

# HEE Quality Interventions Review Report

## King's Health Partners Pharmacy Programme Review



**HEE South London**

**13 May 2021 / Programme Review**

**Final Report: 26 July 2021**

## Review Overview

<p><b>Background to the review:</b></p>	<p>This Programme Review was conducted as part of Health Education England's (HEE) ongoing quality management of pre-registration pharmacist training programmes across London.</p> <p>The rationale for the review is based on the triangulation of evidence collated through trainee exit surveys, Local Faculty Group (LFG) reports and previous quality visits over the past year at partner organisations within the Kings Health Partners (KHP) training programme. These sources identified, several factors which appear to be impacting on the delivery and the experience of the pre-registration pharmacists on the programme, specifically.</p> <ol style="list-style-type: none"> <li>1. Inconsistencies in how trainees are inducted onto the KHP programme compared to the Trust in-house programmes. Consequently, trainees do not feel prepared to start role.</li> <li>2. Lack of developmental opportunity as trainees progress through the programme. The learning objectives are the same and do not appear to show any progression as the trainee moves into the same rotation at a different Trust.</li> <li>3. Lack of clarity in relation to named lead for the programme.</li> <li>4. Absence of any overarching programme governance structures.</li> </ol> <p>The review was intended to be an opportunity to discuss the concerns identified, and work with the partner trusts to support the necessary improvements required to the training programme.</p>
<p><b>Subject of the review (e.g. programme, specialty, level of training, healthcare learner group)</b></p>	<p>Pharmacy Programme Review</p>
<p><b>Who we met with:</b></p>	<p>Chief Pharmacists and Education Leads/ Pre-Registration Pharmacist Education Programme Directors (PRP EPD's) for King's Health Partners at:          King's College Hospital NHS Foundation Trust (KCH)          Guy's and St. Thomas's Hospital NHS Foundation Trust (GSTT)          South London and Maudsley NHS Foundation Trust (SLaM).</p>
<p><b>Evidence utilised:</b></p>	<p>KHP Terms of Reference          KHP Training Programme Handbook          KHP List of Learning Objectives and Named Educational Supervisors/ Practice Supervisors          KHP Named leads for KHP programme including roles and responsibilities and relationship with EPDs          KHP Pharmacy Local Faculty Group (LFG) minutes</p>

## Review Panel

<b>Role</b>	<b>Name / Job Title / Role</b>
<b>Quality Review Lead</b>	Helen Porter Pharmacy Dean, London, Kent, Surrey and Sussex
<b>Specialty Expert</b>	Rachel Stretch Pre-registration Pharmacist Training Programme Director & Regional Lead for the National Pre-registration Pharmacist Recruitment Scheme
<b>External Specialty Expert</b>	Suraj Varia Regional Facilitator for London, Kent, Surrey and Sussex for Pre-Registration Pharmacists in General Practice Programme.
<b>HEE Quality Representative(s)</b>	Kenika Osborne Learning Environment Quality Coordinator (Quality, Reviews and Intelligence)
<b>Supporting HEE Quality Representative</b>	Louise Brooker Deputy Quality, Patient Safety & Commissioning Manager (Quality, Reviews and Intelligence)

## Executive summary

The review panel heard that the KHP Programme intended purpose was to give pre-registration pharmacists (PRPs) exposure to the three partner organisations within King's Health Partners. It was intended to expose the trainee to a variety of different situations including mental and physical health across the different clinical environments.

The review panel found that the Educational Leads were passionate about meeting the training needs of trainees within the KHP programme and worked collaboratively. The review panel further found that the Trusts were committed to ensuring that trainees received the very best development and training opportunities available to them.

The review panel heard that the Trusts were looking at ways to make the training programme more adaptable and robust enough to offer to an increased number of trainees in the future. The review panel commended the Trusts on the hard work they had put into establishing and delivering the programme to date; for considering the lessons learnt in the context of the reforms to the Initial Education and Training (IET) of pharmacists, and the potential opportunities to expand the programme to include a greater number of trainees.

The review panel found the programme governance to be unclear, as there was no overarching programme lead. The review panel was concerned that this lack of clarity had potentially affected the ability to develop the programme further and to succession plan. Despite this, the Trust teams had continued to work closely with each other and regularly communicated to ensure that the programme was delivered successfully.

The review panel heard about innovations including virtual learning sessions that were introduced during the Covid-19 pandemic to ensure that all aspects of training were delivered where face-to-face sessions were not feasible. The review panel further heard that the training programme was flexible, and trainees usually had opportunities to complete any missed learning outcomes in a later rotation.

The review panel agreed that the programme had offered trainees varied learning opportunities. However, it was agreed that there were further steps to take to improve the overall quality of the programme including recognition of prior learning of trainees and to make it available to a greater number of learners in the future.

