

Health Education East Midlands'

Approach to Quality

Change to *Quality Management Visits*

Process from April 2014



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Introduction

One vision

High quality education and training for students, trainees and staff, leading to improved outcomes for patients across the East Midlands.

One Goal

To develop a high quality, safe and sustainable workforce to meet the healthcare needs of the people of the East Midlands

One network

Bringing five health communities together as East Midlands Local Education and Training Board - Derbyshire, Leicestershire and Rutland, Lincolnshire, Nottinghamshire and Northamptonshire.

A New Model

If we do what's always been done - we'll get what we've always got. That's no way to bring about the transformation the healthcare system needs.

We're moving towards:

- Tackling the long standing, difficult issues that have held back the NHS for years
- Doing things differently and doing different things - making an impact by changing the way education, training and continuing professional development are commissioned and delivered in the East Midlands
- Innovating adventurously, promoting a mindset for innovation by removing cultural barriers such as "we've always done it like that"
- Taking courageous and measured risks and learning along the way, sharing the benefits across the patch
- Enabling empowered staff to have a passion for excellence
- New opportunities for continuing professional development for staff
- Encouraging staff to work more flexibly, stretching and bridging current professional boundaries, finding new ways to deliver better 'joined up' services for patients
- Promoting recruitment and training for values - staff with attitudes, values and behaviours that match our vision for a new 'can do', empowered culture
- Listening more to the student and trainee voice
- Relentless focus on improving education quality and the training environment
- Measuring success through the eyes of what matters to the patient as our number one customer.

HEEM Will Be Working In Partnership with Local Education Providers and Higher Education Institutes

Setting the Context for Quality Management



Health Education East Midlands working as part of the vehicle for providers and professionals (working with Health Education England) to improve the quality of education and training outcomes so that they meet the needs of service providers, patients and public.

One of 13 across the country, Health Education East Midlands has a budget of approximately £360 million and is responsible for 3,676 medical trainees and 6,510 students.

As the regulator has responsibility for the quality assurance, Health Education East Midlands is responsible for the quality management, and local education providers for quality control. Quality management visiting will continue to be a

primary function of our organisation needed, to ensure that quality control is taking place and high quality education and training is provided and achieved.

‘Responsible for supporting and facilitating the right workforce, the right skills and values and in the right place at the right time.’

Education & Training Standards	<p>It is important to recognise that for all pre- and post-registration courses commissioned by Health Education East Midlands with Higher Education Institutions and others, there is accountability to the relevant professional bodies (i.e. Nursing Midwifery Council, Health and Care Professions Council).</p>
Shared Evidence	<p>National & local surveys, soft intelligence, reports, action plans, improvement plans, progression rates, attrition.</p>
Process via: Self-assessment, national and local surveys, interviews, visits	<p>Post Graduate Medical Education and Training, Under Graduate Medical Education, Postgraduate Medical Specialty Schools, Care Quality Commission, Royal Colleges, Higher Education Institutes and Nursing Midwifery Council.</p>
Response to Concerns	<p>Action Plans & Evaluation and Monitoring Support & Resources</p>
Enhanced improvements	<p>Levels and depths of visit to local education providers. Learning and Development Agreements, Contracts. General Medical Council, Nursing and Midwifery Council, Health and Care Professional Council, Care Quality Commission, Quality Surveillance Groups, Clinical Commissioning Groups, National Health Service Litigation Authority, NHS Trust Development Authority. Support/ Sanctions.</p>

It is important to note that the statutory Postgraduate Dean role directly carries specific quality management accountability on behalf of the General Medical Council where education and training is delivered within employing organisations.

There is contractual accountability which states that all professional requirements are met along with other elements of the Education Commissioning for Quality (ECQ) framework, i.e. recruitment and selection, student retention, learning in the university, learning in practice, transparency of information and management.

In addition, because practice placements and training posts are so critical to educational quality and professional outcomes, there is a legal tripartite relationship between the Higher Education Institutions, the placement/training post provider and Health Education East Midlands through both the Education Contract and the Learning and Development Agreement (LDA). This ensures that employers are held to account for the quality of any learning provision they are involved in across the health care workforce.

