

# Primary Care Quality Governance

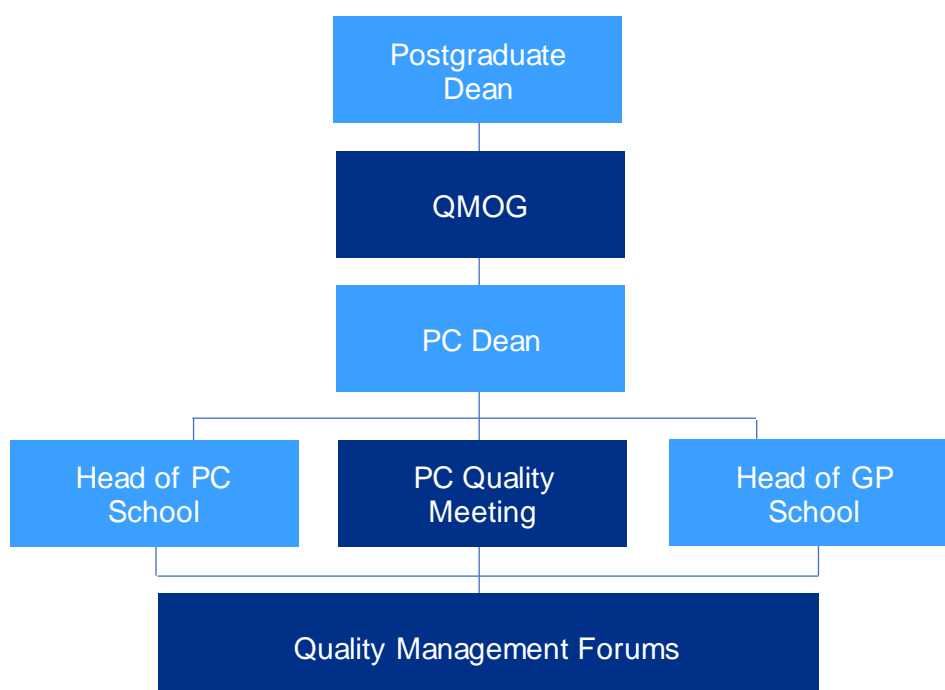
## Workforce, Training and Education (WT&E); Kent, Surrey and Sussex (KSS)

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### Introduction

The Care Act (2014) outlined Health Education England’s responsibility for securing continuous improvement in the quality of education and training and, via this, continuous improvement in the quality of health services. This document sets out how this work is governed within the Kent, Surrey and Sussex Primary Care Department.

### Accountability



## **Workforce, Education and Training – Primary Care Quality Governance**

The Quality Management Forums (QMF) are advisory groups. They are Integrated Care System (ICS) facing, KSS Primary Care Department forums. Members have oversight of all Primary Care quality management processes in its footprint, including clinical learning environment (CLE) and GP Clinical Supervisor (CS) approvals and quality concerns. Each QMF is co-created equally by all members using the Primary Care Department terms of reference as an operational framework. The purpose of the QMF is to ensure that all clinical placements for learners within its locality meet the required education and training quality standards of NHS England, and the relevant professional regulator.

The QMFs are accountable to the KSS Primary Care Dean. They advise the Primary Care Quality Meeting and the Heads of Primary and GP Schools. Any quality concerns which require mandatory reporting must be discussed at the Primary Care Quality Meeting. The Primary Care Quality Meeting is attended by colleagues at the Associate Dean level or their delegates, the Primary Care Senior Leadership, and the Primary Care Quality Team. Through this meeting, the KSS Primary Care Department provides the necessary advice to assure the Primary Care Dean.

The Primary Care Dean and Deputy Primary Care Dean attend the Quality Management Oversight Group (QMOG). QMOG has oversight of the quality of all clinical learning environments in the geography. The Group makes recommendations to support learners with meeting their educational requirements. It ensures that all Kent, Surrey and Sussex learners on clinical placements or participating in education and training meet the required quality standards of the relevant professional regulator and meet curricular requirements. The Group assures the quality management process by agreeing risks, reporting, actions and escalation, to ensure regulatory responsibilities are adhered to.

The Primary Care Dean is accountable to the General Medical Council and advises the Post Graduate Dean. The Post Graduate Dean has final oversight and accountability for Quality in KSS NHS Workforce, Training and Education.