A list of mandatory requirements was set out for the Trusts to assist in improving the current structure and learning opportunities of the KHP training programme (see mandatory requirements section).

## 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
PR2.2a	The KHP programme lacked formalisation of its governance structure and required succession planning around staffing	Please provide evidence of succession planning and a formalised governance structure of the KHP Programme. Please provide an update on this action by 1 September 2021
PR2.2b	The KHP programme lacked an overall education and training lead.	The Trusts are required to nominate an overall programme lead who will be responsible for overseeing the progression and sustainability of the KHP programme. Please provide an update on this action by 1 September 2021.
PR2.2c	The KHP programme did not have regular local faculty group (LFG) meetings to capture feedback on training.	The Trusts are required to provide evidence of recent LFG meeting minutes and attendance, including planned future meeting dates. Please provide an update on this action by 1 September 2021.
PR2.2d	The KHP programme lacked recognition of prior learning of trainees as they moved through the programme.	The Trusts are required to provide an update on how a trainee's prior learning will be recognised as they move from Trust to Trust. Please provide an update on this action by 1 September 2021.
PR3.4	Trainees were repeating mandatory training and prior learning as they rotated between sites.	The Trusts are required to put in place methods of monitoring and acknowledging completion of mandatory training and learning objectives to avoid duplication. Please provide HEE with evidence that learning outcomes are monitored and shared as trainees rotate and that these are not duplicated. Please provide an update on this action by 1 September 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
	N/A

## 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&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>No issues of bullying and undermining were discussed at the review and this had not been reported as an issue across the training programme.</p>	
1.4	<p><b>Appropriate levels of Practice Supervision</b></p> <p>The review panel heard that the PRPs had fortnightly meetings with their Practice Supervisors (PSs).</p> <p>The EPD for KCH stated that they regularly fed back to the site supervisors or base site tutors on the trainees entering rotations and gave updates on their progression throughout the programme. This enabled any issues to be highlighted and an action plan to be put in place at an early stage.</p> <p>The review panel heard that the EPD at SLaM emailed all site supervisors an update on the training needs of trainees once they had joined the SLaM rotation. The site supervisor was then able to design a detailed timetable structured across the individual's training needs.</p>	
1.4	<p><b>Appropriate levels of Educational Supervision</b></p> <p>The review panel heard that the induction and supervision arrangements for PRPs were clearly defined.</p> <p>The review panel heard that the educational supervisors (ESs) were provided with workbooks for the training programmes which enabled them to support PRPs during rotations. The ESs closely worked with trainees to discuss which areas of training should be covered and to identify any items that were still outstanding from previous rotations. The EPD for GSTT reported that the ES for rotational trainees at GSTT was provided with trainee workbooks in advance, which outlined the learning outcomes and were updated as the trainee progressed. It was noted that this placed the emphasis on the ES to track the trainees' progress and that this could be difficult to sustain with a larger number of trainees. The review lead pointed out that the new foundation programme had a more learner-led ethos so a change in responsibilities would align with this.</p>	

## 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	<b>Impact of service design on users</b> N/A	
2.2	<p><b>Appropriate systems for raising concerns about education and training</b> The Chief Pharmacist (CP) for KCH informed the review panel that the programme was designed to give selected trainees exposure to a variety of learning opportunities across three different acute trusts.</p> <p>During the year in training, the PRPs were able to become more adaptable to new situations and organisations and develop a range of skills and experience in both mental and physical healthcare settings.</p> <p>The review panel heard that one PRP per trust, per year, was selected to join the KHP training programme.</p> <p>The CP for SLAM advised that the Trusts were considering ways of improving the programme and its sustainability, so there was potential to offer this programme to more learners in the future.</p> <p>The review panel heard that the programme leads had started succession planning for the programme following the departure of the GSTT Education lead who used to manage the local programme. The review panel heard plans to improve the governance structure of the programme and to make it more sustainable for the future.</p> <p>The EPDs at KCH and GSTT informed the review panel that there was a good working relationship across the Trusts although there was no overall programme lead. The review panel heard how they had managed to run the programme successfully despite the challenges brought about by the Covid-19 pandemic. The review panel informed the Trust that it would be beneficial to have an overall lead for the programme. It was agreed that as plans to offer the programme to more trainees progressed, having a named lead for the programme would become more necessary.</p> <p>The EPD at GSTT further stated that there were joint tutors on the local programmes who worked together with the KHP programme leads to ensure the HR elements and programme structure were agreed upon. The review panel heard that there was a KHP programme LFG but that this had only met once prior to the Covid-19 pandemic. The EPDs advised that they continued to communicate regularly during the pandemic but that their discussions had not been well documented. The EPDs had discussed this issue and planned to hold quarterly LFGs going forward and to keep formal minutes of these. The KHP programme LFG meeting minutes would be fed into the LFGs at each Trust.</p>	<p>Yes, please see PR2.2a</p> <p>Yes, please see PR2.2b</p> <p>Yes, please see PR2.2c</p>

