

# HEE Quality Interventions Review Report



## **Pan-London Audio Vestibular Medicine Programme Programme Review Learner Review**

**Pan-London**  
**Date of Review/Intervention: 12 December 2022**  
**Date of Final Report: 1 February 2023**

## Review Overview

### Background to the review

This programme review of the London Audio Vestibular Medicine programme was scheduled as an exploratory review of the learner experience within the placements in London.

Trusts in scope at this review included:

- University College London Hospitals NHS Foundation Trust
- Great Ormond Street Hospital for Children NHS Foundation Trust
- North East London NHS Foundation Trust
- St George's University Hospitals NHS Foundation Trust
- Guy's and St Thomas' NHS Foundation Trust
- Epsom and St Helier University Hospitals NHS Trust
- Royal Surrey NHS Foundation Trust

Due to the size of the programme and number of postgraduate doctors in placements at various sites within London, it was difficult to obtain any meaningful intelligence from the General Medical Council's National Training Survey (GMC NTS) to better understand any issues within the programme or areas of good practice. Therefore, HEE will be undertaking a programme review inviting all postgraduate doctors within the London Audio Vestibular Medicine programme to share feedback in an anonymous forum. This was undertaken in the form of a Learner Review and will provide the opportunity for HEE to explore the learner experience of the programme and identify any areas of concern and areas of good practice within all placements in London. A concerning PSBU comment was received in the GMC NTS 2022 which prompted a more general discussion around the Audio Vestibular Medicine programme and any intelligence available.

Any Mandatory Requirements identified at this programme review will be allocated equally to all placement providers with Audio Vestibular Medicine postgraduate doctors in training.

### Subject of the review:

Audio Vestibular Medicine

### Who we met with

The review panel met with nine Doctors in Postgraduate Training across the London Audio Vestibular Medicine programme.

### Evidence utilised

No evidence was requested in the preparation for this review.

## Review Panel

Role	Name, Job Title
Quality Review Lead	Dr Elizabeth Carty Deputy Postgraduate Dean, North London
Specialty Expert	Catherine Bryant Deputy Head of the London School of Medicine
Lay Representative	Jane Gregory Lay Representative
HEE Quality Representative	Nicole Lallaway Learning Environment Quality Coordinator
Supporting roles	Kiera Cannon Quality, Patient Safety and Commissioning Officer

## Executive Summary

Health Education England scheduled this programme review to explore the Audio Vestibular Medicine programme due to limited learner feedback, owing to the small number of trainees on the programme available on the quality of the programme and the experiences of Doctors in Postgraduate Training (DPTs).

The review panel were pleased to hear that DPTs felt well supported by the consultants across the programme and that they were felt to be approachable. It was also good to hear that DPTs felt valued by the Trusts they worked for.

However, the review panel identified the following areas of improvement for delivering the programme:

- administrative time was not felt to be sufficient for the workload of DPTs when writing up clinic letters, and this issue was impacted by the varying expectations on the content and format of clinic letters across different Trusts within the programme,
- subspecialty secondment sessions were also scheduled during timetabled administrative time.

Further details on the Mandatory Requirements and Recommendations from this review can be found on pages 4-6. Please note that all Mandatory Requirements and Recommendations will be allocated to all Trusts delivering training of the London Audio Vestibular Medicine programme.

## 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
All Mandatory Requirements and Recommendations will be allocated to all Trusts delivering training of the London Audio Vestibular Medicine programme.		
AVM1.1	The review panel were pleased to hear that Doctors in Postgraduate Training (DPTs) perceived that improvements were made within certain Trusts on the programme around some consultant behaviours, however	The Trust is required to provide training to clinical supervisors on how to provide effective feedback to DPTs.  Please submit progress against this action by the next reporting

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	HEE would like the Trust to develop consultants in their roles as educators to assure improvements have been made.	cycle on the Quality Management Portal (QMP).
AVM5.6a / AVM5.6b	The review panel heard that DPTs did not have adequate time in their rota for administrative work including writing up clinic letters after patient reviews. This was further impacted by the variations in expectations of different Trusts for the format and content of clinic letters, which meant that DPTs had to re-learn how to write letters and this took a considerable amount of time.	<p>The Trust is required to adjust DPTs timetables to ensure DPTs are not completing clinic letters in the evenings and weekends. The Trust is also required to develop guidance for DPTs at departmental induction about the format and content of clinic letters.</p> <p>Please submit progress against this action on the QMP by the next reporting cycle.</p>
AVM5.6c	The review panel heard that DPTs were asked to undertake subspecialty secondment sessions during their administrative time, which placed further pressure on DPTs with the completion of clinic letters.	<p>The Trust is required to ensure that DPT subspecialty secondment sessions are not scheduled during their timetabled administrative sessions.</p> <p>Please submit progress against this action on the QMP by the next reporting cycle.</p>

