

QUALITY MANAGEMENT RE VISIT REPORT

NORTHERN LINCOLNSHIRE & GOOLE HOSPITALS NHS FOUNDATION TRUST - DPOW

5th September 2014

VISITING PANEL MEMBERS

Mr Jon Hossain	Deputy Postgraduate Dean (CHAIR)
Dr Tony Arnold	Head of School of Medicine
Dr Elspeth Alstead	SAC Representative
Prof Sunil Bhandari	Deputy Head of the School of Medicine
Julie Platts	Quality Manager
Alison Poxton	Quality Coordinator

Specialties Visited: Gastroenterology

This report has been agreed with the Trust.

The Trust Visit Report will be published on HEYH Website

Conditions that are RAG rated as Amber, Red and Red* will be reported to the GMC as part of HEYH's Reporting process, the reports are published on the GMC website.

Date of First Draft	08/09/2014
First Draft Submitted to Trust	07/10/2014
Trust comments to be submitted by	
Final Report circulated	

CONDITIONS

Condition 1 (Continues from Condition 6 in October 2013 and condition 5 from February 2014 reports)

GMC Domain 1 – PATIENT SAFETY - Handover

School of Medicine (Gastroenterology)

As reported in the last two Trust QM visit reports there are medical outliers scattered across numerous wards at the DPOW site. However, on this occasion, all trainees interviewed in Gastroenterology reported the Web V system is a reliable tool to identify where the patients are located. Trainees reported that updates on patients' location occur in a timely fashion. The panel visited the Gastroenterology ward and witnessed the Web V system working effectively.

It was noted that clinical handover has been embedded in trainee rotas and that a larger handover room has been identified so all junior doctors can attend.

As progress has been made, the RAG rating has been down rated to amber.

Action To Be Taken:

The Trust to continue to embed the Web V software to ensure the current robust management of outliers in Gastroenterology continues.

RAG Rating:



Timeline: 31/03/2015

Evidence/Monitoring:

- 1) Trainee feedback at the next routine QM visit to NLAG in March 2015
- 2) Updates at the DME/Link APD meetings

Condition 2

GMC Domain 1 PATIENT SAFETY - Clinical supervision

School of Medicine (Gastroenterology)

There was one instance reported of a FY1 doctor instigating medication whilst working out of hours without supervision.

Action To Be Taken:

To ensure that FY1 doctors are not prescribing medication without supervision.

RAG Rating:



Timeline: 31/10/2014

Evidence/Monitoring:

Documented evidence that information relating to FY1 doctors to cease prescribing medication without supervision has been disseminated.

Condition 3 (continues from Condition 14 in the February 2014 report)

GMC Domain 1 – PATIENT SAFETY - Clinical Supervision

School of Medicine (Gastroenterology)

Core

The concerns raised in February have been fully addressed. Trainees were satisfied with their placements and described ward rounds that are led by senior colleagues and clinics being rescheduled to ensure senior support is available in the morning. The issue around the service being reliant on locum cover is much reduced and there were no reports of patient safety concerns. The trainees would be comfortable with family and friends being treated at the unit.

Action To Be Taken:

Continue to sustain the marked improvement. It is recommended this condition is closed in the October Dean's Report

RAG Rating:



Timeline: N/A

Evidence/Monitoring:

N/A

RAG guidance can be found at Appendix 1.

FINAL COMMENTS

The visit was well organised by the Trust and there was good attendance from both trainees and trainers. The trainees at all levels felt the Consultants were happy to teach, supportive and approachable. The Gastroenterology Consultants should be commended for the work they have done to bring about the improvements. In addition the Trust should be commended for the improvements that have occurred in the management of outliers and the effective use of the Web V system.

The majority of trainees would be happy for members of their family and friends to be treated at the hospital and to recommend the post to a colleague.

Phlebotomy support can be variable with reports of phlebotomists only attempting to obtain blood samples once. However, the general nurses offer excellent phlebotomy support with the nurses from Spain being particularly willing to cannulate, etc.

The trainers recognise that higher trainees have particular training individual, for example, endoscopy and if this targeted support can be capitalised upon this should attract high calibre senior trainees in the future.

The weekly discharge meetings where the Educational Supervisors and trainees meet to discuss discharge letters to determine if follow up is appropriate, a review of scans, etc. followed by an educational element was deemed to be good practice. The trainees felt that their opinions are listened to and it was noted that there is now a junior doctors' forum that is held once per month.

The panel strongly encourage the Trust to make the proposed third substantive appointment and recommend more collaboration with the Scunthorpe unit to provide a wider range of opportunities for the trainees.

Approval Status

Approved pending satisfactory completion of conditions set out in this report.

Signed on behalf of HEYH

Name: Mr Jon Hossain

Title: Deputy Postgraduate Dean

Date: 10/09/2014

Signed on behalf of Trust

Name: Dr Asif Naqvi

Title: Director of Postgraduate Medical Education

Date:

RAG Rating Guidance

The RAG rating guidance is based on the GMC RAG rating to ensure a consistent approach. The model takes into account impact and likelihood.

Impact

This takes into account:

- a) patient or trainee safety
- b) the risk of trainees not progressing in their training
- c) educational experience – eg, the educational culture, the quality of formal/informal teaching

A concern can be rated high, medium, or low impact according to the following situations:

High impact:

- patients or trainees within the training environment are being put at risk of coming to harm
- trainees are unable to achieve required outcomes due to poor quality of the training posts/ programme

Medium impact:

- trainees are able to achieve required outcomes, but the quality of education and training is recognised as requiring improvement
- patients within the training environment are receiving safe care, but the quality of their care is recognised as requiring improvement

Low impact:

- concerns have a minimal impact on a trainee's education and training, or the quality of provision for the patient.

Likelihood

This measures the frequency at which concerns arise eg. if a rota has a gap because of one-off last minute sickness absence, the likelihood of concerns occurring as a result would be low.

High likelihood:

- the concern occurs with enough frequency that patients or trainees could be put at risk on a regular basis. What is considered to be 'enough frequency' may vary depending on the concern eg. if rotas have consistent gaps so that there is a lack of safe cover arrangements, the likelihood of concerns arising as a result would be 'high'.

Medium likelihood:

- the concern occurs with enough frequency that if left unaddressed could result in patient safety concerns or affect the quality of education and training, eg. if the rota is normally full but there are no reliable arrangements to cover for sickness absence, the likelihood of concerns arising as a result would be 'medium'.

Low likelihood:

- the concern is unlikely to occur again eg. if a rota has a gap because of several unexpected sickness absences occurring at once, the likelihood of concerns arising as a result would be 'low'.

Risk

The risk is then determined by both the impact and likelihood, and will result in a RAG Rating, according to the below matrix:

Likelihood	IMPACT		
	Low	Medium	High
Low	Green	Green	Amber
Medium	Green	Amber	Red
High	Amber	Red	Red*

Please note:

* These conditions will be referred to the GMC Responses to Concerns process and will be closely monitored

Source: GMC Guidance for Deaneries, July 2012