

# Review of *Rotherham NHS Foundation Trust Gastroenterology Department*



Quality Assurance of Local Education and Training Providers

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## Guidance

From 1 April 2015 Health Education England, working across Yorkshire and the Humber (HEE YH) introduced a new quality function and team structure. The quality function is responsible for leading and overseeing the processes for the quality assurance and quality management of all aspects of medical and non-medical training and education. Our aim is to promote an ethos of multi-professional integrated working and believe that improving quality in education and training is at the heart of delivering outstanding patient care.

HEE YH invests £500 million every year on commissioning a wide range of education on behalf of local and national health systems. It has a duty to ensure that the Education Providers delivering this education provide a high standard of professional education and training.

## Standards are built around 5 core themes:

In developing our new framework we have developed a set of standards for education providers built around five themes. The five themes have been chosen to reflect the multi-professional aspects of training and care and to ensure all Healthcare Regulator standards can be aligned.

All standards have been mapped against the following regulatory documents:

- NMC Quality Assurance Framework Part Three: Assuring the safety and effectiveness of practice learning
- Future pharmacists: Standards for the initial education and training of pharmacists (May 2011)
- HCPC Standards of education and training: Your duties as an education provider
- GMC Promoting Excellence: Standards for medical education and training

Theme 1	Supporting Educators
Theme 2	Supporting Learners
Theme 3	Learning Environment and Culture
Theme 4	Governance and Leadership
Theme 5	Curricula and Assessment

# Review of Rotherham NHS Foundation Trusts Gastroenterology Department

## 1. Details of the Review

<b>Visit Date(s)</b>	19 <sup>th</sup> January 2016
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This visit was conducted in partnership with Rotherham NHS Foundation Trust

- Gastroenterology Department
- Factors considered: Feedback from medical trainees, PPQA,

### Visit Panel / team

<b>Name</b>	<b>Role</b>	<b>Organisation</b>
<b>David Eadington</b>	Deputy Dean	Health Education England (working across Yorkshire and Humber)
<b>Lynne Caddick</b>	Deputy Director School of Foundation	Health Education England (working across Yorkshire and Humber)
<b>Kim Maskery</b> (notes)	Quality Co-ordinator	Health Education England (working across Yorkshire and Humber)

## 2. Summary of findings

This visit was arranged in direct response to the concerns of Foundation and Core Medical Trainees in the Gastroenterology Department based at Rotherham NHS Foundations Trust Hospital. The urgency of the visit was due to the nature and degree of the concerns expressed by both the trainees and Dr Cooper, Director of Medical Education. The two F1 Trainees and the Core Medical Trainee (CMT 2) seen have been escalating concerns within the Postgraduate Department since soon after starting their post in December 2015. There are difficulties in senior medical staffing, and since late summer 2015 there have been only two Locum Consultants in post instead of the expected four substantive posts. There has also been no Middle Grade Speciality Trainee attached to the department. Attempts have been made to reappoint to permanent posts without success, resulting in the bed base being reduced.

The Trainees were honest and professional in their approach and set out the issues in a straightforward and constructive manner. The areas of concern around training delivery are detailed in the conditions below and involve departmental induction, consent, prescribing governance, clinical supervision, curriculum deliver, departmental teaching and patient safety. There is perceived to be a lack of senior leadership in Gastroenterology. Coupled with pressures on the trainees from Ward Managers to increase patient flow, the trainees felt that, if they attempted to, it would be possible to discharge a patient (although they know this is not permitted for any F1).

The feedback from the non-medical learners in Gastroenterology contains positives but there are also negatives, particularly around the staffing issues, which are sufficient to triangulate with the medical findings. There are no medical students attached to Gastroenterology in Rotherham at present.

Some immediate and genuine change in training delivery to the present cohort of trainees is required. In making changes to working practices it is important to include Senior Medical and Nursing Staff in discussions. The appointment of Locum staff is seen by the Trainees as a useful addition, but this short term solution should not change the absolute need to achieve substantive Consultant appointments.

As outlined in the letter dated 22<sup>nd</sup> January to the Medical Director, an initial response to the conditions below is required by 12<sup>th</sup> February 2016.

