Schedule 3

Quality Schedule

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QUALITY SCHEDULE

1. INTRODUCTORY STATEMENT

1.1 This schedule sets out the criteria for addressing quality and performance associated with the LDA.

1.2 Quality outcomes in the provision of healthcare, education and training are essential to ensure the provision and development of a healthcare workforce which is fit for purpose, practice and award. East Midlands Healthcare Workforce Deanery has a delegated responsibility to ensure quality requirements referred to within the LDA Schedules are met through robust and effective quality control processes and procedures.

1.3 The aim is to provide a process and documentation which will aid monitoring of progress against the LDA Quality Schedules.

1.4 The SHA, through the East Midlands Healthcare Workforce Deanery, is responsible for quality management of those standards through partnership working with Service Provider Organisations.

1.5 Quality Control responsibility lies with Service Provider Organisations through implementation and development of their policies and procedures.

1.6 The Accreditation and Review processes undertaken by East Midlands Healthcare Workforce Deanery, on behalf of the SHA, as outlined within this schedule, draw together Quality Assurance standards, Quality Management review and Quality Control implementation within Service Provider Organisations.

2. REVIEW PROCESSES

2.1 **Process for reviewing Practice Learning Placements for non-Medical Health Care Professionals.**

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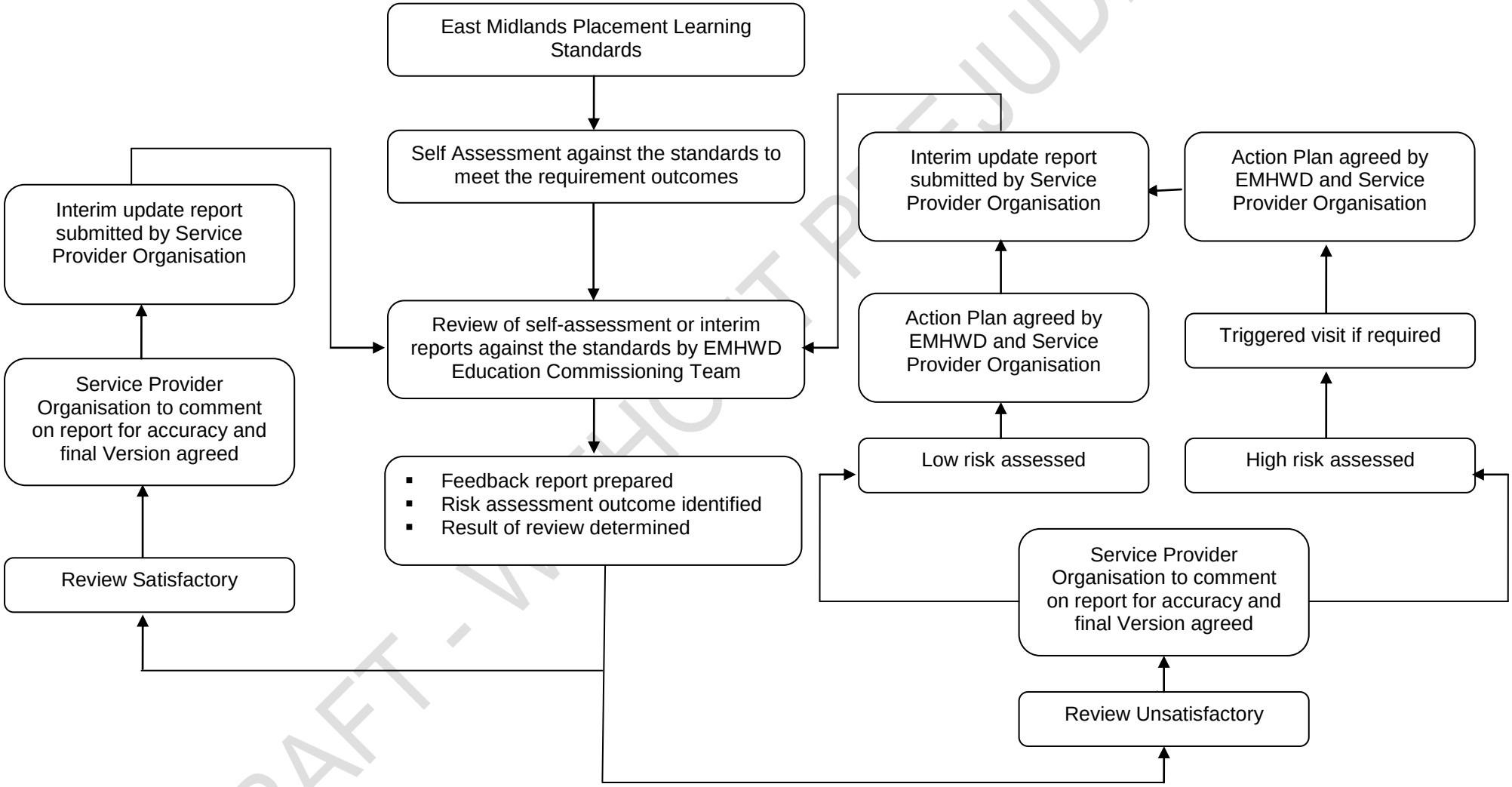
2.1.1 Process Overview – Two-way Quality Management Reporting Cycle



