

# HEE Quality Interventions Review Report

## London North West University Healthcare NHS Trust – Ealing Hospital

### Foundation Surgery Educator Review



## Review Overview

<b>Background to the Review:</b>	<p>Concerns for the quality of foundation surgery at Ealing Hospital were raised via the 2019 General Medical Council (GMC) National Training Survey (NTS).</p> <p>Foundation Year One (FY1) returned red outliers for Overall Satisfaction and Feedback. There were also pink outliers for:</p> <ul style="list-style-type: none"> <li>- Clinical Supervision;</li> <li>- Clinical Supervision out of hours;</li> <li>- Curriculum Coverage; and</li> <li>- Educational Supervision</li> </ul> <p>FY2, whilst having improved on the previous years, returned a red outlier for Clinical Supervision, and a pink for Teamwork.</p> <p>This Educator Review was initially scheduled to take place in April 2020 but was postponed in response to the Covid-19</p>
<b>Training Programme/Learner Groups Reviewed:</b>	<p>Foundation Surgery</p>
<b>Who we met with:</b>	<p>The review team met with the following representatives from the Trust:</p> <ul style="list-style-type: none"> <li>- Director of Medical Education;</li> <li>- Associate Medical Director (Medical Education and R&amp;D - Academic Directorate);</li> <li>- Clinical Tutor;</li> <li>- 2 x Surgical Lead for Foundation Trainees, Foundation Training Programme Director;</li> <li>- 2 x Foundation Training Programme Director;</li> <li>- FY1 Trainee Representative;</li> <li>- Education Services Manager; and</li> <li>- Medical Education Manager</li> </ul>
<b>Evidence utilised:</b>	<p>Trust QMP Action Plan</p>

## Review Panel

Role	Job Title / Role
Quality Review Lead	Dr Orla Lacey, Deputy Postgraduate Dean, North West London
Specialty Expert	Dr Anthea Parry, North West London Foundation School Director
External Specialty Expert	Mr John Brecknell, Head of London School of Surgery
HEE Quality Representative	John Marshall, Deputy Quality, Patient Safety and Commissioning Manager
Supportive Roles	Emily Patterson, Learning Environment Quality Coordinator
Observing	Elisha Richardson, Quality, Patient Safety and Commissioning Officer

## Executive summary

The review team thanked the Trust for facilitating this review.

The review team were encouraged to hear that reconfiguration to services in light of Covid-19 had reportedly had a positive impact on the training experience for foundation trainees in surgical rotations, despite the reduction in procedures at Ealing Hospital. It was reported that trainees had opportunities to work across other sites within the Trust to ensure that trainees had sufficient access to both clinical and educational opportunities to meet their curriculum requirements.

The Trust recognised that the challenge now was to ensure that these positive changes were incorporated and sustainable in future service models once the impact of Covid-19 on business as usual dissipates.

Whilst the review team welcomed this positive outlook, it was agreed by the team that the feedback heard needed to be corroborated with broader trainee feedback.

## 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
1.4	<p><b>Appropriate levels of Clinical Supervision</b></p> <p>The review team heard that out of hours supervision had presented challenges in orthopaedics in particular. It was reported that the situation had since improved, with non-resident middle grade cover on-call from 21:00 and readily available to come on site if necessary, it was noted that those on-call either stayed in hospital accommodation or lived within thirty minutes of the hospital.</p>	

	<p>The review team was also encouraged to hear that there was a full complement of middle grade doctors in the department, meaning that clinical supervision arrangement in the future would be more robust.</p> <p>It was confirmed by the Trust that Foundation year One (FY1) trainees were not required to work out of hours overnight. It was noted that there was an established escalation pathway for FY2 trainees, with all cases reviewed by a consultant the following morning.</p>	
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## 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	<p><b>Impact of service design on users</b></p> <p>Due to the impact of Covid-19 on the configuration of services, the review team heard that there were significantly fewer cases in orthopaedics and emergency surgery. It was reported that major trauma cases diverted to Northwick Park Hospital or other sites, meaning that there were few opportunities trainees to get involved in acute complex cases. The review team heard that despite this, there were valuable educational opportunities at Ealing Hospital, including post-operative care for patients repatriated to the hospital following surgery at other sites within the Trust, medical management of patients and ward reviews.</p> <p>The review team heard that trainees in general surgery had access to elective lists and colorectal cases at Central Middlesex Hospital, and it was noted that trainees were reported to be enjoying the cross-site clinical opportunities. It was also reported that because there were fewer patients across the surgical specialties this presented more learning opportunities as review meetings and handovers were shorter. It was also noted that trainees had access to the ambulatory trauma unit.</p> <p>One of the benefits of the reconfiguration of services due to Covid-19 was that, historically, foundation posts in Trauma and Orthopaedics (T&amp;O) were perceived to be medical posts, with trainees expecting that their role was to manage and care for patients on the wards. It was reported that this is no longer the case.</p> <p>The review team heard that general surgery and some emergency surgery was still taking place on-site, with upper general internal (GI) surgery moving to Ealing Hospital. It was reported that teaching ward rounds took place on Wednesdays and Fridays and that trainees were encouraged to participate in national audits and trials.</p>	

