

HEE Quality Interventions Review Report



**Croydon Health Services NHS Trust (Croydon University
Hospital)
Foundation Pharmacy**

**London – South West London
Senior Leader Engagement Visit on 31 March 2022
Date of Final Report – 10 August 2022**

Review Overview

Background to the review

A Foundation Pharmacy trainee (2021/22 training year) raised concerns to HEE in September 2021 about the accessibility of the pharmacy department, clinical environment and postgraduate education centre at Croydon University Hospital. Specifically, the trainee felt the workplace wasn't accessible and there had been delays to the Trust making the reasonable adjustments made to support their specific access needs. In addition to this, the trainee reported experiencing instances of bullying and harassment on the wards and by their designated educational supervisor.

HEE offered support to trainee to address and resolve these issues with the Trust, however at the time the trainee did not want to pursue amelioration with the Trust and asked for HEE's support to find an alternative training site. The trainee was then placed at West Middlesex Hospital (Chelsea and Westminster Hospital NHS Foundation Trust) in Nov 2021 to restart their foundation training year. In December 2021 the trainee raised similar concerns about their experience since starting foundation training at West Middlesex Hospital as they had at Croydon.

The trainee has since requested HEE support to withdraw from their current training place and restart the programme in full in 2023.

On the 31 March 2022 HEE conducted a Senior Leader Engagement visit to the Trust to understand:

- The nature of the concerns raised by the trainee to the Trust.
- To whom these concerns were raised.
- Any action taken to resolve the concerns raised to the Trust
- The impact of the concerns raised on staff in the department, understand how they can be supported and HEE's role.

Foundation Pharmacy

Who we met with

Chief Pharmacist, Croydon University Hospital
Pharmacy Education and Training Lead, Croydon university Hospital

Review Panel

Role	Name, Job Title
Quality Review Lead	Helen Porter, Pharmacy Dean, London and Kent, Surrey and Sussex
Specialty Expert	Atif Shamim, Foundation Trainee Recruitment Lead
Lay Representative	Sarah-Jane Pluckrose
HEE Quality Representative(s)	Paul Smollen, Deputy Head of Quality, Patient Safety and Commissioning John Marshall, Deputy Quality, Patient Safety and Commissioning Manager

Executive Summary

The review panel met with senior representation from the Pharmacy department.

The review panel heard in sequential order the concerns and issues raised by the trainee during their short time in post at Croydon University Hospital.

These concerns focused on accessibility and mobility issues and later reported incidences of bullying and harassment. The review team heard that there was a breakdown of trust between the trainee and their designated supervisor, the Education and Training lead for pharmacy, which meant that by the time the trainee had left the Trust meetings between the two were being observed by a third-party.

The Trust set out the support offered and given to the trainee, as well as an overview of the advice it sought when responding to the trainee's concerns.

Review Findings

This is the main body of the report and should relate to the quality domains and standards in HEE's Quality Framework, which are set out towards the end of this template. Specifically, mandatory requirements in the sections below should be explicitly linked to the quality standards. It is likely that not all HEE's domains and standards will be relevant to the review findings.

HEE Quality Domains and Standards for Quality Reviews

HEE Standard	HEE Quality Domain 1 Learning Environment and Culture	Requirement Reference Number
1.2	<p>The learning environment is inclusive and supportive for learners of all backgrounds and from all professional groups.</p> <p>The Trust was asked to describe the measures taken prior to, and after, the placement start date to ensure the workplace was accessible. The review panel heard that the first contact between the Trust and the trainee was in October 2020 via HEE. The Trust's manual handling lead met with the trainee and received feedback from the trainee about concerns with accessibility and mobility within the pharmacy. However, there was limited detail provided with the concerns and no further action was taken at this stage as the trainee had yet to confirm their placement with the Trust.</p> <p>Once the trainee had confirmed their placement at the Trust the trainee visited the site twice further, including with the manual</p>	

handling lead to tour the areas where the trainee would be working, to include the pharmacy department and clinical environments to identify any risks or potential hazards that would impair the trainee's access to the workplace. At this visit pathways and obstructions were identified and the need for a fixed desk made known. Following this visit the manual handling lead made some recommendations for changes to the pharmacy to aide access. A form requesting the recommended changes be implemented was submitted the next day and the works were completed within two weeks of the recommendations being made. All other changes were implemented immediately. These had been implemented by the time of a third and final visit by the trainee prior to beginning their placement to the Trust to complete the tour of the facility and to check the changes previously made. At the time of the visit the trainee appeared to be content with the measures taken by the Trust.

