

Triggered Quality Assessment

Standard Operating Procedure

Kent, Surrey and Sussex Primary Care Education and Training

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Introduction

Triggered quality assessments (TQA) are initiated when a concern about the supervision, quality or safety of a clinical learning environment (CLE) reaches the threshold for mandatory reporting.

Definitions

Clinical learning environment (CLE)

The physical, contextual, and cultural setting where learners gain healthcare knowledge and skills and where supervisors and learners interact.

Placement provider (PP)

The organisation where learners undertake clinical placements to deliver the practical, clinical element of an education and training programme.

Clinical placement (CP)

Any supervised clinical learning experience within a workplace environment. These placements are provided, conducted, or arranged by the placement provider for learners.

Roles and responsibilities

Roles and responsibilities are detailed in the KSS Primary Care Education and Training Quality governance document.

Education and Training Quality Concerns

Examples of quality concerns are:

- Concerns about any of the six domains (including organisational culture) in the NHS England Quality Framework
- Concerns about the supervision and/or education provided by the educator and/or within the learning environment
- Concerns raised directly with the programme provider (EG GP school or HEI)
- A mid-programme learner moving between learning environments or employment (for example, advanced practice trainees) due to failure of the placement.

In Kent, Surrey and Sussex primary care, education and training quality concerns are managed using thresholds which are listed in the next section. Quality concerns should be

discussed at the Quality Management Forum (QMF). If a concern does not reach the TQA threshold, the quality concern should be managed within this group. The nominated quality concern leads should have a supportive discussion with the relevant staff in the clinical learning environment and the learners. Any outcomes should be shared with the clinical learning environment and escalated if appropriate to the KSS Primary Care department monthly quality meeting (see QMF standard operating procedure for more details).

The nominated quality concern lead should be an experienced learning environment assessor and appropriate subject expert (e.g. Patch Associate GP Dean or Training Hub Clinical Lead). They will be responsible for making the relevant investigations on behalf of the Primary Care Dean. The approach should be supportive throughout and should be focussed on patient safety and the learner's best interests.

The Training Hub should maintain a local record, using the template below, to track any Quality concern meetings for future reference. Minutes should be taken at every QMF and these may be requested by the NHSE WT&E Primary Care Department and other authorities when appropriate.

County QMF	Quality concern lead name and role	ODS Code	Organisation name	Date of concern raised	Type and summary of concern (e.g. clinical learning environment or supervisor)	Date of meeting (if held)	Summary of meeting (if held)	Summary of TQA lead's decisions and further action required (e.g. actions from QMF)	Date of concern closure

Threshold

Triggered quality assessments (TQA) are initiated when a concern about a supervisor or a clinical learning environment (CLE) reaches the threshold for mandatory reporting, or if the Quality Management Forum decide that a TQA is needed.

Concerns that require mandatory reporting are:

- Healthcare regulator or ICB complaints, concerns or investigations in relation to supervisors or the CLE
- When a site has a new overall CQC rating of 'inadequate'
- When a site has a new overall CQC rating of 'requires improvement' and the QMF has determined that a TQA is required
- National survey result, with the threshold agreed by the relevant Head of School.
- Suspensions or dismissals of supervisors
- A current investigation that may affect the organisation as a learning environment and/or the supervision within it
- At the discretion and request of a Head of School or the Primary Care Dean
- Recommendation of the Quality Management Forum (QMF)

If an education and training quality concern meets the threshold for a TQA, a TQA lead is nominated. In general, the GP Patch Associate Dean is the TQA Lead for cases relating to GP Supervisors or GP Registrars and Training Hub Clinical Lead in all other cases.

If there are no GP Supervisors at the practice, the Training Hub Lead should confirm whether there are multi-professional learners at the practice. The TQA process is applied when the practice is part of an approved CLE or when agreed with programme provider colleagues at the Quality Management Forum. The TQA Lead should coordinate with all the relevant stakeholders, including the HEIs and learners to avoid duplication of work or the perception that jurisdiction has been overstepped, and to gain the necessary information. In the absence of a CLE approval, Training Hubs should work alongside quality leads in the ICBs or HEIs to support their quality processes as and when required.

Support for the placement provider

The TQA Lead's communication with the placement provider should be supportive and clear. The TQA Lead should share the [Guidance for Placement Providers](#) (NHS England, 2025) with the placement provider.

Triggered Quality Assessment Form

A summary of the TQA meeting, any actions and/or recommendations must use the approved Triggered Quality Assessment Form which can be found on our [website](#)

Document title format

The TQA document's title must be saved by the TQA Lead in following format:

Organisation Name_ODS code_TQA_Meeting Date (yyyy-mm-dd)

Or

Surname_Firstname_regulator registration number_TQA – Meeting Date (yyyy-mm-dd)

Meeting Details

- **What learner types are in the clinical learning environment** - must include all types of learners of all professions, whether on placement, apprenticeships or employed (either by host practice or local trust), either current or planned
- The **background of the meeting** should outline the history of the concern(s) being investigated and the rationale for conducting the review
- **The TQA team** should include the name of the TQA Lead and additional attendees
- Include the name and job titles of **practice attendees** unless anonymity is required

- The TQA lead should consult and include past **(up to 12 months)** and present **learners** as part of the TQA. Anonymity of any individual learner should be maintained within the TQA document