## Immediate Mandatory Requirements

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

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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
AVM1.7a	HEE Quality Domain 1 Learning Environment and Culture	The Trust is recommended to encourage Doctors in Postgraduate Training to exception report if they work late or on the weekends to write clinic letters.
AVM1.7b	HEE Quality Domain 1 Learning Environment and Culture	HEE is recommended to raise the idea of a forum for sharing feedback and concerns for Audio Vestibular Medicine Doctors in Postgraduate Training at the Specialist Training Committee (STC).
AVM5.3	HEE Quality Domain 5 Delivering Programmes and Curricula	The Trusts and the HEE Health Education Team (HET) are recommended to work carefully with University College London (UCL) to distribute details of the UCL Diploma to Doctors in Postgraduate Training as soon as possible.

## 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	N/A	N/A

## HEE Quality Domains and Standards for Quality Reviews

HEE Standard	HEE Quality Domain 1 Learning Environment and Culture	Requirement Reference Number
1.1	<p><b>The learning environment is one in which education and training is valued and championed.</b></p> <p>The review panel heard from some Doctors in Postgraduate Training (DPTs) in Audio Vestibular Medicine that since the programme review was requested, it was felt that previous issues around consultant behaviours within certain Trusts had improved and that from daily interactions and discussions among DPTs, that things had improved.</p>	Yes, please see AVM1.1
1.3	<p><b>The organisational culture is one in which all staff are treated fairly, with equity, consistency, dignity and respect.</b></p> <p>The review panel were pleased to hear that DPTs felt they were valued members of their teams, and that they felt they worked well with members of the wider multidisciplinary team (MDT).</p>	
1.7	<p><b>All staff, including learners, are able to speak up if they have any concerns, without fear of negative consequences.</b></p> <p>DPTs reported that they were aware of the exception reporting process as they were informed during inductions. However, the review panel heard that DPTs did not exception report when they worked late or on the weekends to write clinic letters.</p> <p>The review panel heard from some DPTs that the review was beneficial to provide a forum for DPTs to hear about experiences between the wider cohort, and that the majority did not feel they had open discussions between the more senior and newer DPTs within Audio Vestibular Medicine.</p>	<p>Yes, please see AVM1.7a</p> <p>Yes, please see AVM1.7b</p>

HEE Standard	HEE Quality Domain 2 Educational Governance and Commitment to Quality	Requirement Reference Number
	This domain was not discussed at the review.	

HEE Standard	HEE Quality Domain 3 Developing and Supporting Learners	Requirement Reference Number
3.5	<b>Learners receive clinical supervision appropriate to their level of experience, competence and confidence, and according to their scope of practice.</b>	



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	<p>The review panel were pleased to hear that the majority of DPTs received a good quality of clinical supervision by the consultants within the various departments across the Audio Vestibular Medicine programme. The review panel were also pleased to hear that the majority of consultants were felt to be supportive and approachable.</p>	
3.6	<p><b>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.</b></p> <p>The review panel were pleased to hear that the vast majority of DPTs in Audio Vestibular Medicine met with their Educational Supervisor (ES) regularly, with some DPTs reportedly meeting their ES between 2-3 times per week.</p>	
3.9	<p><b>Learners receive an appropriate, effective and timely induction and introduction into the clinical learning environment.</b></p> <p>The review panel heard from some DPTs that their Trust inductions were good, and that they had time to adjust to a new placement in the first couple of weeks of the placement. It was noted however, that some DPTs did not meet the wider members of the department in one go as they did not have a walkaround at the beginning of the placement, for example meeting administrative team, managers and secretaries. As a result, some DPTs felt that it took longer to identify how to do things within a new placement, but it was noted that as a cohort, they had a good support systems in place.</p>	

HEE Standard	HEE Quality Domain 4 Developing and Supporting Supervisors	Requirement Reference Number
	This domain was not discussed at the review.	

