

Programme Review Findings Form

Section 1: Details of the Visit	
Programme Name:	Ophthalmology (East)
LEP (Trust/Site) reviewed:	Hull and East Yorkshire Foundation Trust
	York Teaching Hospitals Trust
Date of Visit:	23 June 2014

No	LEP (Trust & Site)	Issue	Recommendation	Action By
1.	YTHT - Scarborough	In view of the negative comment from a Trainee in the 2013 survey as follows: Change in manager at start of placement meant that my timetable was not finalised until November, i.e. month 4 of the 6 month placement - prior to this the timetable changed sometimes weekly and all training needs were not met - an example would be laser training. All SpRs at ST3 level should be trained in argon laser. Due to the chaotic timetable I was not able to attend a laser list (since there was always another clinic booked) until mid-October. Now that we have designed a training timetable by liaising with the new manager, the placement for subsequent trainees should be more accommodating of training needs. Unfortunately I was unable to reap the benefit of my efforts to effect change. 2) Cataract training - I found it very difficult to get enough cases. There were often cancellations on the day and we were not always able to find suitable replacements at short notice. With one of	 Closely monitor the progress of the Trainee that is commencing in post at the Scarborough unit in August in particular: 1) Rota is provided in a timely manner 2) Ensure that training is provided to meet curriculum requirements. 	Trust/HoS

		 my supervisors in particular I did not get more than 1 (rarely 2) cases per list because we did not agree on which cases were suitable for a trainee of my level. This is evident from my logbook data which will show a significant difference in numbers between my two trainers' lists. I made every effort to label suitable patients when listing in clinic but unfortunately due to the backlog and breach dates these patients will only appear in theatre towards or after the end of my placement. Again my efforts will potentially improve the situation for the next trainee but will not have an effect while I am still in the placement. The Trainer who attended the review explained this situation came about as it was at the time of the merger of York/Scarborough Trusts and has since resolved. 		
2.	HEY	Trainees reported they are unable to carry out audits as the Trust has suspended new audits for one year even though this is a requirement of the Ophthalmology curriculum. This was already identified as a Trust –wide issue at the 2014 Trust QM visit to HEY and a condition was set for an improvement by 31 July 2014. The panel did recognise that the Trust are concerned at the number of audits that are commenced and not completed.	The Trust to ensure that Ophthalmology Trainees are given the opportunity to complete audits to enable them to meet curriculum requirements. TPDs to discuss audit progress with Trainees to ensure that any barriers to completing these are discussed and addressed.	Trust/HoS TPD
3.	HEY and YTHT	The Trainees reported the E-expenses system is overly complex and causes long delays in them receiving reimbursement	HEYH to evaluate how the E-expenses system is working in Ophthalmology	HoS
4.	HEY and YTHT	Handover takes place in both units and a ST2 Trainee said 'handover works extremely well in Hull'. There has been a red flag for Handover according to information recently supplied to HEYH SMT but the 2014 GMC NTS data did not	 Trusts to implement a formalised handover that is led by a Consultant Investigate the 'triple red' status of handover in Ophthalmology 	Trust/HoS Quality Manager

		corroborate this.		
5.	HEY and YTHT	Consent Training does take place on an informal basis, for example, cataract training in York. However, there is no log kept of what consent training each Trainee has undertaken.	Formalise the logging of consent-taking training	Trust/HoS
6.	Regional	The telebroadcasting system from Leeds that allows Trainees at other units to view a speaker and their powerpoint slides was felt to be a good resource that the Trainees value. However, this uses outdated dial up technology that has a negative impact on the experience of Trainees using it as it can be unreliable.	Investigate the possibility of a digital system to deliver regional teaching.	Trust/HoS

Final Comments

The Trainees were very complimentary about the training they receive and one ST3 trainee said 'Yorkshire and Humber is the best place to train'. There was good access to clinical supervision and regional/local teaching. Workload was described as manageable with rotas being 'well organised'. Trainees are encouraged to work independently but can request senior support for assistance or to assess a skill. The Trainee reported there is good case variation and would all recommend their posts to a colleague. The Trainers had no problems in delivering the curriculum and have their Educational Supervisor roles recognised in their job plans.

Section 3: Outcome (please detail what action is requested following the review)	
No further action required – no issues identified	
Monitoring by School	YES
Speciality to be included in next round of annual reviews	
Level 2: Triggered Visit by LETB with externality	
Level 3: Triggered Visit by LETB including regulator involvements	

Section 4: Decision (To be completed by the Quality Team)

The programme review identified minor issues that can be monitored by the School of Ophthalmology in conjunction with the two Trusts. It was noted there is not a Trainee in post in Scarborough but agreed the new Trainee commencing in August should be closely monitored to ensure the issues encountered by the last trainee do not recur.