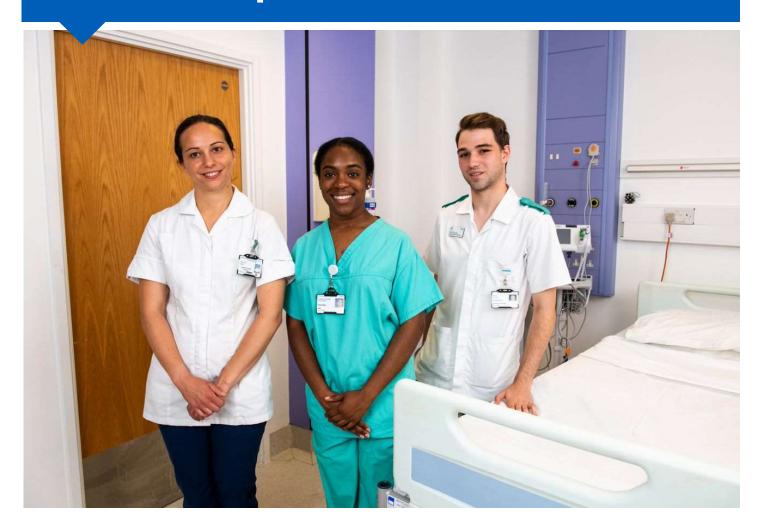


## **Health Education England**

# HEE Quality Interventions Review Report



King's College Hospital NHS Foundation Trust (King's College Hospital)
Neurosurgery
Learner and educator review

London – South London 17 May 2022 Date of Final Report:

#### **Review Overview**

#### Background to the review

A Learner and Educator Review was requested following the 2021 General Medical Council National Training Survey (GMC NTS). The survey results identified several areas of concern across the programme, including negative outlier results in workload, supportive environment and regional teaching. Neurosurgery at the Trust had previously been of concern, resulting in a risk-based review (learner and educator review) in 2017 where it was identified that the Trust was experiencing issues with clinical supervision, supportive environment and culture. It was agreed that a follow-up visit in 2019 to ensure that the learning and training environment was suitable for learners. Although the Trust had demonstrated significant improvements to the learning environment, there were still concerns with culture and supervision. HEE had set some actions for the Trust which were monitored through the quality management portal. It was agreed that a follow-up review would be arranged for May 2022 to monitor progress within the department.

#### Subject of the review:

Neurosurgery

#### Who we met with

Four postgraduate doctors at specialty training levels two to three (ST2-ST3) and four postgraduate doctors at ST4-ST6

College Tutor
Director of Medical Education
Medical Education Manager
Guardian of Safe Working Hours
Clinical Director
Chief Medical Director
Educational Lead
Training Programme Director
Freedom to Speak Up Guardian
Clinical and educational supervisors in Neurosurgery

#### **Evidence utilised**

KCH MEC Minutes
QPP GSWH report Q2 & Q3 July – Dec 2021
Neurosurgery FFT response February – May 2022
Neurosurgical Training practices meeting minutes February 2020
Specialty Registrar Teaching Register 2021-2022

#### Specialty Registrar Staff Breakdown

The review panel also considered information from the GMC NTS 2019 - 2021 and HEE National Education and Training Survey (NETS) 2020-2021. This information was used by the review panel to formulate the key lines of enquiry for the review. The content of the review report and its conclusions are based solely on feedback received from review attendees.

#### **Review Panel**

Role	Name, Job Title
Quality Review Lead	Anand Mehta Deputy Postgraduate Dean, HEE London
Specialty Expert	Celia Theodoreli-Riga Head of London School of Surgery, HEE London
External Specialty Expert	Laurence Watkins Training Programme Director, Consultant Neurosurgeon, UCLH
HEE Quality Representative(s)	Kenika Osborne Learning Environment Quality Coordinator, HEE London
Supporting roles	Sarah-Jane Pluckrose Lay Representative, HEE London  Laura De Maria Quality, Patient Safety and Commissioning Officer, HEE London

#### **Executive Summary**

The review panel thanked the Trust for facilitating the review and ensuring the sessions were well attended. The Trust management representatives presented evidence of improvements that had been made within the department since the last visit. The review panel was reassured to hear that although there was a high caseload, the postgraduate doctors received a wide range of experience for their training.