The New Process

The benefits

- Regulation/quality management happens with meaningful outcomes and not in isolation
- Better working relationships
- The balance of power is equal
- Roles and responsibilities are clearer
- Open and honest culture
- Sharing of information and evidence helps to focus where concerns are raised
- Whole systems looks at departments, teams and pathways
- More meaningful 'LEAN' visits to the Trusts
- Outcomes of visits feed into Learning and Development Agreements and local area workforce and commissioning plans
- Showcase great practice
- Evidence against the Education Outcomes Framework
- Contributes to the local education providers NHSLA levels
- The Outcomes Report enables the public to make a choice.





Health Education East Midlands will begin the process of gathering data which will be used to measure the quality of the training and education across all medical and non-medical environments; the workforce intelligence team at Health Education East Midlands has the responsibility for this role. A conference call between all key partners will be arranged once all the intelligence has been collated for that education and training provider. During the conference call the data and information will be discussed and used to determine and agree the level and depth of the visit to the local education provider.

Levels and depths of a Quality Management visit

Deciding on the level and depth of a visit will depend on the personnel that are invited to attend. The visit will be led by Health Education East Midlands in conjunction with the Local Education Provider. The Local Education Provider is generally a NHS Hospital Trust however we have independent providers where we have learners placed. These providers will be subject to the same process.

Quality and Regulation Managers from Health Education East Midlands Quality and Regulation Department hold a geographical portfolio for quality management and they have the responsibility for arranging, coordinating and managing visits and the outcomes. They have close working relationships with the local training and education teams within the local education providers.

The design of the quality management visit will be determined by the outcomes of the intelligence that is received. This intelligence comes from a variety of sources, i.e. National and local surveys, complaints and satisfactions, previous visits, programme reviews, listening events with learners and

supervisors/mentors, patient feedback, workforce intelligence data, regulatory reports etc. This intelligence informs both Health Education East Midlands and the Local Education Provider where training and education is working well and where there may be risks.

The level of the visit will range from 1-3.

This list of personnel within the section below may seem long. What we are trying to achieve is one visit that provides all key players with the right information at the right time. It has been acknowledged that the provider Trust has many visits throughout the year from Health Education East Midlands and there is a drive to make this process more lean and efficient. Having all the key players in the room at one time will enable better communication, robust accountability, clarity of roles, responsibilities and expectations.

'There will be an on-going evaluation to ensure that this process evolves in line with patient/learner experience and outcomes.'

The new process

Roles and responsibilities

Level 1

This level of visit means that the Training and Education standards are in place and are being met by the local education provider. This visit will be to ensure the sustainability of the training and education plans.

Suggested Key personnel at a level 1 visit:

- **Contract managers**
Learning and Development Agreement management
- **Commissioning Manager Health Education East Midlands**
To support with workforce planning support with workforce planning and commissioning arrangements
- **Director of Foundation/Deputy Directors of Quality/ Associate Post Graduate Dean**
To Chair the visit, manage the day and feedback at the end of the visit. Sign off report and agree action. Visit the Executive team for formal feedback
- **Director of Medical Education of the Trust/Provider**
To support the under and postgraduate medical education and training solutions and action plans
- **Director of Nursing of the Trust/Provider**
To support the nursing education and training solutions and action plans
- **Lay representative**
To ensure the public and patient voice is acknowledged
- **Learners/supervisors/mentors**
Feedback from the learner, supervisor and mentor
- **Medical School Quality leads**
Partnership working to provide a link between undergraduate and postgraduate medical learning
- **Senior Manager for Allied Health Professionals, Pharmacists, Scientists and others that are not represented.**
To support the education and training solutions and action plans.
- **Quality Manager, Health Education East Midlands**
To manage the process and ensure the outcomes are identified and solutions found in partnership with the Local Education Provider
- **Workforce Lead Health Education East Midlands**
To support the outcomes of the visit and action planning

Level 2

This level means that there are risks to meeting the standards for Training and Education. This level of visit aims to understand where the risks are and provide support to reduce negative impact on learners and outcomes.

