased. This included; having a dedicated consultant led inpatient ultrasound list, a named consultant for all outpatient ultrasounds, and a weekly consultant rota for acute CT reporting. It was further discussed that the fluoroscopic lists would be cancelled if there was no consultant cover. Consultants were rostered to work three hours on both Saturday and Sundays to ensure scans were checked within 24-hours. Trust representatives advised that the on-call consultant rota was currently doubled as contingency in case colleagues were required to self-isolate or fell ill.</p> <p>The review team heard that a trainee led audit to monitor the level of on-call clinical supervision had been proposed, however, due to the COVID-19 response this had been postponed. It was advised that the introduction of home reporting for all consultants had increased accessibility for out of hours support.</p> <p>The review team enquired about out of hours supervision and how reports were checked the next day. Trust representatives advised that after 21:00 all cross-sectional scans were outsourced. At 08:00 the next day a consultant led</p>	

	<p>handover took place to review the out of hours scans, including paediatric scans. It was noted that this was used as a training opportunity for the Speciality Training Level One (ST1) trainees. It was advised that a new online records system was in development, which would support the management of the out of hours paediatric scans.</p> <p>Further changes implemented to help improve the level of clinical supervision were discussed. Trust representatives advised that restructuring the departmental layout had increased the level of access to consultant supervision, with consultants positioned in, or close to the hot and cold reporting rooms. It was discussed that having the trainees near to the consultants had decreased the time taken to have scans checked, which had indirectly increased compliance of the Emergency Department targets.</p> <p>Trust representatives advised that trainees had been well supported during the COVID-19 pandemic, with regards to clinical supervision. An emergency consultant rota had been implemented which ran from 08:00 – 22:00 seven days a week.</p>	
1.4	<p><b>Appropriate levels of Educational Supervision</b></p> <p>Trust representatives reported that an anonymous feedback survey had been distributed to trainees, which included questions around the quality of educational supervision. The review team heard that results had been positive and that trainees reported having regular educational supervisor meetings.</p> <p>It was advised that when new trainees started with the department an effort was made to match trainees to the most suitable educational supervisor based on skills and interests.</p>	

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><b>Effective, transparent and clearly understood educational governance systems and processes</b></p> <p>Trust representatives provided an overview of the departmental meetings and how actions were escalated to support the training environment. A speciality training level meeting, attended by trainees and Training Programme Directors (TPD) took place, concerns or issues raised were then taken to managerial meetings. Additional meetings included a departmental meeting, which was attended by a trainee with managerial responsibility, and an educational supervisor meeting where no trainees were present.</p>	

	<p>It was advised that the department had discussed formalising the speciality training level meetings. It was proposed for the meetings to be minuted, agenda items circulated and for consultant cover to be in place to ensure protected time. Trust representatives advised how the movement of forums online had made the meetings more accessible.</p> <p>It was advised that trainees had been asked to exception report excess hours of working to monitor workload, however none had been received.</p>	
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### 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
3.1	<p><b>Access to resources to support learners' health and wellbeing and to educational and pastoral support</b></p> <p>Trust representatives advised that during the COVID-19 response the TPDs had kept in touch with trainees, including those on an external placement, to support their wellbeing. It was discussed that prior to COVID-19 trainees had met with TPDs monthly.</p>	

### 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
4.1	<p><b>Access to appropriately funded professional development, training and appraisal for educators</b></p> <p>Trust representatives advised that all educational supervisor appraisals were signed off by the Director of Medical Education (DME). It was reported that the Trust held educational and clinical supervisor courses, and that supplementary courses including how to manage difficult issues and how to support trainees were available. Following the social distancing measures in place the training had been made accessible online.</p>	

	The review team heard that educational supervisor meetings occurred bimonthly. It was discussed that a number of educational forums were ran by the DME. However, in the last year these had not been regularly attended by a clinical radiology representative. Trust representatives advised that plans were in place to ensure more regular attendance.	
<b>4.4</b>	<b>Appropriate allocated time in educators job plans to meet educational responsibilities</b>  Trust representatives advised that allocated time to meet educational responsibilities was in the educators' job plan.	

## 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.

<b>HEE Standard</b>	<b>HEE Quality Domain 5 – Developing and implementing curricula and assessments</b>	<b>Requirement Reference Number</b>
<b>5.1</b>	<p><b>Placements must enable learners to meet their required learning outcomes</b></p> <p>Trust representatives presented the improvements made to teaching following the 2019 GMC NTS. It was advised that a protected time for trainees to present 'Interesting Cases' had been created. It was discussed that teaching occurred 13:00 – 14:00 and was separated into ST1/2 teaching sessions, and higher-grade teaching sessions. Trainees and educators were responsible for communicating between themselves availability for training. It was further discussed that on average trainees had five dedicated training sessions a week and that these sessions were in the consultants' job plan.</p> <p>The review team heard that ST1 trainees had a logbook, which was used to record and identify training requirements. It was advised that trainees had a dedicated consultant who would monitor and support progress against these training requirements.</p> <p>It was discussed that the training available was focused on the speciality examinations and that all trainees had passed the most recent examinations. Trainees were reported to be given protected time to attend the regional teaching sessions.</p> <p>The review team heard that trainees had fed back to the DME and that the feedback on training was positive.</p>	

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
	Not discussed at 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)
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N/a – No Immediate Mandatory Requirements were identified at the review.

### 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
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N/a – No Mandatory Requirements were identified at the review.

### 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
Domain 2	To continue with plans to formalise the speciality training level meetings. It was advised for the department to consider structuring the agenda around the GMC NTS domains.
Domain 4	To encourage a clinical radiology representative to attend the Trust educational supervisor forums

## Report sign off

<b>Outcome report completed by (name):</b>	Emily Patterson
<b>Review Lead signature:</b>	Dr Bhanu Williams Deputy Postgraduate Dean, North West London Health Education England (London)
<b>Date signed:</b>	12/10/2020

<b>HEE authorised signature:</b>	Dr Gary Wares Postgraduate Dean, North London Health Education England (London)
<b>Date signed:</b>	23/10/2020

<b>Date final report submitted to organisation:</b>	23/10/2020
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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