

*Grantham and District Hospital
United Lincolnshire Hospitals NHS Trust*

Outcomes Report

for healthcare, education and training

<i>Report For:</i>	Grantham and District Hospital Lincolnshire
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1. Executive Summary

This was a level one visit. It was a very positive visit with two previous areas of concern being improved to satisfactory outcome.

HEEM would like to thank the staff within the hospital for access to services and the presentations informing us of progress made and the evolution of best practices.

We require evidence of the strategy of risk management process and the development of the Datix system. We seek reassurance that the educational and clinical supervisors are role models for the incident reporting process.

HEEM is pleased to say that the leadership demonstrated by Dr Houghton is exemplary and HEEM recognises that we may need to think differently to support organisations challenged with significant change and/or potential reconfiguration in the future.

Improvement of training within acute medicine supports the reassurance that the program is moving forward and addressing the General Medical Council enhanced monitoring concerns.

Improved induction from 2014; the visiting team is reassured that this improvement is meeting the need of the trainees and learners

The visiting team had an opportunity to meet the Chair of United Lincolnshire Hospitals and felt that he has a good understanding and recognises the challenges and opportunities in relation to the multi-professional education and training agenda.

There was excellent engagement from both the nursing and therapies divisions and the visiting team also felt that Grantham Hospital provides an excellent supportive and engaging environment for trainees and students. The staff we spoke to felt supported by the Trust, respected by each other and were keen to continue to develop themselves and others.

The visiting team raised concerns about the recording of incidents. The Trust recognises this as an area of improvement and they are implementing a training and development plan to improve the quality of this. The visiting team was reassured that the first roll out of training had been received by some of the consultants; the consultants told HEEM that they had full access and an open door policy to the risk management department when seeking advice and clarity.

HEEM will continue to monitor the effectiveness of this development.

2: Introduction

Health Education East Midlands (HEEM) is responsible for managing the quality of multi-professional education and training across the East Midlands. We have specified the standards we expect providers to meet in [East Midlands Multi-professional Quality Standards for local training and education providers](#).

This is the first year of our new approach to quality management visits, which will look at the quality of education and training of all healthcare professionals within the region. This is to comply with our requirements to improve patient care through the effective management of the quality of healthcare education and training, for both Health Education England and the General Medical Council (GMC). This is a collaborative approach which utilises data from a variety of sources, including the Trust's self-assessment document, the GMC National Training Survey results and workforce intelligence, to inform discussions between HEEM and the Trust about areas of good practice and concern. During a conference call between all key partners the data is assessed and the visit level and specific areas of focus are agreed.

We would like to thank United Lincolnshire Hospitals NHS Trust for the positive way in which they have engaged in this new process.

The Trust is split into three sites: Boston Pilgrim Hospital, Grantham Hospital and Lincoln County Hospital. A visit was scheduled to each area. During the conference call it was agreed that, the visit Grantham District Hospital site should be level 1.

A Level 1 visit means that there are education and training standards in place and are being met by the local education provider. This visit was to ensure the sustainability of the training and education plans.

The visit to Grantham District Hospital took place on the 10th November 2014. The HEEM visiting team comprised of:

Dr Craig Smith, Associate Postgraduate Dean HEEM

Mr. James McLean Deputy Dean HEEM

Mrs. Jillian Guild Head of Quality and Regulation HEEM

Miss. Kirsty Neale Quality Manager HEEM

Ms Chrissie Bedwin, Lay Partner

Mr. David Farrelly Managing Director, HEEM

Mrs. Helen Smith Workforce Lead for Lincolnshire, HEEM

Mr. Richard Marriot Contract Manager HEEM

Jo Beckworth, Education Commissioning Manager HEEM

2: Introduction (cont'd)

The Trust representative's comprised of:

Mr Ron Buchanan, Chairman

Dr Suneil Kapadia Medical Director

Dr Andrew Houghton Deputy Director of Medical Education and Foundation Training
Programme Director

Anita Cooper Clinical Lead Therapies and Rehabilitation Medicine

Liz Ball Deputy Chief Nurse

Wayne Cross Postgraduate Medical Education Coordinator

Mr Dilip Mathur, Consultant Surgeon and Clinical Director

Ms Annette Le-Hair Support Manager

Dr Shirine Boardman Consultant

Dr Rashmi Mathur, RCP Tutor

Miss Aarti Varma

During the visit the team met with:

