

Kent Surrey and Sussex Primary Care

Clinical Learning Environment Approval Process

Document Status

Version:	3.0
Ratified by:	Prof Chris Warwick
Date ratified:	22 May 2023
Name and role of Senior Responsible Officer:	Prof Chris Warwick, Primary Care Dean
Date issued:	22 May 2023
Review date:	21 May 2024
Target audience:	Kent, Surrey and Sussex Primary Care
Document History:	23/6/2022 - Version 1.0 ratified 5/10/2022 - Version 2.0 ratified 22/5/2023 – Version 3.0 ratified

Introduction

The Workforce, Training and Education Directorate of NHS England (NHSE WT&E) is responsible for the quality assurance of education and training of healthcare learners in England as per the Care Act (Care Act, 2014). Within regions, Primary Care Training Hubs (PCTH) are accountable (through Primary Care Schools) to the Primary Care Dean for the quality control of clinical placements in primary care and the quality of supervision of learners provided by trained supervisors (Health Education England, March 2020, p. 8). The PCTH maturity matrix includes quality assurance as a core function and is described in the PCTH Operating Guidance (Health Education England, March 2020, pp. 17-18).

This document explains the process in Kent, Surrey and Sussex by which Clinical Learning Environments (CLE) in primary and community care are accredited by the PCTHs. The process is supported by both the NHSE WT&E Kent, Surrey and Sussex (KSS) Primary Care Department and the Quality Team.

Background

- NHSE WT&E's strategic goal for Quality in 2021/22 was to deliver and quality assure with partners, education and training that is robust, highly sought after and future focused (Health Education England, 2021/22).

- NHSE WT&E set out clear expectations for the quality of healthcare learning environments by embedding our refreshed Quality Framework (Health Education England, 2021-24).
- Part of NHSE WT&E's core business was to work with health and care systems, system partners and regulators to regulate and improve the quality of CLEs (Health Education England, 2021/22). The Quality Strategy outlines a 'whole system' approach to meeting our patient safety and learner wellbeing expectations to drive a more consistent and systematic approach to quality assurance and improvement (Health Education England, 2022/23).
- Expanding the primary care workforce remains a top priority to increase capacity (NHS England, 2022/23, p. 25)
- To meet these strategic objectives, NHSE WT&E KSS Primary Care Department introduced a process to approve CLEs across neighbourhoods, such as Primary Care Networks (PCN). PCTHs work with educational providers to ensure high quality CLEs and expand placement capacity in primary care. The approach is risk-based as with other approval processes within the NHSE WT&E Quality Framework (Health Education England, 2021-24)

Scope

This new process allows the approval and support of multiple sites as a learning environment (e.g., across one PCN). By applying a multi-professional approach, it gives the opportunity for the learning environment to be accredited for all the learners it hosts in a single process. This document does not include the approval of KSS General Practice (GP) Supervisors, which is a separate but interrelated process. The CLE approval process will be completed by the PCTHs and coordinated by the Primary Care Quality Team (PCQT).

Process



Initiation

All CLE approvals in Primary Care are subject to the new national NHSE WT&E guidance for multi-site approval (typically PCNs). Each PCTH will liaise with the Primary Care Department to plan how they will approach accreditation of all the PCNs in their locality.

Below is a non-exhaustive list of scenarios when a CLE process is also required:

- The PCTH initiates a multi-site CLE approval in their locality.
- An HEI identifies a new placement provider.
- The merger of Primary Care providers under one NHS Organisation Data Service code, where one or more organisational sites have changed their code.

- When an Integrated Training Post (ITP) speciality site provides GP training for more than two sessions per week, and is not already approved for post-graduate doctors in GP training on the General Medical Council database.
- The application of a GP Clinical or Educational Supervisor in a training site or organisation that is not already approved for post-graduate doctors in GP training on the General Medical Council database.
- The result of Triggered Quality Assessments.

This new process is likely to be iterative and will require flexibility while PCNs are still in varying stages of their development. Therefore, PCTHs and PADs should contact primarycare.kssquality@hee.nhs.uk for further advice on a specific scenario if required.

If there is likely to be a delay to the CLE approval process, the approval can be completed as a multi professional single site to avoid delay to placements.

Approval panel

The PCTH approval panel will vary depending on skills and availability of members. PCTHs should establish local processes in accordance with this document. This will need to be agreed with Higher Education Institution (HEI) partners to ensure their programme regulations are met. The Lead Approver is the Training Hub Clinical Lead for relevant locality.

Form receipt and management

For all multi-site CLE approvals, the PCTH will send the applicant organisation a link to our website to download the [Clinical Learning Environment approval form](#).

The PCTH is advised to meet the educational lead of the clinical learning environment to support them with any questions that they may have about completing the form. Where there is no Community Education Facilitation (CEF) Lead available to complete the form, an appropriate CLE lead should be identified. This may be a practice manager or any clinical educator (e.g., a GP, nurse, AHP or pharmacist supervisor or assessor).

