

# HEE KSS Quality Team Business and Operating Plan 2020/21



Developing people for health and healthcare

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## Introduction

The KSS Quality Team Business and Operating Plan is mapped to the core goals within HEE's Business Plan for 2020/21.

### 1. Education

The Quality Team, working with Heads of Schools and system leaders, will ensure the planning, management, delivery and quality assurance of education and training to a high standard.

### 2. Quality and Patient Safety

Work with internal and external partners to improve the overall quality of the learning environment for trainees, learners and those on placement.

### 3. Workforce planning and intelligence

Work with internal and external partners to contribute to accurate workforce intelligence and robust workforce planning to aid increasing of trainee numbers in quality placements throughout KSS.

### 4. Workforce transformation

Through the sharing of notable practice and transformation identified by the Quality Team, the Workforce Transformation Team will provide examples of optimal skill mix in healthcare teams. In addition to this, HEE has delivery priorities in the following areas:

1. Cancer (including diagnostics)
2. Mental Health and Learning Disabilities
3. Primary Care
4. Urgent and Emergency Care
5. Maternity
6. Population Health and Prevention

### 5. Working collaboratively across regions and nationally

HEE recognises it has a local, regional and national role to support quality improvement.

## 1. Education

The aim is for KSS to be highly sought after as a place to train. Employer and trainee satisfaction should be high. All HEE KSS placements should be filled. There should be high registration rates where appropriate and retention into posts delivering NHS services.

	Activity	Deliverable	Lead
1.1 Work with Heads of School to identify and showcase quality trainee placements	Identify areas of notable practice and share findings to support quality improvements across the system	Retention into KSS training and substantive posts	Liz
1.2 Share quality intelligence with Workforce Transformation to support new roles	Share quality intelligence via Quality Management Oversight Group (QMOG) to ensure professional leads are aware of suitable quality placements for new roles	New roles are embedded in safe and effective clinical placements	Liz

## 2. Quality and Patient Safety

	Activity	Deliverable	Lead
2.1 Develop KSS Quality Team identity and functions	Establish the KSS Quality Team roles and functions with internal and external stakeholders	Produce a business and operational plan	Liz (business) Bridget (operational)
		Produce an annual report	Liz/Bridget
2.2 Establishment of an effective KSS Quality Team	Team member roles and responsibilities defined	Appraisals and objective setting for all team members within first three months	Liz/Bridget/Heather
		PDPs for all team members	Liz/Bridget/Heather

	<b>Activity</b>	<b>Deliverable</b>	<b>Lead</b>
2.2 Establishment of an effective KSS Quality Team (continued)	HR processes established	Quality Team calendar	Quality Support Administrator (QSA)
		Annual workplan	Bridget/QSA
		Absence reporting processes	Bridget
	Weekly operational meetings established	Ensure workplan is covered and supported with contingency plans	Bridget
	Monthly strategic meetings established	Effective planning to ensure alignment with operational delivery and strategic planning	Liz
	Team development identified and planned	Identification of team development needs addressed to support individuals	Liz/Bridget/Heather
	Quality Team Risk register	Identify risks and mitigate/escalate/report as appropriate to ensure business continuity and growth	Bridget
	Modernisation and streamlining of core business activity utilising technology	Utilise IT to ensure efficient documentation to aid LEAN work processes	Heather
2.3 Sustainability	Review processes in line with South East operating model	Attendance at the regional SLT and implement/develop processes to align	Liz/Bridget
	Ensure processes are KPMG compliant	Apply KPMG recommendations over the coming year	Liz/Bridget

