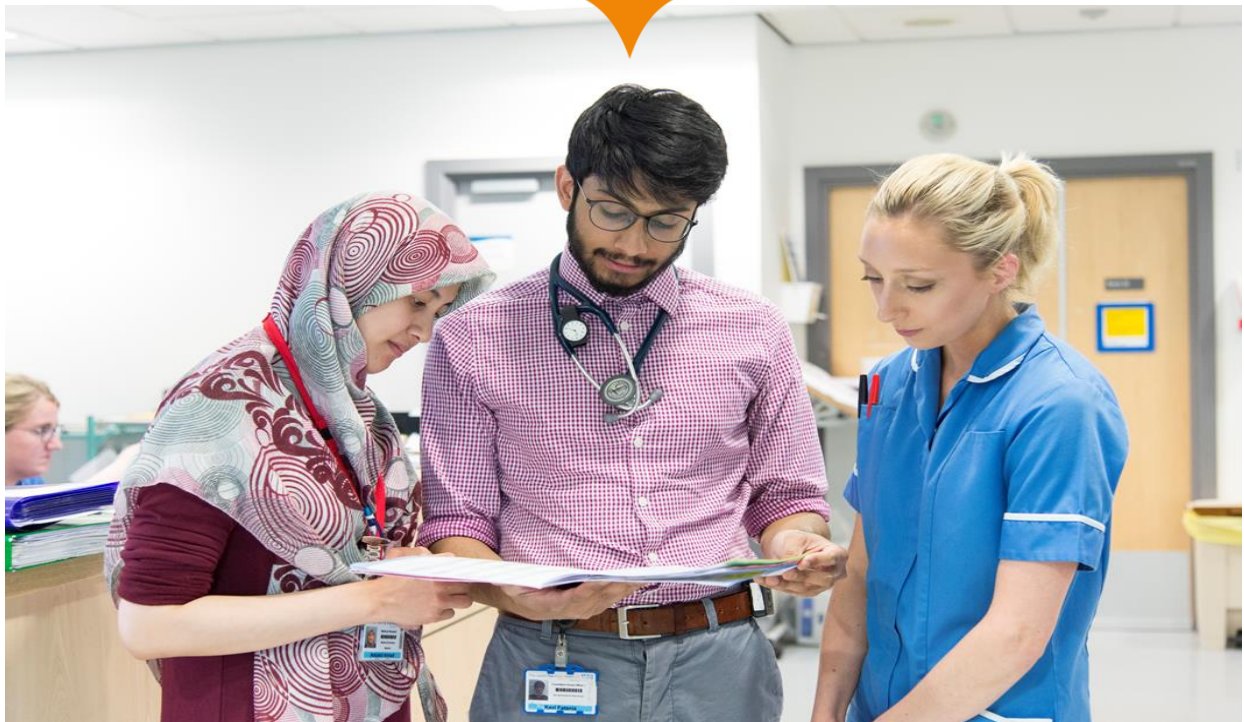


# HEE Quality Interventions Review Report

**St George's University Hospitals NHS  
Foundation Trust  
Foundation Surgery  
Senior Leader Engagement Visit**



**South London**

**17 June 2021**

**20 July 2021**

## Review Overview

<b>Background to the review:</b>	<p>In September 2020 trainees contacted the Foundation Training Programme Directors (FTPDs) at the Trust to raise concerns about culture in the upper and lower gastrointestinal (GI) firms. As a result, foundation trainees were moved to placements in other teams within the Trust (urology, neurosurgery, and plastic surgery).</p> <p>Prior to the review the South Thames Foundation School, and London Specialty School of Surgery had been liaising with the Trust, and the Postgraduate Medical Education Team were working to support the trainees and were conducting an internal investigation. The outcome of the internal investigation was unknown to the review team before the review.</p>
<b>Subject of the review (e.g. programme, specialty, level of training, healthcare learner group)</b>	<p>Foundation surgery, including Foundation Year one (FY1) and Foundation Year two (FY2).</p>
<b>Who we met with:</b>	<p>The review team also met with the following Trust representatives:</p> <ul style="list-style-type: none"> <li>• Deputy Chief Medical Officer</li> <li>• Director of Medical Education</li> <li>• Medical Education Manager</li> <li>• Foundation Training Programme Director (FY1)</li> <li>• Foundation Training Programme Director (FY2)</li> <li>• Educational Leads</li> <li>• College/Surgical Tutor</li> <li>• Freedom to Speak Up Guardian</li> <li>• Clinical Director for Surgery</li> <li>• Training Programme Director for Higher Surgical Training in south west London</li> </ul>