All sites in the learning environment must be involved in the application. The form should be completed to include all learner types across all sites in the learning environment.

The PCTH check the submission. If the form is incomplete, the PCTH will return the form to the applicant organisation. Once the clinical learning environment lead has completed the form, they should send it to the PCTH, including any appropriate evidence embedded within the document.

Meetings (virtual or in person)

Once the submission is complete, the PCTH book an approval meeting (virtual or in person) with representatives from the applicant organisation. During the approval meeting, evidence will be reviewed, and the submission discussed. The meeting should be both formative and supportive.

The Lead Approver needs to be assured that each training site meets the standards required for all learners. If there are any gaps or concerns identified, these should be explored during the

meeting. Any recommendations for improving the learning environment, or mandatory requirements to gain approval, need to be agreed.

Approval

Following the meeting, the Lead Approver completes the approval sections on the submitted form, including any recommendations or mandatory requirements. If approval has not been given for all sites, or for all learners, then this must be clearly documented on the form. The Quality Management Forum maintains oversight and monitors the progress of all CLE approvals.

Where not all practices within Primary Care Networks can be approved for GP or multi-professional supervision, these are known as 'hybrid approvals'. The approval of each site within the Primary Care Network will be marked on the Clinical Learning Environment form. In all cases, the Primary Care Quality Team will mark the approval status of each practice within the PCN on the CLE spreadsheet.

If a Primary Care Network is likely to be a hybrid approval, a representative from the Quality Management Forum should provide an update at the Primary Care Department Quality Meeting as soon as possible.

Sending to the PCQT

When all sections of the form are complete, the PCTH will send it to the Primary Care Quality Team at primarycare.kssquality@hee.nhs.uk. The Primary Care Quality Team will save it to the Primary Care Systems SharePoint site and make it available to the Head of Primary Care School for ratification. The PCTH Administrator is responsible for updating the [CLE spreadsheet](#) with CLEs which are ready for approval.

PCTH Administrators should email primarycare.kssquality@hee.nhs.uk, with their Lead copied, to request access to the KSS Primary Care Systems SharePoint site.

Site changes

Where there are site changes, the PCTH is required to complete an addendum form for Primary Care Network approval and submit this to the Primary Care Quality Team (primarycare.kssquality@hee.nhs.uk).

Second readings

Second readings are not routine. However, new CLE Lead Approvers will be supported by having up to their first three approvals read at the discretion of the Head of School of Primary Care, who will provide feedback. Approvers can also request second readings if they feel it is required.

Ratification

The Primary Care Quality team send the completed form to the Head of Primary Care School for their name and date to be added.

Communication

The Primary Care Quality Team write to the applicant organisation and the PCTH to inform them of the outcome, noting any recommendations and Mandatory Requirements given.

The PCTH communicates the approval to the relevant HEIs.

Monitoring Mandatory Requirements

Any Mandatory Requirements or recommendations made by the approval panel will be monitored by the PCTH. They will follow up any actions and they will notify NHSE WT&E Primary Care Department Quality Team of any completed requirements through the CLE spreadsheet.

Annual review

The purpose of the annual review is to ensure that Clinical Learning Environment approval information remains up to date and any recommendations or mandatory requirements have been followed up and met.

The annual review meeting serves as a reminder to PCNs and other approved organisations of their responsibility to report any significant changes or learning environment concerns to the PCTH, in a timely manner. This is also a formative opportunity for gathering and sharing best practice as well as a development opportunity for the Clinical Learning Environment.

The PCTH will conduct the annual review for each CLE to document site changes and the completion of mandatory requirements within the CLE form. The first annual review for the CLE pilot sites may require additional evidence.

The educational lead of the clinical learning environment will complete the annual review section of the CLE form, and the PCTH Clinical Lead for the relevant locality will read this and complete their own sections.

The PCTH will notify the Primary Care Quality Team of the review completion within SharePoint, update the CLE tracker, and provide feedback to the clinical learning environment.

The PCTH will communicate the outcome of the review to any Higher Education Institutions with a stake in the CLE approval.

Roles and Responsibilities

The NHSE WT&E KSS **Primary Care Department** is responsible for:

- Ensuring that decision making for the recognition of placement providers is consistent, fair, valid and works collaboratively with the Quality Team to advise the Postgraduate Dean accordingly.
- Developing the skills and competencies of the CLE Lead Approvers to undertake approvals.
- Reviewing the recommendations of the approval panels.

Within the NHSE WT&E KSS Primary Care Department, the **Primary Care Quality Team (PCQT)** is responsible for:

- Coordination of Education and Training Quality Assurance processes in KSS Primary Care.
- Version control of the CLE form.
- Communicating to the applicant organisation the completion of the CLE approval and confirming any recommendations or Mandatory Requirements.
- Notifying the GMC, Healthcare Education Team and GP Faculties about GP training site approvals as part of GP School work.
- Attending PC Department Quality meeting to capture and record any suspended or revoked CLE approvals.

