

HEE Quality Interventions Review Report



**West London NHS Trust (Ealing Child and Adolescent Mental Health Services)
Core Psychiatry Training and Child and Adolescent Psychiatry
Learner and Educator Review**

**London – North West London
Date of Review/Intervention: 15 December 2022
Date of Final Report: 31 January 2023**

Review Overview

Background to the review

A Risk-based Learner and Educator Review was requested following the 2022 General Medical Council (GMC) National Training Survey (NTS) results.

The following outliers were generated for Windmill Lodge, the Trust has confirmed that this site no longer exists, and all posts are now linked to Ealing Child and Adolescent Mental Health Services (CAMHS).

Core Psychiatry (Programme Group by Site):

Five red outliers in Overall Satisfaction, Clinical Supervision, Induction, Educational Supervision and Local Teaching. Nine pink outliers in Clinical Supervision out of hours, Reporting systems, Teamwork, Handover, Supportive environment, Adequate Experience, Educational Governance, Regional Teaching and Rota Design.

Child and Adolescent Psychiatry (Post Specialty by Site):

Three red outliers in Induction, Educational Supervision and Local Teaching. Nine pink outliers in Overall Satisfaction, Clinical Supervision, Clinical Supervision out of hours, Reporting systems, Teamwork, Supportive environment, Adequate Experience, Educational Governance and Regional Teaching.

There was a Senior Leaders Engagement Visit (SLEV) in November 2018 to assess whether it was appropriate to advise that the Trust be taken out of GMC enhanced monitoring. The 2018 GMC NTS results demonstrated considerable improvement, and this was corroborated by other sources of trainee feedback. Following discussions between Health Education England (HEE) and the GMC it was agreed that the enhanced monitoring process should end in September 2018. HEE changed the review type from an on-site visit to SLEV to discuss the improvements made by the Trust and offer support to sustain them.

Subject of the review:

Core Psychiatry Training and Child and Adolescent Psychiatry

Who we met with

Four doctors in postgraduate training (DPTs) working in the department from the following programmes: Core Psychiatry Training and Child and Adolescent Specialty Higher Training. Two Clinical and Educational Supervisors in Ealing Child and Adolescent Mental Health Services (CAMHS)

Medical Director

Director of Medical Education

Medical Education Manager

Guardian of Safe Working Hours

Medical Director

Clinical Director

Educational Lead

Evidence utilised

Medical Education Committee Minutes- December 2021, March 2022, June 2022 and November 2022

Medical Advisory Committee Minutes November

Ealing Junior Senior Meetings November 2022

Ealing CT1-2 August 2022 rota

Evidence of teaching sessions and attendance lists

Exception report summary

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 Bhanu Williams, Deputy Postgraduate Dean, North West London, Health Education England (London)
Specialty Expert	Dr Vivienne Curtis, Head of the London Specialty School of Psychiatry, Health Education England (London)
Learner Representative	Dr Maggie Lambert, Child and Adolescent Psychiatry Learner Representative
Lay Representative	Sarah-Jane Pluckrose, Health Education England (London)
HEE Quality Representative	Rebecca Bennett, Learning Environment Quality Coordinator, Health Education England (London)
Supporting roles	Louise Lawson, Quality Patient Safety and Commissioning Officer, Health Education England (London)

Executive Summary

The review panel thanked the Trust for accommodating the review. The review panel was appreciative for the preparation that the Trust had done prior to the review. The review panel was unable to comment about specialty higher training specifically due to lack of sufficient specialty higher doctors in postgraduate training (DPTs) attending the review.

The review panel was pleased that DPTs reported they had good clinical supervision and the majority had experienced a thorough induction. The review panel noted that the supervisors seemed very committed to delivering high quality training and offered good flexibility to accommodate the individual training needs of the DPTs. The review panel also noted that there was good evidence that most issues arising were dealt with in a timely fashion.