Suggested key personnel at a level 2 visit:

- **Director of Foundation/Deputy Dean/Associate Post Graduate Dean/ Deputy Directors of Quality**
To Chair the visit, manage the day and feedback at the end of the visit. Sign off report and agree action. Visit the Executive team for formal feedback.
- **Medical Director of the Local Education Provider**
To support the multi - professional education and training solutions and action plans
- **Director of Medical Education of the Trust/Provider**
To support the under and postgraduate medical education and training solutions and action plans
- **Director of Nursing of the Trust/Provider**
To support the nursing education and training solutions and action plans
- **Head of Speciality School Training Programme Directors**
To provide knowledge on their speciality, support areas for improvement and showcase good practice
- **Lay representative**
To ensure the public and patient voice is acknowledged
- **Learners/supervisors/mentors**
Feedback from the learner, supervisor and mentor
- **Medical School Quality leads**
Partnership working to provide a link between undergraduate and postgraduate medical learning
- **Senior Manager for Allied Health Professionals, Pharmacists, Scientists and others that are not represented.**
To support the education and training solutions and action plans.
- **Quality Manager, Health Education East Midlands**
To manage the process and ensure the outcomes are identified and solutions found in partnership with the Local Education Provider
- **Workforce Lead Health Education East Midlands**
To support the outcomes of the visit and action planning

Level 3

This level of visit means that there are serious concerns about the Local Education Provider being able to provide a sustained safe environment for patients and learners.

Suggested key personnel at a level 3 visit:

- **Managing Director of Health Education East Midlands**
Chair and manage the visit, feedback to Local Education Provider Executive Team at the end of the visit. Risk identification and liaising with professional governing bodies, National Trust Development Agency and Chief Inspector of Hospitals.
- **General Medical Council/Nursing Midwifery Council/Care Quality Commission**
Support the Local Education Provider and Health Education East Midlands to find solutions to high level concerns
- **The Dean/Director of Workforce**
To support the multi - professional education and training solutions and workforce action plans
- **Director of Foundation/Deputy Dean/Associate Post Graduate Dean/ Deputy Directors of Quality**
To support the multi - professional education and training solutions and workforce action plans
- **Medical Director of the Local Education Provider**
To support the multi - professional education and training solutions and action plans
- **Director of Medical Education of the Trust/Provider**
To support the under and postgraduate medical education and training solutions and action plans
- **Director of Nursing of the Trust/Provider**
To support the nursing education and training solutions and action plans
- **Head of Speciality School**
To provide knowledge on their speciality, support areas for improvement and showcase good practice
- **Lay representative**
To ensure the public and patient voice is acknowledged
- **Learners/supervisors/mentors**
Feedback from the learner, supervisor and mentor

Level 3

- **Medical School Quality leads**
Partnership working to provide a link between undergraduate and postgraduate medical learning
- **Senior Manager for Allied Health Professionals, Pharmacists, Scientists and others that are not represented.**
To support the education and training solutions and action plans.
- **Quality Manager, Health Education East Midlands**
To manage the process and ensure the outcomes are identified and solutions found in partnership with the Local Education Provider
- **Workforce Lead Health Education East Midlands**
To support the outcomes of the visit and action planning



The new process

The Chief Executive of the local education provider will receive a letter from Health Education East Midlands explaining the rationale for the level of visit and what the visit is likely to look like and who will be attending.

The visiting team will jointly plan the visit with the local provider.

During the visit trainers/mentors and learners from different departments and specialities will engage with the visiting team. The design of the sessions will be agreed between all parties and will ensure that there is minimum disruption to service delivery whilst the visit takes place. To capture both the trainer's/mentor's and learner's voice the use of Turning Point will be considered as the favourable option to aid discussion. Turning point is an electronic tool used to enhance the learners/mentor/trainers voice. The questions for discussion will be framed around the nine domains and the standards.



The outcome of the visit will form a RAG rating by area and recommendations for improvement/action, compiled together from all key partners during the visit. This will be completed within 30 days from the visit. High level concerns deriving from the visit will be escalated by Health Education East Midlands immediately to the relevant regulators/stakeholders.