HEE Standard	HEE Quality Domain 5 Delivering Programmes and Curricula	Requirement Reference Number
5.3	<p><b>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.</b></p> <p>The review panel heard that some DPTs missed the deadline for the Diploma at University College London (UCL) as they received</p>	



	<p>the details for the Diploma too late for timely registration. This meant they some DPTs had to re-apply for the course in the following training year when it was felt they were busier whilst on their placement.</p>	<p>Yes, please see AVM5.3</p>
5.6	<p><b>Timetables, rotas and workload enable learners to attend planned/ timetabled education sessions needed to meet curriculum requirements.</b></p> <p>The review panel heard that the Audio Vestibular Medicine programme was solely outpatient-based, so the majority of clinical activity within this specialty was undertaken in clinics rather than on wards within the hospitals. Some DPTs reported that they anticipated that the specialty would have a good work-life balance due to the nature of undertaking work during the week rather than during the night and on weekends, however it was found that DPTs spent a large proportion of their personal time completing administrative tasks such as clinic letters.</p> <p>The review panel heard that DPTs felt the clinics were generally busy, however there was some variation in experiences across the Trusts. DPTs reported that in a specialist hospital like Great Ormond Street Hospital for Children, clinics may average about two patients per clinic, however for a larger District General Hospital (DGH) or an adult clinic, DPTs may see around 5-6 patients. This was felt to be busy due to the nature of the specialty, where DPTs may need to go through a thorough medical history with patients, wait for further testing and test results, and sometimes wait for support from consultants where necessary. In addition, after the appointments DPTs were required to write up often detailed patient letters which was time-consuming. Some DPTs reported that their Educational Supervisors told DPTs to see five patients per clinic, however sometimes the administrative team sometimes placed additional patients in clinics which would bring this number up to 6 or 7 patients.</p> <p>The review panel heard that the DPTs in Audio Vestibular Medicine did not have adequate administrative time within their rota, especially with the volume of patients they were required to see in the clinic, and that that vast majority of DPTs spent their evenings and weekends completing their administrative tasks, mainly finishing clinic letters for patients.</p> <p>DPTs reported that there were variations between the expectations of the format and content of clinic letters between different hospitals on the programme, and that this added to the administrative burden on DPTs. The review panel heard that there was limited guidance for DPTs on clinic letters and that particularly when DPTs were between specialty training grade 3-5 (ST3-5), a large proportion of time was spent working out these</p>	<p>Yes, please see AVM5.6a</p> <p>Yes, please see AVM5.6b</p>

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	<p>expectations and writing up clinic letters. It was felt that when DPTs got to ST6-7, this tended to become easier for DPTs to complete. The review panel heard that due to the nature of the specialty, that expectations on styles of clinic letters varied due to previous experiences of consultants and the DPTs, whereby colleagues who worked in Neurology previously and consultants who worked in a Surgical specialty previously had varying expectations and approaches to clinic letters.</p> <p>The review panel heard from the majority of DPTs that part of their curriculum included undertaking subspecialty secondment sessions to rotate within different specialties, however it was reported that in some Trusts, DPTs were asked to do these rotations during the administrative time which placed additional pressures on the DPTs. The majority DPTs reported that some departments enable DPTs to drop one of their clinics to undertake the subspecialty secondment, however others tell DPTs to consider fitting this into their administrative time on the rota. The review panel heard that DPTs would often undertake a subspecialty secondment session during their working week rather than doing blocks of a rotation, and that some subspecialty secondments require 10-20 sessions so these could take place over 3-6 months.</p>	<p>Yes, please see AVM5.6c</p>
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HEE Standard	HEE Quality Domain 6 Developing a sustainable workforce	Requirement Reference Number
	This domain was not discussed at the review.	

## Report Approval

Quality Review Report completed by	
Name	Nicole Lallaway
Role	Learning Environment Quality Coordinator

Review Lead	
Name	Dr Elizabeth Carty
Role	Deputy Postgraduate Dean, North London
Signature	Dr Elizabeth Carty
Date signed	19 January 2023

HEE Authorised Signatory	
Name	Dr Gary Wares
Role	Postgraduate Dean, North London
Signature	
Date signed	31 January 2023

Final Report submitted to organisation	1 February 2023
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