

A guide to the HEE Intensive Support Framework





Introduction

The purpose of Health Education England (HEE) is to support the delivery of excellent healthcare and health improvement, in partnership with patients and public across England, by ensuring that the healthcare workforce of today and tomorrow has the right numbers, skills, values and behaviours, at the right time and in the right place. The quality of teaching, learning and assessment delivered by both education institutions and clinical placement providers affects the learning outcomes and the assurance that professional regulators are able to provide to patients, the public and employers that newly qualified healthcare professionals are safe and able to practise to the required standard at the point of registration.

For HEE, the quality of teaching, learning and assessment, particularly in work-based clinical placements, lies at the heart of our responsibility in the NHS. The HEE Quality Strategy and Framework describe HEE's vision for how we will use our leadership and influence to assure and continuously improve the clinical learning environment. The Strategy and Framework set out:

- HEE's responsibilities for the quality agenda and our multi-professional leadership offer to the education and training system for healthcare;
- How HEE will build stronger collaborative alignments with the wider health and care system to drive quality improvement in education and training;
- How HEE will align our resources to make the most effective and efficient use of our education infrastructure, investment, leadership and capability;
- A single, multi-professional HEE Quality Framework to ensure a consistent approach to quality improvement across work-based clinical learning and assessment for all healthcare learners.

Since the Strategy and Framework were published, a Quality Handbook has been produced, which assists teams to implement the Framework. Specific quality interventions supportive activities are described within this document. The quality interventions enable HEE to investigate concerns and risk, but also detail good practice, while the supportive activities are used by HEE to help achieve quality improvement within clinical learning environments.

Alongside the Handbook, an **Intensive Support Framework** has also been developed. This framework is designed to enable both categorisation of concerns and provide support to address them. It facilitates a graded approach to reporting and support, with strong collaboration and partnership working between quality teams, providers, specialty schools, programme leads, and other relevant stakeholders, with involvement of a wider range of key stakeholders at a national level (including the professional regulators and service commissioners) in some circumstances.

This guide is to assist regional quality teams and local offices to implement the framework in terms of categorising concerns, reporting, escalation (and de-escalation) and monitoring. It also gives clarity to providers of clinical placements around HEE's approach to quality management and what implementation of the framework means to them in practice. The guide will also be of interest to regulators in making transparent HEE's escalation, reporting and monitoring mechanisms in relation to concerns affecting its learners.



The Intensive Support Framework (ISF)

The framework was developed by a sub-group of the National Quality Scrutiny Forum (QSF), chaired by Sir Stephen Moss, and approved by HEE Executive. The ISF aligns to, and is supported by, the HEE Quality Strategy, Quality Framework and Quality Handbook, as well as the HEE Suspension of Postgraduate Medical Training in relation to serious concerns policy. Key characteristics of the ISF are:

- It is concerned with all clinical learning environments, within which learners are placed;
- It describes an escalation and de-escalation route for concerns;
- The framework is used in the spirit of collaboration with clinical placement providers;
- It offers a consistent, national HEE internal framework;
- Once concerns have been identified the ISF will exist as a delivery vehicle for the improvements needed;
- It is a transparent and unambiguous framework against which concerns can be categorised;
- Categorisation is not static; concerns can move between categories on the grounds of triangulated evidence;
- Its focus is on the HEE response to concerns, not on the identification of the concern.

The principles of the ISF align to those of the Quality Strategy, Quality Framework and Quality Handbook. These are:

- Risk-based interventions and supporting activities are not routine but evidence-based and undertaken as and when needed to manage risk at different levels to ensure that HEE's resources are deployed in the most efficient and effective way;
- Responsive once identified, concerns are responded to in a timely manner. Minor concerns
 may not require immediate attention, nor might they require a formal intervention but be managed
 in-house by a provider or left to a Specialty School / TPD to address. Concerns with an ISF
 categorisation of 2 or above would be expected to have been responded to in a more rapid
 manner than those in category 1;
- Proportionate the response of HEE to a concern must be proportionate to the level of risk and to the complexity and sensitivity of the concern. It also takes into account other factors, such as the size of the provider, the provider's own educational governance arrangements and the number of learners affected:
- Flexible this is essential to allow HEE teams to be sensitive to the wide variety of concerns that may present and also to regional variation (e.g. in geography, types of provider and provider relationships). However, they do ensure a common language and consistent terminology, as well some consistency in the types of activities undertaken across the system;
- Supportive the ISF is not intended to be punitive but is designed to address concerns and improve education and training quality across the system, while also ensuring that trainees are not exposed to clinically unsafe environments and that patients are safe.