	<b>Activity</b>	<b>Deliverable</b>	<b>Lead</b>
2.4 Reporting and Governance	Identify and develop robust reporting mechanisms to meet: <ul style="list-style-type: none"> <li>• regulatory requirements – Deans report</li> <li>• internal intelligence</li> <li>• external requirements</li> </ul>	Production of key reports within agreed timescales to ensure robust sharing of intelligence to meet regulatory and stakeholder requirements	Heather
	Locally Analyse and report: <ul style="list-style-type: none"> <li>• National Training Surveys (NTS)</li> <li>• National Student Survey</li> <li>• National Education and Training Survey (NETS)</li> <li>• Primary Care</li> </ul>	Prepare and produce local reports to aid quality management and improvement	Heather/Quality Project Officer (QPO) Non-Medical/Yaa
2.5 Quality Surveillance Groups	Attend meetings and present key findings from KSS	KSS presence to cascade information internally and externally to meet regulatory and stakeholder requirements	Liz
2.6 KSS Quality Management Oversight Group (QMOG)	Review terms of reference and membership	QMOG to effectively contribute to internal and external governance processes	Liz
	Provide administration support		Sarah
	Provide oversight to the quality assurance processes and decisions	Live reporting register that captures emerging and existing concerns	Heather
2.7 Quality Interventions	Determine annual programme for quality interventions in KSS	Plan put in place for quality interventions appropriate to level of risk identified	Bridget

	<b>Activity</b>	<b>Deliverable</b>	<b>Lead</b>
2.7 Quality Interventions (continued)	Develop interventions procedures and processes to implement the HEE Quality Framework across all professional groups	Co-produced procedures to determine roles and responsibilities associated with reviews	Bridget
	Provide pre-review evidence bundles to aid effective focussed interventions process	Bundles of evidence relevant to visit produced and circulated to aid review teams to effectively utilise intelligence and visit time	QPOs
	Provide reporting administration at interventions to ensure robust reporting and audit	Provide detailed succinct reports or letters to aid implementation of the HEE Quality Framework	QPOs & QSA Primary Care
	Support the development and progression of SMART action plans	Produce SMART standardised action plans and monitor progression to aid reporting	QPOs
		Develop crib sheet for Immediate Mandatory Requirements, Mandatory Requirements and Recommendations to support standardisation in reporting and action plans	QPOs
	Monitor the Intensive Support Framework (ISF) and rate risk	ISF process and monitoring to contribute to quality intervention planning and improvement	Bridget/Heather

	<b>Activity</b>	<b>Deliverable</b>	<b>Lead</b>
2.8 Evaluate effectiveness of quality interventions	Develop an evaluation methodology to identify areas of success and development in current intervention processes	Annual review of processes planned into cycle	Bridget
2.9 GMC Quality assurance process	Prepare to provide evidence requirements for the GMC approval process	Documentation and processes meet the GMC standards	Liz/Bridget/Heather
		Complete the required self-assessment	Heather
2.10 Trainee surveys	To work with the Review Lead to determine trainee surveys are gathering correct evidence ahead of interventions	Develop a core trainee survey and a suite of frequently asked questions to select as appropriate	Sarah
	Develop NETS analysis and reporting for local purposes	Design, implement and evaluate a tool for reporting NETS data to support multi-professional quality intervention planning	QPO non-medical
	Develop process for managing free text comments	Co-produce a process for analysing and planning quality interventions with professional leads to provide assurance and governance	Heather
2.11 Quality Management in Primary Care	Manage the process for approvals and reapprovals of GP Educational Supervisors, Clinical Supervisors and learning environments for GP Practices in Kent, Surrey and Sussex	New educators approved and reapprovals carried out before they expire. All learning environments hosting GP trainees approved as a safe and effective clinical learning environment	Yaa



