

# HEE Quality Interventions Review Report

**University College London  
Hospitals NHS Foundation Trust  
(University College Hospital)  
Foundation Surgery  
Learner and Educator Review**



**Review Overview**

<p><b>Background to the Review:</b></p>	<p>Health Education England (HEE) conducted this learner and educator review to Foundation Surgery following a deterioration of trainee feedback in the General Medical Council National Training Survey (GMC NTS) 2019. This review was scheduled for March 2020 and was postponed until November 2020 due to Covid-19 and pressures on the Trust.</p> <p>Foundation Surgery year one feedback reported red outliers in:</p> <ul style="list-style-type: none"> <li>- Overall satisfaction</li> <li>- Supportive environment</li> <li>- Induction</li> <li>- Adequate experience</li> <li>- Curriculum coverage</li> <li>- Educational supervision</li> <li>- Feedback</li> </ul> <p>Foundation Surgery year two feedback reported red outliers in:</p> <ul style="list-style-type: none"> <li>- Overall satisfaction</li> <li>- Clinical supervision out of hours</li> <li>- Induction</li> <li>- Educational governance</li> <li>- Feedback</li> </ul>
<p><b>Training Programme/Learner Groups Reviewed:</b></p>	<p>Foundation Surgery</p>

<p><b>Who we met with:</b></p>	<p>The review team met with the following Trust representatives:</p> <ul style="list-style-type: none"> <li>- Director of Postgraduate Medical Education</li> <li>- Medical Director for Surgery and Cancer Board</li> <li>- Director of Education</li> <li>- Deputy Director of Education</li> <li>- Medical Education Manager</li> <li>- Divisional Clinical Director for Surgical Specialties</li> <li>- Divisional Clinical Director for Gastrointestinal Division</li> <li>- Foundation Year 1 Training Programme Director</li> <li>- Foundation Year 2 Training Programme Director</li> <li>- Surgical College Tutor</li> <li>- Local Postgraduate Medical Education Lead for General Surgery</li> <li>- General Manager for Gastrointestinal Surgery</li> <li>- Divisional Manager for Surgical Specialities</li> <li>- Deputy Divisional Manager for Surgical Specialities</li> <li>- Divisional Manager for Gastrointestinal Services</li> </ul> <p>The review team met with eleven Foundation trainees across year one and two in General Surgery and Trauma &amp; Orthopaedic Surgery placements.</p> <p>The review team also met with eight surgical clinical supervisors.</p>
<p><b>Evidence utilised:</b></p>	<p>The Trust provided the following evidence for this review:</p> <ul style="list-style-type: none"> <li>- Foundation Local Faculty Group Minutes - 02.09.2020</li> <li>- Guardian of Safe Working Hours report - 02.09.2020</li> <li>- Surgery and Cancer Board Medical Education Committee Minutes - 18.06.20</li> </ul>

## Review Panel

Role	Job Title / Role
Quality Review Lead	Dr Elizabeth Carty, Deputy Postgraduate Dean
Specialty Expert	Dr Keren Davies, Head of School for Foundation
Lay Representative	Kate Rivett
HEE Quality Representative	Nicole Lallaway, Learning Environment Quality Coordinator
HEE Quality Representative	Tarek Hussain, Quality, Patient Safety and Commissioning Officer

## Executive summary

The review team were pleased to hear that foundation trainee satisfaction had improved with all trainees reporting that they would recommend their placement for training. It was also good to hear that foundation trainees in Trauma & Orthopaedic Surgery were able to attend weekly teaching and that all supervisors had their appraisal within the past three years.

However, from discussions with trainees, the following areas were identified as requiring improvement:

- Handover lacked formal structure
- Trainees did not have a dedicated confidential workspace and were completing their work in communal areas
- Limited access to computers
- Departmental induction for General Surgery did not adequately prepare trainees for their placement.
- Trainees in General Surgery did not have formal weekly surgical teaching
- Trainees did not have dedicated opportunities to attend theatre and outpatient clinics

## 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
1.1	Handover	
	The review team were concerned to hear that handover lacked formal structure, as there was no agreed time or place for handover. It was reported that there was a disparity between handover in the green zone and blue zone.	Yes, please see FS1.1