	<p>It was reported that the service was divided into three zones covering emergency, elective and recovery. It was reported that with the increased staffing levels in the department meant that covering across the three zones was flexible and increased demand in one could draw on support from the others. It was noted that this arrangement had been in place for four weeks at the time of the visit and would remain in place for the incoming December 2020 rotation. The review team welcomed this development and agreed following the visit that the Trust should provide demonstrable trainee feedback that the service design amounted to a valuable training environment.</p> <p>The review team heard that links with the orthogeriatric team had improved, but it was noted that pathways were still being developed, with Covid-19 affecting the transfer of patients back to Ealing Hospital. Due to this, it was reported that the orthogeriatric team's focus was on providing medical care, where it was noted that foundation trainees could join the team's ward rounds. It was also noted that out of hours pathways were well established and, due to fewer surgical procedures taking place on-site, the reliance on medical colleagues to support out of hours had diminished.</p> <p>The review team were encouraged to hear that the Trust saw it as its duty not to let the reported improvements to trainee experience slip or revert back to previous ways of working.</p> <p>The Trust reported that it had no plans to redeploy any trainees to meet the demands of Covid-19 and its impact on other services and would refer to national guidance and HEE if necessary.</p>	Yes, please see FS2.1
<b>2.2</b>	<p><b>Appropriate systems for raising concerns about education and training</b></p> <p>It was reported that foundation trainee representatives attended a weekly faculty meeting on Tuesdays. The meeting was described as a forum where trainees could feedback on behalf of their peers any concerns in relation to the quality of their education and training.</p>	

<b>Domain 3 – Supporting and empowering learners</b>		
<p><b>3.1.</b> 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.</p> <p><b>3.2.</b> Learners are supported to complete appropriate summative and formative assessments to evidence that they are meeting their curriculum, professional standards or learning outcomes.</p> <p><b>3.3.</b> Learners feel they are valued members of the healthcare team within which they are placed.</p> <p><b>3.4.</b> Learners receive an appropriate and timely induction into the learning environment.</p> <p><b>3.5.</b> Learners understand their role and the context of their placement in relation to care pathways and patient journeys.</p>		
<b>HEE Standard</b>	<b>HEE Quality Domain 3 – Supporting and empowering learners</b>	<b>Requirement Reference Number</b>
<b>3.2</b>	<p><b>Time for learners to complete their assessments as required by the curriculum or professional standards</b></p> <p>The review team heard that there was a journal club on Wednesday morning that covered a broad range of cases for discussion. It was also reported that there were scheduled weekly teaching session led by a consultant or middle</p>	

	grade doctor but that this was not protected and could be cancelled at short notice to meet workload pressures.	
<b>3.3</b>	<b>Access to study leave</b>  The review team heard that trainees had flexibility to take their two hours per week self-development time either on a weekly basis, or they could stockpile this allowance to take a full day's study leave if they preferred.	

#### 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
<b>4.1</b>	<b>Access to appropriately funded professional development, training and appraisal for educators</b>  The review team heard that the Trust planned to review its Foundation Training Programme Director cohort.	Yes, please see FS4.1

#### 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
	Not covered at this review	



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	<p><b>Retention and attrition of learners</b></p> <p>The review team was encouraged to hear the positive experiences fed back by the attending trainee representative. It was reported that trainees had exposure to a broad range of clinical activities, both theatre and ward-based. It was reported that the opportunity to work cross-site at other sites within the Trust expanded trainee clinical opportunities.</p>	

## 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)
	N/A	
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
FS2.1	It was reported that service was divided into three zones covering emergency, elective and recovery. It was reported that with the increased staffing levels in the department meant that covering across the three zones was flexible and increased demand in one could draw on support from the others. It was noted that this arrangement had been in place for four weeks at the time of the visit and would remain in place for the incoming December 2020 rotation. The review team welcomed this development and agreed following the visit that the Trust should provide demonstrable trainee feedback that the service design amounted to a valuable training environment.	Please provide demonstrable trainee feedback via the local faculty group meeting minutes that the service model across the surgical specialties provides all trainees with the requisite clinical and educational opportunities commensurate with their level of training. Please provide this by 01 March 2021.
FS4.1	The review team heard that the Trust planned to review its Foundation Training Programme Director cohort.	Please provide an update on the review into the Foundation Programme review by 01 March 2021

## 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
	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)
	N/A	

## Report sign off

Outcome report completed by (name):	John Marshall. Deputy Quality, Patient Safety and Commissioning Manager
Review Lead signature:	Dr Orla Lacey, Deputy Postgraduate Dean, North West London
Date signed:	31 December 2020

HEE authorised signature:	Dr Gary Wares, Postgraduate Dean, North London
Date signed:	18 February 2021

Date final report submitted to organisation:	19 February 2021
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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