Lewisham & Greenwich NHS Trust (University Hospital Lewisham)

Obstetrics & Gynaecology Risk-based Review (Learner and Educator Review)



HEE London

29 September 2020

Review Overview

Background to the Review:	The review was planned in response to the 2019 General Medical Council (GMC) National Training Survey (NTS) results of Obstetrics & Gynaecology training at Lewisham & Greenwich NHS Trust (University Hospital Lewisham). In the previous year, the department performed very well overall but received seven red outlier results and two pink outliers in 2019 which included rota design, curriculum coverage and adequate experience. The review was originally planned to take place in early 2020 but was postponed due to the Covid-19 pandemic response. The current review was Health Education England's (HEE) first visit to University Hospital Lewisham to review Obstetrics & Gynaecology in recent years and was planned to assess the impact of changes made by the Trust to address these issues.
Training Programme/Learner Groups Reviewed:	Obstetrics & Gynaecology
Who we met with:	Director of Medical Education Medical Education Manager Guardian of Safe Working Hours Clinical Director Educational Lead College Tutor Five Obstetrics and Gynaecology (O&G) trainees at specialty training levels one to six (ST1 toST6) based at University Hospital Lewisham (UHL) and one community sexual and reproductive health specialty trainee working with the O&G team at UHL Clinical and Educational supervisors for O&G at UHL

Evidence utilised:	Obstetrics & Gynaecology College Tutor Meeting Minutes Obstetrics & Gynaecology educational and clinical supervisors list Obstetrics & Gynaecology exception report data Obstetrics & Gynaecology Friends and Family Test (FTT) 2019 Obstetrics & Gynaecology MEC Minutes Obstetrics & Gynaecology learner groups Obstetrics & Gynaecology teaching rota and register
--------------------	--

Review Panel

Role	Job Title / Role
Quality Review Lead	Anand Mehta, Deputy Postgraduate Dean, HEE South London
Specialty Expert	Greg Ward, Head of Specialty School of Obstetrics & Gynaecology
Specialty Expert	Sonji Clarke, Deputy Head of Specialty School of Obstetrics & Gynaecology
Lay Representative	Robert Hawker
HEE Quality Representative	Louise Brooker, Deputy Quality, Patient Safety and Commissioning Manager
HEE Quality Representative	Kenika Osborne, Learning Environment Quality Co-ordinator
HEE Quality Representative	James Oakley, Quality, Reviews and Intelligence Officer

Executive summary

The review team was pleased to hear of the positive feedback from trainees about their experiences within the department. The trainees highlighted that there were positive improvements in the departmental culture, rota design and induction compared to the GMC NTS results 2019.All learners reported feeling well supported by their educational and clinical supervisors within their learning environment.

Some learning activities such as early pregnancy scannings were affected by the Covid-19 pandemic, however the Trust was looking to find ways to make these services available to the trainees.

It was agreed that a further review would be planned to assess the improvements with the learners in the next six months.

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

- **1.1.** Learners are in an environment that delivers safe, effective, compassionate care that provides a positive experience for service users.
- **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.
- **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).
- **1.4.** There are opportunities to learn constructively from the experience and outcomes of service users, whether positive or negative.
- **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.
- **1.6.** The learning environment promotes interprofessional learning opportunities.

HEE Standard	HEE Quality Domain 1 - Learning Environment & Culture	Requirement Reference Number
1.1	Handover	
	Constraints with Infection Prevention and Control (IPC) and inadequate room size in which MDT can social distance is affecting handover. Trainees described the gynaecology team handover as being disrupted and difficult to follow. Due to Infection Prevention and Control (IPC) regulations around social distancing, gynaecology handover was held immediately following the labour ward handover and in the same space, while the obstetric and midwifery teams were discussing their patients.	O&G1.1

1.2	Bullying and undermining		
	None of the trainees at the review reported experiencing bullying or undermining behaviour.		
1.3	Quality improvement		
	The trainees advised that they had been encouraged to implement improvement projects within the department, such as work to improve rest facilities and to introduce activities to support staff wellbeing.		
1.4	Appropriate levels of Clinical Supervision		
	The review team was pleased to hear that trainees were well supported by some consultants during peak of the Covid-19 pandemic.		
	Trainees reported having good clinical supervision from the O&G team in Lewisham, particularly for Hysteroscopy. There was also a clear escalation pathway in place if trainees needed to seek advice or raise concerns.		
1.4	Appropriate levels of Educational Supervision		
	The trainees reported to the review team that they had all met with their Educational Supervisors (ESs) since starting within the department. They further expressed that their ESs were approachable, and they felt listened to and supported. ESs stated that they regularly met with trainees both formally and informally and operated on an open-door policy within the department. The ESs advised that they were encouraged to meet with the trainees they supervised 10 times per year and that they found this regular contact useful.		

Domain 2 – Educational governance and leadership

- **2.1.** The educational governance arrangements measure performance against the quality standards and actively respond when standards are not being met.
- **2.2.** The educational leadership uses the educational governance arrangements to continuously improve the quality of education and training.
- **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.
- **2.4.** Education and training opportunities are based on principles of equality and diversity.
- **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.

HEE Standard	HEE Quality Domain 2 – Educational Governance and Leadership	Requirement Reference Number
2.1	Effective, transparent and clearly understood educational governance systems and processes	
	The review team was pleased to hear that the department held a monthly College Tutor Forum where trainees had the opportunity to have open conversations with the College Tutor about their training. The College Tutor was able to escalate any issues to the senior management team, as necessary.	