	<b>Activity</b>	<b>Deliverable</b>	<b>Lead</b>
2.11 Quality Management in Primary Care (continued)	Work with the Primary Care team to develop and implement processes for ensuring the learning environments are safe and effective. All GP Practices hosting trainees (Foundation or GP) are monitored in line with the HEE Quality Framework and Standards. Actions taken are consistent across the region	Clear audit trail, escalation policy and records of actions and outcomes for quality interventions undertaken within Primary Care	Heather/Yaa
	Arrange, co-ordinate, attend and provide administrative support for primary care meetings that have a quality function	Agree which primary care meetings quality will attend and their role at the meeting	Heather/Yaa
	Manage triangulation of evidence related to quality standards	Develop a process for triangulation of CQC, NETS, GMC NTS and any other evidence linked to quality standards	Yaa
2.12 Lay representation	Operationally manage the recruitment, training and contract arrangements for quality interventions lay representation	Trained competent lay representative attendance at Quality interventions and QMOG	Bridget
2.13 Trainee representation	Develop and enhance the role of trainees as part of the quality intervention and assurance functions	Establish the trainee representation role, contracts, expenses aligned with South East region	Tiffiney
		Develop training materials to support trainees with their role on quality interventions	Tiffiney

### 3. Workforce planning and Intelligence

	Activity	Deliverable	Lead
3.1 Compile intelligence to share with local office Transformation and Workforce planning teams	Gather holistic information from quality processes to determine areas requiring transformation across systems	Provide assurance that the clinical learning environment has processes for non-medical staff in line with the HEE Quality Framework standards	Bridget
3.2 Develop and monitor a process for gathering evidence from placement providers for non-medical education	Tool/process developed and agreed with placement providers and HEIs	Clearly documented trail of evidence to support monitoring and assurance	Bridget

### 4. Workforce Transformation

	Activity	Deliverable	Lead
4.2 Establish quality function with transformation team to ensure the HEE Quality Framework is implemented as appropriate	Agree processes and responsibilities for supporting implementation of HEE Quality Framework with transformation lead	HEE Quality Framework applied to new roles	Bridget

### 5. Working collaboratively across regions and nationally

	Activity	Deliverable	Lead
5.2 Integration meetings with South East operating model	Attendance at meetings to integrate KSS Quality Team functions and reporting to the regional South East quality activity	Integration into South East Quality model	Liz/Bridget

## Meetings to be covered linked to activity above

Meeting	Internal/ external	Frequency	Team member(s) to attend
Quality Surveillance Groups x2	External	Quarterly	Liz
GMC/NHSE/NHSI	External	Bi monthly	Liz
Quality Team - Strategic	Internal	Monthly	Liz – all
Quality Team - Operational	Internal	Weekly	Bridget
Direct reports 1:1 x6	Internal	Monthly	Liz/Bridget/Heather
South East Clinical Forum	Internal	Quarterly	Liz
Quality Management Oversight Group	Internal	Monthly	Liz/Bridget/Heather/Sarah
Operational Group	Internal	Weekly	Bridget/Liz
South Regional SLT meeting	Internal	Quarterly	Liz
Quality Leads Meeting	Internal	Quarterly	Bridget
Joint Intelligence Group – Surrey Heartlands	External	Bi-monthly	Liz
KSS SLT	Internal	Monthly	Liz
KSS SMT	Internal	Monthly	Liz/Bridget
MEM	External	Quarterly	Bridget
CTAG	External	To be determined	Liz
Guardians of Safe Working	Internal	Quarterly	Liz
GMC liaison meeting	External	Quarterly	Heather/Liz

## Team members

Liz Fidler – Associate Dean - Quality  
 Bridget Kelly – Quality Lead  
 Heather Haynes – Quality Support Manager (Reporting and Regulation)  
 Tiffiney Kent – Quality Project Officer  
 Hayley Kenway - Quality Project Officer  
 Vacant – Quality Project Officer  
 Sarah Stanbridge – Quality Project Officer/Quality Support Administrator  
 Vacancy – Quality Project Administrator  
 Yaa Addo – Quality Support Administrator (Primary Care)

## References

HEE Business Plan for 2020/21 – [HEE business plan](#)

HEE Quality Framework – [HEE Quality Framework 2019-20](#)

HEE Quality Standards – [HEE Quality Framework 2017-18 Quality Standards](#)

HEE Intensive Support Framework – [A guide to the HEE Intensive Support Framework](#)

## Contact

If you have any queries about this document or wish to contact the team, please contact [kssquality@hee.nhs.uk](mailto:kssquality@hee.nhs.uk).