# Review of Rotherham NHS Foundation Trusts Gastroenterology Department

## 3. Conditions

<b>GMC Theme</b>	<b>LEARNING ENVIRONMENT AND CULTURE</b>	
<b>Requirement</b> (R1.13 Induction)	<p>Organisations must make sure learners have an induction for each placement that clearly sets out</p> <ul style="list-style-type: none"> <li>• their duties and supervision arrangements</li> <li>• their role in the team</li> <li>• how to gain support from senior colleagues</li> <li>• the clinical or medical guidelines and workplace policies they must follow</li> <li>• how to access clinical and learning resources</li> </ul> <p>As part of the process learners must meet their team and other health and social care professionals they will be working with. Medical students on observational visits at early stages of their medical degree should have clear guidance about the placement and their role.</p>	
<b>HEYH Condition Number</b>	1	
<b>LEP Site</b>	Rotherham	
<b>Specialty (Specialties)</b>	Gastroenterology	
<b>Trainee Level</b>	Foundation and Core	
<b>Concern</b>	Trainees are not provided with a relevant induction to work in Gastroenterology. They are not provided with essential guidance on the management of the important or common conditions they are expected to manage as soon as they take up post.	
<b>Evidence for Concern</b>	The trainees felt that there was insufficient information delivered in the departmental induction and that this could be improved through by a more robust structured format.	
<b>Action</b>	Provide all trainees with a relevant departmental induction.	<b>Next intake</b>
<b>Evidence for Action</b>	Copy of department induction programme	<b>Prior to next intake</b>
<b>RAG Rating</b>		
<b>LEP Requirements</b>	<ul style="list-style-type: none"> <li>• Copies of documents must be uploaded to the QM Database</li> <li>• Item must be reviewed and changes confirmed with link APD</li> </ul>	
<b>Further Review</b>		
<b>Resources</b>	<a href="http://www.cqc.org.uk/sites/default/files/documents/20130625_800734_v1_00_supporting_information-effective_clinical_supervision_for_publication.pdf">http://www.cqc.org.uk/sites/default/files/documents/20130625_800734_v1_00_supporting_information-effective_clinical_supervision_for_publication.pdf</a> <a href="http://www.yorksandhumberdeanery.nhs.uk/media/501652/201404v2Trainer%20Accreditation%20Policy.pdf">http://www.yorksandhumberdeanery.nhs.uk/media/501652/201404v2Trainer%20Accreditation%20Policy.pdf</a> <a href="http://www.gmc-uk.org/Final_Appendix_4_Guidance_for_Ongoing_Clinical_Supervision.pdf_53817963.pdf">http://www.gmc-uk.org/Final_Appendix_4_Guidance_for_Ongoing_Clinical_Supervision.pdf_53817963.pdf</a>	