Evidence utilised:	<p>The review team received the following supporting evidence from the Trust in advance of the review:</p> <ul style="list-style-type: none"> <li>• Faculty Meeting minutes - 03.12.2020</li> <li>• FY feedback meeting- 03.09.20 minutes</li> <li>• General Surgery Local Faculty Group September 2020</li> <li>• Guardian of Safe Working Hours Report - Foundation Surgery</li> <li>• Minutes -GI Surgical educational leads meeting 15.10.2020</li> <li>• HEE visit Foundation Year presentation</li> </ul> <p>The review team also utilised evidence from the General Medical Council (GMC) National Training Survey (NTS) 2019 and 2020 and Health Education England's (HEE) National Education and Training Survey (NETS) 2019 and 2020.</p>
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## Review Panel

Role	Name / Job Title / Role
<b>Quality Review Lead</b>	Geeta Menon, Postgraduate Dean, South London, Health Education England
<b>Deputy Postgraduate Dean</b>	Anand Mehta, Deputy Postgraduate Dean, South London, Health Education England
<b>Specialty Expert</b>	Celia Theodoreli-Riga, Head of School for Surgery, Health Education England
<b>Specialty Expert</b>	Jan Welch, Director South Thames Foundation School, London and Kent, Surrey and Sussex, Healthcare Education Team
<b>GMC Representative</b>	Kevin Connor, Principal Education QA Programme Manager, General Medical Council
<b>HEE Quality Representative(s)</b>	Rebecca Bennett, Learning Environment Quality Coordinator, Health Education England
<b>HEE Quality Representative(s)</b>	Louise Brooker, Deputy Quality, Patient Safety & Commissioning Manager, Health Education England

## Executive summary

The review team would like to thank the Trust for accommodating the review and acknowledge the work done by the Trust to address the cultural concerns and preparation to reinstate training.

The review team was pleased that the Trust representatives were receptive to a number of different options for returning the foundation trainees to the upper GI team and that the Trust had a plan to improve the culture of the department and the learning environment. However, the review team was concerned that there was not a clear consensus between the Trust representatives regarding the concerns around team culture.

The review team was impressed with the Emergency Surgery Team (EST) structure that had been proposed and acknowledged that it would be an ideal learning environment for foundation trainees. However, the review team was concerned to hear that the proposed changes were still in the initial phases and that a proposal had not yet been submitted to the board for approval. The review team was also concerned that they had not been notified of an upcoming Royal College of Surgeons (RCS) service review and the implications the review might have.

Given these concerns and as trainees had already made their post selections, the review team was not comfortable placing foundation trainees back into the department permanently for 2021/2022. However, the review team confirmed that they would support a hybrid model for returning trainees to the department in 2021/2022. Subject to Health Education England (HEE) approval of the plans, the department would be able to offer structured 'taster' weeks to foundation trainees.

The implementation of the EST and the taster weeks would need to be reviewed by HEE prior to reinstating the foundation trainees to the department permanently. It was also noted that the results of the 2021 GMC NTS would be reviewed to determine whether there were any concerns regarding the learning environment for the higher and core trainees.