- Core and Higher Trainee Doctors
- Education management team
- Educational and Clinical Supervisors
- Executive members of the Trust
- GP and Foundation Trainee Doctors
- Health care workers
- Matrons
- Nurses
- Student Nurses
- Trainers and mentors

3: Progress since last year

Progress against the Quality Standards for Postgraduate Medical Education

Dr Houghton presented an overview of Grantham and District Hospital and how they are measuring themselves against the nine domains set out by HEEM. Promoting a safety culture from the outset of a trainee placement was explained and evidenced by Dr Houghton. The promoting is done via a presentation at induction, the on line induction package and departmental induction; encouraging learners to raise their concerns, complaints and incidents.

The visiting team heard that trainee engagement was enhanced through departmental meetings and a patient safety forum; trainees are encouraged to bring cases forward for discussion and all significant incidents involving trainees are notified to the Deputy Director of Medical Education. A quality dashboard has been designed to capture and measure 18 standards for Foundation Doctors; this ensures that the target of 100% compliance is being met.

Both trainees and supervisors have a forum which happens during every rotation, this enables an opportunity for both trainees and supervisors to give feedback on what is working well and what needs to be improved. All clinical and educational supervisors are monitored to ensure that they have up to date certificates on file for carrying out the role.

All new educational supervisors are mentored by the Deputy Director of Medical Education, all educational supervisors have an appraisal for their educational role and the supervisors' forums enable updates on new developments and feedback from supervisors.

Trainers are all given an equal opportunity to become trainers; there is also continuous personal development for all trainers as well as mandatory training on Equality, diversity and Human rights. There is also a process in place which continuously monitors the teaching attendance to ensure an equal opportunity to access training happens. A guide has been produced for educational supervisors for Foundation doctors.

The visiting team heard how the hospital has invested in educational resources and capacity; investment in video conferencing and clinical skills equipment. A recent bid has been submitted to develop a room for clinical skills teaching.

3: Progress since last year (cont'd)

It is clear that the post graduate medical team have been innovative in their thinking and have implemented new ways of working that are improving patient, trainee and trainers experience.

Progress against the Quality Standards for Nursing

It was evident from the visit that there is strong leadership in place; a staffing review has taken place which has led to a new nursing structure. There is a leadership programme in place for Band 7 and a developing Matrons programme.

The Trust is working well in partnership with University of Lincoln; they have seconded a nurse to develop the older people's curriculum and also have on the Professional Advisory Committee the Director of Nursing at Lincoln University.

The Inter Practice Learning Unit has developed a data base for mentor information; this will ensure all mentors are up to date with training etc. Currently in development is a clinical supervision model and the role of clinical educators. The Trust is also developing a mentor conference and professional development framework for the nursing teams.

Progress against the Quality Standards for Allied Health Professionals

The visiting team heard that clinical placements come from seven universities across the United Kingdom. The Occupational Therapy and Physiotherapy Practice Based Learning programmes based in Grantham are coming up to their 10 year anniversary with the 5th cohort of students commencing in January 2015. The Trust receives excellent feedback following placements. The team heard how they are working towards more inter-professional learning opportunities in the future and how three dieticians are now trained to undertake an extended role of inserting balloon gastrostomy feeding tubes.

Using trainee engagement and feedback to enhance quality

The visiting team heard how the hospital is developing the Foundation Programme through junior doctor feedback, junior doctor forums and survey feedback. This has led to a more robust teaching schedule which includes more acute clinical sessions early on in their placement, more consultant led sessions video conferencing and new clinical skills equipment.

The students continue to provide excellent feedback following their placements.

3: Progress since last year (cont'd)

Accident and Emergency:

The visiting team heard that the A&E department has been run by locum consultants for several years and that there was a focus of concern raised about trainee doctor's training and education in this department. The concern came via the national GMC Trainee Survey results for 2012-13.

The hospital conducted an initial review and developed an action plan to improve the experience of Foundation doctors. The action plan included a revised department induction, a robust approach to clinical supervision, early training in procedural competencies, better clarity around rotas and leave, policies made clearer in relation to review and discharge of patients, closer working with Acute Medicine which involves a joint weekly teaching programme and regular interdepartmental meetings.

Postgraduate Medical Education Programme

The visiting team heard how the education programme has been enhanced for all grades of trainee doctors which includes joint teaching sessions for Medicine and A&E and also includes Acute Medicine for EAU and nurses.