	The blue zone referred to patients who could have Covid-19, and were often patients attending through A&E. The green zone referred to elective patients who had to isolate before attending the hospital. Trainees reported that handover in the blue zone had more structure and was well conducted, whilst handover in the green zone lacked formal structure. Trainees and the supervisors reported that handover would take place in the mess, but this was not structured or planned and conducted ad-hoc.	
<b>1.4</b>	<p><b>Appropriate levels of Clinical Supervision</b></p> <p>The review team heard that trainees felt well supported by their consultants, and felt they were easily able to seek clinical advice if they required support. Trainees reported that they felt supported by both the Clinical Supervisors (CS) and their middle grade colleagues on the ward, noting that they were approachable and were able to contact them via text or WhatsApp at any time. However, it was noted that trainees interacted mostly with the new middle grade doctors that recently joined the Trust, and that they fostered a positive working environment for the trainees. It was felt that there was a lack of consultant presence on the ward, and that support was provided by the middle grade doctors.</p> <p>It was reported by the CS' that it had been difficult to find time to meet with trainees regularly due to the different working patterns due to the Covid-19 pandemic. The review team heard that CS' met with the trainees every two to three weeks.</p>	

<b>Domain 2 – Educational governance and leadership</b>		
<p><b>2.1.</b> The educational governance arrangements measure performance against the quality standards and actively respond when standards are not being met.</p> <p><b>2.2.</b> The educational leadership uses the educational governance arrangements to continuously improve the quality of education and training.</p> <p><b>2.3.</b> 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><b>2.4.</b> Education and training opportunities are based on principles of equality and diversity.</p> <p><b>2.5.</b> 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>		
<b>HEE Standard</b>	<b>HEE Quality Domain 2 – Educational Governance and Leadership</b>	<b>Requirement Reference Number</b>
<b>2.1</b>	<p><b>Impact of service design on users</b></p> <p>The review team were concerned to hear that foundation trainees did not have a dedicated confidential workspace. This lack of workspace meant that trainees were often completing their work in communal areas i.e. the doctor's mess, meaning that trainees found it challenging to get quiet time away from clinical areas. The review team were also concerned that due to the lack of workspace there were potential risks to patient confidentiality.</p> <p>The review team were disappointed to hear that there was a lack of accessible computers for trainees to use whilst on the ward. It was reported that there were six computers and two phones to be used between multiple teams and that trainees would spend time waiting for a computer to complete their work. It was noted that there were many computers taken off the wards due to social distancing requirements, however these computers were not re-</p>	Yes, please see FS2.1a

	provided elsewhere. It was reported that this issue was raised with the Faculty, and that trainees were advised to go to another building across the road to use the computers available there. Trainees felt that this was impractical because they would be required to change out of their scrubs each time, making this a time-consuming process.	Yes, please see FS2.1b
<b>2.2</b>	<b>Appropriate systems for raising concerns about education and training</b>  The review team heard that the local faculty group (LFG) meetings had appropriate foundation trainee representation. Trainees reported that they felt able to raise concerns through this group and felt that they were generally listened to by the faculty. However, the review team heard that there were some foundation trainees who were moved from surgical posts into Intensive Care posts due to the Covid-19 pandemic. These trainees expressed that they wanted to attend theatre to gain surgical experience but did not receive confirmation that this could be facilitated.	

<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>3.4</b>	<b>Induction (organisational and placement)</b>  Foundation trainees in Trauma & Orthopaedics (T&O) reported that departmental induction equipped them with everything they required for their placement, including a welcome booklet and details on escalation pathways and holding the bleep. However, trainees in general surgery reported that induction did not fully prepare them for their placement, noting that Covid-19 had an impact on this. The pandemic caused regular changes within the department, and the review team heard that it could be difficult to communicate all of the changes to the team as it was difficult to get all of the foundation trainees together on one day.	Yes, please see FS3.4
<b>3.1</b>	<b>Regular constructive and meaningful feedback</b>  The CS' reported that they were able to find time to provide feedback as part of workplace-based assessments, and trainees noted that the process was clear.	
<b>3.1</b>	<b>Access to resources to support learners' health and wellbeing and to educational and pastoral support</b>  The Trust reported that there was a Psychologist available on the wards every day, and that this person was able to provide support to trainees in terms of their well-being.	

## 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>4.3</b>	<p><b>Educational appraisal and continued professional development</b></p> <p>The review team was pleased to hear that all supervisors had an appraisal with the Director of Postgraduate Medical Education in the past three years. The ES' reported that this was a robust process where they went through evidence of training courses and feedback from trainees. It was felt that the pandemic enabled more opportunities for development as the shift to virtual webinars and courses were less challenging to fit into their work schedule.</p>	