## 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.

<b>Immediate Mandatory Requirements</b> 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	N/A
Requirement Reference number	Progress on immediate actions	Required Action, timeline, evidence
	N/A	N/A

<b>Mandatory Requirements</b> The Quality Review Team 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
S2.1a	<p>The Trust representatives mentioned that there was a Royal College of Surgeons (RCS) service review scheduled for the near future and that the Emergency Surgery Team (EST) plans would be reviewed as part of this.</p> <p>The review team was concerned that HEE had not been notified of this visit prior to the review.</p>	<p>The Trust is to provide HEE with details of the review and submit a copy of the RCS report following the review.</p> <p>Please submit this evidence by 1 September 2021, in line with HEE's action plan timeline.</p>
S2.1b	<p>The review team confirmed that they would support a hybrid model for returning trainees in 2021/2022, in which foundation trainees placed in other departments would be able to gain some experience in general surgery via structured taster weeks.</p> <p>This model would need to be approved by HEE prior to implementation.</p>	<p>Please provide evidence of how the department would implement a taster week model, including a well-structured timetable detailing the opportunities available to the trainees along with clear supervision arrangements.</p> <p>Please submit this evidence by 1 September 2021, in line with HEE's action plan timeline.</p>
S5.1	<p>The review team was optimistic that the proposed EST would be a viable solution and acknowledged that it would be an ideal learning environment for foundation trainees. However, the review team was concerned to hear that the proposed changes were still in the initial phases and that a proposal had not yet been submitted to the board for approval.</p>	<p>Please provide a copy of the proposal for the EST and a timeline for the implementation of the proposed structure.</p> <p>Please submit this evidence by 1 September 2021, in line with HEE's action plan timeline.</p>

## 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
1.1	<p><b>Handover</b></p> <p>The review team was informed that there was a consultant of the week model in place and separate consultant led ward round in the morning for both upper and lower gastrointestinal (GI) surgery firms. It was also mentioned that there was a twice daily board round with higher trainees. It was noted by the Trust representatives that no issues had been reported about the ward rounds or consultant of the week model.</p>	
1.1	<p><b>Serious incidents and professional duty of candour</b></p> <p>The Freedom to Speak Up (FTSU) Guardian confirmed that there had not been any concerns raised regarding the upper and lower GI teams. The FTSU Guardian reported that they worked closely with the Guardian of Safe Working Hours and the FTSU Guardian confirmed that they reported directly to the board. It was also noted that the FTSU service had recently started offering triangulation meetings with departments and Human Resources (HR) representatives to discuss themes in the concerns that were being raised.</p> <p>The FTSU Guardian reported that in general trainees had not frequently used the FTSU service to raise concerns. The FTSU Guardian reported that the Trust had invested more resources into the FTSU service and that they had started to see improvements in the use of the service and with the speak up culture.</p>	
1.2	<p><b>Bullying and undermining</b></p> <p>The Trust representatives informed the review team that when the concerns were initially raised the foundation trainees had reported issues with culture within the department and that they had experienced behaviours which were not conducive to a supportive working environment. The Trust representatives noted that given these concerns it was felt that it was not a secure environment for the trainees, therefore the trainees were removed from the department and placed in urology, neurosurgery, and plastic surgery.</p> <p>The Trust representatives informed the review team that they had undertaken work to improve the culture and relationships between consultants in general surgery and reported that they believed this would have a positive impact on all trainees working in the department. However, the review team was</p>	

	concerned that some representatives reported that they did not believe there had been cultural issues in general surgery.	
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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><b>Effective, transparent and clearly understood educational governance systems and processes</b></p> <p>It was noted that the Trust sought to reinstate the foundation trainee posts within general surgery and some Trust representatives reported that they believed the foundation trainees could return to the department with the current structure. The review team was informed that the Trust had planned to return foundation trainees to upper and lower GI but had decided not to return the trainees to bariatrics. However, other Trust representatives reported that the Trust was not ready for the trainees to return as the Trust required more time to fully review the training environment and implement sustainable changes.</p> <p>The Trust representatives mentioned that there was a Royal College of Surgeons (RCS) service review scheduled for the near future and that the Emergency Surgery Team (EST) plans would be reviewed as part of this. The review team was concerned that Health Education England (HEE) had not been notified of this visit prior to the review. The review team was also concerned about the implications the RCS review could have.</p> <p>The review team advised that foundation trainees starting in August 2021 had not had the opportunity to select the posts which were suspended, so would have been allocated to posts in other surgical areas. In the interim it was suggested that the Trust could develop a hybrid post in which foundation trainees in other departments were offered the opportunity to do a 'taster' week in the general surgery department. The review panel clarified that the taster weeks would need to be defined explicitly, offer appropriate support and supervision, and would need to be optional for foundation trainees. This model would need to be approved by HEE prior to implementation and success of this implementation would need to be reviewed prior to reinstating the foundation trainees to the department permanently.</p> <p>The review team was asked by the Trust representatives whether there were any plans for continued restrictions on the number of foundation trainee surgical posts. The review team confirmed that there were plans to increase the number of foundation posts and that it was yet to be determined how these posts would be distributed across the different specialities. The review team noted that trusts would be informed and consulted regarding the process. The Trust representatives queried whether there was a limit to the</p>	<p>Yes, please see S2.1a</p> <p>Yes, see S2.1b</p>



