

Quality review outcome report



Local office name:	Yorkshire and the Humber
Organisation:	Health Education England
Placements reviewed:	Special Care Dentistry
Date of Review:	Thursday 6 th December 2018

Developing people
for health and
healthcare

www.hee.nhs.uk

Date of report: 6 December 2018

Author: Emma Diggle

Job title: Quality Coordinator

Review context

Background

Reason for review:	Last review was 15 th July 2014. Postgraduate Dental Dean (Head of School) and Associate Postgraduate Dean raised concerns about certain aspects of the specialty training programme at the Quality Meeting of Dentistry and requested a review to establish whether concerns are region-wide or based on one institution.
No. of learners met:	4
No. of supervisors / mentors met:	11
Other staff members met:	
Duration of review:	5 hours
Intelligence sources seen prior to review: (e.g. CQC reports; NSS; GMC Survey)	Training Programme Self-Assessment Report Special Care Dentistry HEYH South 2018, Special Care Dentistry HEYH (South) TPD Presentation, and Dental Head of School Special Care Dentistry Quality Paper

Panel members

Name	Job title
Bryony Simpson	Associate Dean (Chair)
Simon Littlewood	External Advisor
Avril MacPherson	External Advisor
Matthew Sibley	Lay Representative

Executive summary

Representation from the programme was good with eleven educators and four trainees in the Yorkshire and Humber (Y&H) region in attendance. Training Programme Directors (TPD) reported that the programme was well-liked, and trainees felt supported by their Educational Supervisors (ES). This was corroborated by the trainees.

Curriculum mapping has evolved organically over the last ten years. Both the school and ESs recognise that the curriculum is extensive with eighteen key clinical procedures to be covered in the speciality. Trainees recognise that the training pathway is difficult, however, all trainees would recommend the programme.

The ESs reported that block booking of training in core competences causes gaps in training as the skills learnt are not utilised for a prolonged period, this can lead to de-skilling and could potentially become a patient safety issue. A Core Competency framework needs to be developed to ensure skills are learnt and maintained and that trainees receive a broad range of training.

The TPD in the South reported that organisational support is excellent and that links with the School of Dentistry provides a central point for all staff. Trainees concurred that the training facilities in Sheffield are excellent and that the Dental School work alongside Health Education England (HEE) to provide work-based assessment (WBA) opportunities and help identify WBA requirements.

This contrasts with the North, where there is limited organisational support and where service provision was felt to be prioritised over training. Furthermore, because the specialty has no links with institutions (specifically Leeds Dental Institute (LDI) there is a risk of producing trainees who work in isolation and are reluctant to engage. For example, it was noted that there was no representation from East Yorkshire at the review, and trainees working in the North mentioned that they have had to travel to Liverpool to undertake WBAs for biopsies, IV sedation and cannulation training. Additionally, they have limited access to facilities such as libraries. Both ES and trainees in the North suggested that training should be provided locally and on an ongoing basis and that a presence at LDI with access to academic and training facilities in the North would be advantageous.

Both TPDs in Y&H have expressed an interest to step down and the school have already started looking at succession planning. The panel felt that a fresh approach is needed and that this may be the opportunity to review the job description and to combine the roles of the two TPDs into one. Furthermore, the school reported that they aim to address ES and TPD training and support in 2019 by implementing an Annual Review of Competence Progression (ARCP) report to understand how ESs are progressing in their own training and through a refresher and induction of new TPDs.

Handover was noted to be excellent with ESs and trainees maintaining accurate and thorough patient notes. This has been key to safeguarding patients and staff. Additionally, trainees reported that they are well-supervised, have regular contact with their ES, and feel confident that support is available on site to help assist with acute situations, ensuring a high-level of care is maintained and patient risk is minimised throughout a patient's treatment plan.

The following areas were highlighted as requiring action and further details of the issues and proposed actions are shown in the Educational Requirements section:

- **Standardisation of curriculum in Y&H region** – A Core Competency framework needs to be developed to ensure skills are maintained and that trainees receive a broad range of training (20181206_HEEYH_RQ1).
- **Access to facilities at LDI** – Head of School (HoS) to speak with LDI about gaining trainees access to facilities which should help to alleviate travel pressure and provide a central hub for both trainees and ES (20181206_HEEYH_RQ2).
- **Y&H TPD** — Job description for the Y&H TPD to combine the roles of the two TPDs into one role. HoS and chair of the Special Care Dentistry panel to develop the Y&H TPD job description. (20181206_HEEYH_RQ3).
- **ESs in the North are not supported** – HoS and HEE to discuss training with the employer for the North to ensure that the North TPD and ESs are supported. Need to investigate further the support available at City Health Care Partnership (20181206_HEEYH_RQ4).

