



London North West University Healthcare NHS Trust (Northwick Park Hospital) Haematology Senior Leader Engagement Visit

> London – North West London Date of Review/Intervention: 10 October 2022 Date of Final Report: 18 November 2022

## **Review Overview**

#### Background to the review

This review was a follow up risk-based Senior Leader Engagement Visit following a number of reviews of Haematology, the most recent being a Learner Review that took place in March 2022.

In the review March 2022, the review panel was pleased that doctors in postgraduate training (DPTs) reported the culture in the department had improved. DPTs also reported that they felt able to raise concerns and provide feedback, which was actively encouraged by the department and sometimes acted upon. However, whilst it was reported that the culture of feedback and raising concerns had improved, there were still some reports of bullying and undermining behaviours in the department. The review panel noted that progress had been slow in some areas and there had not been resolution of a number of issues previously identified. The review panel also noted several areas for improvement including, induction, handover, the effect of consultant workload on clinical supervision, the workload of the trainee covering the outlier patients and the quality of care for those patients.

The GMC was involved in this review as the department has been under enhanced monitoring since September 2017.

#### Subject of the review:

Haematology

#### Who we met with

Chief Executive Officer Medical Director Associate Medical Director (Education, Research and Development) Director of Medical Education Clinical Director College Tutor Educational Leads Guardian of Safe Working Hours Postgraduate Centre Manager Medical Education Manager Doctor in postgraduate training representative

#### **Evidence utilised**

Northwick Park Hospital Action Plan for Specialty Higher Training 10 September 2022 Haematology Friends and Family Test Results July 2022 and August 2022 Haematology Staff Survey Results 2021 Local Faculty Group Minutes for January 2022, February 2022, March 2022, May 2022 and July 2022. Rota information for Specialty Higher Doctors in Postgraduate Training in Haematology August 2022-February 2023.

Evidence of teaching sessions and attendee lists.

Breakdown of the learner groups and clinical and educational supervisors in the department.

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	Dr Elizabeth Carty, Deputy Postgraduate Dean, Health Education England (London)
Specialty Expert	Dr Catherine Horsfield, Head of the London Specialty School of Pathology, Health Education England (London)
General Medical Council Representative	Kevin Connor, Principal Education Quality Assurance Programme Manager, General Medical Council
Learner Representative	Dr Kayleigh McCloskey, Doctor in Postgraduate Training Representative in Specialty Higher Haematology Training
HEE Quality Representatives	<ul> <li>Paul Smollen, Deputy Head, Quality, Patient Safety &amp; Commissioning, Health Education England (London)</li> <li>Rebecca Bennett, Learning Environment Quality Coordinator, Health Education England (London)</li> <li>Laura De Maria, Quality, Patient Safety and Commissioning Administrator, Health Education England (London)</li> <li>(Observing)</li> </ul>

## **Executive Summary**

The review panel thanked the Trust for accommodating the review. The review panel was appreciative for the extensive pre-review evidence and preparation that the Trust had done prior to the review.

The review panel acknowledged there had been significant improvement in the areas where issues had been identified previously, such as clinical supervision, handover and access to laboratory experience. The review panel recognised and commended the hard work and engagement at all levels to make improvements for Doctors in Postgraduate Training (DPTs) and service users. The Trust representatives acknowledged that there was still some work to do but noted that significant progress had been made.

The review panel was pleased to hear strong positive feedback for the culture of the department and that DPTs felt they were able to raise concerns and that their feedback was taken seriously.

The review panel was also pleased to note the work that had been started for the redistribution of DPT posts out of London and felt the Trust had a robust plan for this.

The review panel was mindful of the sustainability of the improvements and therefore it was requested that the Trust provides evidence of the sustainability of the improvements made in the areas with conditions under General Medical Council (GMC) Enhanced Monitoring. This report includes a number of requirements and recommendations for the Trust to take forward, which will be reviewed by HEE as part of the three-monthly action planning timeline. Initial responses to the requirements below will be due on 1 March 2023.

