

## QUALITY MANAGEMENT VISIT

### LEEDS COMMUNITY HEALTHCARE NHS TRUST

4<sup>TH</sup> NOVEMBER 2013

#### VISITING PANEL MEMBERS:

Mr Jon Hossain	Deputy Postgraduate Dean (Chair)
Dr Paul Rowlands	Head of School – Psychiatry
Dr Mark Purvis	Director of Postgraduate GP Education (attended Trust Briefing)
Sarah Walker	Quality Manager
Lynda Price	Quality Officer

**Specialties Visited:**                      Psychiatry

This report has been agreed with the Trust.

The Trust Visit Report will be published on the Deanery Website

Conditions that are RAG rated as Amber, Red and Red\* will be reported to the GMC as part of the Deanery Reporting process, the reports are published on the GMC website.

Date of First Draft	06/11/13
First Draft Submitted to Trust	15/11/13
Trust comments to be submitted by	17/11/13
Final Report circulated	19/12/13

## **CONDITIONS**

### **Condition 1**

#### **GMC DOMAIN 1 – PATIENT SAFETY - Induction**

##### **School of Psychiatry**

##### **All Trainees**

There are some concerns regarding the Trust Induction. For those trainees who started out of sync it was not apparent that the Trust was expecting them. No arrangements had been made for them to attend Induction, with trainees expected to book their own.

Some trainees were not able to attend the IT Induction and were not given passwords/log in details to access the Tough Books. Trainees felt that it would be beneficial to include specific training on the Care Note system, on how to navigate and what paperwork is expected to be completed especially on call.

##### **Action To Be Taken:**

- 1) The Trust must ensure that all new starters are booked onto a Trust Induction session and these details forwarded to the trainee prior to commencement at the Trust.
- 2) IT passwords/log in details to be issued to trainees within the first week of starting at the Trust.
- 3) The Trust to develop a basic Care Note Awareness Training session to be delivered at the IT Induction.

**RAG Rating:**



**Timeline:** 28<sup>th</sup> February 2014

##### **Evidence/Monitoring:**

- 1) Confirmation from the Trust that this is occurring.
- 2) Confirmation from the Trust that this is occurring.
- 3) Training materials.

### **Condition 2**

#### **GMC DOMAIN 1 – PATIENT SAFETY – Handover**

##### **School of Psychiatry**

##### **All Trainees**

There is no formal handover process in place, with a lack of documentation. The current handover arrangements are adhoc and involve doctors contacting the oncoming doctors if there is a requirement.

##### **Action To Be Taken:**

The Trust to implement a formal, auditable handover process which will benefit remote working. Rotherham, Doncaster & South Humber NHS Foundation Trust has an example of a remote electronic handover which the Trust may wish to explore.

**RAG Rating:**



**Timeline:** 31<sup>st</sup> March 2014

**Evidence/Monitoring:** Details of the handover system and process.

**Condition 3****GMC DOMAIN 6 – SUPPORT & DEVELOPMENT****School of Psychiatry****All Trainees**

When working out of hours there is the potential for breaches regarding Health & Safety Regulations. Currently trainees are required to attend to assess 16-18 year olds at the acute Trust, as they will not be admitted. There is the potential that this can take all night which will require the trainees to take off compensatory time the next morning; however trainees do not feel empowered to do this.

**Action To Be Taken:**

- 1) The Trust must monitor the out of hours requirements to determine if they are non-compliant.
- 2) If found to be an issue the Trust to produce and implement guidance on what to do the following day.

**RAG Rating:****Timeline:** 31<sup>st</sup> January 2014**Evidence/Monitoring:**

- 1) Out of hours monitoring results.
- 2) Guidance documentation.

**Condition 4****GMC DOMAIN 5 – CURRICULUM DELIVERY****School of Psychiatry****Core Trainees**

One of the in-patient posts does not get sufficient community experience. The trainers are aware of this and historically it was part of the job. However the previous trainee did not take up the opportunity and therefore this needs reviewing.

**Action To Be Taken:**

The Trust to review the structure of the in-patient job to include community experience.

**RAG Rating:****Timeline:** 31<sup>st</sup> January 2014

**Evidence/Monitoring:** Confirmation from the Trust that community experience has been incorporated into the post.

**Condition 5****GMC DOMAIN****School of Psychiatry**

Currently there is no link Associate Postgraduate Dean (APD) allocated to the Trust and therefore there is a lack of communication between the Trust and Health Education Yorkshire & the Humber (HEY&H). HEYH is not notified of reports of serious untoward incidents (SUIs) involving trainees.

**Action To Be Taken:**

- 1) The Deputy Dean to request a link APD is allocated to the Trust.
- 2) The Trust to develop an SUI process to ensure that all SUIs involving trainees are identified and HEYH is notified.