Special Care Dentistry prides itself on delivering a programme that is considered one of the best specialities in Y&H at looking after trainees. There is an open and honest culture across the speciality. The panel noted the high level of engagement and positive feedback from the trainees.

Sign off and next steps

Report sign off

Outcome report completed by (name):	Emma Diggle
Chair's signature:	Bryony Simpson
Date signed:	18 January 2019
HEE authorised signature:	Bryony Simpson (Associate Dean)
Date signed:	18 January 2019
Date submitted to organisation:	18 January 2019

Organisation staff to whom report is to be sent

Job title	Name
Head of School	James Spencer
Business Manager	Nick Sowerby
Programme Support Manager	Rachel Noble

Findings and conclusions

Patient / learner safety concerns

Any concerns listed will be monitored by the organisation. It is the organisation's responsibility to investigate / resolve.

Were any patient/learner safety concerns raised at this review?	NO
To whom was this fed back at the organisation, and who has undertaken to action?	
Brief summary of concern	

Educational requirements

Requirements are set where HEE have found that standards are not being met; a requirement is an action that is compulsory.

HEE Theme	DEVELOPING AND DELIVERING CURRICULA AND ASSESSMENT	
Requirement (R5.9b Experience)	Postgraduate training programmes must give Dentists in Training sufficient practical experience to achieve and maintain the clinical or medical competencies (or both) required by the curriculum.	
HEYH Condition Number	20181206_HEEYH_RQ1	
Specialty (Specialties)	Special Care Dentistry	
Trainee Level	All	
Concern	Whilst the post offers the potential for a broad experience in Special Care Dentistry, trainees are unable to take advantage of them due to their timetables/clinical duties	
Evidence for Concern	ESs reported that block booking of training in core competences which causes gaps in training as the skills learnt are not utilised for a prolonged period, this can lead to de-skilling and could potentially become a patient safety issue. A Core Competency framework needs to be developed to ensure skills are learnt and maintained and that trainees receive a broad range of training.	
Action 1	Review and amend trainee timetables/work schedules to allow them access to more educational opportunities in the department.	3 months
Action 2	Regional Core Competency framework to be developed to ensure skills are learnt and maintained and trainees receive a broad range of training.	3 months
Evidence for Action 1	Copy of new timetables identifying new educational opportunities.	6 months
Evidence for Action 2	Copy of Regional Core Competency Framework to ensure skills are learnt and maintained, and action plan to introduce new educational opportunities.	6 months
RAG Rating	RED	
School Requirements	<ul style="list-style-type: none"> Copies of documents must be uploaded to the QM Database Item must be reviewed and changes confirmed with Quality Lead 	

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HEE Theme	LEARNING ENVIRONMENT AND CULTURE	
Requirement (R1.19 Capacity)	Organisations must have the capacity resources and facilities** to deliver safe and relevant learning opportunities, clinical supervision and practical experiences for learners required by their curriculum or training programme, and to provide the required ES and support. <i>**Resources and facilities may include: IT systems so learners can access online curricula, workplace-based assessment, supervised learning events and learning portfolios; libraries and knowledge services; information resources; physical space; support staff; and patient safety orientated tools.</i>	
HEYH Condition Number	20181206_HEEYH_RQ2	
Specialty (Specialties)	Special Care Dentistry	
Trainee Level	All	
Concern 1	ESs within Special Care Dentistry in the North are concerned that trainees do not have access to sufficient resources, equipment or facilities	
Concern 2	ESs are concerned that the library facilities are unavailable to meet trainee requirements.	
Evidence for Concern	TPD and ESs reported that there is limited organisational support in the North and that service provision is prioritised over training. Furthermore, because the specialty has no links with institutions (specifically LDI) trainees have limited access to facilities such as libraries and are travelling to other regions outside of Y&H to undertake training. Both ES and trainees in the North suggested that training should be provided locally and on an ongoing basis and that a presence at LDI with access to academic and training facilities in the North would be advantageous.	
Action 1	Investigate concerns and produce an action plan to address them.	6 months
Action 2	Address concerns raised by trainees in relation to inadequate facilities.	3 months
Evidence for Action 1	Copy of investigation and action plan with a review of the impact of the changes that have made.	6 months
Evidence for Action 2	Confirmation that the library facilities have been improved.	3 months
RAG rating	RED	
School Requirements	<ul style="list-style-type: none"> • Copies of documents must be uploaded to the QM Database • Item must be reviewed and changes confirmed with Quality Lead 	