## **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
H1.3	The Trust representatives advised that Doctors in Postgraduate Training (DPTs) described the working environment as positive, kind and that the team camaraderie was good. It was also reported by the Trust representatives	Please provide evidence to demonstrate that the changes made are sustainable and evidence of the Trust's plans to maintain the improvements long-term.

	that the leadership of the team was in a more sustainable position and therefore the culture had improved. General Medical Council (GMC) Enhanced Monitoring Condition: Haematology trainees must not be subjected to, or subject others to, behaviour that undermines their professional confidence, performance or self-esteem. The learning environment and culture within the haematology department must value and support education and training so that learners are able to demonstrate what is expected in Good medical practice and to achieve the learning outcomes required by their curriculum.	Please also provide feedback on this topic from DPTs, both in the current cohort and the next cohort, via Local Faculty Group (LFG) meeting minutes or other evidence. Please submit this evidence by 1 March 2023, in line with HEE's action plan timeline.
H1.5	The Trust representatives advised that there had been improvements to the red cell pathway and the handover since the General Medical Council (GMC) National Training Survey (NTS) results in 2022. The Trust representatives advised that there had been improvements to the handover process with Hammersmith Hospital (HH). GMC Enhanced Monitoring Condition: There must be a clear system in place for handover of haematology patients to the acute medical take at night, as well as a system in place for learners to be aware of which haematology patients have come in overnight. Handover of care must be organised and scheduled to provide continuity of care for patients and	Please provide evidence to demonstrate that the changes made are sustainable and evidence of the Trust's plans to maintain the improvements long-term. Please also provide feedback on this topic from Doctors in Postgraduate Training (DPTs), both in the current cohort and the next cohort, via Local Faculty Group (LFG) meeting minutes or other evidence. Please submit this evidence by 1 March 2023, in line with HEE's action plan timeline.

	maximise the learning	
	opportunities for doctors in	
	training in clinical practice.	
	The review panel was advised	Please provide evidence to
	by the Trust representatives	demonstrate that the changes
	that the Trust had invested in	made are sustainable and
	personnel and workforce	evidence of the Trust's plans to
	transformation. It was added	maintain the improvements
	that the Trust had recruited high	long-term.
	quality consultants and as a	
	result the consultant body was	Please also provide feedback
	now more robust, ensuring	on this topic from DPTs, both in
	Doctors in Postgraduate	the current cohort and the next
	Training (DPTs) were well	cohort, via Local Faculty Group
	supervised.	(LFG) meeting minutes or other
		evidence. Please submit this
	General Medical Council (GMC)	evidence by 1 March 2023, in
	Enhanced Monitoring Condition:	line with HEE's action plan
	Haematology trainees must	timeline.
	have an appropriate level of	
	clinical supervision at all times	
H3.5	by an experienced and	
	competent supervisor, who can	
	advise or attend as needed, on	
	the wards and in the laboratory.	
	The level of supervision must	
	meet the individual learner's	
	competence, confidence and	
	experience; and provide	
	educational opportunities with	
	feedback given to the learner.	
	The support and clinical	
	supervision must be clearly	
	outlined to the learner and the	
	supervisor.	

#### **Immediate Mandatory Requirements**

Requirement Reference Number	Review Findings	Required Action, Timeline and Evidence
N/A		
Requirement	Progress on Immediate	Required Action, Timeline
Reference Number	Actions	and Evidence
N/A		

#### 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
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/Professional Group/Department/Team	Good Practice	Related HEE Quality Framework Domain(s) and Standard(s)
N/A		

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

HEE Standard	HEE Quality Domain 1 Learning Environment and Culture	Requirement Reference Number
	The learning environment is one in which education and training is valued and championed.	
1.1	The Trust representatives reported that they had met regularly with the Doctors in Postgraduate Training (DPTs) in Haematology to gather feedback on the ongoing improvements. The Trust representatives reported that they had noticed a stark improvement in the feedback from DPTs and noted that all DPTs advised they would recommend their post to colleagues.	
	The DPT representative reported that they had observed significant changes in the department. It was noted that the DPTs had felt the department had good potential to offer excellent training which was now being realised with the support of the consultants and the increased workforce.	
	The organisational culture is one in which all staff are treated fairly, with equity, consistency, dignity and respect.	
	The Trust representatives advised that DPTs described the working environment as positive, kind and that the team camaraderie was good. It was also reported that the leadership of the team was in a more sustainable position and therefore the culture had improved.	Yes, please see H1.3
1.3	The Trust representatives acknowledged that the cultural issues were not limited to the haematology department. The Trust informed the review panel that there had been a lot of work on culture trust-wide and it was noted that the Trust had attempted to encourage a kinder culture based on a flat hierarchy model. The review panel was also informed that the Trust had recently relaunched their Trust values. The review panel was informed that the Trust was taking the culture very seriously and individual's behaviours were being closely monitored for behaviours which fell outside of the values. The representatives confirmed that the Trust was not tolerant of individuals who did not embrace and maintain the new culture. Trust representatives advised that individuals who did not adhere to the values were generally leaving.	
1.5	Learners are in an environment that delivers safe, effective, compassionate care and prioritises a positive experience for patients and service users.	

