

QUALITY MANAGEMENT VISIT REPORT

TRUST	Leeds Community Trust
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DAY	Tuesday	DATE 24 th February 2015

VISITING PANEL MEMBERS:

Mr Jon Hossain	Deputy Postgraduate Dean (Chair)
Mr Kevin Sherman	Associate Postgraduate Dean
Ms Fiona Bishop	Associate Postgraduate Dean
Dr Gearoid Fitzgerald	Training Programme Director, Psychotherapy
Dr Patrick Quinn	Training Programme Director, Forensic Psychiatry
Linda Garner	Quality Co-ordinator
Vicky Jones	Quality Co-ordinator

SPECIALTIES VISITED:

- Psychiatry
- Community Paediatrics
- Community Medicine

This report has been agreed with the Trust.

The Trust Visit Report will be published on Health Education Yorkshire and the Humber's Website

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

Date of First Draft	09/03/15
First Draft Submitted to Trust	09/04/15
Trust comments to be submitted by	17/04/15
Final Report circulated	13/05/15

General Comments

- The visit was well organised by the Trust and the turnout of Foundation, Core, and Higher Trainees was excellent. Engagement was clearly demonstrated by those Trainees who were not able to be present requesting a telephone call to enable feedback to be given.
- The panel were appreciative of the informative presentation from the Chief Executive of the Trust and that the Trust were keen to work with the Deanery.
- There were no reports of undermining from the trainees and none reported being expected to act beyond their competence.
- All trainees would recommend their post and feel they have become a more experienced doctor as a result of their post. In addition all trainees would be happy for a member of their family to be treated in the department.
- All the trainees were happy with the consultant support provided and with the training received which appears to be well thought out. The higher trainees in Psychiatry especially seemed to value the training they were receiving.
- The panel recommend the Trust raise awareness amongst their Trainers of the GMC requirement for all Clinical Supervisors and Educational Supervisors to be fully accredited by July 2016. Any non-accredited supervisors at this point will be unable to train.

CONDITIONS

Condition 1 : (continues from Condition No. 1 in the report of 4 th November 2013)		
GMC Domain: 1	Patient Safety	
Concern relates to:	Induction	
School: Psychiatry	Trainee Level Affected: Core	Site: Leeds Community Trust
<p>Trust induction is variable across the specialities. All trainees reported gaining a Trust induction in the first few days that they found extremely useful. However, while the Paediatric trainees were given ample notice of induction and were furnished with log-ins prior to arrival, the Psychiatry trainees reported being unable to access a log-in for a week from their start date. One trainee reported being on-call over a weekend which equated to a 48 hour period with no access to the system.</p> <p>Consequently during this period the trainees reported having to work without a log-in, borrow someone else's or use a "shadow" log-in. The panel felt that the latter two options would not comply with Trust information governance policies. With the trust receiving a low number of trainees arriving with a good amount of notice given by HEYH, the issuing of log-ins prior in a timely manner or even before the start date is eminently possible.</p>		
Action To Be Taken:		
1) IT passwords/log-in details to be issued to trainees at Trust induction or prior to starting with the Trust.		
RAG Rating:	■	Timeline: 30/05/15
Evidence/Monitoring:		
1. Confirmation from the Trust that this is occurring.		

Post visit comments from the LEP:-

The Trust has given assurances and described a process by which this will be resolved the next trainee rotation.

Condition 2

GMC Domain: 6	Support and Development	
Concern relates to:	Study leave, etc	
School: Psychiatry	Trainee Level Affected: Core	Site: Leeds Community Trust

The trainees were unsure as to who their actual employer was and two GPVTS trainees had not yet signed their contract. One Psychiatry trainee was unsure as to whether or not they actually had a contract. The Paediatric trainees were unclear about the study leave process; they understood there was a budget but were not sure how to access this.

There was also uncertainty surrounding the process to book annual leave, sick leave and the trainees were not aware of the disciplinary route. It was assumed by the trainees that none of these processes had changed since their transfer from Leeds Teaching Hospital Trust as they had not been informed otherwise.

The panel felt this was basic knowledge that trainees need to gain from their employers and have a thorough understanding of. In order to encourage further trainees to work within the Trust in the future, it is imperative the Trust ensure the trainees are empowered with this information.

Action To Be Taken:

- 1) Ensure induction process includes clear instruction on employment information, study leave, annual leave, sick leave and disciplinary route
- 2) Ensure all trainees employed by the trust receive receive a contract to sign within one week of placement starting

RAG Rating:



Timeline: 30/06/15

Evidence/Monitoring:

1. Copy of induction process
2. Copy of timeline indicating date contracts are issued.

Post visit comments from LEP:-

The Trust has described a process by which the employment issues will be resolved