HEE Theme	SUPPORTING EDUCATORS	
Requirement (R4.2 Job Plans)	ESs must have time in job plans to meet their educational responsibilities so that they can carry out their role in a way that promotes safe and effective care and a positive learning experience.	
HEYH Condition Number	20181206_HEEYH_RQ4	
Specialty (Specialties)	Special Care Dentistry	
Trainee Level	All	
Concern	ESs who have identified responsibilities for supervision of trainees do not have an appropriate amount of time allocated in their job plans.	
Evidence for Concern	Both TPDs in Y&H have expressed an interest to step down and the school have already started looking at succession planning. The panel felt that a fresh approach is needed and that this may be the opportunity to review the job description and to combine the roles of the two TPDs into one role.	
Action	The school must ensure that the TPD has an appropriate amount of time allocated to the role in their job plans.	3 months
Evidence for Action	Confirmation that the TPD has had a job plan review and now has appropriate time allocated.	3 months
RAG Rating	RED	
School Requirements	<ul style="list-style-type: none"> • Copies of documents must be uploaded to the QM Database • Item must be reviewed and changes confirmed with Quality Lead 	

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HEE Theme	DEVELOPING AND DELIVERING CURRICULA AND ASSESSMENT	
Requirement (R5.9h Service)	Postgraduate training programmes must give DiT a balance between providing services and accessing educational and training opportunities. Services will focus on patient needs, but the work undertaken by doctors in training should support learning opportunities wherever possible. Education and training should not be compromised by the demands of regularly carrying out routine tasks or out-of-hours cover that do not support learning and have little educational or training value.	
HEYH Condition Number	20181206_HEEYH_RQ4	
Specialty (Specialties)	Special Care Dentistry	
Trainee Level	All	
Concern	Trainees make an excessive contribution to services within Special Care Dentistry in the North to the detriment of their training.	
Evidence for Concern	TPD and ES in the North raised concerns that they feel unsupported by organisations in their region and that service provision is prioritised over training. Dental Head of School and HEE to discuss training with the employer for the North to ensure that the North TPD and ESs are supported. In particular, there is a need to investigate further the support available at City Health Care Partnership.	
Action 1	Review the service commitments of the trainees and produce an action plan that identify how some of these responsibilities can be shared with or devolved to other members of staff.	3 months
Action 2	Assess the impact of the implementation of the action plan on the training opportunities for trainees.	6 months
Evidence for Action 1	Summary of review and copy of action plan.	3 months
Evidence for Action 2	Copy of impact assessment.	6 months
RAG Rating	RED	
School Requirements	<ul style="list-style-type: none"> • Copies of documents must be uploaded to the QM Database • Item must be reviewed and changes confirmed with Quality Lead 	

Appendix 1: HEE Quality Framework Standards & Standards

Standard 1 - Learning environment and culture

- 1.1. Learners are in an environment that delivers safe, effective, compassionate care that provides a positive experience for service users.
- 1.2. The learning environment is one in which education and training is valued and learners are treated fairly, with dignity and respect, and are not subject to negative attitudes or behaviours.
- 1.3. There are opportunities for learners to be involved in activities that facilitate quality improvement (QI), evidence based practice (EBP) and research and innovation (R&I).
- 1.4. There are opportunities for learners to engage in reflective practice with service users, applying learning from both positive and negative experiences and outcomes.
- 1.5. The learning environment provides suitable educational facilities for both learners and educators, including space, IT facilities and access to quality assured library and knowledge services.
- 1.6. The learning environment maximises inter-professional learning opportunities.

