Escalating Quality Issues (including De-escalation and Sharing)

Policy

Yorkshire and Humber
Workforce Training and Education, North East and Yorkshire, NHS England
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Name of Document	Escalating Quality Issues (including de-escalation and sharing) Yorkshire and the Humber
Category	Policy
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Document Status

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This document is not intended to be interpreted as a policy statement. This is a local guidance document for faculty and staff in the Yorkshire and Humber Deanery to enable consistency of application; it is recognised there may be exceptional circumstances when deviation from this guidance may be required.

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1. Introduction

NHS England, Workforce, Training and Education (WT&E) is responsible for ensuring that there are high quality learning environments for all healthcare learners.

There are times when concerns may be raised about a healthcare education and training programme or an approved learning environment. It is important that NHS England WT&E and our partners work together to ensure regulatory and education and training standards for education and training continue to be met. This policy provides the overarching approach and principles for escalating, de-escalating, and sharing of issues, risks and concerns relating to the quality of education and training and to the clinical or practice learning environment.

This policy should be read in conjunction with the NHS England Education Quality Strategy and Framework and supporting documents.

2. Principles

The principles that underpin this policy are:

- To ensure a safe and suitable learning environment for all healthcare learners.
- To promote the values of the NHS Constitution through collaboration and respect for each other.
- To support openness and transparency between organisations with a commitment to work together to drive improvements.
- To have a duty of candour and to share information and concerns in a timely manner.
- To use the NHS England Education Quality Strategy and Framework when describing issues, concerns and risks. Specifically reporting against the six grouped domains/ themes articulated in the education quality framework.

3. Scope

NHS England WT&E has a statutory responsibility to work with partners to plan, recruit, educate and train the future workforce to produce the highest quality healthcare professionals in the right numbers to meet the needs of patients and NHS services.

This policy applies to all clinical and practice learning environments in which learners are placed regardless of funding arrangements.

This policy applies to all providers of healthcare education programmes and health and care practice placements, including:

- Higher Education Institutions (HEIs)
- NHS health and care providers
- Independent health and care providers

This policy covers escalation and governance to and from NHS England Yorkshire and Humber (YH) with external partners. It includes the local information sharing, escalation and de-escalation process between HEIs and NHS England YH.

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This policy does not replace the following existing policies, protocols, or processes:

- Policies which organisations may already have in place for their own role in escalating concerns to NHS partner organisations for example, to a professional regulator. NHS England YH must be informed of any escalation of this kind, where there is an impact on education and training.
- Local policies for the sharing and escalation of concerns between local placement providers and education providers. At a local level, provider organisations and those responsible for education and training must have processes in place to manage concerns raised by learners.
- Local and/or regional WT&E polices for the sharing and escalation of concerns between providers and WT&E education quality teams, this policy provides the principles to support a consistent approach across England.

It is important that learners and educators utilise local mechanisms within the learning environment initially. This process does not replace serious incident reporting procedures in trusts and local processes should be followed for serious incidents.

All training related concerns need to be validated and triangulated with other sources of information. NHS England YH is well placed to triangulate both learner and educator feedback and to raise concerns about both training and patient safety through its own internal quality processes. It is also well placed to triangulate/escalate concerns with other stakeholders including Care Quality Commission (CQC) and Integrated Care Boards (ICBs), other regulators, and through participation in System Quality Groups (SQGs). Timely sharing of appropriate information and evidence across the healthcare system, and the system wide raising of, and responding to concerns about patient safety and care, are crucial local partnership endeavours.

4. The Education Quality Framework

The NHS England Education Quality Framework articulates NHS England's expectations of the quality of the clinical and practice learning environment as a whole system, complementing the other regulatory and professional frameworks and requirements where relevant.

Robust monitoring and reporting processes are essential to the continuous improvement of education and training, with patient safety and quality, central to all activities. The NHS Education Funding Agreement sets out the expectations for all providers in respect of the application and monitoring of quality through the Quality Framework and associated quality and performance requirements.

NHS England exists within a wider system, working in partnership with, and across, healthcare and professional regulators, service and education providers, other arms-length bodies, and key stakeholders. We occupy a unique space where we can view quality through a multi-professional and cross-disciplinary lens and have an overview and understanding of the clinical education and training landscape, which reaches across sectors and organisations.

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5. Notification (or escalation) of concerns

5.1 Learners and educators

Learners in any clinical learning environment (or healthcare related educational placement) are well placed to provide valuable information through evaluation/feedback on their placements, not just about the quality of their educational experience, but also about the supportive nature of each workplace, both in terms of patient safety and interpersonal/inter-professional behaviours. Since learners commonly rotate between different placements, their feedback can often be an early warning for potential quality or patient safety concerns.