## Review of Rotherham NHS Foundation Trusts Gastroenterology Department

<b>GMC Theme</b>	<b>LEARNING ENVIRONMENT AND CULTURE</b>	
<b>Requirement</b> (R1.11 Consent)	Doctors in training must take consent only for procedures appropriate for their level of competence. Learners must act in accordance with the GMC guidance on consent. Supervisors must assure themselves that a learner understands any proposed intervention for which they will take consent, its risks and alternative treatment options.	
<b>HEYH Condition Number</b>	2	
<b>LEP Site</b>	Rotherham	
<b>Specialty (Specialties)</b>	Gastroenterology	
<b>Trainee Level</b>	Foundation and Core	
<b>Concern</b>	Foundation trainees are delegated to obtain consent for procedures that they are not competent performing or for which they have not been provided with training.	
<b>Evidence for Concern</b>	F1 Trainees are familiar with simple o/g endoscopy consent from their first surgical post. However, no formal training for consent has been received in this post and they are also being asked to consent patients for other higher level procedures.	
<b>Action</b>	If Foundation Trainees are to be involved in the consent process they must be provided with training, guidance and support.	<b>Immediate</b>
<b>Evidence for Action</b>	Copy of training programme	<b>Prior to next intake</b>
<b>RAG Rating</b>		
<b>LEP Requirements</b>	<ul style="list-style-type: none"> <li>• Copies of documents must be uploaded to the QM Database</li> <li>• Item must be reviewed and changes confirmed with link APD</li> </ul>	
<b>Further Review</b>		
<b>Resources</b>	<a href="http://www.cqc.org.uk/sites/default/files/documents/20130625_800734_v1_00_supporting_information-effective_clinical_supervision_for_publication.pdf">http://www.cqc.org.uk/sites/default/files/documents/20130625_800734_v1_00_supporting_information-effective_clinical_supervision_for_publication.pdf</a> <a href="http://www.yorksandhumberdeanery.nhs.uk/media/501652/201404v2Trainer%20Accreditation%20Policy.pdf">http://www.yorksandhumberdeanery.nhs.uk/media/501652/201404v2Trainer%20Accreditation%20Policy.pdf</a> <a href="http://www.gmc-uk.org/Final_Appendix_4_Guidance_for_Ongoing_Clinical_Supervision.pdf_53817963.pdf">http://www.gmc-uk.org/Final_Appendix_4_Guidance_for_Ongoing_Clinical_Supervision.pdf_53817963.pdf</a>	

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<b>GMC Theme</b>	<b>LEARNING ENVIRONMENT AND CULTURE</b>	
<b>Requirement</b> <b>(R1.9 Level of Competence)</b>	Learner's responsibilities for patient care must be appropriate for their stage of education and training. Supervisors must determine a learner's level of competence, confidence and experience and provide an appropriately graded level of supervision.	
<b>HEYH Condition Number</b>	3	
<b>LEP Site</b>	Rotherham	
<b>Specialty (Specialties)</b>	Gastroenterology	
<b>Trainee Level</b>	Foundation and Core	
<b>Concern</b>	Foundation and Core Trainees are sometimes expected to carry out clinical duties that are beyond the expected level of competence for their stage of training.	
<b>Evidence for Concern</b>	The trainees are being asked to prescribe beyond their boundaries, for instance to prescribe Infliximab	
<b>Action</b>	Provide alternative arrangements for staff to carry out these duties.	<b>1 month</b>
<b>Evidence for Action</b>	Summary of alternative arrangements.	<b>1 month</b>
<b>RAG Rating</b>		
<b>LEP Requirements</b>	<ul style="list-style-type: none"> <li>• Copies of documents must be uploaded to the QM Database</li> <li>• Item must be reviewed and changes confirmed with link APD</li> </ul>	
<b>Further Review</b>		
<b>Resources</b>		
<b>Question Reference</b>	Trainer 10 Trainee 10	