### **Roles and responsibilities**

The following stakeholders have defined roles and responsibilities regarding Quality in KSS Primary Care.

#### Primary Care Quality Team

The Primary Care Quality Team (PCQT) is managed by the Quality Support Officer (QSO). It is responsible for the coordination and administration of Primary Care Quality Assurance, including Triggered Quality Assessments, Clinical Learning Environment, and GP Supervisor approvals and renewals.

The Primary Care Quality Team are responsible for monitoring Triggered Quality Assessments and updating the Triggered Quality Assessment Log. Concerns at Intensive Support Framework Level 2 or above are escalated to the Quality Master Register (QMR).

#### KSS Quality Team

The KSS Quality Team is responsible for the administration and coordination of the Quality Master Register, the Quality Management Oversight Group, and the GMC National Training Survey. The KSS Quality Team also supports the National Education and Training Survey.

### Primary Care School

Quality Assurance of Clinical Learning Environments in Primary Care is the responsibility of the Primary Care School. It also develops Primary Care Networks as learning environments using the Clinical Education Facilitation (CEF) framework.

### GP School

The GP School is responsible for the Quality Assurance of GP Speciality Training and for the approval of GP Educational Supervisors.

### Escalation Panel

The Escalation Panel provides a mechanism for extraordinary escalation and ongoing calibration of GP Supervisor and Clinical Learning Environment approvals.

### Primary Care Training Hubs (PCTH)

PCTHs facilitate training and education in Primary Care. PCTHs provide educational leadership to Primary Care Networks and are responsible for Quality Management. Selected colleagues from the PCTH are accountable for the approval of GP Clinical Supervisors.

### Primary Care Networks

The Primary Care Networks are responsible for Quality Control and development of placements and clinical supervision through the Clinical Education Facilitation (CEF) framework.

### Higher Education Institutions

The Higher Education Institutions are accountable to professional regulators, including the General Medical Council (GMC), Nursing and Midwifery Council (NMC), General Pharmaceutical Council (GPhC) and Health and Care Professions Council (HCPC) for their regulated programmes.

### **Quality processes**

- Reporting of Clinical Learning Environment approvals is in accordance with [Primary Care Quality Team processes](#).
- Triggered Quality Assessments will follow the [Primary Care Quality Management Toolkit and Flowchart](#).
- Approval of GP Supervisors is in accordance with [the relevant process](#) as administered by the Primary Care Quality Team.
- Other quality escalation processes exist within the Integrated Care Systems, Higher Education Institutions, and regulators. The Quality Management Forums should co-ordinate with these other processes as appropriate.

### **Regulation**

There are nine regulators of healthcare professions, and the KSS Primary Care Department will consult their regulations, directly or indirectly, within the scope of its Quality Assurance processes.

- General Chiropractic Council (GCC)
- General Dental Council (GDC)
- General Optical Council (GOC)
- General Osteopathic Council (GOsC)
- General Pharmaceutical Council (GPC)
- The Care Quality Commission (CQC)
- The General Medical Council (GMC)
- The Health and Care Professions Council (HCPC)
- The Nursing and Midwifery Council (NMC)

### Declarations of Interest

The [NHSE Managing Conflict of Interest Guidance](#) will be adhered to. All colleagues of the Primary Care Department should declare their interests using the national CoreStream system. The Primary Care Department requests a list of these interests from the Corporate Governance Team for tracking purposes. Colleagues working in a substantive clinically facing or leadership role within the organisation of concern, who also have an NHSE-WT&E role should not be present during the relevant discussion. However, if their NHSE-WT&E role is not related to the location being discussed, they can speak as appropriate to their role in the meeting.

### Information Governance

The [NHSE Information Governance Policy](#) will be adhered to. Information will be shared on a strict need to know basis and the management of information should adhere to the Caldicott Principles. The Primary Care Dean for KSS is the Information Asset Owner (IAO) for all information held by the NHSE-WT&E Primary Care Department in Kent, Surrey and Sussex (KSS). The Quality Support Officer is the Information Asset Administrator (IAA) for all information held by the NHSE-WT&E Primary Care Department in Kent, Surrey and Sussex around GP Supervisors, Clinical Learning Environment approvals and Triggered Quality Assessments.