For the 15 Foundation posts the visiting team heard how the training rotates across 11 specialties. The Grantham site has invested in:

Induction for Trainee Doctors

The Deputy Director for Education together with the Education Centre Manager has been listening to the feedback from the trainees to enable them to improve the induction for trainee doctors. Reviewing together with trainee doctors the old style induction process, discussing positives and negatives about the current induction, discussion a wish list for future inductions and trainee representatives seeking feedback from their peers has all contributed to new induction programme for trainees.

The visiting team heard that a new induction programme started in August 2014.

Joint Training for Acute Care teams

The visiting team heard from Dr S Boardman how a new training programme is making a difference. There was a recognised need to a new training programme and acknowledging junior doctor feedback, patient safety concerns, conflict between teams, ambulatory care protocols and NICE updated guidelines a programme was developed.

3: Progress since last year (cont'd)

The aims of the training were to have better working relationships between the on call and medical team and emergency department. Evaluation showed that doctors benefitted and enjoyed the training and better working relationships have formed from the joint training sessions.

Handover

Dr S Boardman gave an overview of the developing handover process and how it has been evolving since 2011. These are now multi-professional with more detailed history being presented, safety incidents reporting introduced at handover, guidelines on handover discussions, ambulatory protocols highlighted and risk assessments which support discharge. The Trust has evaluated this process and taken feedback from junior and middle grade doctors this has informed a more structured and streamlined process.

Practiced Based Learning Students

The visiting team heard that academic learning takes place at Grantham, but placements may be done elsewhere. Practice placements have been very supportive and there was recognition that they are a different type of student (they are all mature students with a reasonable amount of healthcare experience). Students all reported being confident and have the ability to raise patient safety concerns, one student had raised concerns and been fully supported by all groups including the University. They were all very engaged and one has an interview even though they do not qualify until March 2015.

Meeting the Surgical Team

The visiting team had an opportunity to go onto the wards and meet groups of learners and trainers. Foundation doctors said the hospital was organised and had a good induction. They are encouraged to go to theatres and clinics see a broad range of elective patients. They have lots of contact with seniors, whom are approachable, the handover at 9am was a good educational experience and there are role models that they aspire to. At handover all teams are together that helps with learning and information giving.

Consultants alluded that there was time to train at Grantham (reflected by the ST6, less volume that allowed more autonomy with good supervision and time to train). In terms of training, it is consultant led but delivered by other senior doctors. It's a good mix of T&O and surgery together – good for patients and for training and education. There is an

3: Progress since last year (cont'd)

audit lead for each department. Ward 2 has a Clinical Educator and this role was valued by the ward sister.

The administrators the visiting team met had been in post 18 and 2 years, they reported people were approachable, willing to help each other, culture of in it together and that there was training and development for administrators. The higher trainee felt well supported and had been given a lot of independence in ward rounds and clinics and supported their less than full time training.

The visiting team heard that there is a surgery governance meeting once a month, doctors, nurses, pharmacists attend and trainees are encouraged to attend.

Medical wards

The visiting team had an opportunity to go onto the wards and meet groups of learners and trainers. Trainees' said they felt supported – smaller wards, with opportunities, small consultant roll call – all staff that could be there were there, trainees were positive about all aspects. CT2 had come back as a locum consultant – and spoke about how different it was now. Workload and rota are better – they now have time to learn.

Meeting the matrons

The visiting team had an opportunity to meet the matrons and they felt there was evidence of strong leadership progressive examples of culture change within the ward managers and support trust agendas.

4. Good practice and innovation

Developing the new Foundation Teaching Programme

In relation to the delivery of approved curriculum a detailed review of F1 and F2 curricula happened during 2013 in conjunction with mapping the teaching programme against the curriculum. Trainees were involved in this review process. This led to a focus on key topics early in the training year and the introduction of video conferencing. A review of the e-portfolio for both trainees and educational supervisors has increased awareness of the curriculum and ARCP requirements. This has help inform the structure of the meetings with trainees and their educational supervisors.

Handover as an educational opportunity as in previous section

The new Induction programme as in section as in previous section

Dr Toolbox

The use of Dr Toolbox at Grantham Hospital is a helpful new smartphone app for supporting trainees during their placement. It includes contact details, information on the postgraduate education programme, trainees and supervisors' forum, care bundles and Trust guidelines as well as information links to online resources and details about raising concerns.