The review panel were concerned about the challenges DPTs had experienced with the case load and complexity of cases. The DPTs advised they were supported by the supervisors for this but noted it was still challenging. The review panel also noted some issues where there was a lack of substantive supervisors and no specialty higher post which made DPTs more exposed. The review panel encouraged the Trust to ensure specialty higher and core DPTs were placed in the same team to offer the best possible experience for the DPTs

The review panel acknowledged there was ongoing work to improve supervisor cover and advised better forward planning for staffing situations which do not follow the usual pattern would alleviate uncertainty for the DPTs.

Overall, the review panel commented that it was clear the department was making great efforts to support the DPTs, and the quality of the education and training provided was good. 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
CPT3.5a and CAP3.5a	Doctors in postgraduate training (DPTs) noted that the case load for some of the posts, both the volume and the complexity of cases, was very demanding	The Trust must review the DPT caseload to ensure that it is manageable and appropriate for their stage of training and within their scope of practice.

	<p>despite the support of the consultants. Some of the DPTs advised that they felt they had been allocated complex cases which were slightly beyond what they would have expected to be doing at their level but advised that they were well supported by the supervisors.</p> <p>It was advised that this was sometimes challenging and time consuming for DPTs, particularly where the cases involved complicated family communications. In addition to the impact on educational time, DPTs felt this was a lot for the DPTs to deal with and was sometimes quite emotionally challenging.</p>	<p>Please provide evidence of the outcome of this review and please also provide feedback from DPTs on this topic, via Local Faculty Group (LFG) meeting minutes, other junior/senior meeting minutes or other evidence.</p> <p>Please submit this evidence by 1 March 2023, in line with HEE's action plan timeline.</p>
CPT3.5b and CAP3.5b	<p>The review panel was informed by the Trust representatives that there were some doctors in postgraduate training (DPTs) who were not supervised by a clinical supervisor in their own team. The review panel was informed by DPTs that having a supervisor from another team was not ideal as they were not aware of all the cases.</p> <p>The Trust representatives informed the review panel that some of the supervisors had left which had caused issues with capacity. The Trust representatives noted that there had been issues with recruitment and maintaining the service, however Trust representatives noted that they had recently recruited to several full-time posts. The Trust representatives advised that they had recruited NHS locums and were planning on running</p>	<p>The Trust must ensure all DPTs receive clinical supervision appropriate to their level of experience, competence and confidence, and according to their scope of practice. Please provide evidence that all DPTs have access to a clinical supervisor within the specific team they are based in.</p> <p>The Trust should review the supervision arrangements for the next cohort of doctors in postgraduate training (DPTs) and ensure all DPTs have access to adequate clinical supervision to meet their training needs.</p> <p>Please also provide feedback from DPTs on this topic, via Local Faculty Group (LFG) meeting minutes, other junior/senior meeting minutes or other evidence.</p>

	recruitment for a substantive consultant in February 2023.	Please submit this evidence by 1 March 2023, in line with HEE's action plan timeline.
--	--	---

Immediate Mandatory Requirements

Requirement Reference Number	Review Findings	Required Action, Timeline and Evidence
N/A		
Requirement Reference Number	Progress on Immediate Actions	Required Action, Timeline 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
CPT3.5c and CAP3.5c	3.5	Where possible the review panel recommends that the Trust groups specialty higher and core doctor in postgraduate training (DPT) posts in the same team to improve the DPT experience.