2.1	Impact of service design on users	
	The trainees advised that they had an allocated room to complete their administrative work. However, due to the small size of the room, this had not been accessible to trainees since social distancing requirements were introduced.	
2.2	Appropriate systems for raising concerns about education and training	
	The trainees reported that they felt comfortable in raising any concerns about their education and training. The College Tutor Forum and regular meetings with the ESs provided trainees with the opportunity to raise any concerns or queries. Trainees reported that there was a very supportive and overall positive culture within the department.	

HEE	HEE Quality Domain 2 Supporting and ampowering learners	Requirement
Standard	HEE Quality Domain 3 – Supporting and empowering learners	Reference
3.4	Induction (organisational and placement)	Number
	The review team was informed that the current induction was a mixture of both face-to-face sessions as well as virtual sessions conducted through online platforms such as Microsoft Teams. Overall, the trainees found the Trust induction to be very good and stated it included teaching about various topics including instrumental deliveries.	
3.1	Regular constructive and meaningful feedback	
	The review team was pleased to hear that the trainees were able to hold regular and open discussions with their ESs and received feedback.	
3.1	Access to resources to support learners' health and wellbeing and to educational and pastoral support	
	The review team heard that the trainees received good pastoral support from their ESs. The trainees described positive working relationships between the O&G, midwifery, and nursing teams.	
	Three consultants were particularly commended for the excellent clinical supervision and support they gave to the trainees especially during the peak of the Covid-19 pandemic and for their continuous contributions to improvements to training environment and provision for trainees. The trainees suggested that, should further surges in Covid-19 case numbers occur, more support from the wider consultant and senior team would be appreciated.	

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 Requirement HEE Quality Domain 4 – Supporting and empowering educators **Reference** Standard Number The review team was pleased to hear that the education supervisors had educator appraisals and supervision time as part of their job plan. They found that very useful and supportive. 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 Requirement HEE Quality Domain 5 – Developing and implementing curricula Standard Reference and assessments Number 5.1 Placements must enable learners to meet their required learning outcomes Trainees reported that they had experienced difficulty in accessing early pregnancy ultrasound scanning cases at Lewisham hospital. The department O&G 5.1a was looking at ways to mitigate this issue and had plans to introduce additional early pregnancy and foetal medicine scanning sessions which trainees would be able to attend. Due to reductions in elective surgery services during the Covid-19 pandemic, trainees advised that they had had reduced access to gynaecology theatre lists. At the time of the review, trainees were able to access elective operating lists at King's College Hospital and at a private hospital which the Trust had commissioned so this issue was being addressed. The trainees confirmed that they only attended the private hospital with a clinical supervisor from the Trust.

5.1 Appropriate balance between providing services and accessing educational and training opportunities

The trainees' rota arrangements were due to change in October 2020. This included assigning two higher trainees or middle-grade doctors to cover oncall shifts: one for labour ward and one for the gynaecology service, with consultant support. This was not expected to alter the amount of weekend working for trainees. The new rota design also included plans to change to a firm-based structure to improve clinical experience for trainees. The department employed non-training doctors including doctors from overseas on the Medical Training Initiative (MTI). The trainees did not feel that they were in competition with these doctors for clinical experience or training opportunities and that their job plans clearly outlined their remits.

The Trust representatives advised that trainees had been consulted about	O&G 5.1b
the rota changes and that they had conducted a trainee survey to obtain their	
suggestions and feedback.	

Domain	Domain 6 – Developing a sustainable workforce		
 6.1. Placement providers work with other organisations to mitigate avoidable learner attrition from programmes. 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. 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. 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. 			
HEE Standard	Standard		
		Reference Number	
6.1	Retention and attrition of learners		

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)
Requirement Reference number	Progress on immediate actions	Required Action, timeline, evidence (to be completed within an agreed timeframe)

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
O&G1.1	Constraints with Infection Prevention and Control (IPC) and inadequate room size due to social distancing measures is affecting the quality of the handovers.	The Trust is required to seek a more suitable area for the gynaecology handover. Please provide an update on this requirement and associated evidence by 1 December 2020.
O&G 5.1a	Trainees have not been able to access early pregnancy scanning cases at Lewisham hospital due to the Covid-19 pandemic. Trust is aware of current challenges and the department is currently looking at ways of making provision for scanning facilities in the department.	The Trust is required to demonstrate that trainees have sufficient access to ultrasound scanning to meet their curricular requirements. HEE requires an update on this requirement by 1 December 2020.
O&G 5.1b	The trainees' rota arrangements were due to change in October 2020. This included moving to a single registrar labour ward with consultant support. Trainees were anxious about this new change but were looking forward to these new rota plans.	Please provide evidence that trainees are satisfied with the new rota design. An update on this requirement and associated evidence are required by 1 December 2020.

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.

Related Domain(s) & Standard(s)	Recommendation
	N/A

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)	

Report sign off

Outcome report completed by (name):	Kenika Osborne
Review Lead signature:	Anand Mehta
Date signed:	08/12/2020

HEE authorised signature:	Geeta Menon				
Date signed:	08/12/2020				

Date final report submitted to organisation:	Lewisham Lewisham)		Greenwich	NHS	Trust	(University	Hospital
--	-----------------------	--	-----------	-----	-------	-------------	----------

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 development 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