The **PCTH** is responsible for:

1. Initiating a multi-site CLE request.
2. Sending out the invitation and website link to the CLE form to the applicant organisation.
3. Ensuring that the approval panel consists of the Locality Training Hub Clinical Lead, at least one GP and one other healthcare professional, and that they have appropriate knowledge of the requirements of the regulators.
4. Checking that the approval form is complete.
5. Arranging the approval meeting for multi-site CLE approvals. Where single site approval is needed for GP training, then the approval meeting should be arranged through the PCQT.
6. Keeping the Clinical Learning Environments spreadsheet continuously up-to-date as guided by the PCQT.
7. Monitoring and following up any Mandatory Requirements or recommendations.
8. Sharing completed Primary Care Department approvals with the relevant HEIs following the Head of Primary Care School ratification.
9. Assessing existing and proposed education and training environments.
10. Reviewing any major changes to the learning environment and taking appropriate action if needed.
11. Informing the Primary Care Department Quality meeting if there are changes to a CLE that would affect the continuation of that CLE approval.
12. If the CLE approval be suspended or revoked, the TH should inform the relevant CLE and HEI accordingly.
13. Holding a regular Quality Management Forum meeting (see Quality Management Forum toolkit for terms of reference).
14. Updating the CLE spreadsheet

The **PCTH approval panel** are responsible for:

1. Deciding the range of learner or educating professions for which recognition is sought and to be fully familiar with their requirements.
2. Liaising with relevant HEI partners to engage in meetings/approvals as required by the HEI.
3. Making recommendations to the NHSE WT&E Primary Care Department Quality Team and Primary Care Department, acting on behalf of the Postgraduate Dean regarding the recognition or on-going recognition of environments.
4. Agreeing recommendations or mandatory requirements with the learning environment.
5. Ensuring that the PCTH Clinical Lead for the relevant locality completes the approval section of the form.
6. Sending the completed CLE form with any recommendations or Mandatory Requirements to PCQT.

The **applicant organisation** (for example, PCN Education Team/CEF) is responsible for:

- Ensuring that written confirmation of approval has been received from the NHSE WT&E Primary Care Department Quality Team before hosting any learners.
- Ensure that all sites and all relevant professions have contributed to the application.
- Informing the NHSE WT&E Primary Care Department Quality Team and the PCTH of any major changes to the learning environment.

Anyone who places a learner into a learning environment is responsible for:

- Checking that the location is approved for learners of that profession, and that there is a suitably qualified supervisor.
- Before placing post graduate doctors in GP training, the GP Training Programme Director (TPD) is responsible for checking that locations are approved for the relevant Training Programme on the [GMC website](#). If the location is not yet approved, then this must be completed before the placement is started (General Medical Council, n.d.).

Governance

- Updates about the progress of Clinical Learning Environment approvals are required at the Primary Care Quality Meeting.
- There will be an annual calibration exercise to ensure consistency of the approval process across Kent Surrey and Sussex. Representatives from each PCTH approval panel, together with an HEI representative will meet with the NHSE WT&E Primary Care Department 'Escalation Panel'.
- The Escalation Panel provides a formal setting for complex learning environment and educator approvals to be considered by a group of appropriate individuals. In an extraordinary fashion the panel will either meet in person, or virtually.
- The Escalation Panel will provide on-going calibration of recommendations made by those fulfilling the Lead Approver role.
- Each Lead Approver will have a minimum of two of their approval recommendations considered by an Escalation Panel per annum. The Primary Care Quality Team will manage the sampling process.

Data Protection and Information Governance

Why NHSE WT&E collects the information

- NHSE WT&E processes personal information because NHSE WT&E has a legal obligation to do so or because it is necessary for the exercise of NHSE WT&E's statutory functions or any other function in the public interest. This includes the quality assurance of training programmes and ensuring that standards are maintained (Health Education England, n.d.).

What information is collected and how it is stored

- Information about the learning environment including the key contacts for each site will be collected.
- The information is collected from the applicant organisation who submits it to the PCTH for the purpose of CLE approval.
- The NHSE WT&E [Privacy Notice](#) explains how NHSE WT&E will use and protect any information they are given including any information about NHSE WT&E sponsored training, education and development.
- The Applicant organisations, PCTHs, NHSE WT&E Teams and the Primary Care Department on behalf of the Dean must ensure that all data and information is securely stored in accordance with the requirements of NHSE WT&E and the General Data Protection Regulations.

Information Sharing

- The completed CLE approval form will be shared between the PCTHs and the NHSE WT&E Primary Care Quality Team. Where necessary, it will also be shared with the wider NHSE WT&E Primary Care Department and the NHSE WT&E Quality Team.
- The approval status of the learning environment will be shared with the Training Programme Directors, Patch Associate Deans, NHSE WT&E Primary Care Department, the Healthcare Education Team (HET), GMC, and the relevant HEIs.
- Sites approved for post-graduate doctors in GP and Foundation training will appear on the GMC database.
- Locality PCTHs will share completed CLE approvals with respective HEIs.

References

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