## 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
<b>5.1</b>	<p><b>Placements must enable learners to meet their required learning outcomes</b></p> <p>Foundation trainees in T&amp;O reported that weekly teaching was scheduled every Wednesday and that they regularly attended this. This was reportedly organised by two educational clinical fellows, and some sessions were held by the orthopaedics team. However, the review team were concerned to hear that regular weekly teaching was not scheduled in the same way for foundation trainees in general surgery. It was reported that the foundation programme teaching was available.</p> <p>The review team heard that trainees did not have dedicated opportunities to attend theatre or clinics. However, it was reported that trainees could attend theatre when their workload allowed but that this was not scheduled within trainees' rotations as standard.</p> <p>The CS' for foundation trainees in general surgery reported that before the pandemic teaching occurred on a weekly basis and was delivered by middle grade doctors and consultants. Since the pandemic began, regularly scheduled teaching had stopped and was resumed two weeks prior to the quality review. It was reported that the department had struggled to deliver scheduled teaching for foundation trainees due to poor attendance, and it was felt this was a result of regular changes to the working pattern. The review team heard that there was a weekly teaching ward round session held</p>	<p>Yes, please see FS5.1a</p> <p>Yes, please see FS5.1b</p>

	<p>every Tuesday, and cases were discussed with trainees who attended. It was noted that teaching and learning still took place informally on a clinical basis whilst on the wards.</p> <p>The review team were concerned that there was a disconnect between the training opportunities described by the CS' and the actual structures in place for trainees to access these in terms of teaching in general surgery and attending theatre and outpatient clinics.</p> <p>The Trust reported that foundation programme teaching was conducted virtually and was delivered every second Wednesday of the month for four hours. It was noted that this session was recorded, and trainees were able to watch afterwards if they were unable to attend. Trainees were encouraged not to watch foundation teaching recordings outside of working hours.</p>	
--	--	--

Domain 6 – Developing a sustainable workforce		
<p><b>6.1.</b> Placement providers work with other organisations to mitigate avoidable learner attrition from programmes.</p> <p><b>6.2.</b> 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><b>6.3.</b> 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><b>6.4.</b> 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
<b>6.1</b>	<p><b>Retention and attrition of learners</b></p> <p>The review team were pleased to hear that all trainees enjoyed their placement and would recommend it for training. The review team acknowledged that there had been improvements to the foundation trainee experience.</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

<b>Immediate Mandatory Requirements</b>		
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	None
Requirement Reference number	Progress on immediate actions	Required Action, timeline, evidence (to be completed within an agreed timeframe)
	None	None

<b>Mandatory Requirements</b>		
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
FS1.1	Trainees raised concerns that handover was not structured and was conducted on an ad-hoc basis.	The Trust is required to formalise the handover process so that it takes place in a dedicated space and at specific time(s) in the day. Please send through evidence that handover is no longer a concern via Local Faculty Group (LFG) minutes by 01 March 2021.
FS2.1a	The review team were concerned that Foundation trainees did not have safe confidential workspace provision and were completing their work in the mess. It was felt that the lack of dedicated workspace would have implications for confidentiality.	The Trust is required to confirm that trainees have safe confidential workspaces within clinical areas. Please send through evidence in support of this action by 01 March 2021.
FS2.1b	Trainees reported that there was a lack of accessible computers whilst on the ward. It was reported that	The Trust is required to enable access to computers within clinical areas so that trainees can complete their work efficiently. Please send

	computers were removed due to social distancing requirements but were not re-provided.	through Local Faculty Group (LFG) feedback that this is no longer an issue among Foundation trainees by 01 March 2021.
FS3.4	It was reported that the departmental induction for General Surgery was not adequately preparing trainees for their placement.	The Trust is required to ensure that the departmental induction for trainees in General Surgery prepares trainees for their placement. Please send evidence in support of this action by 01 March 2021.
FS5.1a	Foundation trainees in General Surgery reported that they did not have formal weekly surgical teaching with their supervisors.	The Trust is required to organise formal surgical teaching for Foundation trainees in General Surgery. Please send through Local Faculty Group (LFG) minutes demonstrating that regular local teaching is available and attended by trainees by 01 March 2021.
FS5.1b	Trainees reported that they did not have dedicated opportunities to attend theatre and outpatient clinics as part of their workplan, instead they were encouraged to attend theatre if they had free time.	The Trust is required to foster opportunities for Foundation trainees to attend theatre and outpatient clinics as part of their workplan. Please send through Local Faculty Group (LFG) minutes demonstrating that this is no longer an issue 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	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	N/A	N/A

## Report sign off

<b>Outcome report completed by (name):</b>	Nicole Lallaway, Learning Environment Quality Coordinator
<b>Review Lead signature:</b>	Dr Elizabeth Carty, Deputy Postgraduate Dean
<b>Date signed:</b>	21/01/2021

<b>HEE authorised signature:</b>	Dr Gary Wares, Postgraduate Dean, North London
<b>Date signed:</b>	21/01/2021

<b>Date final report submitted to organisation:</b>	21/01/2021
---	------------

### 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