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
1.1	<p>The learning environment is one in which education and training is valued and championed.</p> <p>Some doctors in postgraduate training (DPTs) advised that they would recommend specific posts at the Ealing Child and Adolescent Mental Health Services (CAMHS) site but noted that they would not feel comfortable recommending posts where the workload was very busy and there was limited support from other DPTs and medical staff.</p>	
1.3	<p>The organisational culture is one in which all staff are treated fairly, with equity, consistency, dignity and respect.</p> <p>The DPTs confirmed that they had not witnessed or experienced any instances of bullying or undermining behaviour at the Ealing CAMHS site.</p>	
1.5	<p>Learners are in an environment that delivers safe, effective, compassionate care and prioritises a positive experience for patients and service users.</p> <p>The DPTs advised that due to significant service pressure, they would be comfortable with friends and family being treated by some but not all Ealing CAMHS teams.</p> <p>Some DPTs felt there was also a lack of communication and teamwork for the cases they were working on and advised that with the high service demand there was not enough time to hold Multi-Disciplinary Team (MDT) meetings.</p>	
1.7	<p>All staff, including learners, are able to speak up if they have any concerns, without fear of negative consequences.</p> <p>The review panel was pleased to note that DPTs felt able to raise concerns and felt they were listened to with actions being put in place to make improvements where appropriate.</p>	
1.12	<p>The learning environment promotes multi-professional learning opportunities.</p> <p>The DPTs praised the support of the other professionals at the Ealing CAMHS site, including the nursing staff, Occupational</p>	

	Therapists and the Social Workers. The DPTs reported that the nursing staff were very experienced.	
--	--	--

HEE Standard	HEE Quality Domain 2 Educational Governance and Commitment to Quality	Requirement Reference Number
2.1	<p>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.</p> <p>The Trust representatives reported that they were recruiting a fulltime interim local tutor to support the existing one to ensure cover during periods of absence.</p>	
2.6	<p>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.</p> <p>The Trust representatives advised the review panel that there were a small number of posts at the Ealing CAMHS site but acknowledged that there had been a decline in performance in the 2022 General Medical Council (GMC) National Training Survey (NTS). The Trust representatives informed the review panel that the sites represented on the GMC NTS had not been correct and the Trust had worked with the Health Education Team (HET) to update the posts and ensure they were linked to the correct site.</p> <p>The Guardian of Safe Working Hours (GOSWH) reported that there had been some exception reports at the Ealing CAMHS site. It was advised that there had been four exception reports in September 2022, zero in October 2022 and three in November 2022. The review panel was informed by the GOSWH that these reports had been largely related to the duty DPT role. However, it was acknowledged by the GOSWH that they were aware changes had been made therefore the number of exception reports may show improvement. The GOSWH reported that they had encouraged DPTs to exception report around this change as it would provide useful feedback. DPTs confirmed that they were informed about exception reporting in their induction. The review panel was informed by DPTs that they often did not feel the need to exception report for their day-to-day posts. It was advised that there were some DPTs who were working overtime when on-call but not all were exception reporting. DPTs advised that it was sometimes challenging to complete the reports following a busy</p>	

	shift and they did not want to spend more time looking for the form and completing it.	
2.8	<p>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).</p> <p>It was advised by the Trust representatives that following the Covid-19 pandemic there had been considerable issues with increased service demand and staff turnover. The Trust representatives informed the review panel that there was an ongoing service transformation taking place and noted that there had been challenges with this. The review panel was informed by the Trust representatives that managing the service transformation had been a large piece of work. The Trust representatives confirmed that the DPTs had been involved in the service transformation process and had provided feedback on the changes made. It was also advised that the DPTs had been included in team and service away days. It was advised that the away days aimed to support staff engagement in the service changes. The Trust representatives felt that despite the challenges the service had begun to consolidate and move forward.</p>	

HEE Standard	HEE Quality Domain 3 Developing and Supporting Learners	Requirement Reference Number
3.5	<p>Learners receive clinical supervision appropriate to their level of experience, competence and confidence, and according to their scope of practice.</p> <p>The Trust representatives reported that from August 2022 they had implemented individual plans for DPTs in terms of supervision requirements and offered DPTs choices about which services would be most relevant to their training needs. The Trust representatives reported that weekly supervision meetings between clinical supervisors and DPTs were happening. DPTs confirmed that clinical supervision had improved and noted that weekly supervision meetings were accessible and of good quality. Some DPTs advised that when the service was very busy the supervision meetings were more patient focused rather than education focused, but it was noted that this had improved. Some DPTs reported that supervision had been an issue when they first started as there was a lack of substantive consultants and high demand of the service. However, it was noted that changes had been made and this had improved.</p>	