It was reported by Trust representatives that most DPTs would be comfortable for friends and family to be treated in the department. The Trust advised that there had been improvements to the red Yes, please cell pathway and the handover since the General Medical Council see H1.5 (GMC) National Training Survey (NTS) results in 2022. It was noted that DPTs were appropriately supervised and DPTs received a good guality induction. The Trust reported that it believed that red cell patients received good quality care. Trust representatives advised the review panel that the Trust offered excellent red cell learning opportunities for DPTs as they had a large number of patients with sickle cell disease and rare conditions. Trust representatives advised that there had been improvements to the specialised haemoglobinopathy service, and they had acted on the concerns raised previously. It was advised that changes had been made across the Trust and that the Divisional Medical Director had been working closely with the department. The Trust confirmed that there had been good managerial and executive support for the improvement work. The Trust representatives advised that there was a commitment, from the Executive Team and across all of the staff groups, to ensure the sickle cell pathway functioned well and offered a high-quality service. The review panel was informed that the work on the sickle cell pathway had been particularly challenging. However, Trust representatives had acknowledged that this work needed to be done rapidly. It was noted that consultant recruitment to this pathway was historically challenging, however, the Trust advised that they felt it was important to recruit the right people for the culture of the team. The Trust representatives reported that they had been working well with Imperial College Healthcare NHS Trust. The Trust advised that there had been improvements to the handover process with Hammersmith Hospital (HH). It was reported that there was a weekly Multi-Disciplinary Team (MDT) meeting on Yes, please Tuesdays which was linked with HH. It was advised that the MDT see H1.5 meeting was for complex cases and was therefore a valuable learning opportunity for DPTs. The review panel enquired about protected time for DPTs to attend this MDT meeting and the Trust confirmed that there was a dedicated red cell DPT role which included protected time to attend the MDT meeting. It was advised that other DPTs on the on-call rota were encouraged to attend if they were able to. The DPT representative confirmed that the DPTs had been able to attend the MDT meetings.

	Trust representatives noted that improvement had been made to the Emergency Medicine Department (ED) pathway for haematology patients. It was advised that the pathway involved an intensive care consultant, an acute medicine consultant and an ED consultant with corresponding specialty higher DPTs for each specialty. It was also reported that the outlier bleep referral process between acute medicine and haematology had improved. The Trust advised that out of hours there was a DPT on-call at home who could come in if needed. It was reported that if a haematology patient came into the hospital out of hours, they were seen by the medical DPT on-call. It was noted that the medical DPT on-call could send a referral for a haematology doctor to review these patients. It was advised by Trust representatives that there had not been any instances where patients had not been seen and it was confirmed that all patients were seen by a consultant within 24 hours. The Trust also	
	were seen by a consultant within 24 hours. The Trust also advised that there was a DPT handover of patients between shifts. It was also confirmed that previous issues relating to remote access to clinical systems whilst on-call had been resolved.	
	The Trust representatives informed the review panel that at a recent NHS England review it was reported the team were passionate and hardworking and that the review had found areas of good practice which could be shared with other organisations. It was also noted that reportedly NHS England had recognised a positive culture of learning as part of this review.	
	All staff, including learners, are able to speak up if they have any concerns, without fear of negative consequences.	
1.7	The Trust representatives reported that they felt the DPTs were aware that the consultant body were responsive to the concerns they had raised.	

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, inter- professional approach to education and training.	
	The Trust representatives discussed the Trust Board involvement in the improvement work and reported that the Trust	

	Board were aware of the issues and plans to address them, and it was confirmed that the Trust Quality Committee were overseeing this work. The review panel enquired about Non- Executive Director (NED) support for education and the Trust representatives reported that there was not a NED specifically for education but advised that it could be explored. The Trust reported that NEDs had attended some of the 'junior doctor' forums and the Postgraduate Medical Education Team (PGME) were well supported by the NEDs.	
	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 reported that overall, there had been considerable improvements since the previous HEE quality review in March 2022. The review panel was advised by the Trust representatives that they felt they had demonstrated great improvement against all three GMC Enhanced Monitoring conditions. It was also advised that DPT feedback had been strongly considered to measure the improvement. The Trust representatives commended the efforts of the haematology team for their hard work and noted that the issues had been taken very seriously.	
2.6	The Trust advised that the Executive Team had been very responsive and helpful. The DPT representative also advised that the Executive Team had been very responsive and the DPTs felt they were able to raise concerns at any level. It was advised by the DPT representative that the department was receptive to and encouraged DPTs to report concerns. The DPT representative reported that DPTs were aware of who they could raise concerns to. It was also noted by the DPT representative that they had seen evidence of changes being taken forward.	
	The Trust representatives advised that there was a monthly 'junior doctor' forum in which all DPTs were invited to attend. It was noted that the DPTs could also feedback to this forum via their DPT representatives. The Trust representative confirmed that the Medical Director, Guardian of Safe Working Hours and Chief Executive Officer attended the forums along with the Heads of Human Resources (HR) and Finance. It was noted that the forums were well attended.	
	The sustainability of the improvements made was discussed and the Trust reported that there were clear structures in place to maintain the changes and allow issues to be escalated. The review panel was informed by the Trust that they felt positive about the improvements and the structure of the team and were confident that the changes would be sustained going forward. It	

