

HEE Quality Interventions Review Report

King's College Hospital NHS Foundation Trust (Princess Royal University Hospital)

Medicine (various specialties, including
Geriatric Medicine, Foundation year one (F1)
Medicine and GP Medicine)

Senior Leader Engagement Visit



HEE South London

07 May 2021

Final Report: 26 July 2021

Review Overview

Background to the review:	<p>The review was planned as part of a follow-up to the medical training at King's College Hospital NHS Foundation Trust, Princess Royal University Hospital (PRUH).</p> <p>The review was organised to investigate the effect of changes made by the Trust to address a series of ongoing issues including clinical supervision and medical staffing.</p> <p>There were 26 relevant open actions on the Quality Management Portal (QMP) which included actions related to clinical supervision out of hours, workload, teamworking and rota design.</p>
Subject of the review (e.g. programme, specialty, level of training, healthcare learner group)	<p>Medicine (various specialties, including Geriatric Medicine, Foundation year one (F1) Medicine and GP Medicine)</p>
Who we met with:	<p>Chief Executive Officer (PRUH) Chief Medical Officer Clinical Director College Tutor(s) Director of Medical Education Educational Lead(s) General Manager(s) Medical Director Medical Education Manager (PRUH) Senior Medical Education Manager</p>

Evidence utilised:	<ul style="list-style-type: none"> • Results of the proposed Learner Survey with a Trust Summary • SMART actions plan arising from the Learner Survey and other trainee feedback. • Details of the number of exception reports/summary of GoSWH Board report • LFG Minutes • Evidence of teaching sessions and attendance lists • Evidence of trainee attendance in outpatient clinics
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Review Panel

Role	Name / Job Title / Role
Quality Review Lead	Geeta Menon, Postgraduate Dean, HEE south London
Deputy Postgraduate Dean	Anand Mehta, Deputy Postgraduate Dean, HEE south-east London
External Specialty Expert (as appropriate)	Mark Cottee, Associate Director of South Thames Foundation School
Specialty Expert	Andrew Deaner, Head of School of Medicine
External Specialty Expert (as appropriate)	Sarah Divall, Head of School of GP Specialty Training, south London
HEE Quality Representative	Kenika Osborne, Learning Environment Quality Coordinator
HEE Quality Representative	Louise Brooker, Deputy Quality, Patient Safety & Commissioning Manager (Quality, Reviews and Intelligence)

Executive summary

The review panel would like to thank the Trust for ensuring that the session was well attended.

The review panel noted that the Trust had made some improvements in a few areas however it was agreed that not enough was done to address the immediate clinical supervision for trainees and medical staffing issues.

The review panel found that there were inadequate improvements made to several pre-existing issues within medical training at the Princess Royal University Hospital.

It was agreed that a follow-up review would be arranged after the GMC NTS survey results 2021 to determine what further progress had been made. The Trust was required to engage in workforce transformation with Health Education England to address the staffing issues that have been affecting the quality of training.

Review findings

The findings detailed in the sections below should be referenced to the quality domains and standards set-out towards the end of this template. Specifically, mandatory requirements should be explicitly linked to quality standards. Not all of HEE's domains and standards have been included, only those that have a direct operational impact on the quality of the clinical learning environment, which a quality review will be most likely to identify (although this does not preclude other standards outlined in the Quality Framework being subject to review, comment and requirements where relevant).

Mandatory requirements

Mandatory requirements and Immediate Mandatory Requirements (IMRs) should be identified as set out below. IMRs are likely to require action 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

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
	N/A	
Requirement Reference number	Progress on immediate actions	Required Action, timeline, evidence
	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
	Please refer to the Mandatory Requirements listed in the KCH Medicine (PRUH) Learner Review Report dated 06 May 2021.	

Recommendations

Recommendations are not mandatory but intended to be helpful, 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 3	The Trust is advised to ensure trainees can book annual leave and study leave in a timely manner.
Domain 3	The Trust is advised to ensure GP trainees can attend outpatient clinics.

Good practice

Good practice is used as a phrase to incorporate educational or patient care initiatives that, in the view of the Quality Review Team, 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	

HEE Quality Standards and Domains for Quality Reviews

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
1.1	<p>Handover</p> <p>The review panel heard that the rota for weekend cover included at least two foundation year two (F2) or Internal Medicine Trainees (IMTs) and consultant cover to ensure there was adequate senior level supervision. The Trust representatives further stated that they had recruited additional staff on twilight shifts during the last surge of Covid-19 using the additional winter pressures funding.</p>	
1.2	<p>Bullying and undermining</p> <p>The review panel was pleased to hear that there were no issues of bullying and undermining reported.</p>	
1.4	<p>Appropriate levels of Clinical Supervision</p> <p>The review panel informed the Trust representatives of their disappointment to hear that junior trainees were still not receiving the appropriate levels of clinical supervision as required for their training programmes. The review panel heard that there was an increase in the number of doctors within the department and there was a total of 13 middle grade doctors and three senior clinical fellows in post. The review panel was assured that there were named consultants on every ward, each day of the week to ensure there was adequate clinical supervision for the junior trainees.</p> <p>The review panel heard that there were 16 medical wards divided over three floors. Out of hours cover included a F1 trainee and a F2 trainee or IMT covering each floor, as well as two higher trainees (or clinical fellows) and a consultant on site until 20:00, and available by phone overnight. The Trust representatives informed the review panel that cover at the weekends was more limited and the department had received extra funding for an additional consultant on the weekends to provide senior supervision to the trainees.</p> <p>The Postgraduate Dean commended the Trust on the recent £28 million investment that had gone into the Princess Royal University Hospital (PRUH) site which led to the recent staff recruitment. The Trust representatives stated</p>	

	that the increase in staffing helped improve the clinical cover and provided the extra staffing required to prevent regular rota gaps as reported during past reviews. It was reported that senior supervision for junior trainees had been improved since the previous review. The Trust representatives informed the review panel that there was now a clear process for medical staffing and junior trainees were only moved as a last resort.	
1.4	Appropriate levels of Educational Supervision N/A	

