

Quality Interventions

What is expected of a Lay Representative?

Role of the Lay Representative at a Quality Intervention

Lay Representative attendance is required to ensure that the review of education and training:

- is transparent and robust
- is independent
- supports good medical practice
- has accountability in decision making
- promotes equality, fairness and values diversity

Your role as a lay representative at Quality Management Interventions (see Appendix 1) is a very important one. Please find below some of the duties we would expect you to undertake as a lay member of a panel.

Prior to the Quality Intervention

You will be sent a panel pack which will include details of the intervention, including agenda and papers. If the visit is to take place in person and you require copies of these papers on the day for reference, please print and bring them with you. Please note that these are confidential and for your eyes only.

You should familiarise yourself with the content of the panel pack and raise any concerns or queries with the panel either before the visit or during the visit itself.

The HEE Quality Strategy 2016-2020 and the HEE Quality Framework 2017-2018, set out how we will measure, identify and improve quality in the education and training environment. You should familiarise yourself with these documents which details the domains and standards that interventions will be using as the basis of the risk-based intervention and report. The documents can be found at the following [link](#).

During the Quality Intervention

The attendance of the Lay Representative is in the interest of patients, the public and the learner. Part of your role is to ensure that the panel are covering all of the HEE Quality Framework domains during their interviews.

- **Panel Briefing**

Use the panel briefing to introduce yourself to the panel and clarify with them if there is any specific role they wish for you to adopt. This is also an opportunity for you to raise any specific issues you may have noted from the paperwork which you wish to explore further during the day.

- **Take Notes**

Take notes on the question templates and contribute to discussions with the panel, educators and learners and these should be sent/given to the Quality Administrator. It can be difficult to remember which learner said what and to which question but having a prompt of your notes there will help to confirm the accuracy of the report that will be written.

- **Voice concerns or issues**

Raise any themes with the panel or the learners as they arise and consider what you think are issues which would need to be addressed as areas of concern and also those to highlight as best practice. If there is an area you feel that, as a lay representative, you think is particularly important, consider asking further questions which may more fully cover that area of concern.

- **Timing**

The panel chair will try to keep to time, but you can help with this, and perhaps ask the panel chair how they wish for you to help them keep time appropriately.

- **Parity**

Part of your role is to ensure that the panel are covering all of the appropriate HEE domains (see website link above for further details).

- **Complete feedback form**

As usual, complete the feedback form which will help to inform future interventions and further input into the process from a lay point of view.

If you have any queries, please contact Michele Hannon, Quality Administrator at michele.hannon@hee.nhs.uk or telephone 01482 421178.

After the Quality Intervention

The draft intervention report will be produced by the Quality Manager and Intervention Chair and sent to the Panel Chairs for comments.

The completed draft will then go to the Local Education Provider (LEP) for confirmation of accuracy. The final report is then checked by other members of the Quality Team for consistency of style and language. The finalised report is then sent to the LEP and placed on the HEE YH website.

Review Date: September 2022

Appendix 1

Urgent Risk Visits

Why? To provide an urgent response to suspected significant concerns

What? To focus on the quality of a single clinical learning environment; face to face/virtual meetings with learners and educators

Who? Senior panel members with expert and external input; lay input and other input as appropriate.

Outcome: Prompts rapid action; raises awareness of concerns, usually at executive/board level

Programme Reviews

Why? To explore an education and training programme at a local office-wide level.

What? Multiple meetings or use of a single lead site (using teaching events may limit impact on providers); face to face/virtual 'focus group' approach with learners (and sometimes educators).

Who? Small team with clinical input led by senior clinical faculty but not the School faculty.

Outcome: Understanding of common concerns across multiple sites and where there are site-specific issues; allows comparison of quality across the local office patch.

Learner/Educator visit

Why? To clarify concerns from learners' and/or educators' perspectives within a specific, clinical learning environment especially if concerns may be contentious (for example undermining)

What? One to one as a 'drop in' clinic or group meeting, virtual or face to face in the placement provider setting.

Outcome: Engagement with learners and/or educators and provides an opportunity to voice concerns

Senior Leader Engagement visit

Engagement meeting with medical and/or LEP healthcare professional LEP education leads.

The meeting may include the Postgraduate Dean, Associate Dean, Head of Quality, Chief Executive Officer, Medical Director, Director of Medical Education, Medical Education Manager, Chief Nurse, Head of Learning and Development.

Outcome: improve Senior Leader Engagement with and commitment to the education and training quality agenda where there is evidence that this is at risk; improves relationships.

Monitoring the Learning Environment

Varies in approach but expert/specialty advice; externality and objectivity often involves sharing best practice.

Outcome: Engagement with providers; demonstrates HEE's commitment to quality; improves relationships; allows for regional and local flexibility

Sharing Good Practice/Peer Review

Identification and dissemination of good practice via networks/events; establishing links and networks to allow providers to learn from one another.

Outcome: Engagement with Providers; demonstrates HEE's commitment to quality; improves relationships.