	<p>number of surgical posts that could be created. The review team advised that the allocation of posts would be based on the learning opportunities provided and advised that the more innovative the posts were the more likely they would be included in the expansion of foundation posts. It was noted that a community/surgery model was also an option which could be explored. The review team noted that HEE welcomed suggestions on how to develop the workforce for the future.</p>	
2.1	<p><b>Impact of service design on users</b></p> <p>The Trust representatives reported that in 2020 they were made aware of the concerns of the foundation trainees within the general surgery department. It was reported that when the Foundation Training Programme Director (FTPD) discussed these with the trainees, several issues were raised including concerns about the quality of the educational experience. It was reported that trainees had experienced a disproportionate amount of ward work and that there had not been sufficient exposure to other education opportunities.</p> <p>The Trust representatives noted that they had received a lot of positive comments from trainees and that the negative feedback was usually received when there had been staffing issues within the department. It was also noted that feedback from the core trainees in the colorectal team had been very positive.</p> <p>The Trust representatives reported that between 2018 and 2019 there were concerns raised about the workload for foundation trainees. This was reportedly specifically related to the reduction of foundation posts in surgery to one in each department. The review team was informed that the Trust had recruited Physician Associates (PAs) into permanent roles in response to the reduction in posts and that they had also recruited a prescribing pharmacist. There were two PAs within the upper GI team, one PA in the colorectal team and there was one PA vacancy in lower GI which was being covered by a trust grade doctor. The review team was informed that the PAs had staggered start and finish times to enable sufficient ward cover. It was noted that this had helped with the workload for the foundation trainees however the support had fluctuated at times when there were recruitment issues. The Trust representatives clarified that some of the PAs had come through the Trust's training programme and had completed placements in the general surgery department as part of their training.</p> <p>The review team discussed other potential workforce development options with the Trust representatives, in addition to the ones which had already been utilised within the department, such as doctors' assistants which were mentioned as a lower cost option.</p> <p>Trust representatives noted that general surgery was quite a broad term and that there were several sub-specialties within this department; it was suggested that perhaps restructuring to recognise these differences would help with enabling a supportive structure for trainees. The review team was informed that the Trust had been working very closely with the general surgery department to improve structure and governance. It was reported that there had been progress on improving the way the upper GI team organised emergency work. Trust representatives informed the review team that there was still some progress to be made regarding how the on-call work was distributed but there had been some developments in this area and discussions about an emergency surgery on-call rota had occurred.</p>	

	The review team was informed that the foundation trainees had been part of the on-call rota which included work within general surgery. The Trust representatives reported that the trainees had enjoyed the on-call work and found it to be a positive experience with good supervision, this included the trainees who had been removed from the department.	
<b>2.2</b>	<p><b>Appropriate systems for raising concerns about education and training</b></p> <p>Representatives from the department reported that they would have found it helpful if they had been made aware of the feedback which related to the removal of trainees earlier, thus providing the opportunity to address the issues before they were escalated.</p> <p>The review team heard that the Trust representatives had monitored the Local Faculty Groups (LFGs) which were relevant to the core and higher trainees who remained in the department. It was reported that the concerns raised by the foundation trainees were not shared by the core and higher trainees, who had described being satisfied with their training experience.</p> <p>The review team heard that the Trust had monitored the foundation trainees who had been moved and the trainees had reported that they were satisfied with their experience in the other departments. The review team was pleased to hear that these departments had been very supportive and had worked hard to accommodate the trainees.</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
	Domain not discussed during the review.	