## Review of Rotherham NHS Foundation Trusts Gastroenterology Department

GMC Theme	LEARNING ENVIRONMENT AND CULTURE	
<b>Requirement</b> (R1.8 Clinical Supervision)	<p>Organisations must make sure that learners have an appropriate level of clinical supervision at all times by an experienced and competent supervisor, who can advise or attend as needed. The level of supervision must fit the individual learner's competence, confidence and experience. The support and clinical supervision must be clearly outlined to the learner and the supervisor.</p> <p>Foundation doctors must always have on-site access to a senior colleague who is suitably qualified to deal with problems that may arise during the session. Medical students on placement must be supervised, with closer supervision when they are at lower levels of competence.</p>	
<b>HEYH Condition Number</b>	4	
<b>LEP Site</b>	Rotherham	
<b>Specialty (Specialties)</b>	Gastroenterology	
<b>Trainee Level</b>	Foundation and Core	
<b>Concern</b>	Trainees are sometimes expected to provide clinical care on the ward without access to appropriate support from a senior trainee or consultant.	
<b>Evidence for Concern</b>	There is a senior ward round most days, but this may be as early as 8 am depending on the consultant, and the trainees need to be there by 7 am to prepare notes and organise the day's blood tests. Daytime supervision is minimal and it can be difficult to get senior advice. Sometimes the Consultant attends the ward on successive days, but there are instances of inconsistent management plans and changing advice which confuses the trainees.	
<b>Action</b>	Provide Foundation trainees with consistent access to on-site support from Senior grade doctors	<b>Immediate</b>
<b>Evidence for Action</b>	Copy of senior cover arrangements.	<b>1 month</b>
<b>RAG Rating</b>		
<b>LEP Requirements</b>	<ul style="list-style-type: none"> <li>Copies of documents must be uploaded to the QM Database</li> <li>Item must be reviewed and changes confirmed with link APD</li> </ul>	
<b>Further Review</b>		
<b>Resources</b>	<a href="http://www.cqc.org.uk/sites/default/files/documents/20130625_800734_v1_00_supporting_information-effective_clinical_supervision_for_publication.pdf">http://www.cqc.org.uk/sites/default/files/documents/20130625_800734_v1_00_supporting_information-effective_clinical_supervision_for_publication.pdf</a> <a href="http://www.yorksandhumberdeanery.nhs.uk/media/501652/201404v2Trainer%20Accreditation%20Policy.pdf">http://www.yorksandhumberdeanery.nhs.uk/media/501652/201404v2Trainer%20Accreditation%20Policy.pdf</a> <a href="http://www.gmc-uk.org/Final_Appendix_4_Guidance_for_Ongoing_Clinical_Supervision.pdf_53817963.pdf">http://www.gmc-uk.org/Final_Appendix_4_Guidance_for_Ongoing_Clinical_Supervision.pdf_53817963.pdf</a>	
<b>Question Reference</b>	Trainer 8 / Trainee 8, 9	



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<b>GMC Theme</b>	<b>LEARNING ENVIRONMENT AND CULTURE</b>	
<b>Requirement (R1.7 Staffing)</b>	Organisations must make sure that there are enough staff members who are suitably qualified, so that learners have appropriate clinical supervision, working patterns and workload, for patients to receive care that is safe and of a good standard, while creating learning opportunities.	
<b>HEYH Condition Number</b>	5	
<b>LEP Site</b>	Rotherham	
<b>Specialty (Specialties)</b>	Gastroenterology	
<b>Trainee Level</b>	Foundation and Core	
<b>Concern 1</b>	Trainees report that there are insufficient senior staff available on duty to always provide a safe level of patient care and this has led to significant incidents.	
<b>Concern 3</b>	Trainees report that there are insufficient staffing levels on duty to allow them to attend programmed teaching sessions/clinic sessions/workplace assessments/annual leave.	
<b>Evidence for Concern</b>	<p>The trainees are having great difficulty getting workplace assessments completed in a useful way, and portfolio entries are minimal. All trainees have had difficulty in arranging the time away from the ward for training days or for annual leave.</p> <p>Action is required to enable to trainees to catch up with their learning.</p>	
<b>Action 1</b>	<p>Review staffing levels on ward and develop an action plan to address the deficiencies.</p> <p>There should always be two Junior Doctors available to be on the ward to look after the Gastroenterology patients. Whilst this may result in removing the F1s from MAU day time duties for the immediate future, this does remove them from another important part of the training experience and should not be a long term position.</p>	<b>3 months</b>
<b>Action 3</b>	Review rotas and timetables and make appropriate modifications that will allow trainees to meet their curriculum requirements.	<b>3 months</b>
<b>Evidence for Action 1</b>	Copy of review and action plan.	<b>3 months</b>
<b>RAG Rating</b>		
<b>LEP Requirements</b>	<ul style="list-style-type: none"> <li>• Copies of documents must be uploaded to the QM Database</li> <li>• Item must be reviewed and changes confirmed with link APD</li> </ul>	
<b>Further Review</b>		
<b>Resources</b>	<a href="http://www.jrcptb.org.uk/assessment/workplace-based-assessment">http://www.jrcptb.org.uk/assessment/workplace-based-assessment</a> <a href="http://bma.org.uk/practical-support-at-work/ewtd/ewtd-juniors">http://bma.org.uk/practical-support-at-work/ewtd/ewtd-juniors</a> <a href="http://bma.org.uk/practical-support-at-work/contracts/juniors-contracts/rotas-and-working-patterns">http://bma.org.uk/practical-support-at-work/contracts/juniors-contracts/rotas-and-working-patterns</a>	
<b>Question Reference</b>	Trainer 7 Trainee 7	