	<p>The majority of DPTs reported that they would recommend their training post to colleagues. However, DPTs noted reservations for some of the posts as the caseload, both the volume and the complexity of cases, was very demanding despite the support of the consultants. Some of the DPTs advised that they felt they had been allocated complex cases which were slightly beyond what they would have expected to be doing at their level but advised that they were well supported by the supervisors. The DPTs advised the review panel that the nature of the cases at the Ealing CAMHS site was very individualistic, and they felt there was an expectation for the DPTs to manage and hold responsibility for these complex cases. It was advised that this was sometimes challenging and time consuming for DPTs, particularly where the cases involved complicated family communications. In addition to the impact on educational time, DPTs felt this was a lot for the DPTs to deal with and was sometimes quite emotionally challenging. DPTs advised that the supervisors were very supportive with complex cases however it was noted that even with all of the support there was still a considerable amount of pressure for the DPTs.</p> <p>The review panel was informed by the Trust representatives that there were some DPTs who were not supervised by a clinical supervisor in their own team. The Trust representatives confirmed that there was a degree of cross cover across the different teams therefore the supervisors may not be aware of the cases in other teams. The review panel was informed by DPTs that having a supervisor from another team was not ideal as they were not aware of all the cases. The Trust representatives informed the review panel that some of the supervisors had left which had caused issues with capacity. The review panel was informed by the Trust representatives that this had left DPTs feeling unsettled. The Trust representatives noted that there had been issues with recruitment and maintaining the service, however Trust representatives noted that they had recently recruited to several full-time posts. The Trust representatives advised that they had recruited NHS locums and were planning on running recruitment for a substantive consultant in February 2023. It was confirmed by Trust representatives that all teams now had an NHS locum consultant in post.</p> <p>The review panel advised that consultant cross covering arrangements could be improved further, particularly for consultants who worked less than fulltime. DPTs confirmed that emergency cover and escalation pathways were in place but noted that the day-to-day clinical supervision cover could be improved. The supervisors advised that they had tried to ensure cover was arranged for DPTs where their supervisor</p>	<p>Yes, please see CPT3.5a and CAP3.5a</p> <p>Yes, please see CPT3.5b and CAP3.5b</p> <p>Yes, please see CPT3.5b and CAP3.5b</p>
--	---	--

	<p>had announced they were leaving however the supervisors acknowledged this had taken some time to gain approval for the arrangements. The supervisors also advised the review panel that they were reviewing the timing of announcements that staff were leaving to help minimise uncertainty for DPTs whilst arrangements were being made. The supervisors commented that they believed this issue would lessen when more substantive consultants had been recruited.</p> <p>DPTs advised that there was not a higher and core DPT post in each team and reported that DPT post gaps were not always filled. DPTs informed the review panel that there were some Locally Employed Doctor (LEDs) but advised that there was sometimes a lack of middle grade presence on site. DPTs felt that having both a core and higher DPT in a team would allow the workload to be more easily distributed according to training level and ensure DPTs were not isolated. The DPTs advised that they were well signposted and were able to access support from the consultants however DPTs noted that despite the support they did not feel they were able to fully manage. The review panel also felt that the DPT experience would be improved where core and specialty higher posts could be in the same team.</p>	<p>Yes, please see CST3.5c and CAP3.5c</p>
3.6	<p>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.</p> <p>The Trust representatives reported that educational supervision was not delivered at the site as DPTs had their own educational supervisors at their respective programmes. The Training Programme Director (TPD) advised the review panel that they had been working to recruit supervisors into educational supervision roles, with the hope to ensure a better balance across the different Trusts. The TPD informed the review panel that they were trying to align the educational supervision roles to the specific Trust the DPTs were working at.</p>	
3.9	<p>Learners receive an appropriate, effective and timely induction and introduction into the clinical learning environment.</p> <p>The majority of DPTs reported that their induction and subsequent shadowing period had been good. Most DPTs advised that the induction had been very tailored to their needs, and they felt very supported. However, some DPTs reported that their experience had not been as good as their colleagues due to understaffing and noted it took a lot longer to get settled in the role.</p>	