Coordination with relevant parties

- Information about the concern and the learning environment will be gathered before and during the meeting
- The Triggered Quality Assessment lead should establish from the placement provider's manager which learners are currently on placement in the clinical learning environment
- The TQA lead should coordinate with the relevant stakeholders such as learners, Higher Education Institutions, ICS quality team, relevant schools and regulatory bodies before the TQA meeting
- The TQA lead should record key information from each discussion in this section
- If appropriate, use this section to highlight any relevant national survey data

Summary of Discussion

- The record of conversation should be factual and concise. Subjective comments or opinions should be avoided.
- It is important that all reports are written in such a way that anonymity is protected. It may be necessary to provide more general wording in some circumstances.
- The summary should include feedback from learners in the learning environment. Do not include any information that may lead to the identification of individual learners.
- Personal and special category information should only be recorded if it is relevant to the quality concern and the individual's consent has been obtained.
- Advice and guidance should be offered during these conversations

Summary of Concerns and Conclusion

- Following the discussion and having reviewed the information, a summary of any potential concerns is given

- The assessment team record whether a safe and appropriate learning environment, with a suitable level of supervision is being provided

Level of concern

Using [NHSE's Intensive Support Framework](#), assess the level of support required around the clinical learning environment following the meeting.

ISF Rating Level (please tick)	
No concerns	0
Minor concerns	1
Significant concerns	2
Major concerns	3
Training suspended	4

Note: Intensive Support Framework ratings apply **only to the quality of the clinical learning environment** and should not be applied where the TQA concerns only the supervisor.

Next Steps

- **Mandatory requirements** are the steps that **must** be taken by the placement provider or supervisor. Mandatory requirement should be specific, measurable, achievable, relevant and timebound (SMART). These must be followed up by the TQA Lead by the agreed timeframe.
- **Recommendations** are *not mandatory* but intended to be formative.

Submission of TQA form to the Primary Care Quality Team (PCQT)

The TQA Lead should complete a TQA form within 6 weeks. The completed TQA form must be emailed to england.primarycare.kssquality@nhs.net no less than 5 working days before the Primary Care Quality meeting, with the acronym 'TQA' in the subject line. The form should not be sent to any named email addresses.

Primary Care Quality meeting

All TQAs are reviewed, and ***where necessary*** discussed, at the Primary Care Department Quality meeting. The Primary Care Department 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 outcome of the discussion (with a copy of the completed TQA form) will be communicated in writing by the Quality Team to the relevant educator or CLE and approved by a Head of School. All mandatory requirements will be tracked by the Quality Team.

Decisions will be recorded in the TQA Log. The Primary Care Quality Team are responsible for monitoring TQAs and updating the TQA Log. Concerns at ISF Level 2 or above are escalated to the Quality Master Register (QMR). The KSS Quality Team is responsible for the administration and coordination of the Quality Master Register and the KSS Quality Management Oversight Group (QMOG).

All discussions and decisions at the Primary Care Quality Meeting should be fed back to the Quality Management Forum by the relevant Associate Dean.

Data Protection and Information Governance

Why NHS England collects the information

- NHSE processes personal information because NHSE has a legal obligation to do so or because it is necessary for the exercise of NHSE'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.

What information is collected and how it is stored

- The NHSE Privacy Notice explains how NHSE will use and protect any information they are given including any information about NHSE sponsored training, education, and development.
- All employees of the NHSE Primary Care Department on behalf of the Primary Care Dean must ensure that all data and information is securely stored in accordance with the requirements of NHSE and the General Data Protection Regulations.

Information Sharing

- The completed TQA form will be shared between the NHSE Primary Care Department and the NHSE Quality Team by the KSS Primary Care Quality Team.

- Relevant PAD or TH clinical lead should share any change in approval status of the clinical learning environment or supervisor with the QMF and appropriate allocation teams (eg: faculty admin, Training Programme Directors, GP programme team and the relevant HEIs or NHSE pharmacy school)
- The KSS Primary Care Quality team is responsible for updating GMC connect accordingly

Relevant documents

- A guide to the HEE Intensive Support Framework:
<https://www.hee.nhs.uk/sites/default/files/documents/Intensive%20Support%20Framework%20Guide%20-%20June%202018.pdf> (Health Education England, 2018)
- Education Quality Framework: <https://www.hee.nhs.uk/our-work/quality/education-quality-strategy-framework> (NHS England)
- Education quality interventions review reports: Standard operating procedure:
https://nhs.sharepoint.com/sites/HEEQualityPortal/HEE%20Quality%20Interventions/2024%20SOP%20and%20paperwork/2024_Education%20Quality_Reporting%20SOP.dotx (NHS England)
- KSS GP Clinical Supervisor Approval Governance
- KSS GP Educator Pathway Governance
- KSS Primary Care Education and Training Quality governance
<https://kss.hee.nhs.uk/primary-care/clinical-learning-environments-and-triggered-quality-assessments/>
- NHS England Education Quality Interventions Guidance for Placement Providers in Kent, Surrey and Sussex:
- Removal of Learners from Clinical Placements in Relation to Serious Concerns:
<https://www.hee.nhs.uk/sites/default/files/documents/Removal%20of%20Learners%20Guidance.pdf> (NHS England, 2023)
- Reporting and/or Escalating Education Quality Concerns:
<https://www.hee.nhs.uk/sites/default/files/Education%20Quality%20Escalating%20Quality%20Concerns.pdf> (NHS England, 2023)