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<b>GMC theme</b>	<b>LEARNING ENVIRONMENT AND CULTURE</b>	
<b>Requirement</b> <b>(R1.16 Protected time)</b>	Doctors in training must have protected time for learning while they are doing clinical or medical work, or during academic training, and for attending organised educational sessions, training days, courses and other learning opportunities to meet the requirements of their curriculum. In timetabled educational sessions, doctors in training must not be interrupted for service unless there is an exceptional and unanticipated clinical need to maintain patient safety.	
<b>HEYH Condition Number</b>	6	
<b>LEP Site</b>	Rotherham	
<b>Specialty (Specialties)</b>	Gastroenterology	
<b>Trainee Level</b>	Foundation and Core	
<b>Concern 1</b>	The trainees are not provided with any specialty-based teaching.	
<b>Evidence for Concern</b>	The trainees report there is no organised departmental activity. The F1s are still attending the weekly F1 teaching sessions, but this is their only non-clinical training activity.	
<b>Action 1</b>	A regular teaching programme must be introduced that should contain a multidisciplinary element in order to foster better team dynamics. The sessions must be scheduled at a time that allows maximum attendance. The content of the programme should be jointly agreed with the trainees and aimed towards meeting the requirements of the relevant curriculum.  An attendance register should be kept and monitored. Action should be taken to address poor attendance. The educational impact of the teaching sessions should be regularly evaluated.	<b>3 months</b>
<b>Evidence for Action 1</b>	Copy of the teaching programme with confirmation of regular high attendance. Copies of evaluation of educational effectiveness.	<b>3 months</b>
<b>RAG Rating</b>		
<b>LEP Requirements</b>	<ul style="list-style-type: none"> <li>• Copies of documents must be uploaded to the QM Database</li> <li>• Item must be reviewed and changes confirmed with link APD</li> </ul>	
<b>Further Review</b>		
<b>Resources</b>		
<b>Question Reference</b>	Trainer 15 Trainee 22	

## Review of Rotherham NHS Foundation Trusts Gastroenterology Department

<b>GMC Theme</b>	<b>LEARNING ENVIRONMENT AND CULTURE</b>	
<b>Requirement</b> (R1.1 Safety)	Organisations must demonstrate a culture that allows learners and educators to raise concerns about patient safety, and the standard of care or of education and training, openly and safely without fear of adverse consequences.	
<b>HEYH Condition Number</b>	7	
<b>LEP Site</b>	Rotherham	
<b>Specialty (Specialties)</b>	Gastroenterology	
<b>Trainee Level</b>	Foundation and Core	
<b>Concern 1</b>	Trainees have not been reporting their concerns about patient safety and the standards of care for patients.	
<b>Evidence for Concern</b>	The trainees described several instances of recognisable clinical incidents. These have not all been Datixed and the potential patient safety risks created by the staffing shortages may be being underestimated by the Trust Board. All Trainees should be urged to record all safety concerns when they occur.	
<b>Action 1</b>	Provide all staff with access to a policy/procedure for raising concerns about patient safety that meets GMC standards (Raising and acting on concerns about patient's safety GMC 2012).	<b>3 months</b>
<b>Action 2</b>	Ensure all staff are encouraged to raise concerns about patient safety and that this is reinforced at induction and mandatory training. Staff should be able to share concerns together and plan solutions that will be a help to both service and training.	<b>Immediate</b>
<b>Action 3</b>	Ensure that all trainees are encouraged to report concerns about the standard of education and training to the Director of Medical Education, College Tutor, Training Programme Director, or Head of School and that this is reinforced at induction and mandatory training.	<b>Immediate</b>
<b>Evidence for Action 1</b>	Copy of the policy/procedure.	<b>3 months</b>
<b>Evidence for Action 2</b>	Written confirmation that this will be included in induction/mandatory training.	<b>Immediate</b>
<b>Evidence for Action 3</b>	Written confirmation that this will be included in induction/mandatory training.	<b>Immediate</b>
<b>RAG Rating</b>		
<b>LEP Requirements</b>	<ul style="list-style-type: none"> <li>Copies of documents must be uploaded to the QM Database</li> <li>Item must be reviewed and changes confirmed with link APD</li> </ul>	
<b>Further Review</b>		
<b>Resources</b>	<a href="http://www.gmc-uk.org/Raising_and_acting_on_concerns_about_patient_safety_English_0914.pdf">http://www.gmc-uk.org/Raising_and_acting_on_concerns_about_patient_safety_English_0914.pdf</a> <a href="http://www.gmc-uk.org/guidance/ethical_guidance/raising_concerns.asp">48902813.pdf</a> <a href="http://www.gmc-uk.org/guidance/ethical_guidance/raising_concerns.asp">http://www.gmc-uk.org/guidance/ethical_guidance/raising_concerns.asp</a>	
<b>Question Reference</b>	Trainer 1, 2, 3, 4 Trainee 1, 2, 3, 4	