5.2 Raising quality concerns

NHS England WT&E has a pathway for learners and educators to raise, and where appropriate, escalate concerns regarding the learning environment. The pathway and supporting information can be found on the website here.

Escalation should be considered where there is a risk of, or evidence that standards are not being met and would especially be considered where there are:

- Persistent issues that are not resolved through actions with providers / stakeholders. These may include persistent minor concerns over a longer period of time.
- Major and serious quality issues that may require immediate escalation / action. For example, a lack of supervision/support because of trainer/educator absence.
- Regulator concerns, including GMC, NMC, HCPC, Ofsted, GPhC.

Whilst managing quality issues and concerns, the following should be considered:

- To be clear what the issue/concern is.
- To be clear what the desired improvements, and any actions to achieve these are.
- To consider and define what a successful outcome looks like.
- That the pace and timings of actions /monitoring are clearly described.
- That the next steps and potential end points, including escalation, are clearly described.
- To be clear if there is potential for impact on other professional or learner groups.

De-escalation is considered when sustained and triangulated progress has been made. NHS England YH will triangulate information with a range of intelligence including (Please note this is not an exhaustive list):

- National Education Training Survey (NETS)
- GMC National Training Survey (NTS)
- NHSE Student Data Collections
- NHS Staff Surveys
- CQC reports and local intelligence.
- Ofsted reports
- NHSE/I reports and local intelligence.
- HEI and provider intelligence.
- Professional and/or regulatory body reports and intelligence
- Placement feedback from placement or education provider and or Learners
- Complaints and investigation reports

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- Learner committees
- Feedback from programme managers including Tutors, Deans, Training Programme Directors and Head of Schools.

5.3 Placement and Education Providers

When a concern arises regarding an education and training programme and/or an approved learning environment, NHS England YH quality team, education providers and placement providers must work together to ensure regulatory and educational standards for education and training continue to be met. Education institutions and those responsible for the management of approved training programmes are required to report concerns to NHS England YH, particularly where an issue affects the clinical learning environment or where the concern may pose a risk to patient and/or learner safety.

It is important to recognise that the education or placement provider will remain responsible for the management and mitigation of the concern. NHS England YH will be able to offer support and will require providers to share progress updates and confirmation of resolution. This information will enable the triangulation of concerns geographically and professionally to identify any emerging and/or escalating concerns. Providing regular updates to NHS England YH quality team will support the collation of mitigating actions and good practice to support other providers to resolve similar concerns.

5.4 Sharing and Escalating Quality Concerns

Reporting to NHS England YH should take place where there is a risk of, or evidence that, one or more of the Education Quality Framework standards for education quality are not being met, and should especially be considered where there are:

- Persistent issues that are not resolved through actions with providers / stakeholders. These may include persistent minor concerns over a longer period.
- Major and serious quality issues that may require immediate escalation / action. For example, a lack of supervision/support because of educator absence.
- Professional and system regulator concerns.

A concern that may impact on one or more of the Education Quality Framework standards should be reported. The table below (figure 1) provides examples of concerns that should be reported to regional NHS England YH quality team (please note that this list is not exhaustive).

Figure 1

NHS England Education Quality Framework domain	Examples of concerns, relating to the learner experience, that should be reported and/or escalated to NHS England
Learning environment and culture	• A trend of reported bullying and undermining behaviours in a clinical learning environment that has not improved or where feedback regarding concerns has not been acted upon. • Significant patient safety risk because of insufficient staff to cope with workload pressures.

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	• Patient dignity concerns, for example instances of patients being spoken to in a derogatory manner or failing to protect a patient's dignity. • Unsupportive environment and/or unsupportive behaviours. • Patient safety concerns. • Governance issues including supervision and mentoring.
Educational governance and commitment to quality	• Poor governance including reporting or poor engagement with the trust senior education team or leads. • Concerns that are about a specific learning environment or organisation wide issues. • Trends or patterns from complaints, feedback, data, visits, meetings, and committees. • Conditions or requirements and actions following regulators visits which have a link to or an impact on education and training/quality of experience.
Developing and supporting learners	• A lack of supervision (named supervisors/mentors) because of staffing shortages. • Emerging themes from learner feedback that highlight concerns. This may include more than one learner describing the same concern, or consecutive feedback from individual learners in a small programme/placement.
Developing and supporting supervisors	• Supervisors/educators not given adequate time for the role.
Delivering programmes and curricula	• Access to clinics or procedures reported as mixed and sometimes difficult, but with a plan in place to monitor and resolve. • Workforce issues affecting the ability of learners in the clinical learning environment to achieve curriculum requirements. • Curriculum delivery failure/ability to achieve learning objectives.
Developing a sustainable workforce	• Service reconfiguration which has the potential to impact on placement quality and capacity. • Insufficient placement capacity.