Some areas for improvement were also identified. The review panel heard that postgraduate doctors were regularly working beyond their rostered hours to meet service needs but did not fill in exception reports as they did not feel that it would make a difference. The review panel explained to the postgraduate doctors the importance of ensuring that exception reports were completed, in order to ensure the Trust management team were aware of these issues.

Additionally, the review panel felt that the Trust needed to adjust the two-tier working pattern between the ST4-6 doctors and clinical fellows in order to prioritize the training needs of the postgraduate doctors depending on their level.

This report includes some requirements for the Trust to take forward, which will be reviewed by Health Education England (HEE) as part of the three-monthly action planning timeline. Initial responses to the requirements below will be due on 1 September 2022.

### **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.

#### Requirements

#### **Mandatory Requirements**

Requirement Reference Number	Review Findings	Required Action, Timeline and Evidence
NR1.11	The review panel heard that although the postgraduate doctors had access to the exception reporting tool, they did not know how or when to fill in an exception report.	The Trust is required to ensure postgraduate doctors have access to the exception report system and are trained on the process to complete exception reports where necessary. Please provide evidence of communication to doctors in training explaining how and when to complete exception

		reports and encouraging them to do so by 1 September 2022.
NR2.6	The review panel heard that there were formal and informal feedback meetings with postgraduate doctors.  Postgraduate doctors attended meetings which appeared to be Local Faculty Group (LFG) meetings, although they did not recognise them as such. These meetings were not regular and minutes of the meetings with actions did not appear to be shared with the postgraduate doctors or their representatives.	Please provide evidence to demonstrate that postgraduate doctors receive updates on action taken as a result of their feedback.  Please provide this evidence by 1 September 2022.
NR3.2a	The review panel heard that the postgraduate doctors did not have access to regional teaching days and missed COVID-19 recovery training opportunities that were being provided in the region.	Please provide evidence that postgraduate doctors are able to attend regional teaching days and make up for learning opportunities missed due to COVID-19.  Please provide this evidence by 1 September 2022.
NR3.2b	The review panel felt that although the support of the clinical fellows was beneficial for the ST2-3 doctors, the Trust needed to adjust the two-tier work pattern between ST4-6 doctors and clinical fellows to prioritise the training needs of the postgraduate doctors.	Please provide evidence to show that adjustments with the two-tier work pattern have been made and that training is prioritised within this model.  Please provide the relevant information for this action by 1 September 2022.

## **Immediate Mandatory Requirements**

Requirement Reference Number	Review Findings	Required Action, Timeline and Evidence
None		
Poquiromont	Progress on Immediate	Paguired Action Timeline
Requirement Reference Number	Progress on Immediate Actions	Required Action, Timeline and Evidence

#### 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.

Reference Number	Related HEE Quality Framework Domain(s) and Standard(s)	Recommendation
None		

#### **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/Professional Group/Department/Team	Good Practice	Related HEE Quality Framework Domain(s) and Standard(s)
None		

## **HEE Quality Domains and Standards for Quality Reviews**

HEE Standard	HEE Quality Domain 1 Learning Environment and Culture	Requirement Reference Number
1.1	The learning environment is one in which education and training is valued and championed.  The Trust management representatives assured the review panel that the department had a commitment to teaching and training. The review panel also heard that the Trust had undertaken some collaborative work between departments, including anaesthetics and neurosurgery, to improve the learning experience and offerings to learners.  The supervisors informed the review panel that they were committed to teaching and that the postgraduate doctors were exposed to a wide range of interesting cases.	
1.2	The learning environment is inclusive and supportive for learners of all backgrounds and from all professional groups. N/A	
1.3	The organisational culture is one in which all staff are treated fairly, with equity, consistency, dignity and respect.  The more ST2-3 doctors informed the review panel that there had been improvements to their training programmes, which were now more flexible. Postgraduate doctors had been given a fourmonth block to allow them to catch up on learning opportunities including interventional radiology, which were lost during the COVID-19 pandemic.  The clinical supervisors expressed to the review panel that there had been an improvement in the departmental culture with better working relationships between postgraduate doctors and consultants. The review panel was pleased to hear that morning handover meetings provided postgraduate doctors with better learning opportunities than they had previously. However, it was noted that although consultants were willing to help, there were times that pressures on the wards limited their availability for postgraduate doctors when needed.	
1.4	There is a culture of continuous learning, where giving and receiving constructive feedback is encouraged and routine.  The review panel heard that there were formal and informal feedback meetings with postgraduate doctors. The education	