## Review of Rotherham NHS Foundation Trusts Gastroenterology Department

<b>GMC Theme</b>	<b>LEARNING ENVIRONMENT AND CULTURE</b>	
<b>Requirement (R1.15 Experience)</b>	Organisations must make sure that work undertaken by doctors in training provides learning opportunities and feedback on performance, and gives an appropriate breadth of clinical experience.	
<b>HEYH Condition Number</b>	8	
<b>LEP Site</b>	Rotherham	
<b>Specialty (Specialties)</b>	Gastroenterology	
<b>Trainee Level</b>	Foundation and Core	
<b>Concern 1</b>	Trainees spend too much time on tasks or minor procedures with little or no educational value; for example cannulation.	
<b>Concern 2</b>	Whilst the post offers the potential for a broad experience in Gastroenterology, trainees are unable to take advantage of them because of their timetables/clinical duties.	
<b>Evidence for Concern</b>	The Phlebotomy Service is reported to operate in an over-rigid manner that requires quick modification all clinical areas; for example refusing to return to a bed bay that they have already passed. Gastro trainees are providing cross cover the rest of the ward and this should be avoided except in reaction to emergency situations.	
<b>Action 1</b>	Identify what alternative Senior Nursing resource exists that could assist with organising tasks and performing minor procedures.	<b>3 months</b>
<b>Action 2</b>	Review and amend trainee timetables/work schedules to allow trainees access to more educational opportunities in the department. There needs to be better co-ordination of nursing/medical communication to enable the trainees to work more efficiently, for example channelling bleep requests and improved management of task requests/job lists.	<b>3 months</b>
<b>Evidence for Action 1</b>	Copy of action plan identifying the additional support, implementation date and impact.	<b>6 months</b>
<b>Evidence for Action 3</b>	Copy of new timetables identifying new educational opportunities and improved efficiency.	<b>6 months</b>
<b>RAG Rating</b>		
<b>LEP Requirements</b>	<ul style="list-style-type: none"> <li>Copies of documents must be uploaded to the QM Database</li> <li>Item must be reviewed and changes confirmed with link APD</li> </ul>	
<b>Further Review</b>		
<b>Resources</b>		
<b>Question Reference</b>	Trainee 14, 15	

# Review of Rotherham NHS Foundation Trusts Gastroenterology Department

## **APPROVAL STATUS**

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

### **Signed on behalf of HEYH**

**Name:** David Eadington

**Title:** Deputy Dean

**Date:** 29<sup>th</sup> January 2016

### **Signed on behalf of Trust**

**Name:** Alison Cooper

**Title:** Director of Medical Education

**Date:** 2<sup>nd</sup> February 2016

<b>Date of first Draft</b>	29 <sup>th</sup> January 2016
<b>First draft submitted to Trust</b>	1 <sup>st</sup> February 2016
<b>Trust comments to be submitted by</b>	
<b>Final report circulated</b>	3 <sup>rd</sup> February 2016
<b>Report published</b>	