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	• Services identified at risk due to significant non-training workforce gaps that have not been resolved and which impact on educational opportunities, supervision and experience.

Higher Educational Institutes will be asked monthly to notify NHS England YH of escalated quality risks at level 2 or above to england.escalatingconcerns.yh@nhs.net. In notifying NHS England YH of concerns, HEIs will forward regulator escalation templates as appropriate.

Provider Organisations are responsible for raising concerns directly to HEIs. If learner or patient safety is identified as an issue, reporting will be promptly made e.g., issues raised by a regulatory body will be passed directly on to the HEI by the provider organisation, without awaiting the publication of a report.

How to report and escalate quality concerns

This is a live quality reporting process, and concerns should be reported and/or escalated as they arise. **To report a concern, please contact the Yorkshire and Humber quality team at england.escalatingconcerns.yh@nhs.net.**

When reporting the quality issue or concern, the following should be considered:

- Be clear what the issue/concern is and which learner groups it affects.
- Be clear what the desired improvements, and any actions to achieve these are.
- Consider and define what a successful outcome looks like.
- That the pace and timings of actions /monitoring are clearly described.
- That the next steps and potential end points, including escalation, are clearly described.
- Is there potential for impact on other professional or learner groups?

De-escalation by the provider is considered when sustained and triangulated progress has been made.

6. How NHS England WT&E will use the information

Reported concerns will feed into NHS England's national and regional education quality management processes. This will include the triangulation of concerns with other sources of data and intelligence. In accordance with our Intensive Support Framework, concerns may be shared with professional and system regulators and other system partners. NHS England WT&E will involve providers if concerns are shared.

We will consider the sharing and escalation of quality concerns through a categorised structure; this supports individuals managing concerns as well as ensuring appropriate and fair actions or next steps. The National Intensive Support Framework (figure 3) is designed to enable both categorisation of concerns and provide local support to address them. It facilitates a graded approach to this reporting and support. To promote consistency regional offices, apply the same language and categories for all learners to classify and describe the escalation level.

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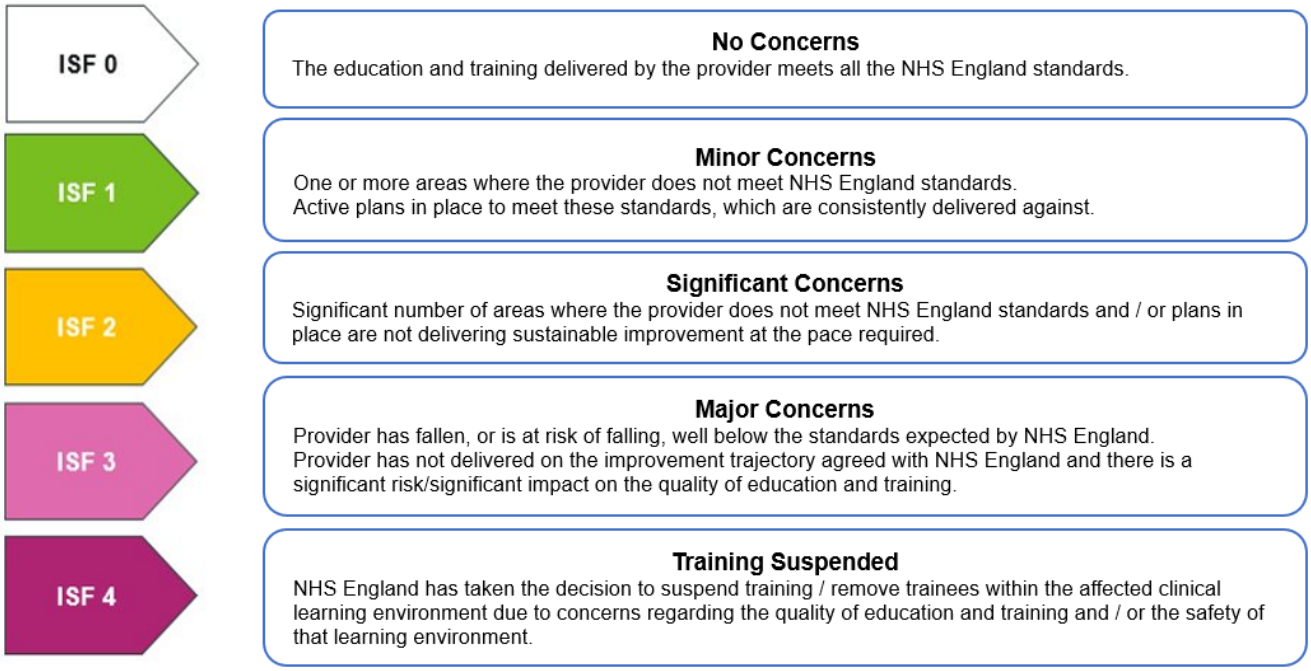
Figure 2