1.5	supervisors (ESs) further stated that they gathered learner feedback through anonymised surveys. The review panel heard that postgraduate doctors attended meetings which appeared to be Local Faculty Group (LFG) meetings, although they did not recognise them as such. These meetings were not regular and minutes of the meetings with actions did not appear to be shared with the postgraduate doctors or their representatives.  Learners are in an environment that delivers safe, effective, compassionate care and prioritises a positive experience for patients and service users.  The review panel heard that there was a good balance of access to training between the two hospital sites. The review panel heard from Trust management representatives that the Trust was moving to a mock operative at one of the hospital sites for simulation purposes which was available to all learners. The use of dedicated mock operating room within the department of surgical and interventional engineering would provide high fidelity simulation training to learners. The review panel also heard that learning sessions on spinal surgery were scheduled to be delivered to postgraduate doctors at the end of June 2022.  The postgraduate doctors at the review informed the review panel that there had been a change in the culture of the department and that the consultants and other clinical staff worked together more cohesively to deliver good levels of care to the patients. The postgraduate doctors agreed that they were generally happy for their friends and family to be treated in the department at the	
1.6	King's College Hospital (KCH) site.  The environment is one that ensures the safety of all staff,	
	including learners on placement.  All staff, including learners, are able to speak up if they have any concerns, without fear of negative consequences.  Postgraduate doctors described their consultants as friendly and	
1.7	approachable and said that they were highly engaged with training and proactive about teaching. Postgraduate doctors felt that they worked collaboratively within the department. None of the postgraduate doctors at the review reported witnessing or experiencing bullying or undermining during their training.	
1.8	The environment is sensitive to both the diversity of learners and the population the organisation serves.	

1.9	There are opportunities for learners to take an active role in quality improvement initiatives, including participation in improving evidence-led practice activities and research and innovation.	
1.10	There are opportunities to learn constructively from the experience and outcomes of patients and service users, whether positive or negative.	
	The learning environment provides suitable educational facilities for both learners and supervisors, including space and IT facilities, and access to library and knowledge services and specialists.	
1.11	The postgraduate doctors reported that they frequently stayed late either out of choice or completing routine tasks. The ST4-6 doctors stated that due to a lack of access to remote IT support and facilities, they regularly stayed beyond their rostered hours to complete various tasks, which could have been completed off site.	
	The review panel heard that although the postgraduate doctors had access to the exception reporting tool, they did not know how or when to fill in an exception report. The postgraduate doctors reported regularly working beyond their rostered hours but claimed that this was mainly by choice for learning opportunities.	Yes, please see NR1.11
	The learning environment promotes multi-professional learning opportunities.	
1.12	The review panel was pleased to hear that there was an increase in the number of collaborative training sessions set up with the anaesthetics and neurosurgery teams.	
1.13	The learning environment encourages learners to be proactive and take a lead in accessing learning opportunities and take responsibility for their own learning.	

HEE Standard	HEE Quality Domain 2 Educational Governance and Commitment to Quality	Requirement Reference Number
2.1	There is clear, visible and inclusive senior educational leadership, with responsibility for all relevant learner groups, which is joined up and promotes team-working and both a multi-professional and, where appropriate, interprofessional approach to education and training.	
2.2	There is active engagement and ownership of equality, diversity and inclusion in education and training at a senior level.	
2.3	The governance arrangements promote fairness in education and training and challenge discrimination	

2.4	Education and training issues are fed into, considered and represented at the most senior level of decision making.	
2.5	The provider can demonstrate how educational resources (including financial) are allocated and used.	
2.6	Educational governance arrangements enable organisational self-assessment of performance against the quality standards, an active response when standards are not being met, as well as continuous quality improvement of education and training.  The Trust management representatives outlined several feedback mechanisms open to the postgraduate doctors which were both formal and informal. The postgraduate doctors described attending meetings which appeared to be Local Faculty Group (LFG) meetings although they did not describe them as such. Postgraduate doctors also stated that they had held informal conversations with consultants as and when needed. The review panel heard that the majority of meetings were undocumented, and the actions and minutes were not shared with postgraduate doctors.	Yes, please see NR2.6
2.7	There is proactive and collaborative working with other partner and stakeholder organisations to support effective delivery of healthcare education and training and spread good practice.	
2.8	Consideration is given to the potential impact on education and training of services changes (i.e. service re-design / service reconfiguration), taking into account the views of learners, supervisors and key stakeholders (including HEE and Education Providers).	