	<p>The review panel heard that there were plans to hold LFGs within the KHP programme four times a year. There were plans to have an LFG in June 2021 ahead of induction for the next cohort of PRPs in July, followed by further LFGs in December 2021 and February 2022.</p>	
<p><b>2.2</b></p>	<p><b>Appropriate systems to manage learners' progression</b></p> <p>The review panel was pleased to hear that all KHP Trusts provided trainees with teaching sessions on a Monday afternoon, such as Paediatric teaching sessions. There were also coordinated sessions throughout the year which were temporarily facilitated via MS Teams due to current pandemic. Trainees were encouraged to attend their base Trust teaching sessions where possible.</p> <p>The EPD for GSTT added that teaching programmes were mapped out during the year and trainees had flexibility to attend sessions either locally or at their base site. Whilst trainees were encouraged to attend training sessions at their base site to avoid duplication, most opted to attend sessions held locally for ease.</p> <p>The review panel was pleased to hear that the KHP programme providers had plans to better coordinate the teaching sessions and see which core teaching could be provided for all trainees.</p> <p>The review panel heard that joint sessions on recruitment and mental health had been carried out for all trainees across the three providers. The review panel heard that the SLaM trainees joined the KCH teaching programme as the sites were close together and the KCH trainee cohort was larger.</p> <p>The review panel heard that there were plans to put together a workbook for both trainees and tutors. This was aimed to serve as a guide to provide learners with all the necessary information and guidance required for each rotation of their training programme to support the transition between organisations. For the tutors, the handover manual was to enable them to best support learners during their placement and identify learning outcomes and identify any potential needs.</p> <p>The review panel heard that the KHP HR Passport was a document designed to speed up human resources (HR) processes as trainees moved across the sites and was not a document to record a trainee's prior learning. This included records of Disclosure and Barring Service (DBS) checks and mandatory training.</p> <p>The review panel heard that the programme leads were working together to formalise the KHP HR passport documentation with their HR colleagues, but this had not been finalised at the time of the review.</p> <p>Further documentation had been created to enable each educational supervisor (ES) to identify which learning outcomes and competencies trainees had completed and which were outstanding. The aim was that ESs would be able to discuss with trainees any items that were not completed and plan towards achieving these outcomes.</p>	<p>Yes, please see PR2.2d</p>

### 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	<b>Regular constructive and meaningful feedback</b> N/A	
3.4	<p><b>Induction (organisational and placement)</b></p> <p>The review panel heard that the programme providers were reviewing training books to consider what opportunities were available via in-house programmes for new starters.</p> <p>When asked if there was a process in place to highlight learning completed in earlier rotations, the Trusts had varied processes in place. The review panel heard that there was some overlap, particularly at the start of the rotations, as each Trust had its own mandatory training requirements which trainees were required to complete.</p> <p>The review panel heard that at both KCH and GSTT trainees were given clinical workbooks and went through clinical objectives once joining the rotation. Trainees also had to complete local statutory mandatory training, medicine management logs and dispensing logs as each Trust had their own governance surrounding these.</p> <p>All placement providers confirmed that trainees had to complete an induction into the local programmes. Induction was streamlined to one week at SLAM if trainees had previously completed mandatory training, whilst the local induction lasted two weeks at GSTT and KCH. The EPDs advised that they were working to standardise induction and reduce repetition of mandatory training and logs through development of the KHP pharmacy workbook and KHP HR passport.</p>	Yes, please see PR3.4

### 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	<b>Access to appropriately funded professional development, training and appraisal for educators</b> N/A	

## 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	<b>Placements must enable learners to meet their required learning outcomes</b> N/A	

## 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
6.2	<b>Opportunities for learners to access careers advice</b> N/A	

## Report sign off

<b>Quality Review Report completed by (name(s) / role(s)):</b>	Kenika Osborne Learning Environment Quality Coordinator
<b>Review Lead name and signature:</b>	Helen Porter
<b>Date signed:</b>	23.06.2021

<b>HEE authorised signature:</b>	Helen Porter
<b>Date signed:</b>	02.08.2021

<b>Date final report submitted to organisation:</b>	03.08.2021
---	------------

### 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 HEE's national website. Information from quality reports will usually be shared with other System Partners such as Regulators and Quality Surveillance Groups