Clinical Skills

Grantham Hospital has invested in three new clinical skills models for teaching:-

- Chest Drain
- Lumbar Puncture
- Central Venous Catheter Insertion

Video Links

Grantham has invested in video linking equipment and a demonstration was given to the visiting team. This enables video linking to cover specialities which are not available at Grantham. It also enables coordination with teaching times Trust wide and supports both Foundation and Core teaching. Developments such as on site simulation sessions and linking to other Trusts are happening as is trainee doctors currently actively involved in teaching nursing and medical students which they hope will encourage future doctors to be involved in the delivering of teaching sessions.

5. Areas for improvement

Incident reporting:

- Ensure absolute clarity about when and what to report and the detail of what to report
- Roll out the training programme to all staff that require it

Accident and Emergency:

- The Trust to ensure that all future reconfiguration of service plans include all aspects of training and education
- All plans which are considered and agreed must be shared, at an early stage, with the teams that have responsibility for supporting all learners/trainees, trainers and mentors
- Emergency medicine has a named educational supervisor

Postgraduate Medical Education Programme:

- Review the Foundation training year 2 training rotations in line with broadening the Foundation programme
- Make one of the Foundation year 2 posts General Surgery, community-facing (TO30)
- Ensure the best outcome for post (TO29). HEEM to support decision making

Induction for Trainee Doctors:

- Continue to review all three elements of the induction:
 - on-line
 - face to face site induction
 - departmental induction
- Continue to share best practice with other ULHT sites
- A smart phone app to support the induction process

5. Areas for improvement (cont'd)

Support and development of trainers:

- Continue to ensure that all trainers have time to train and supervise.
- Individual job plans reflect the explicit allocated time
- Share the educational supervisors guide with other pan trust supervisors that would benefit from the principles of the guide

Practiced Based Learning Students:

- Improvement made to their teaching environment

6. Recommendations and Requirements

The Trust takes all the areas of improvement and builds these into an action plan which forms a Multi-professional Education and Training Strategy.

The Trust engages with HEEM in relation to future service reconfiguration and planning of training and education.

7. Action Plan

A comprehensive action plan has been received by HEEM from the Trust. The action plan reports the issues, actions needed, impact, lead action by, due by time and evidence of completion. The Quality Manager from HEEM will monitor and support the Trust to produce positive outcomes from this visit.

8. Providers response

POSTGRADUATE MEDICAL EDUCATION CENTRE Grantham & District Hospital

December 2014

Grantham & District Hospital is one of three training sites in the United Lincolnshire Hospitals NHS Trust.

Health Education East Midlands (HEEM) visited Grantham & District Hospital on 10th November 2014, and conducted a one-day Level 1 visit with a team of 9 assessors, facilitated by the Medical Education Directorate.

The visit was multi-professional and included input from the Deputy Chief Nurse (Liz Ball) and the Clinical Lead for Therapies & Rehabilitation Medicine (Anita Cooper). The inspection team's approach was open, clear and conversational.

The visiting team provided positive verbal and subsequently written feedback in the LEP outcomes report received on 8th December 2014. The report highlighted a number of areas of progress and good practice since the last HEEM visit, and recognised the innovations in education taking place on the site. We were pleased to read that the visiting team received good feedback from the staff they had met.

The visiting team raised concerns about the recording of incidents. We recognise this as an area in need of improvement; actions are already in place to address this, together with a clear strategy to improve this issue further in 2015.

It is worth noting that the HEEM visiting team has recognised that challenges that can be faced by a small site facing possible future reconfiguration, particularly with regards to its A&E and inpatient services. We look forward to working with HEEM to identify new opportunities and new ways of working during this period of change, to ensure the continuing provision of the highest standards of clinical training and education.

Grantham & District Hospital, as part of the United Lincolnshire Hospitals NHS Trust, is committed to the provision of high quality multidisciplinary education and training for the whole healthcare workforce in Lincolnshire. We listen to the learners recognising that high quality, safe patient-centred care is inextricably linked to well-trained and motivated healthcare professionals. Delivery of care is patient-centred and we look forward to working closely with HEEM to continuously improve the quality of education and training to deliver our shared vision of safe high quality patient care.

Dr Andrew R. Houghton
Consultant Cardiologist
Deputy Director of Medical Education & Foundation Training Programme Director
Grantham & District Hospital