In June 2021 the trainee met with an Access to Work officer to discuss recommendations and advice around reasonable adjustments that would aid the trainee's mobility and comfort whilst at work. The meeting was held online owing to Covid-19 protocols. The recommendation for a further follow-up meeting in person to meet with the Trust Manual Handling Lead was rejected by the trainee. Recommendations were made around chairs and equipment ahead of the trainee beginning their placement in July 2021. Despite being ordered in advance not all of the equipment – a footstool – was in place by the time the training year started in July 2021. In the interim it was suggested that the trainee use the one they had been using at their university and the necessary arrangements were made to deliver this to the hospital site.

Once in post, the trainee began to flag concerns with the placement of accessible toilets and requested that support rails be installed in the toilet in the postgraduate medical education (PGME) centre. However, the PGME centre was owned by a third party and therefore the Trust was required to get any required changes to the accessible toilet signed off by the building owner and it proved that installation would not be possible. This resulted in a delay to carrying out the required works. Concerns were also raised about the accessibility of other accessible toilets on the Trust estate, and it was agreed that the trainee could take extended breaks if the nearby accessibility toilets were out of service. The review panel heard that a list of alternative accessible toilets was provided to the trainee. The trainee recommended that the number of accessible toilets across the Trust estate be increased. In response, the Trust suggested that the trainee lead or participate in a quality improvement project (QIP) to work with the Trust to advocate for and suggest improvements to aide accessibility around the Trust estate for staff, patients, and members of the public alike. It was reported

<p>that this was not something the trainee wished to become involved in.</p> <p>The trainee was also offered adjustments to their training plan to account for their particular needs, but this was rejected by the trainee due to concerns that they would not be getting the same full educational and clinical development opportunities as their peers despite reassurance from the Trust to the contrary.</p> <p>Around this time, the education and training lead for Pharmacy began to attend the staff Ability Network for support and to learn about other avenues of support that could aide both the trainee and the department. The Trust also contacted the Business Disability Forum (BDF), a non-profit organisation, who advised further on support. It was reported that the Trust implemented the recommendations of the BDF.</p> <p>The review panel heard that the Covid-19 pandemic also had an impact on the speed with which the estates and facilities team could undertake work such as installing or fixing faulty handrails in accessible toilets. The pandemic also meant that one-way systems were in place and some parts of the estate were designated as either 'hot' or 'cold' covid sites, further limiting movement around the Trust estate.</p> <p>It was also reported that the trainee had requested that handrails be installed in all toilets across the Trust estate, whether designated as accessible toilets or not. This request was denied. The review panel also heard that that the Trust had an online form open to all staff members for reporting faults and health and safety concerns and to avoid delays the trainee's designated supervisor empowered the trainee to report faults directly.</p> <p>The review panel heard that it was the Trust's impression that the trainee had become fixated on addressing concerns around accessibility that their educational progress had been negatively impacted. By the fifth week of the trainee being in post it became apparent that there was a risk to the trainee not meeting all their educational objectives. A remedial action plan was put in place but was not followed by the trainee. It was noted that meetings with their designated supervisor, the education and training (E&T) lead for Pharmacy, were solely focused on issues of accessibility.</p> <p>It was reported that by their seventh week in their placement the trainee had yet to complete their core skills and mandatory training modules – all of which could have been completed online – despite undertaking some ward work during this time in contravention of Trust policy.</p> <p>To address this, it was agreed that the Chief Pharmacist would meet with the trainee separately to discuss issues around</p>	
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accessibility leaving the E&T lead to focus on educational development. An extension was also given to the trainee for them to submit their personal development plan and to complete their core skills and statutory mandatory training – the importance of the latter was stressed to the trainee but not completed.

Prior to the trainee leaving the Trust it had become apparent that meetings between the trainee and the E&T lead needed to be witnessed by a third party, having sought external advice. as the trainee had previously later denied their own account of events and had attributed things to the E&T lead that they had not said.