was advised that the Trust had taken a holistic approach to making improvements and it was hoped that this would help to ensure the sustainability of the changes. Trust representatives also reported that the most significant change had been the recruitment of more consultants to stabilise the workforce at this level. It was noted that this had improved many of the issues and had provided a more stable system to ensure the changes were sustained long-term. The Trust reported that there was a regular meeting with the Divisional Medical Director and PGME to discuss and monitor the improvement work. The Trust representatives also advised that there was a functional Local Faculty Group (LFG) meeting and DPTs had access to supervisors and the Clinical Director directly to provide feedback and raise concerns if needed.	

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. The DPT representative advised that the support offered by the consultants extended beyond the clinical training environment and they felt that the consultants offered holistic wellbeing support for personal issues. It was reported by the DPT representative that there was recognition that wellbeing outside of the work environment was important as well. The DPT representative advised that this had made the DPTs feel comfortable discussing personal issues with the consultants and they felt that the response to this had been supportive, and any necessary adaptations had been implemented easily.	
3.5	Learners receive clinical supervision appropriate to their level of experience, competence and confidence, and according to their scope of practice. The Trust representatives advised that DPTs had reported that the majority of the consultants had been friendly and available to answer questions. It was also reported that DPTs were generally happy with the clinical advice they had received from consultants which was largely within the guidelines. The Trust representatives informed the review panel there had been several personnel changes within the consultant body and therefore previous issues around inappropriate clinical advice and behaviour had been resolved. The review panel was advised by the Trust that it had invested in personnel and workforce transformation. It was added that the Trust had recruited high quality consultants and as a result the	

	<ul> <li>consultant body was now more robust, ensuring DPTs were well supervised. It was also advised that education was a priority across the consultant body and the workload was more evenly distributed allowing more stability if staff were on leave or left the Trust.</li> <li>The Trust reported that the department was well staffed and therefore DPTs had good supervision for clinics. The review panel was informed that a named consultant was usually available for laboratory supervision. It was also confirmed that consultants did a ward round with the DPTs for the haematology patients in the ED.</li> </ul>	Yes, please H3.5
	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.	
3.7	The review panel was informed by the Trust representatives that they had achieved a 100% exam success rate in the recent exams for the DPTs. The Trust praised the hard work of the DPTs and also commended the supervisors for their efforts to support the DPTs in their exams.	
	Learners receive an appropriate, effective and timely induction and introduction into the clinical learning environment.	
3.9	The Trust representatives reported that DPT feedback for departmental induction had been positive. The review panel was informed that the DPTs had described their start to the department as warm and welcoming, with DPTs commenting that they understood their role in the team and felt the team really cared about their experience. The Trust advised that the education lead led the departmental inductions, which consisted of a face-to-face meeting with DPTs to deliver a presentation of essential information. It was noted that DPTs were informed about the relevant guidelines for haematology and where to find them on the Trust intranet. The Trust representatives also confirmed that they provided the DPTs with a hard copy of the necessary guidelines. The Trust informed the review panel that the guidelines were reviewed regularly, and the department ensured the guidelines were up to date.	
	It was reported that the feedback from the Trust induction had generally been positive, but it was noted that the response rate for Trust induction feedback was usually low. However, the Trust confirmed that any issues identified in the feedback were resolved. The Trust representatives advised that there had been feedback from the latest Trust induction and DPTs reported that log-in information had not been received in good time. The Trust	

representatives advised that they welcomed any feedback DPTs had to improve the Trust induction.	
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HEE Standard	HEE Quality Domain 4 Developing and Supporting Supervisors	Requirement Reference Number
	Formally recognised supervisors are appropriately supported, with allocated time in job plans/ job descriptions, to undertake their roles.	
4.2	The Trust representatives assured the review panel that the supervisors were well supported. It was reported that the College Tutor and supervisors had sufficient time allocated in their job plan for the role. It was advised that the College Tutor and supervisors were in regular contact, and it was felt that there were good relationships at divisional level. The Trust representatives also reported that they ensured there was time allocated in the leadership team's diaries to mentor and support the consultants.	

