

Primary Care Quality Governance

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

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Introduction

This document sets out how Primary Care Education and Training Quality Management is governed within the Kent, Surrey and Sussex Primary Care Department.

Clinical learning environment

The [Care Act \(2014\)](#) gave Health Education England (HEE) statutory duties to: (1) ensure sufficient skilled health care workers for the health service, (2) ensure quality improvement in the education and training of the health care workforce.

The General Medical Council's (GMC) '[Promoting Excellence](#)' came into effect in 2016 and the multiprofessional and the NHS England [Education Quality Framework](#) was published in the same year. The NHS England Education Quality Framework relates to the "totality of the clinical learning environment" for all healthcare professions. It incorporates the five themes of 'Promoting Excellence' and adds a sixth domain for 'developing a sustainable workforce'.

The application of the GMC standards in General Practice is explained in the Royal College of General Practitioners' guidance '[Promoting Excellence for General Practice](#)'. The standards for the clinical learning environment for the other professional regulators are encompassed in the NHS England Education Quality Framework.

The [Health and Care Act \(2022\)](#) legislated for collaborative working in the National Health Service and the responsibility for Integrated Care Boards for commissioning services within their areas. Health Education England's duties transferred to NHS England on the closure of HEE as per the [Regulations of 2023](#).

GP Supervisors

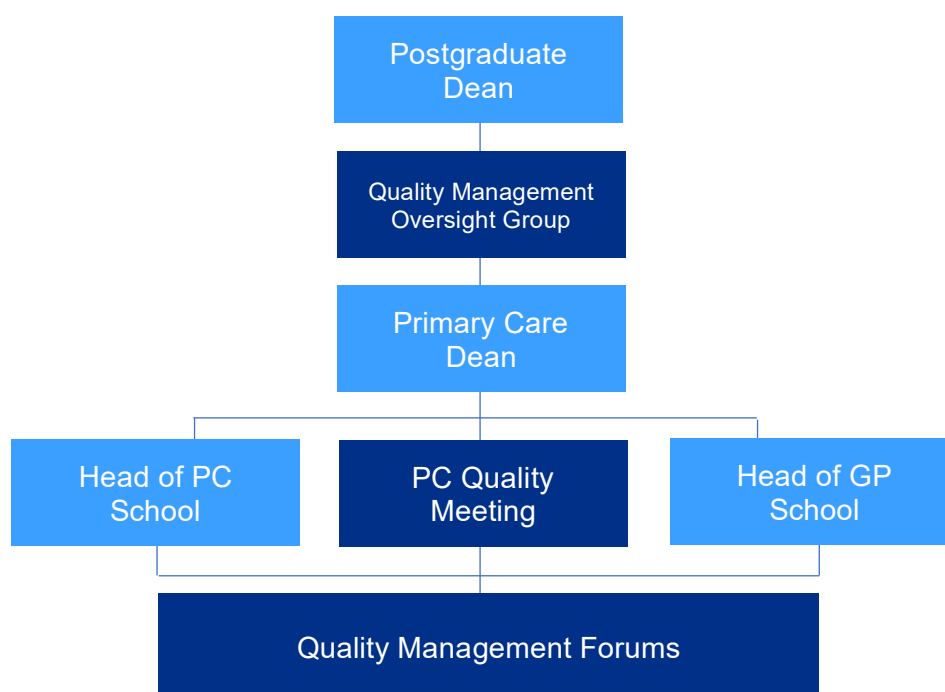
Accountability for the quality of post-graduate medical and pharmacist supervision is delegated to NHS England from the appropriate regulator. Accountability for the quality of undergraduate nursing, physician associate and allied health professionals supervision in healthcare is delegated from the relevant professional regulators to approved educational institutions (AEI) and placement providers.

GMC recognition of GP Trainers is legislated by the [Medical Act](#) (1983) and [The General and Specialist Medical Practice \(Education, Training and Qualifications\) Order](#) (2003 No.1250). In its 2012 [Trainer Recognition Implementation Plan](#), the GMC adopted the [Academy of Medical Educators Framework \(AoME\) for the Professional Development of Postgraduate Medical Supervisors](#) (2010) as the criteria for trainer recognition. The first five areas are used for the recognition of named clinical supervisors and all seven areas are used for the recognition of named educational supervisors.

The HEE London Multiprofessional Faculty Development team adapted the AoME Framework to create the '[HEE Professional Development Framework for Educators](#)'. It is mapped to the educator standards of the different professional regulator bodies to show that it encompasses multiprofessional standards. The KSS GP Supervisor approval process is based on this document.

In primary care, each Deanery arranges its own training and approval process for named clinical and educational supervisors. These educational processes are based on the original AoME Framework.

Accountability



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 Supervisor 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.

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. 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 responsible for the coordination and administration of Primary Care Quality Assurance, including Triggered Quality Assessments, Clinical Learning Environment, and GP Supervisor approvals.

The Primary Care Quality Team are responsible for monitoring any mandatory requirements, Triggered Quality Assessments and updating the Triggered Quality Assessment Log.

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.

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 approvers/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.

Clinical Learning Environment Organisations

Approved CLE organisations are responsible for quality assurance of learner placements including education and training, clinical supervision, patient safety and learner wellbeing

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 Clinical Learning Environments SOP](#).
- Triggered Quality Assessments will follow the [Primary Care Triggered Quality Assessments SOP](#). Concerns at Intensive Support Frame Level 2 and above are escalated by the Primary Care Dean to the Quality Management Oversight Group.
- Approval of GP Supervisors is in accordance with [the GP Supervisor SOP](#).
- 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 (GPhC)
- 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 [NHS England 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 [NHS England 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.