The review panel heard that when the designated supervisor discussed their concerns with the trainee about progress the trainee immediately took to take sick leave, citing stress and impact on mental health and wellbeing as the cause.

The review panel heard the trainee made accusations of bullying and mean and aggressive behaviour experienced on the wards and from the E&T lead, however no formal allegations of bullying and undermining were brought by the trainee against any member of staff. There was a reported incident whereby a nurse had allegedly spoken to the trainee in an inappropriate manner. The incident involved the trainee being asked to move their wheelchair as it had been left in a position that impeded the resuscitation area. The E&T lead for Pharmacy acted immediately once the concerns had been raised by the trainee, speaking directly to the ward matron and the nurse in question to understand what had happened and seek resolution. The nurse in question was upset for the hurt caused and apologised to the trainee. A further incidence of bullying and harassment was reported in the trainee's final sickness report before leaving the Trust against their designated supervisor. The trainee did not return to work so the report could not be followed up. Despite the trainee leaving the Trust an offer to follow up on the complaint was offered but not taken up. was noted that this information was shared with the relevant Trust management.

The review panel heard that knowledge of the trainee's challenges in meeting their educational objectives and the nature of the complaints that they had made was tightly controlled and limited to the Trust Human Resources team, and the General Pharmaceutical Council and the senior pharmacy team to ensure that they remained confidential.

Regret was expressed that a positive resolution could not be found despite the best efforts of those involved. However, there was a degree of anger in the way the trainee had communicated their allegations and misgivings about the Trust and E&T lead to a number of prominent Pharmacy professional bodies and

	<p>networks.</p> <p>The Trust felt that it had spent a significant amount of time and energy in attempting to make a success of the trainee's time at the Trust, including reasonable adjustments, feeding back to Trust management things outside of the control of the Pharmacy department, and reformatting the trainee's learning plan to make it more manageable and allowing for extensions on completing their mandatory training and personal development plan.</p> <p>Asked what lessons it had learned and what, if anything, it would do differently, the Trust responded that in future it would look to ensure that trainees with disabilities received a more thorough initial site visit and tour, with more focus on what a typical day for a trainee Pharmacist would look like.</p> <p>It was reported that the Pharmacy department has taken forward the QIP suggested to the trainee in conjunction with the Trust's Ability Network around reviewing the number and placement of the accessible toilets across the Trust estate. The Trust is also exploring the involvement of Ability Network representation participating in the initial site visits by trainees with accessibility and mobility needs and how learners from other professional groups are inducted into the Trust.</p> <p>The Trust noted that the Chief Pharmacist had been well supported by HEE and felt it had done everything it could to support the trainee at the time and it was acknowledged that the Trust estate was a challenge and covid priorities had delayed some adjustments being made. However, going forward the Pharmacy Department committed to working with the Trust Ability Network in order to improve the experience of future trainees. A recommendation for HEE to take away from this episode was to explore and review its guidance for supporting trainees with a disability.</p>	
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HEE Standard	HEE Quality Domain 2 Educational Governance and Commitment to Quality	Requirement Reference Number
	Not in the scope of this review	

HEE Standard	HEE Quality Domain 3 Developing and Supporting Learners	Requirement Reference Number
	Not in the scope of this review	

HEE Standard	HEE Quality Domain 4 Developing and Supporting Supervisors	Requirement Reference Number
	Not in the scope of this review	

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HEE Standard	HEE Quality Domain 5 Delivering Programmes and Curricula	Requirement Reference Number
	Not in the scope of this review	

HEE Standard	HEE Quality Domain 6 Developing a sustainable workforce	Requirement Reference Number
	Not in the scope of this review	

Report Approval

Quality Review Report completed by	
Name	John Marshall
Role	Deputy Quality Patient safety and Commissioning Manager

Review Lead	
Name	Helen Porter
Role	Pharmacy Dean, London and Kent, Surrey and Sussex
Date signed	10 August 2022

HEE Authorised Signatory	
Name	Helen Porter
Role	Pharmacy Dean, London and Kent, Surrey and Sussex
Date signed	10 August 2022

Final Report submitted to organisation	10 August 2022
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