HEE Standard	HEE Quality Domain 3 Developing and Supporting Learners	Requirement Reference Number
3.1	Learners are encouraged to access resources to support their physical and mental health and wellbeing as a critical foundation for effective learning.	
	Learners receive the educational supervision and support to be able to demonstrate what is expected in their curriculum or professional standards to achieve the learning outcomes required.	
3.2	The postgraduate doctors informed the review panel that they had not been asked to carry out any tasks outside their remits or beyond their respective levels of competence.  The postgraduate doctors advised that they had met with their ESs since starting in post and that they were able to access mandatory training days. Teaching was held on Friday mornings, and they were given dedicated time to attend.	

	The review panel heard however that postgraduate doctors were unable to access regional teaching days. The postgraduate doctors stated that it was not advertised to them that the regional teachings had restarted since the COVID-19 pandemic and had therefore they had not attended any pan-London formal teaching. The review panel also found that postgraduate doctors had missed COVID-19 recovery training opportunities that were being provided in the region. The review team heard that regional teaching sessions were not advertised to south London region postgraduate doctors.  The postgraduate doctors reported that the neurosurgery department had commenced a two-tier middle-grade rota system which had both a positive and negative effect on their training. Whilst the ST2-3 doctors found working with clinical fellows helpful, the ST4-6 doctors found that they had struggled to get enough theatre cases as they had to share them with the clinical fellows and at times, they were doing the same cases. The postgraduate doctors further stated that they did not believe they met the number of cases as required to meet training needs.  The postgraduate doctors advised that they had received their timetables in advance of starting their placement and they felt that they know what was required of them on commencing their	Yes, please see NR3.2a Yes, please see NR3.2b
	they knew what was required of them on commencing their placement.  The potential for differences in educational attainment is	
3.3	recognised and learners are supported to ensure that any differences do not relate to protected characteristics.	
3.4	Supervision arrangements enable learners in difficulty to be identified and supported at the earliest opportunity.	
3.5	Learners receive clinical supervision appropriate to their level of experience, competence and confidence, and according to their scope of practice.  The ST2-3 doctors felt that the supervision arrangements in the department were sufficient to ensure postgraduate doctor and patient safety, as they were always able to find a consultant, more senior postgraduate doctor or clinical fellow when needed.  The Trust had worked to improve supervision and consultant presence within the department. it was reported that there had been an increase in the consultant workforce, ensuring there were named consultants on postgraduate doctors' timetables and increasing the out of hours support.  Learners had access to an on-call telephone with direct access to consultants should they have any questions. It was also reported that there were specialist clinical fellows in the department who	

	that there was an open environment in the on-call room with plenty of help at hand.	
	The review panel heard that postgraduate doctors found the workload in clinics manageable. It was further stated that they were allocated to their own consultant clinics and that although there were instances when they had been asked to cross cover, there was always consultant supervision in clinics.	
	None of the postgraduate doctors at the review reported being involved in any serious incidents (SIs). However, postgraduate doctors stated that they felt confident that they would be supported by their supervisors should this arise. It was also stated that postgraduate doctors had received good senior support when dealing with complications and difficult conversations involving patient care.	
3.7	Learners are supported to complete appropriate summative and/or formative assessments to evidence that they are meeting their curriculum, professional and regulatory standards, and learning outcomes.	
3.8	Learners are valued members of the healthcare teams within which they are placed and enabled to contribute to the work of those teams.	
	Learners receive an appropriate, effective and timely induction and introduction into the clinical learning environment.	
3.9	The postgraduate doctors at the review informed the review panel that they had undergone an induction which they found useful. Postgraduate doctors stated that they had received a timetable and knew what they were expected to do from Monday to Friday.	
3.10	Learners understand their role and the context of their placement in relation to care pathways, journeys and expected outcomes of patients and service users.	
3.11	Learners are supported, and developed, to undertake supervision responsibilities with more junior staff as appropriate.	