Risk categorisation of concerns

HEE has developed a consistent approach for the identification of concerns and associated risks. Concerns can be identified from evidence sources, including (but not restricted to) learner survey data, complaints, concerns from regulators and ALBs, learner committees / representatives, alerts from providers, and so on¹. Drawing on the guidance from the Quality Handbook, HEE local quality teams will gather further evidence for triangulation of concerns via quality interventions.

All identified new concerns are given a risk rating locally using the HEE corporate risk matrix (scores range between 1 and 25 based on likelihood and impact). All concerns are managed in accordance to regional procedures but those rated 12 or above are also reported to the HEE national team via the regional and national risk registers. The risk ratings for on-going concerns may be revised depending on the outcomes of any interventions and / or improvement initiatives. On-going items may therefore be escalated to the regional and national risk registers or de-escalated as appropriate. All concerns are given an ISF category. The categories are as follows:

- Category 0 No Concerns: the education and training delivered by the provider meets all the HEE standards;
- Category 1 Minor Concerns: there are one of more areas where the provider does not meet HEE standards. However, there are active plans in place to meet these standards, which are consistently delivered against;
- Category 2 Significant Concerns: there are a significant number of areas where the provider does not meet HEE standards and / or plans in place are not delivering sustainable improvement at the pace required;
- Category 3 Major Concerns: the provider has fallen, or is at risk of falling, well below the standards expected by HEE. The provider has not delivered on the improvement trajectory agreed with HEE; there is a significant risk to, or significant impact on, the quality of education and training provided to learners. Notice will be given that training in the affected clinical learning environment will be suspended if rapid and sustained directed improvements are not made;
- Category 4 Training Suspended: HEE has taken the decision to suspend training / remove trainees within the affected clinical learning environment due to concerns regarding the quality of education and training and / or the safety of that learning environment. HEE's Suspension of Postgraduate Medical Training in relation to serious concerns policy (Suspension of Postgraduate Medical Training Policy) and procedure is invoked (this is applicable to postgraduate medical trainees only). There are recovery plans in place with the provider to reinstate training.

The categorisation of concerns will be subject to agreement and confirm / challenge via local and regional governance arrangements. This will include triangulation of evidence and, where

-

¹ An increasingly systematic approach to the gathering and analysis of quality data and metrics to identify concerns, risk levels, as well as potential good practice, is being developed and refined by HEE through various workstreams, including the Quality Dashboard, Data Warehouse, NETS and Data Portal.



appropriate, clinical opinion. Where category 4 is to be applied to a concern, there will need to be scrutiny and agreement at a national level.

The category given to a concern determines the nature of the activities relating to reporting, monitoring and support. As with HEE risk ratings, concerns can move between ISF categories. **Appendix 1** provides a flow diagram for reporting, monitoring and escalating concerns (<u>ISF Flow Chart</u>).

Reporting

If category 0 or 1 is appropriate, then the expectation is that any concerns will only be shared locally by quality teams in partnership with the following stakeholders (as appropriate):

- Head(s) of Specialty School;
- Training Programme Directors (TPDs);
- Programme Leads;
- Practice Placement Leads;
- Local Quality Leads;
- · Education and Training Leads;
- Educators (Educational Supervisors, Clinical Supervisors, Mentors etc.);
- Affected learners;
- Provider organisation education / quality leads and / or teams.

It is not expected that any category 1 concerns would appear on the regional or national risk registers.

Category 2 concerns will be required to be shared locally with the stakeholders listed above. However, they should also be reported to the regional Head of Quality, the Postgraduate Dean, the respective regulator(s) (e.g. the General Medical Council) and the provider's Director of Medical Education. Category 2 concerns may, but will not always, reach or exceed the risk rating threshold of 12 and therefore be included on the regional and national risk registers.