HEE Standard	HEE Quality Domain 4 Developing and Supporting Supervisors	Requirement Reference Number
4.3	<p>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).</p> <p>The Trust representatives advised that the Director of Medical Education (DME) worked closely with the Clinical Directors (CDs) to ensure new consultants undertook clinical supervisor training as soon as possible.</p>	

HEE Standard	HEE Quality Domain 5 Delivering Programmes and Curricula	Requirement Reference Number
5.1	<p>Practice placements must enable the delivery of relevant parts of curricula and contribute as expected to training programmes.</p> <p>The review panel was pleased to hear positive feedback from DPTs about the access to and quality of educational opportunities. The DPTs advised that they had been able to access what was needed to meet curriculum requirements. The DPTs confirmed that they were able to attend regional teaching. DPTs reported that the teaching available was more focused on general adult psychiatry and they would have found CAMHS specific teaching useful.</p> <p>The Trust representatives reported that the local academic programme at the Ealing CAMHS site was relatively well established, and it was confirmed that the Trust was working on developing more trust wide teaching options for all medical staff to attend. The Trust representatives also confirmed there were opportunities for psychotherapy training and workshops. Some DPTs confirmed that the teams at the Ealing CAMHS site had been very flexible and accommodating of DPTs undertaking psychotherapy cases and offered opportunities for family therapy and Cognitive Behaviour Therapy (CBT).</p>	
5.4	<p>Placement providers proactively seek to develop new and innovative methods of education delivery, including multi-professional approaches.</p> <p>The Trust representatives advised that they had been developing an academic DPT post which incorporates leadership responsibilities. The Trust representative advised that they</p>	

	believed this role would have a positive impact on training for all DPTs.	
5.6	<p>Timetables, rotas and workload enable learners to attend planned/ timetabled education sessions needed to meet curriculum requirements.</p> <p>DPTs confirmed that they had been able to access protected education time. The review panel was informed by some of the DPTs that they were unable to take on new cases as they had no capacity in their caseload.</p> <p>The Trust representatives advised DPTs had fed back that the duty work system had not been working well. It was reported that the Trust had made changes to this and there was now one duty DPT per service rather than per team. It was advised that this meant the DPTs only had to be on duty once a month rather than once a week which had been the previous requirement. The Trust representatives advised the review panel that this role focused on placing referrals in the right team and confirmed there was consultant oversight of this every day. The Trust representatives advised that this change had been implemented recently and therefore the impact had not been measured yet, however it was noted that the early feedback from DPTs was positive. The Trust representatives advised that they planned to do some work to review the changes and suggested it could be an opportunity for DPTs to do quality improvement work.</p>	

HEE Standard	HEE Quality Domain 6 Developing a sustainable workforce	Requirement Reference Number
6.1	<p>Placement providers work with other organisations to mitigate avoidable learner attrition from programmes.</p> <p>The Trust representatives reported that DPTs were opting to stay at the Ealing CAMHS site for their training and after they had completed their training, which they took as a positive sign.</p>	

Report Approval

Quality Review Report completed by	
Name	Rebecca Bennett
Role	Learning Environment Quality Coordinator
Review Lead	
Name	Dr Bhanu Williams
Role	Deputy Postgraduate Dean, North West London
Signature	Bhanu Williams
Date signed	27 January 2023
HEE Authorised Signatory	
Name	Dr Gary Williams
Role	Postgraduate Dean, North London
Signature	Gary Williams
Date signed	30 January 2023
Final Report submitted to organisation	31 January 2023