### 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
	Domain not discussed during the review.	

## 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><b>Placements must enable learners to meet their required learning outcomes</b></p> <p>The Trust representatives informed the review team that they had developed specific timetables for foundation trainees based in upper and lower GI, which included a broader range of educational experiences, whereas previously the trainees had only been allocated to ward-based work. The Trust representatives also confirmed that the foundation trainees would be supernumerary. It was reported that under these new arrangements, the trainees' roles and experience of the general surgery department would be significantly different. Therefore, the Trust representatives suggested that the department would be an appropriate environment for trainees in the interim prior to the proposed introduction of the EST. However, the Trust representatives noted that the proposed timetables for the foundation trainees were not entirely reliant on the development of the EST. The Trust representatives advised that they believed with the changes that had been made, the department was a suitable environment for trainees and were therefore ready for the trainees to be returned the department.</p> <p>The Trust representatives confirmed there was a clear difference in the type of work assigned to the FY1s and the FY2s. It was reported that the plan was for FY2 trainees to be offered similar experiences to the core trainees in terms of access to surgery, clinics, and clerking. It was advised that the FY1s were expected to handover to their FY1 counterparts on the on-call team.</p> <p>The review team enquired whether there would be sufficient ward work for the foundation trainees with the supernumerary status and the additional workforce in the department. The Trust representatives confirmed that it was a concentrated period of work which offered a sufficient learning opportunity. The Trust representatives emphasised that this was the case particularly as the ward work was scheduled for Mondays on the new timetable, which offered the opportunity to be involved in post-weekend work.</p> <p>Trust representatives told the review team that they believed the relationship shared with St George's University of London was a real advantage and there was a great opportunity for trainees to teach medical students and develop their teaching skills.</p>	
5.1	<p><b>Appropriate balance between providing services and accessing educational and training opportunities</b></p> <p>The Trust representatives described plans to incorporate FY1s into the on-call team within the proposed EST, which would be based in the surgical admissions unit. The Trust representatives confirmed that the FY1 role would be supernumerary. It was noted that the EST would be a good opportunity to reintroduce the foundation trainees as it offered a more closely supervised environment in addition to improved education opportunities for trainees such</p>	

	<p>as increased access to theatres, clinics, and assessment of new surgical admissions.</p> <p>The Trust representatives reported that they were optimistic that the new plans for the training environment would allow for a good experience for the trainees. It was noted that experience of working with acute patients was beneficial to all foundation trainees and was relevant experience for the majority of the specialties that trainees may pursue in their future training.</p> <p>The Trust confirmed that the plan was to place foundation trainees in the EST once it had been established. The Trust representatives explained that progress had been slow due to the scale of the changes which were being suggested which required recruitment of consultants and changes to job plans. The Trust representatives advised that this restructuring required further development and approval.</p> <p>The review team noted that the concerns which were raised about workload seemed to stem from understaffing issues. The review team was optimistic that the proposed EST would be a viable solution and acknowledged that it would be an ideal learning environment for foundation trainees. However, the review team was concerned to hear that the proposed changes were still in the initial phases and that a proposal had not yet been submitted to the board for approval. The review team also enquired how these proposed changes would be financed given the financial pressures the Trust was experiencing. The Trust representatives advised that the proposed changes would potentially solve other issues so they were confident that the board would consider it to be a viable option.</p>	<p>Yes, please see S5.1</p>
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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
	Domain not discussed during the review.	

## Report sign off

<b>Quality Review Report completed by (name(s) / role(s)):</b>	Rebecca Bennett, Learning Environment Quality Coordinator, Health Education England
<b>Review Lead name and signature:</b>	Prof Geeta Menon, Postgraduate Dean, South London
<b>Date signed:</b>	20 July 2021

<b>HEE authorised signature:</b>	Prof Geeta Menon, Postgraduate Dean, South London
<b>Date signed:</b>	20 July 2021

<b>Date final report submitted to organisation:</b>	20 July 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 HEE's national website. Information from quality reports will usually be shared with other System Partners such as Regulators and Quality Surveillance Groups