Categories

There are different concerns that may be identified in a clinical learning environment, and organisations are required to be familiar with all standards and requirements as outlined in the NHS England Education Quality Framework and complimented by those of the regulatory and professional groups. The following table provides examples of concern for each escalation level and further detail on the process by which escalation should occur.

ISF Categories	Process	Examples
ISF 4 – Training suspended / withdrawn The decision has been made to remove / suspend learners from the clinical learning environment with Postgraduate Dean awareness and involvement.	Sharing of concerns within NHS England and with others across the wider system (SQG / GMC, for example) is routine. ISF 2 and above are shared with the NHS England Challenged Trusts Report on a quarterly basis.	A lack of supervision (named supervisor, mentor or educator) due to staffing shortages. An immediate escalated risk to safety (leaner or patient). Lack of opportunity to attain curriculum requirements.
ISF 3 - Major Concerns	Requires specific reporting and discussion of concerns to the Postgraduate Dean via the Dean's Executive	A provider under region-wide monitoring such as a Quality Improvement Board or special measures and educational

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ISF Categories	Process	Examples
The provider has failed or is at risk of falling well below the standards expected by NHS England. The provider has not delivered on the improvement trajectory agreed with NHS England; there is a significant risk to, or significant impact on, the quality of education and training provided to learners. There is a risk or notice to removing learners. There may be system wide concerns that require NHS England YH to consider the quality of education and training in a particular service and/or provider organisation.	Meeting for Quality (DEMQ) and escalation log. Routine sharing of the concerns will be made within NHS England and across the wider system (SQG / GMC, for example). ISF 2 and above are shared with the NHS England Challenged Trusts Report on a quarterly basis.	concerns e.g. Significant workforce gaps affecting poor supervision levels at a particular post and site. Learners unable to obtain curriculum requirements with poor learner feedback over several years. Significant patient safety risk because of insufficient staff to cope with workload pressures. Services identified at risk due to significant non-training workforce gaps that have not been resolved and which impact on educational opportunities, supervision, and experience. Outlier data of 3 or more years that triangulates with learner feedback (forums, reporting, visits, or escalated concerns via the school structure).
ISF 2 - Significant Concerns There are a significant number of areas where the provider does not meet the NHS England standards, and/or plans in place are not delivering sustainable improvement at the pace required.	Requires specific reporting and discussion of concerns to the Postgraduate Dean. If concerns are confirmed as significant and/or triangulated then the wider sharing of concerns within NHSE England or with others (SQG / GMC, for example) will be considered. HEI Escalation to NHS England is required i.e., reporting and discussion of concerns via the monthly escalation log from HEI's by their Professional Leads. Quality Team to report to the Postgraduate Dean via monthly DEMQ.	A provider under region wide monitoring such as a Quality Improvement Board or special measures that may not triangulate with educational concerns but that requires regular and additional monitoring, support, and engagement. CQC inadequate ratings that triangulate with educational concerns. Poor governance including reporting or poor engagement with the trust senior educational team or leads. Outlier data of 3 or more years that triangulates with learner feedback (forums, reporting, visits, or