Condition 3		
GMC Domain:	Management of Education and Training	
Concern relates to:	Workload	
School: Psychiatry - Child and Adolescent Mental Health Services (CAMHS)	Trainee Level Affected: Core and Higher	Site: Leeds Community Trust
<p>The Psychiatry Core Trainees reported taking blood samples on a daily basis from eating disorder in-patients. The chasing up of results is done by telephone as the trainees are unable to access the Leeds electronic system. The inordinate length of time taken to gain blood test results is not a good use of a doctor's time. It also means doctors are often having to rely on single test results rather than a trend, which is important in these patients. The panel felt this could present a potential patient safety risk.</p> <p>The panel felt that the Trust need to examine options other than doctors taking blood, for instance employing a phlebotomist or training for nurses to take bloods. In addition liaison with the IT Department in Leeds Teaching Hospitals NHS Trust, regarding an electronic solution to accessing blood test results within the trust, either by remote access or having workstation connected to the LTHT intranet. This exists in many other trusts where LTHT consultants provide outreach clinics in specialties like Renal Medicine, Oncology and Vascular Surgery.</p>		
Action To Be Taken:		
1) Review of the process undertaken to take blood samples and receive results.		
RAG Rating:	[REDACTED]	Timeline: 31/05/15
Evidence/Monitoring:		
<ol style="list-style-type: none"> 1. Copy of new process for taking blood. 2. Copy of implementation plan for IT support for results 		
Post visit note:-		
The Trust has described a process for regular venipuncture to take place and is liaising with IT to develop a solution to access results.		

Condition 4		
GMC Domain: 5	Delivery of Curriculum	
Concern relates to:	Learning environment – in patients	
School: Psychiatry	Trainee Level Affected: Higher	Site: Leeds Community Trust
<p>Trainees reported concerns over the workload relating to child and adolescent psychiatry patients being admitted to an inpatient bed out of hours. This is a national issue and not confined to the LEP.</p> <p>The individual co-ordinating the admission spends a large amount of time phoning round units, negotiating a bed, organising an ambulance, organising staff, etc. This workload is often left to a trainee. If a higher trainee is not on call this workload is delegated to a consultant. The panel felt that some of this workload could be taken off the trainee and will ask the Trust to look at options, but recognise that this is a national issue. The learning element of this co-ordination could be assessed with feedback as it will become part of their consultant work.</p>		
Action To Be Taken:		
<ol style="list-style-type: none"> 1) Trust to review process of child admissions and audit frequency 2) Trainees to receive feedback on learning 		
RAG Rating:		Timeline: 31/08/15
Evidence/Monitoring:		
<ol style="list-style-type: none"> 1. Evidence of review and alternative action. 2. Copy of new process 		

Condition 5		
GMC Domain: 1	Patient Safety	
Concern relates to:	Clinical Supervision	
School: Psychiatry and Community Medicine and Paediatrics	Trainee Level Affected: Foundation, Core, Higher	Site: Leeds Community Trust
<p>The panel expressed concerns that the term Senior House Office was still in wide use within the Trust. This term refers to a wide range of training grade doctors, and creates confusion in nursing and other colleagues' expectations about a trainee's level of experience and competence.</p>		
Action To Be Taken:		
<ol style="list-style-type: none"> 1) The Trust must ensure the term "SHO" is removed from rotas, name badges and any other documentation so it is clear to all staff the level of the trainee who is working with them. 		
RAG Rating:		Timeline: 31/05/15
Evidence/Monitoring:		
<ol style="list-style-type: none"> 1) Copy of rotas. 		

Condition 6		
GMC Domain: 5	Delivery of Curriculum	
Concern relates to:	Learning Portfolio	
School: Psychiatry	Trainee Level Affected: Foundation, Core	Site: Leeds Community Trust
<p>The trainees reported the learning portfolio was fine apart from a problem of being unable to access the work placed based assessment area. It may be that the Trust's IT system is not conversant with the portfolio in this area and the panel feel this needs examining with a view to perhaps installing an appropriate browser, system upgrade or to remove blocks to solve the problem.</p>		
<p>Action To Be Taken:</p> <p>1) Review of the IT system that supports the Trainees' portfolio</p>		
RAG Rating:		Timeline: 31/05/15
<p>Evidence/Monitoring:</p> <p>1. Written confirmation from the Trust</p>		
<p>Post visit notes:-</p> <p>The Trust has given assurances that the operating system on workstations is being upgraded</p>		

Condition 7		
GMC Domain: 2	Quality Assurance	
Concern relates to:	Review and Evaluation	
School: Psychiatry, Community Medicine and Community Paediatrics	Trainee Level Affected: Foundation, Core	Site: Leeds Community Trust
<p>The panel felt that the Trust need to develop a reporting process to deal with complaints that involve trainees. This is a revalidation requirement for trainees. To date HEYH have not received any. It is acknowledged that the trust has developed a serious incident reporting system. The Trust should then submit the reports to HEYH as part of the exception reporting process.</p>		
<p>Action To Be Taken:</p> <p>1) Trust to review exception reporting process based on HEYH guidelines</p>		
RAG Rating:		Timeline: 30/05/15
<p>Evidence/Monitoring:</p> <p>1. Copy of SUI process</p>		

RAG guidance can be found at Appendix 1.

Approval Status

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

Signed on behalf of HEYH

Name: Jon Hossain

Title: Deputy Postgraduate Dean

Date: 07/04/15

Signed on behalf of Trust

Name:

Position:

Date:

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