# **Quality Team Working across Kent, Surrey, and Sussex Annual Report 2020-21 QUICK GLANCE**



### Introduction

The Kent, Surrey and Sussex (KSS) Quality Team work to ensure there are high quality clinical learning environments for all healthcare learners, primarily within NHS trusts and primary care, across the KSS region, ultimately aiming to support the delivery of high quality patient care. The Quality Team's work is underpinned by our mission statement and strategic ambitions.

### **Mission statement**

We are committed to supporting the implementation of education standards in clinical learning environments as defined in the HEE Quality Framework. Learners have a right to expect safe, good quality education from their clinical placements.

### Strategic ambition 1

To provide evidence-based quality management processes that enable transformation and sharing of best practice.

### Strategic ambition 2

To contribute to wider quality management systems enabling sharing of intelligence to promote learning opportunities.

For more information on the areas covered within this summary document, please read the full annual report.

### Covid-19 Response

HEE made the decision to pause all **routine** quality activities during the COVID-19 pandemic. The focus remained on the key areas of Induction, Clinical Supervision, Patient and Trainee Safety, working with professional leads to mitigate risk.

Quality Management Oversight Group continued to meet monthly; five of twelve held as extraordinary meetings.

Worked with Heads of School to review trust action plans throughout the year as the pandemic situation changed and further surges in Covid-19 cases arrived.

During further COVID surges recognised that pressure on services may impact on the implementation of requirements on Trust action plans. Action plan monitoring continued, taking a proportionate approach.

Primary Care Quality processes were streamlined taking into consideration the increased workload in general practice.

HEE set out a process for how escalating concerns should be reported. The quality team developed an internal process for checking for concerns in the specific inbox and an escalation route.

Supported County surge planning meetings during the second wave of the pandemic from October 2020 to March 2021. beneficial as it enabled awareness of areas which were experiencing higher pressures from covid-19, aiding in taking a proportionate approach to quality interventions and monitoring.

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### **Quality Interventions**



Quality interventions took place virtually – the team worked to rapidly change processes and created guidance to support the team, internal and external stakeholders.

All interventions in 2020-21 took place virtually via Microsoft Teams. Guidance documents to support this were produced.

Multi-professional interventions during this period that were well attended and facilitated and allowed intelligence to be gathered from the wider workforce when considering the impact of the learning environment on all learners.

A review of all Immediate Mandatory Requirements issued between 1 January 2017 and 15 March 2020 took place and the outcomes discussed with stakeholders to enable the production of guidance in issuing and monitoring IMRs to ensure a more consistent approach.

### **Trainee Surveys**



National Education and Training Survey

- •Management of free text comments.
- •Review of quantitative data.
- Working with the other south local offices to share information about the survey, discuss ways of working with the data, agree communications to ensure consistency across the south and strengthen feedback to the national team.
- Quality Lead attended the National NETS Implementation Group on behalf of the South East which enabled more input into the survey, sharing of NETS information and better planning for NETS related tasks such as communications.



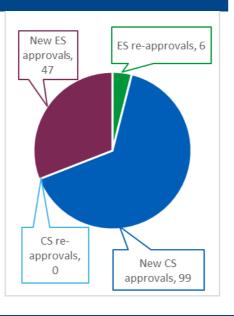
General Medical Council National Training Survey

- •Survey was postponed due to covid-19. Ran from 22 July to 12 August 2020, it was not in usual format and was a shortened, targeted survey with covid-19 related questions.
- •Trainer data collection and validation carried out by team.
- •No during survey tasks to support survey. 41.4% trainee response rate.
- •A General Medical Council National Training Survey results support tool was produced to assist stakeholders with reviewing the results.

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### **Primary Care**

The approval of Clinical Supervisors (CS) and Educational Supervisors (ES) in General Practice is a GMC requirement. In total there are 736 approved supervisors across Kent, Surrey, and Sussex. Due to Covid-19 Reapprovals had been automatically extended for a period of twelve months from 24.04.2020, reflecting the low number of reapprovals.



### Regulation



Overview of work in relation to regulatory bodies:

- Fitness to practise responded to three requests.
- •GMC Quality reporting (formerly known as the Deans' Report) there are five concerns which meet the threshold for reporting to the GMC. Two concerns have been de-escalated from GMC quality reporting in 2020-21.
- •GMC enhanced monitoring continued to work with the GMC on enhanced monitoring cases within KSS, including the de-escalation of one case.
- •Guardians of safe working hours (GSWH) Associate Dean Quality attends the GSWH group to link the team to this important role.
- •HEE KSS GMC Quality Assurance review will begin in October 2021.

### Reporting and governance











Quality Management
Oversight Group (QMOG)
ensures all HEE KSS
learners on clinical

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placements meet the
required quality standards of
the relevant professional
regulator and curricular
requirements, thus ensuring
that the future w orkforce is fit
for purpose and able to
provide safe, compassionate
care.

Briefing papers responded to specific areas of concern within NHS Trusts by preparing comprehensive deep-dive reports and briefing papers where appropriate. This supported triangulation of evidence, reporting to regulators and evidence-based decisionmaking regarding quality interventions.

Quality Surveillance
Groups (QSG) provided
monthly reports for the QSG
to support wider quality
monitoring processes and
intelligence sharing between
Arm's Length Bodies.

Joint Strategic Oversight
Group (JSOG) contributed
to reporting of concerns
nationally through
completion of a template to
support identification of Early
Warnings/Emerging
Concerns for the JSOG.

SE EQMOG: The Education
Quality Management
Oversight Group (EQMOG)
was established during
2020/21 as part of the
regional quality governance
structure. The group meets
monthly, chaired by the
Regional Postgraduate
Dean, and reports to the
South East Regional Senior
Leadership Team.



Education

•The KSS Quality Team newsletter has been established as a forum to share examples of notable practice in healthcare education and training with both internal and external stakeholders. One edition of the newsletter was produced, other editions were paused due to the covid-19 pandemic.



planning and intelligence **Norkforce** 



January 2021, an

important step for

intelligence from

QMOG triangulating

multiple professions.



**Norkforce transformation** 

- During all quality interventions, feedback has been shared with transformation teams and stakeholders to aid decisions relating to the clinical learning environment.
  - Feedback from all quality interventions carried out in 2020-21 has been shared with professional leads via QMOG.



# regions and nationally Working collaboratively across

- South East Regional Quality Team Meetings have been established and take place monthly. The group have focused on the South **East Quality Operating** model, aligning processes and making joint decisions on how key areas of work such as NETS should be managed.
- National quality refresh has taken place during 2020-21, the Associate Dean Quality has contributed to Task and Finish Groups to support this work and incorporated feedback from the Quality Team.