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ISF Categories	Process	Examples
	i.e., reporting and discussion of concerns by School / Director to the Quality Team. Quality Team / Director to report to the Postgraduate Dean via the monthly DEMQ. ISF 2 and above are shared with the NHS England Challenged Trusts Report on a quarterly basis.	escalated concerns via the school structure). A trend of reported bullying and undermining behaviours in a clinical learning environment that has not improved or where feedback regarding concerns has not been acted upon.
ISF 1 - Minor Concerns There are one or more areas where the provider does not meet the NHS England standards, however there are active plans in place to meet these standards, which are consistently delivered against.	The Postgraduate Dean is aware via routine management and directorate-level meetings. The concern is not at a level for system wide sharing. i.e. concerns are managed by the professional lead(s) within HEIs and provider organisation, without the need for HEI escalation to NHS England YH i.e. training committees and the school's management of programmes occurs day to day with specific reporting and discussion of concerns and guidance with the Director.	Single year data outlier(s) that require further exploration and monitoring at a programme or post level e.g. outlier data for one year in curricula and workload. Trend data that is mixed over several years with recurring areas flagged as not a below outlier, but as being in Q1 (or a "pink flag") Some areas requiring improvement or monitoring e.g., learner feedback that clinic attendance usually occurs but is sometimes cancelled at short notice e.g. verified learner feedback that they would not recommend the placement A standard considered partially met, because of mixed engagement with work placed based assessments and variable WPBA quality across the consultant body. Access to clinics or procedures reported as mixed and sometimes difficult, but with a plan in place to monitor and resolve. Single reported issue(s) or a culmination of minor issues that require further exploration and monitoring at a placement level e.g. verbal report via professional

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ISF Categories	Process	Examples
		lead relating to quality concerns due to lack of resource Placement experiences reported as mixed and sometimes difficult, but with a plan in place to monitor and resolve
No Concerns Normal quality processes are used where routine management of the programme occurs day to day. Areas may also be identified with sustained outstanding practice (These items will be added to the NEY region's Good Practice System for wider sharing as appropriate).	Programmes are managed by the professional lead(s) within HEIs and provider organisations, without the need for HEI escalation to NHS England NE. Training committees and school management monitoring, without the need for director involvement.	Data within range or positive trends. Feedback reporting no concerns. No data but no concerns (no escalated or reported concerns via established local process and network).

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7. Escalation Routes and Governance

The following flowchart shows the available escalation routes for quality concerns. Considering escalation through this structure supports individuals managing concerns as well as ensuring appropriate and fair actions or next steps. This visual reflects the established governance of NHS England (roles and committees as per local and national structures) as well as that of partner and national organisations. NHS England YH will always inform the relevant provider organisation if the issue relating to the placement requires further escalation.

Figure 3

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7.1 Governance principles of the Dean's Executive Meeting for Quality (DEMQ)

NHS England YH DEMQ is accountable to the Postgraduate Dean for process and organisational governance. The meeting is held on a monthly basis with the following aims:

- To ensure appropriate clinical leadership from all professional groups is sought and views are taken into consideration of any response.
- Ensure any concerns are noted, monitored, escalated, de-escalated, and shared as required.
- Oversee the management of risks to training of the health workforce across NHS England YH including escalation to NHS England, SQG, JSOG, ICB and the regulators and adding items to the NHS England risk register.
- Be responsible for advising the Postgraduate Dean about any decisions regarding a change in educational approval and/or the placement of learners (removal, continued or reinstated). This will be supported by information and the views collated.
- Review and triangulate medical, dental, and multi-professional issues at ISF level 2 and above along with issues that have been on the issues log for longer than three months, reviewing the progress of actions and providing feedback where required.
- Promote quality improvement of the education and training delivered in the NHS England YH area by identifying and sharing good practice.
- Receive, review, and approve Quality Team reports and reports to regulators and external bodies (System Quality Groups, risk summits etc.)
- Manage the issues logs with an operational focus, ensuring that current items are updated and that there is an 'organisational memory' for the region.
- Oversee the management of any regulator visits and the monitoring of associated action plans to ensure activities are completed within agreed timescales.
- For medical and dental education and training: receive and review quality reports and updates (including action plans for current items with associated timeframes), school visit reports, school board reports, regulator visit reports and data including local and national (GMC) survey results. DEMQ will manage the governance of all visits including the support for visits outside the usual scheduled visits cycle.
- Receive and consider updates on the national workstreams and programmes.

8. Equality Impact Assessment (EIA)

English Deans are committed to equality, diversity and inclusion (EDI), with a duty to eliminate discrimination, promote equality and ensure inclusive opportunities are available to all with regards to age, disability, gender, ethnicity, sexual orientation, religion or belief in the design and delivery of all our services. English Deans aim to meet and exceed their statutory obligations under the Equality Act 2010 by adopting a continuous improvement approach.

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9. References

Documents available at https://www.hee.nhs.uk/our-work/quality

- NHS England Education Intensive Support Framework
- NHS England Education Quality Framework
- NHS England Education Quality Strategy
- Emerging Concerns Protocol

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