The outcomes report will feed into Health Education England's reporting framework and into the Dean's return to the General Medical Council in April and October of each year. Other reporting mechanisms will also be in place that this information will also feed into, such as Quality Surveillance Groups.

The high level concerns that are identified through the above process will form a plan of action for both the local education provider and Health Education East Midlands.

Triggered visits or enhanced monitoring

In addition to the Quality Management Visits there may be occasions when Health Education East Midlands or the Local Education provider receives intelligence that requires further investigation. If this is required then all parties will work closely together and follow the enhanced monitoring process. For both undergraduate and postgraduate medical training and education concerns the General Medical Council will be informed and may be actively involved in the visit to the local provider. The process for non medical triggered visits or enhanced visits is currently under review.



Patient and Public Lay Partners

Health Education East Midlands strongly believes in working directly with Patient and Public Lay Partners to support the quality management processes and outcomes of healthcare education and training.

Health Education East Midlands recently held two highly successful recruitment events to extend their existing pool of Lay Partners. Lay partners will play a fundamental part of the visiting process and will join HEEM as a member of the visiting team, ensuring that the patient and public's interest are at the heart of the quality management process and to ensure that HEEM carry out their duties in a fair and equitable way.

'The outcome of the visit will form a report, compiled together from all key partners during the visit. This will be completed for public view within 30 days of the visit. High level concerns deriving from the visit will be escalated by Health Education East Midlands immediately to the relevant regulators/stakeholders.'

The system

We are building upon the system that has been adopted and agreed by Health Education East Midlands to measure its strategic objectives. This system is built in excel and provides a dashboard based on the how the local education provider is meeting the domains for training and education.

The scorecard is structured as followed:

The first tab (Dashboard) provides the current overarching status for the local education provider through the traffic light where:

- GREEN** low concerns
- AMBER** medium level concerns
- RED** major issue / high level concerns

The traffic light and summary of domains are designed to update automatically based on the rating of each standard in the individual Domains (in subsequent tabs).

Local Education Provider				
	Q1	Q2	Q3	Q4
1 Patient Safety	5	9	1	6
2 Quality Management, review and evaluation	1	9	1	4
3 Equality, diversity and opportunity	9	6	6	4
4 Recruitment, selection and appointment of trainers and mentors	9	6	6	5
5 Delivery of the approved curriculum including assessment	4	6	6	1
6 Support and development of learners, trainers and local faculty	1	9	6	4
7 Management and Governance of training	1	6	1	6
8 Educational resources and capacity	1	6	4	1
9 Outcomes including areas of Innovative Practice	1	4	6	1

The tabs (domains 1 -9) allow assessing each standard identified for the domain every quarter.

To assess the status of a standard, a simple drop down RAG rating is being used.

The RAG rating is scored as - for each green a score 1 is given, for amber a score of 6 is given and for each red a score of 9 is given.

For each RAG rating, a space is provided for comment to supplement with additional evidence or to support the rating based on the score of each measure/activity. The score of the Domain is calculated by adding the score of each measure/activity and dividing the total by the number of measures/activities.

The score of the Domains are accumulated automatically and fed into the Dashboard. All the Domains must be evaluated for the traffic light to work.

The process:

The Quality and Regulation department will manage the population of the balanced score card for each geographical area in conjunction with the workforce intelligence team.

As a local education provider you will be asked to do your initial self-assessment using this scorecard. We suggest that you use separate scorecards for medical, nurses and other health

professionals. The scorecard will be managed by yourselves with the support from your local HEEM team. HEEM will ask every quarter for an update progress and this will feed into HEEM's business reporting framework.

The information will be used through the governance structure of Health Education East Midlands and shared with key partners to support improvement and the sharing good practice.

The outcome and benefits:

Each time the balanced score card is updated it will be saved so that a picture can be captured each quarter and year by year for performance management and reporting purposes.

The rating of the local education provider at any one time can be shared with key stakeholders. Key stakeholders can see where the local education providers are meeting the standards within each of the domains. Support can be targeted in the areas that are showing the highest level of concern.