**RAG Rating:****Timeline:** 1) 31<sup>st</sup> December 2013 & 2) 31<sup>st</sup> January 2014**Evidence/Monitoring:**

- 1) Details of APD.
- 2) A copy of the process.

**Condition 6****GMC DOMAIN****School of Psychiatry**

Not all trainers have undertaken the Educational Supervisor training and are currently waiting for the new system to be implemented by HEYH.

**Action To Be Taken:**

All Educational Supervisors to undertake the Educational Supervisor eLearning which is accessed through the National Learning Management System (NLMS) and via smart cards. The Trust to liaise with the Educational Team at HEYH to confirm access to the e-learning and how to deliver the face to face elements.

**RAG Rating:****Timeline:** 31<sup>st</sup> March 2014**Evidence/Monitoring:** Confirmation that all Educational Supervisors have undertaken training.

RAG guidance can be found at Appendix 1.

## **RECOMMENDATIONS**

As recommendations are not a condition of training they will not form part of our response to the GMC.

### **Recommendation 1**

#### **GMC DOMAIN 6- SUPPORT & DEVELOPMENT**

##### **School of Psychiatry**

##### **All Trainees**

Trainees felt that they would benefit from some in-house specific cross speciality, physical health refresher training eg. Paediatrics training. This may also be of use to other speciality trainees for psychiatry training.

Trainees would find in-house training in consent and capacity and how case law for children relates to those areas of practice, to be beneficial.

##### **Action To Be Taken:**

The Trust to consider implementing in-house speciality specific and consent and capacity training courses.

##### **RAG Rating:**



**Evidence/Monitoring:** Details of training schedule.

Timeline for recommendations is 12 months.

## **FINAL COMMENTS**

This is the Trust's first Quality Management visit and the panel were pleased to find very positive engagement from the Trust. Trainee attendance and interaction was good and there was an excellent turnout of consultants. The panel were impressed with the presentation that described what the Trust does.

All trainees reported that clinical supervision was good and they feel well supported by the consultants with good learning opportunities.

The Core trainees find the Child and Adult Mental Health Service (CAMHS) training very useful they have experienced conditions that they would not necessarily have seen in adults and reported excellent clinic opportunities.

The Higher trainees also found the team environment to be very positive with one trainee reporting it was the 'best team they had ever worked for'.

All trainees interviewed reported that they would recommend their post.

### **Approval Status**

**Approved pending satisfactory completion of conditions set out in this report.**

**Signed on behalf of Health Education Yorkshire and the Humber**

**Name: Mr Jon Hossain**

**Title: Deputy Postgraduate Dean (Panel Chair)**

**Date: 19 December 2013**

**Signed on behalf of Trust**

**Name: Dr Amanda Thomas**

**Position: Medical Director**

**Date: 25 November 2013**

## RAG Rating Guidance

The RAG rating guidance is based on the GMC RAG rating to ensure a consistent approach. The model takes into account impact and likelihood.

### Impact

This takes into account:

- a) patient or trainee safety
- b) the risk of trainees not progressing in their training
- c) educational experience – eg, the educational culture, the quality of formal/informal teaching

A concern can be rated high, medium, or low impact according to the following situations:

High impact:

- patients or trainees within the training environment are being put at risk of coming to harm
- trainees are unable to achieve required outcomes due to poor quality of the training posts/ programme

Medium impact:

- trainees are able to achieve required outcomes, but the quality of education and training is recognised as requiring improvement
- patients within the training environment are receiving safe care, but the quality of their care is recognised as requiring improvement

Low impact:

- concerns have a minimal impact on a trainee's education and training, or the quality of provision for the patient.

### Likelihood

This measures the frequency at which concerns arise eg if a rota has a gap because of one-off last minute sickness absence, the likelihood of concerns occurring as a result would be low.

High likelihood:

- the concern occurs with enough frequency that patients or trainees could be put at risk on a regular basis. What is considered to be 'enough frequency' may vary depending on the concern eg if rotas have consistent gaps so that there is a lack of safe cover arrangements, the likelihood of concerns arising as a result would be 'high'.

Medium likelihood:

- the concern occurs with enough frequency that if left unaddressed could result in patient safety concerns or affect the quality of education and training, eg if the rota is normally full but there are no reliable arrangements to cover for sickness absence, the likelihood of concerns arising as a result would be 'medium'.

Low likelihood:

- the concern is unlikely to occur again eg if a rota has a gap because of several unexpected sickness absences occurring at once, the likelihood of concerns arising as a result would be 'low'.

## Risk

The risk is then determined by both the impact and likelihood, and will result in a RAG Rating, according to the below matrix:

Likelihood	IMPACT		
	Low	Medium	High
Low	Green	Green	Amber
Medium	Green	Amber	Red
High	Amber	Red	Red*

Please note:

\* These conditions will be referred to the GMC Responses to Concerns process and will be closely monitored

Source: GMC Guidance for Deaneries, July 2012