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	The Trust representatives informed the review panel that the department offered weekly teaching. The Trust reported that DPT feedback indicated that the morphology teaching had been very good. Trust representatives advised that the morphology teaching was consultant-led and the attendance from DPTs was very high. It was also reported that DPTs had the opportunity to present complex cases at the thrombosis meeting on Wednesdays. The review panel was informed that they also offered ad-hoc teaching and ran mock exams for the DPTs who were due to sit exams.	
5.1	When discussing laboratory experience for DPTs the Trust reported that there was a laboratory rota with a named consultant covering every day. It was noted that there was a laboratory DPT, and the consultant liaised with them and covered any work if the DPT was busy. The Trust representatives advised that the laboratory consultant went to the laboratory in the afternoon to review and sign off the DPT's work. It was noted that the consultants provided supervision based on the ability and training level of the DPT.	
	The Trust informed the review panel that the DPTs had access to the paediatric red cell clinic and confirmed that this was protected time when DPTs had this scheduled on their rota. The review	

	panel was informed that DPTs benefitted from exposure to a variety of cases. It was also noted that consultants always offered DPTs the opportunity to be involved with rare cases when they arose.	
	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.	
5.3	The Trust representatives reported that the weekly complex coagulation meeting with HH was a good learning opportunity. It was also advised that the Trust had been working closely with Imperial College Healthcare NHS Trust for the sickle cell service. It was reported that the Trusts had been working together to devise a system-wide improvement to the service. It was acknowledged that there was still a lot of work to be done to improve the trust that the patient community had in the service, which had been negatively affected in the past.	
5.4	Placement providers proactively seek to develop new and innovative methods of education delivery, including multi- professional approaches. The review panel asked about the Trust's plans and preparations for the redistribution of training posts outside of London. The Trust advised that they had started discussions around this with the College Tutor quite early and reported that the Trust would be a great learning environment for both HEE and non-HEE doctors. The review panel was informed that the Trust had covered some of the service provision workload so that DPTs could be released for educational opportunities such as clinics. It was advised that the Trust had carried out work on workforce planning and had implemented an Advanced Nurse Practitioner (ANP) role within the day unit. It was reported that the ANP had taken on some of the workload and was being trained to support the bone marrow clinic as well. The Trust representatives also reported that the department had taken on a research fellow post in myeloma and confirmed this clinical fellow had also taken on some of the workload. In addition to this, it was also confirmed they had recruited a Physician Associate and an additional Locally Employed Doctor.	
	Trust representatives also advised that the Clinical Reference Group for north west London had also been exploring options for the redistribution at a sector-wide level. It was noted that the group had agreed it was a good opportunity to set up a Certificate of Eligibility for Specialist Registration (CESR) programme.	

	Timetables, rotas and workload enable learners to attend planned/ timetabled education sessions needed to meet curriculum requirements.
	The Trust representatives informed the review panel that all study leave requests, particularly leading up to exams, had been granted.
5.6	The review panel was advised that the backlog of cases in the laboratory had been cleared. It was noted that the DPT workload was reviewed to ensure that workload was not duplicated, as had occasionally been the case. The Trust also advised that all bone marrow films were now reported at The Royal Marsden NHS Foundation Trust. It was reported that the DPTs covered urgent bone marrow trephines, inpatient bone marrow films and any particularly interesting cases. Trust representatives informed the review panel that this had enabled the DPTs to gain good experience without the additional backlog of work which they had previously found challenging.
	It was also reported that the DPTs had been allocated protected time for administrative work to ensure they had sufficient time to complete post-clinic administration such as letters and liaising with other departments.

HEE Standard	HEE Quality Domain 6	Requirement Reference Number
	Domain not discussed at this review	

## Report Approval

Quality Review Report completed by		
Name	Rebecca Bennett	
Role	Learning Environment Quality Coordinator, Health Education England	
Review Lead		
Name	Dr Elizabeth Carty	
Role	Deputy Postgraduate Dean, Health Education England	
Signature	Elizabeth Carty	
Date signed	27 October 2022	

HEE Authorised Signatory			
Name	Dr Gary Wares		
Role	Postgraduate Dean, North London, Health Education England		
Signature	Gary Wares		
Date signed	18 November 2022		

Final Report submitted to organisation	18 November 2022	
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