The Relational Health Audit

This is an audit tool to measure the strengths of a relationship

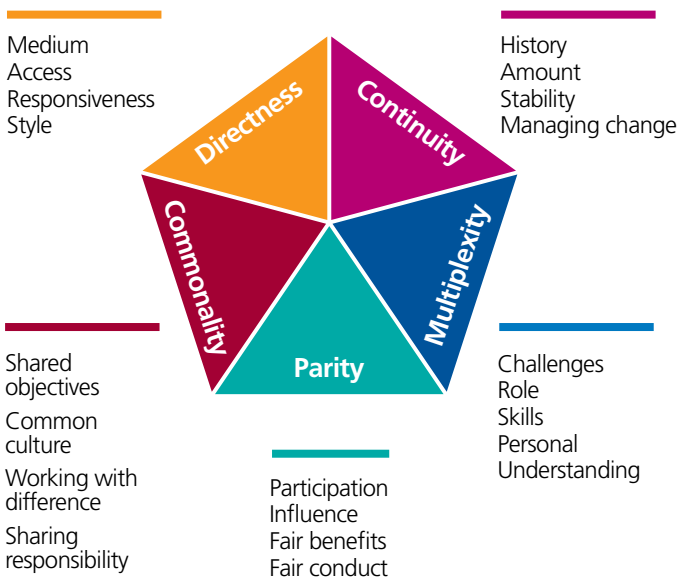
The quality management review is to move to a model that strengthens the co-production of enhanced environments for the provision of training and education through greater openness and transparency. This requires improved relationships, which it is believed will also lead to improved quality of training.

The relationships at the centre of this proposal are therefore:

1. Between Health Education East Midlands and the Local Education Providers being visited;
2. Between the learners and the Local Education Providers in which they are trained.

Whilst these two relationships need to be understood, assessed and developed separately they are inter-linked. The former being the primary focus of the work whilst the latter provides evidence of the effectiveness of improved relationships. Addressing the former without having evidence that the latter is improved may not therefore, provide sufficient evidence of a positive effect on the 'end-quality' of training provision. The proposed approach should therefore be seen as an integrated whole.

The audit tool that will be used is based on five dimensions of relational proximity



A questionnaire based on these five dimensions has been used to identify strengths and weaknesses in the respective relationships. In the first instance this will be used as a base-lining tool, but will then be used to feed into the on-going redesign of the programme of visits.

Periodic re-use of the questionnaire will monitor change over time. It will therefore measure the overall effectiveness of the change programme in achieving the goals of improved relationships, and ultimately of the improved quality of training environments.

Following on from the stakeholder engagement sessions a design group was formed to take the Relational Health Audit Model forward.

'The design group are asking stakeholders to contribute to the evaluation of relationships between Health Education East Midlands and the NHS Trusts.'

The group are hoping that this exercise will provide an indication of how robust those relationships are at this point in time, and enable both Health Education East Midlands and the local education providers to identify issues or arrangements that are in need of development.

We asked stakeholders to complete a simple online questionnaire which was anonymous. Each of the first 20 questions asked to make an assessment of a particular aspect of the relationship between the two organisations i.e. the HEEM staff and the Local Education Providers. A further four questions explored the nature of the culture underpinning the relationship.

The survey results are anonymised and independently analysed, and will generate an overall report alongside a breakdown by individual Trust and the corresponding Health Education East Midlands Team contacts.

'The outcomes of the health audit will feed into the quality improvement framework and help us to strengthen the quality of our on-going relationships we have with key partners.'

Conclusion

This report describes the consultative process and new design for the Quality Management Visits in Health Education East Midlands, a process shared and applauded by the General Medical Council and the

This new Quality Improvement Framework will be available on the Health Education East Midlands website during 2014.