At category 3, the same stakeholders will again be involved as at category 2 but, locally, the concerns will need to also be shared with the provider's Chief Executive and Medical Director and, regionally, with the regional Quality Surveillance Group. Nationally, the concerns must be reported to the Joint Strategic Oversight Group (JSOG), the Executive Director of Education and Quality, and the National Medical Director. It is expected that all concerns at category 3 will also be reported via the regional and national risk registers as they will have a risk rating in excess of 12 and therefore be available to the HEE Executive.

Category 4 concerns will be shared with all of the above stakeholders, but also must be reported directly to the Regional Director and HEE Executive, including the national Medical Director and Deputy Medical Director. At provider level, the Chair will need to be notified and local and regional service commissioners must be kept up-to-date.



Monitoring

Regional quality teams may wish to explore whether there are areas of good / best practice within category 0.

At categories 1 and 2, it is expected that concerns will be monitored by HEE via regional quality teams, in partnership with Specialty Schools. It is important at this level that concerns are monitored closely as they may provide an early warning to the potential for more significant issues to develop, and therefore afford the opportunity for early intervention to counter this.

Category 3 concerns should also be monitored nationally via the regional and national risk registers and by the JSOG.

At category 4, there will need to be oversight from the HEE Executive and the JSOG.

Activity / support

At category 0, the only action that may be appropriate would be investigating areas of good / best practice and sharing these with other providers within the region and nationally as appropriate.

Once concerns are identified and provisionally risk rated and categorised (from 1 to 3), the Quality Handbook describes a range of interventions and supportive activities, which HEE can undertake. The interventions are designed to enable regional quality teams to investigate concerns further and gather evidence. This may result in the concern's risk rating and the ISF categorisation being adjusted. The supportive activities are designed to enable HEE to work together with providers to improve quality.

Support through the framework

The ISF provides a framework, within which the supportive activities described in the Quality Handbook can be drawn on in a graduated way to assist providers with improving quality where concerns have been identified. For ISF categories 2, 3 and 4, the support offer to providers may involve a single supporting activity or a multi-faceted support package. At category 3 and 4, there may be further assistance required from wider system partners. HEE's levels of involvement will be:

- Category 1 Self-directed quality improvement Support is provided by HEE quality teams
 locally as appropriate and with a view to preventing concerns with relatively low level risk
 developing into more significant concerns. Advice and suggestions for improvement might be
 made by HEE quality teams and there may be the sharing of good practice;
- Category 2 Enhanced support programme This will involve formal, time limited action plans
 in response to recommendations and requirements set by HEE following intervention(s). The
 action plans will be agreed between HEE and the provider to ensure SMART objectives. Plans
 may be shared with other stakeholders (e.g. GMC, NHSI, CQC etc.).
- Category 3 Intensive support programme Multi-agency oversight and ownership with commitment to effect improvement and manage risk. Notice of intention to withdraw approval or suspend training if improvement not delivered.



 Category 4 – Training recovery support programme - Trainees removed in line with HEE Suspension of Post Graduate Medical Training in relation to serious concerns policy.. There will be an expressed ambition to remove this suspension in the future unless training posts are decommissioned. There will be an agreement on lead agency and ownership, with commitment from all partners to effect improvement. Support and any associated resources will be agreed through multi-agency discussions.

Movement between ISF categories

Initial categorisation of a concern will almost always be below category 4 and, in most cases, will likely be at category 1 or 2. At category 2, action plans and improvement initiatives will, in most instances, lead to de-escalation to category 0 or 1. If, however, insufficient progress is made to address concerns at category 1 or 2, or there is a significant and rapid fall in quality, then there will be an escalation to category 3. At this point the ISF will initiate the series of actions, support and reporting escalation described above that should prove sufficient to improve quality and facilitate a move back to a lower category.

There will, however, be occasions where this fails to address the situation and, as a last resort, HEE will escalate a concern to category 4, at which point training is suspended within the affected clinical learning environment. The ISF enables HEE to continue to support and work with the provider to reinstate training. Assurance that it is safe to do so will require sustained improvement over time, which must be evidenced (for example, through feedback from consultants, non-training grade doctors and other healthcare professionals).

Escalation through the categories reflects the escalation process described in the Suspension of Post Graduate Medical Training in relation to serious concerns policy, which has been approved by the HEE Executive.