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>Effective, transparent and clearly understood educational governance systems and processes</p> <p>The review panel heard that the Trust was disappointed to hear that trainees did not feel encouraged to exception report and informed the review panel that the timetables would be better managed to ensure that trainees did not stay overtime on a regular basis. The Trust representatives informed the review panel that overtime was repaid with time in lieu.</p>	
2.1	<p>Impact of service design on users</p> <p>The Clinical Director College Tutor informed the review panel that investments were made into recruiting higher levels of skillset for the staff responsible for rota organisation. The review panel heard that plans to manage rotas were set out in a clearly defined action plan with activities over a three-month period.</p> <p>The Trust admitted that the master ship of the rota needed improvement and that there were still many gaps in the rota which resulted in trainees being moved at last minute to cover other areas in the department.</p> <p>The review panel heard about the pressures faced by the Trust during the Covid-19 pandemic. The Trust had recently stepped down from level four major incident status. The Trust stated that at the peak of the pandemic 64% of the bed base was accommodated by Covid-19 patients with a total occupancy rate of 87% on wards.</p>	

	<p>The Deputy Postgraduate Dean informed the Trust representatives that trainees valued the support they received from Health Care Assistants (HCAs) on the Acute Medical Unit (AMU), who were referred to as technicians or navigators, and enquired if this could be extended to the post-acute wards. The review panel heard that the Trust was also exploring the possibility of recruiting more Physician Associates.</p>	
2.2	<p>Appropriate systems for raising concerns about education and training</p> <p>The Postgraduate Dean commended the Trust on the good working relationships the consultants had formed with the trainees. However, it was stated that there was little evidence to suggest that many of the issues raised about the education and training affecting trainees had been resolved.</p> <p>The review panel heard that Trust had acted on to concerns raised by the trainees and were responsive to issues raised. The educational lead informed the review panel that the Trust would ensure that training and education would be a regular item on the Local Faculty Group meeting (LFGs) agenda and that more would be done to action issues raised at these forums.</p>	

Domain 3 – Supporting and empowering learners		
<p>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.</p> <p>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.</p> <p>3.3. Learners feel they are valued members of the healthcare team within which they are placed.</p> <p>3.4. Learners receive an appropriate and timely induction into the learning environment.</p> <p>3.5. Learners understand their role and the context of their placement in relation to care pathways and patient journeys.</p>		
HEE Standard	HEE Quality Domain 3 – Supporting and empowering learners	Requirement Reference Number
3.4	<p>Induction (organisational and placement)</p> <p>N/A</p>	
3.2	<p>Time for learners to complete their assessments as required by the curriculum or professional standards</p> <p>The Deputy Postgraduate Dean advised that trainees were having difficulty accessing training sessions and outpatient clinics. Trainees had also described experiencing difficulty when booking annual leave and study leave. The review panel also noted that clinics were embedded into the weekly plans for IMTs but not the GP trainees. It was suggested that it would be beneficial for outpatient clinics to be embedded into GP trainees' weekly timetables as they found it difficult to leave wards during busy periods. The Trust representatives agreed that they would consider having arrangements put in place to accommodate this request.</p>	<p>Domain 3</p> <p>Domain 3</p>

3.1	<p>Regular constructive and meaningful feedback</p> <p>The review panel was pleased to hear that the Trust had implemented a doctors' forum where trainees were able to raise issues with their seniors. The review panel also heard that a WhatsApp group had been set up by the Clinical Director College Tutors (CDCTs) to allow trainees to openly communicate and have regular contact with their senior colleagues.</p> <p>The Educational Lead informed the review panel that there was also a weekly open-door catchup for trainees on a Thursday and that the CDCTs visited the wards at least twice a week to speak directly with trainees and identify if there were any issues present.</p>	
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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>Access to appropriately funded professional development, training and appraisal for educators</p> <p>N/A</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
5.1	<p>Placements must enable learners to meet their required learning outcomes</p> <p>N/A</p>	
5.1	<p>Appropriate balance between providing services and accessing educational and training opportunities</p> <p>The review panel informed the Trust that there were reports that both F1s and higher trainees came in early to prepare for their shifts and regularly worked beyond their rostered hours. They further informed the Trust representatives that trainees were not motivated to exception report as they did not see it bringing about any change. The Medical Director informed the review panel that there were proposals in place to improve medical staffing processes, including better rota management, rostered clinics, and more</p>	

	effective communication with all trainees. The review panel heard from the educational leads that the department offered trainees extra training sessions on topics including palliative care and dealing with death.	
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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	HEE Quality Domain 6 – Developing a sustainable workforce	Requirement Reference Number
6.1	Retention and attrition of learners	
	N/A	

Report sign off

Quality Review Report completed by (name(s) / role(s)):	Kenika Osborne Learning Environment Quality Coordinator
Review Lead name and signature:	Anand Mehta
Date signed:	24/06/2021

HEE authorised signature:	Geeta Menon
Date signed:	29/07/2021

Date final report submitted to organisation:	29/07/2021
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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 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 HEE's national website. Information from quality reports will usually be shared with other System Partners such as Regulators and Quality Surveillance Groups