HEE Standard	HEE Quality Domain 4 Developing and Supporting Supervisors	Requirement Reference Number
4.1	Supervisors can easily access resources to support their physical and mental health and wellbeing.	
4.2	Formally recognised supervisors are appropriately supported, with allocated time in job plans/ job descriptions, to undertake their roles.	
	The ESs advised the review panel that there was time for supervision and mentoring activity in their job plans, but that	

	meeting the requirements of the service and of training was at times difficult as they operated within a busy department. The ESs assured the review panel that the new teaching programme was a positive change and that they worked together collaboratively to ensure they all undertook teaching activity and delivered learning opportunities to postgraduate doctors.	
4.3	Those undertaking formal supervision roles are appropriately trained as defined by the relevant regulator and/or professional body and in line with any other standards and expectations of partner organisations (e.g. Education Provider, HEE).	
4.4	Clinical Supervisors understand the scope of practice and expected competence of those they are supervising.  The clinical supervisors (CSs) informed the review panel that they understood the postgraduate doctors' needs and worked to ensure they were able to achieve the expected competences and training as required by their programme.	
4.5	Educational Supervisors are familiar with, understand and are up-to-date with the curricula of the learners they are supporting. They also understand their role in the context of leaners' programmes and career pathways, enhancing their ability to support learners' progression.	
4.6	Clinical supervisors are supported to understand the education, training and any other support needs of their learners.	
4.7	Supervisor performance is assessed through appraisals or other appropriate mechanisms, with constructive feedback and support provided for continued professional development and role progression and/or when they may be experiencing difficulties and challenges.	

HEE Standard	HEE Quality Domain 5 Delivering Programmes and Curricula	Requirement Reference Number
	Practice placements must enable the delivery of relevant parts of curricula and contribute as expected to training programmes.	
5.1	When asked whether they would recommend Neurosurgery training posts at the Trust to colleagues, the majority of postgraduate doctors said they would recommend training posts at the Trust to colleagues. Postgraduate doctors stated that overall, they worked in a busy department with a wide variety of cases which gave them a good learning experience. They also stated that their experience was positive, and they worked in a supportive environment with good support from consultants and clinical fellows.	

## Placement providers work in partnership with programme leads in planning and delivery of curricula and assessments.

The Trust management representatives reported that a new teaching programme had been introduced in response to postgraduate doctors' feedback. The aim was to inspire postgraduate doctors in neurosurgery to fulfil their clinical and academic potential.

The review panel heard that postgraduate doctors had access to regular, free, hands-on neurosurgical cadaveric education and skills training. They added that postgraduate doctors had opportunities to engage in high-quality research during clinical training.

The review panel heard that doctors in the department had access to the Academic Foundation Programme and an academic clinical fellow training pathway.

It was also stated that there was an on site neurosurgical drilling course available to postgraduate doctors which was aimed at improving the delivery and content of curricula and assessments.

Placement providers collaborate with professional bodies, curriculum/ programme leads and key stakeholders to help to shape curricula, assessments and programmes to ensure their content is responsive to changes in treatments, technologies and care delivery models, as well as a focus on health promotion and disease prevention.

The ESs stated that the clinical fellows had a positive impact on postgraduate doctors and that it was beneficial for postgraduate doctors to be trained by clinical fellows as well as consultants. Senior specialty trainees felt that they were at times competing with clinical fellows to review the same cases on wards. The CSs stated that there had been a richness in level of teaching and an increased number of presentations that postgraduate doctors had access to and there was opportunity for senior specialty trainees to learn from each other.

The ESs acknowledged that improvements had to be made to ensure postgraduate doctors could attend regional teaching days. The supervisors informed the review team that they felt that they had enough time on their timetable for teaching. It was also added that Friday teaching for the neurosurgery postgraduate doctors had been consistent and there were other on-going teaching activities that were available to them.

Placement providers proactively seek to develop new and innovative methods of education delivery, including multiprofessional approaches.

5.3

5.4

5.5	The involvement of patients and service users, and also learners, in the development of education delivery is encouraged.	
5.6	Timetables, rotas and workload enable learners to attend planned/ timetabled education sessions needed to meet curriculum requirements.	

HEE Standard	HEE Quality Domain 6 Developing a sustainable workforce	Requirement Reference Number
6.1	Placement providers work with other organisations to mitigate avoidable learner attrition from programmes.	
0.1	Not discussed at this review.	
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 provider 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 and/or, where appropriate, career progression, is underpinned by a clear process of support developed and delivered in partnership with the learner.	

## Report Approval

Quality Review Report completed by		
Name	Kenika Osborne	
Role	Learning Environment Quality Co-ordinator	

Review Lead	
Name	Geeta Menon
Role	Postgraduate Dean, HEE London
Signature	
Date signed	Date 02/08/2022

HEE Authorised Signatory		
Name		
Role		
Signature		
Date signed	Date	

Final Report submitted	Data
to organisation	Date