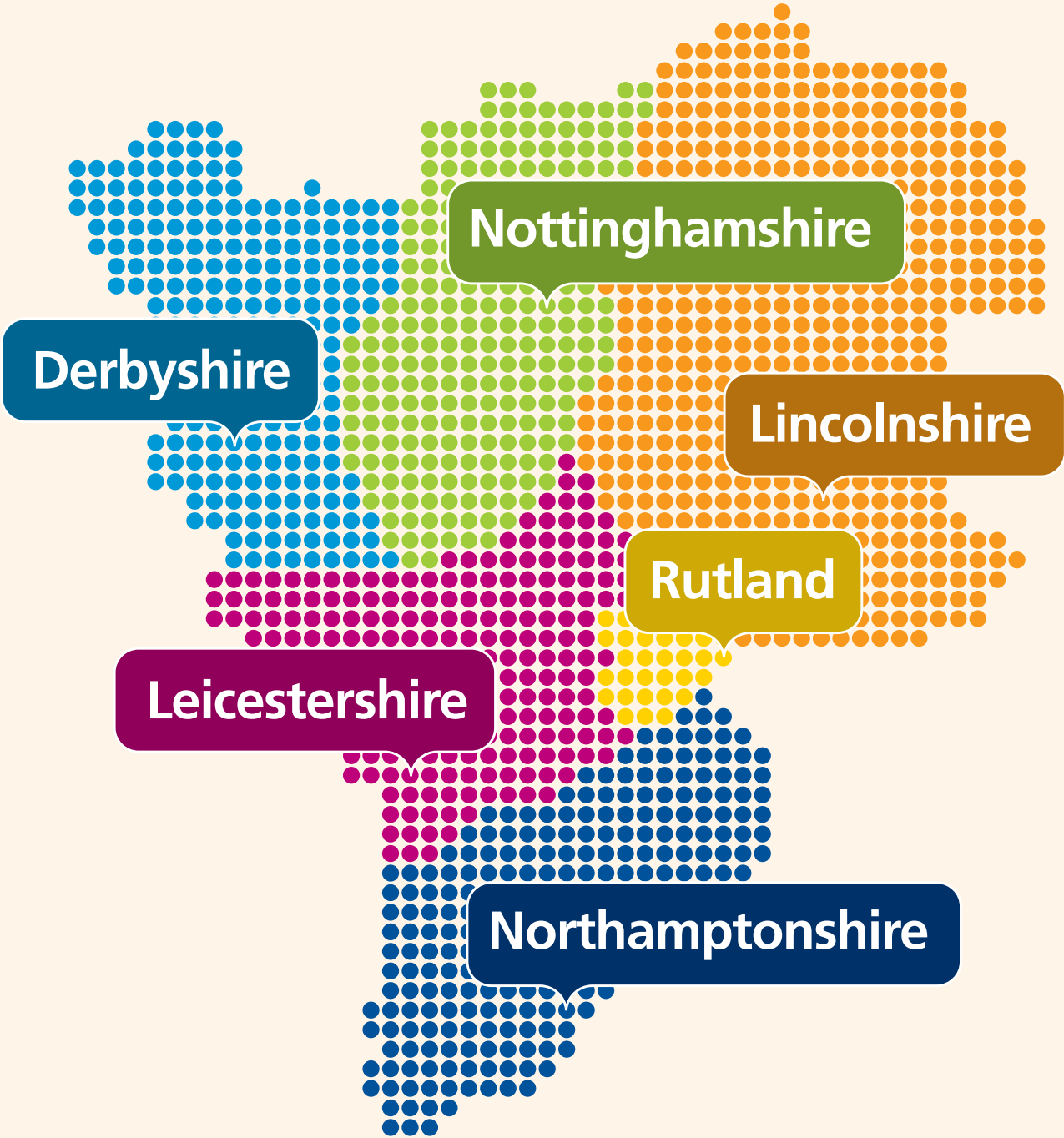
Please share this document widely and ensure that your colleagues have the opportunity to know about and participate in the on-going conversation about quality improvement for the training and education of our future workforce.

'The highlights from the consultation have been reported here and the detailed feedback has been incorporated into the new framework and process for Quality Improvement in the East Midlands.'



***Our grateful thanks
to everyone who has
contributed to this review.***

Health Education East Midlands Approach to Quality



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