Standard 2 – Educational governance and leadership

- 2.1 The educational governance arrangements measure performance against the quality standards and actively respond's when standards are not being met.
- 2.2 The educational leadership uses the educational governance arrangements to continuously improve the quality of education and training.
- 2.3 The educational leadership promotes team-working and a multi-professional approach to education and training, where appropriate.
- 2.4 Education and training opportunities are based on principles of equality and diversity.
- 2.5 There are processes in place to inform the appropriate stakeholders when performance issues with learners are identified or learners are involved in patient safety incidents.

Standard 3 – Supporting and empowering learners

- 3.1 Learners receive educational and pastoral support to be able to demonstrate what is expected in their curriculum or professional standards to achieve the learning outcomes required.
- 3.2 Learners are supported to complete appropriate summative and formative assessments to evidence that they are meeting their curriculum, professional standards and / or learning outcomes.
- 3.3 Learners feel they are valued members of the healthcare team within which they are placed.
- 3.4 Learners receive an appropriate and timely induction into the learning environment.
- 3.5 Learners understand their role and the context of their placement in relation to care pathways and patient journeys.

Standard 4 – Supporting and empowering educators

- 4.1 Those undertaking formal education and training roles are appropriately trained as defined by the relevant regulator or professional body.
- 4.2 Educators are familiar with the curricula of the learners they are educating.
- 4.3 Educator performance is assessed through appraisals or other appropriate mechanisms, with constructive feedback and support provided for role development and progression.
- 4.4 Formally recognised educators are appropriately supported to undertake their roles.
- 4.5 Educators are supported to undertake formative and summative assessments of learners as required.

Standard 5 – Developing and implementing curricula and assessments

- 5.1 The planning and delivery of curricula, assessments and programmes enable learners to meet the learning outcomes required by their curriculum or required professional standards.
- 5.2 Placement providers shape the delivery of curricula, assessments and programmes to ensure the content is responsive to changes in treatments, technologies and care delivery models.
- 5.3 Providers proactively engage patients, service users and learners in the development and delivery of education and training to embed the ethos of patient partnership within the learning environment.

Standard 6 – Developing a sustainable workforce

- 6.1 Placement providers work with other organisations to mitigate avoidable learner attrition from programmes.
- 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 organisation 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 is underpinned by a clear process of support developed and delivered in partnership with the learner.

Appendix 2: HEE Risk matrix

Likelihood	RAG RATING MATRIX				
5. Almost Certain	G	A	A/R	R	R
4. Likely	G	A	A/R	R	R
3. Possible	G	G/A	A	A/R	R
2. Unlikely	G	G/A	A	A	A/R
1. Rare	G	G	G/A	G/A	A
Impact	1. Negligible	2. Minor	3. Moderate	4. Major	5. Significant

Likelihood	RAG RATING MATRIX				
5. Almost Certain	5	10	15	20	25
4. Likely	4	8	12	16	20
3. Possible	3	6	9	12	15
2. Unlikely	2	4	6	8	10
1. Rare	1	2	3	4	5
Impact	1. Negligible	2. Minor	3. Moderate	4. Major	5. Significant

Score	Likelihood	Impact
1	Rare: <ul style="list-style-type: none"> Will probably never happen Could only imagine it happening in rare circumstances 	Negligible: <ul style="list-style-type: none"> Very low effect on service/project/ business area No impact on patients/trainees/public/staff No reputational impact, i.e. no press interest No financial loss
2	Unlikely: <ul style="list-style-type: none"> Do not expect it to happen It is possible that it may occur 	Minor: <ul style="list-style-type: none"> Minimal disruption to service/project/business area Limited impact on patients/trainees/public/staff Minimal reputational impact Limited financial loss
3	Possible: <ul style="list-style-type: none"> Might occur Could happen occasionally 	Moderate: <ul style="list-style-type: none"> Moderate impact on service/project/business area Moderate level of impact on patients/trainees/public/staff Medium level of reputational impact Medium financial loss
4	Likely: <ul style="list-style-type: none"> Will probably happen in most circumstances Not a continuing occurrence 	Major: <ul style="list-style-type: none"> Major effect to service/project/business area Major level of impact to patients/trainees/public/staff Major impact on reputation, i.e. Major press interest Major financial loss
5	Almost certain: <ul style="list-style-type: none"> Expected to happen Likely to occur in most circumstances 	Significant: <ul style="list-style-type: none"> Loss of service/project/business area Detrimental effect on patients/trainees/public/staff National press coverage Significant financial loss