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2.1.2 Self assessment of compliance with quality assurance standards defined or identified within the LDA Schedules, alongside national, professional and regulatory body standards (i.e. NMC, HPC, HCC etc), will be undertaken by Service Provider Organisations.

2.1.3 The documentation for the self assessment will be provided by East Midlands Healthcare Workforce Deanery two months prior to the agreed date of return.

2.1.4 The return date will be agreed between East Midlands Healthcare Workforce Deanery Education Commissioning team and the Service Provider Organisation's nominated officer after the LDA is signed.

2.1.5 The completed self assessment should be returned to the nominated officer within East Midlands Healthcare Workforce Deanery by the agreed return date.

2.1.6 Where examples of good practice are identified, these will be shared internally and across Service Provider Organisations, wherever possible and appropriate.

2.1.7 The formal assessment of compliance status will be reached through an accreditation process between relevant East Midlands Healthcare Workforce Deanery representation on behalf of the SHA and Service Provider Organisation personnel.

2.1.8 The East Midlands Healthcare Workforce Deanery Education Commissioning team will provide a feedback report to the Service Provider Organisation based on the review of the self-assessment documentation.

2.1.9 Further Service Provider Organisation action is dependent upon the outcome identified from the review of the self-assessment documentation and will be jointly negotiated.

2.1.10 Interim update reports against agreed action plans will be submitted by the Service Provider Organisation to the East Midlands Healthcare Workforce Deanery Education Commissioning team according to agreed timescales.

2.1.11 The agenda for any required visits will as a minimum, but not exclusively, consist of the core content as follows :

2.1.11.1 Review of self assessment documentation

2.1.11.2 General compliance status

2.1.11.3 Issues arising

2.1.11.4 In-depth review of issues relating to standards identified as high risk

2.1.11.5 Where appropriate, consultation with student representatives

2.1.11.6 Where appropriate, consultation with academic Education Provider representatives

2.1.11.7 Good practice exemplars shared

2.1.11.8 Actions proposed to further improve the quality of healthcare education

2.1.11.9 Agreement of timescales for further review activities

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2.1.12 Core attendance, at any required visits, shall be as a minimum, but not exclusively, as follows :

2.1.12.1 East Midlands Healthcare Workforce Deanery representation on behalf of the SHA :

- Learning Development Agreement Manager or representative
- Education Commissioning Team representatives
- Programme Manager as required
- Specialist Advisors as required
- Senior Administrator

2.1.12.2 Service Provider Organisation Review Team :

- Service representation, as jointly agreed
- Nominated Service Education leads for healthcare professions covered by the LDA contract
- HR representation

2.1.13 Required Resources and Facilities

2.1.13.1 East Midlands Healthcare Workforce Deanery will provide on behalf of the SHA :

- A single point of contact
- Documentation for self assessment
- Documentation review dates
- Two-way reporting dates where appropriate
- Administrative / secretarial support at any visits
- Face to face contact as required and subject to availability

2.1.13.2 Service Provider Organisations will provide :

- A single point of contact
- Premises for the review visit to be undertaken
- Self assessment as required
- Action planning as required
- Interim reporting as required
- Dissemination of good practice

2.1.14 Review outcomes from this process will inform the financial and activity monitoring managed by the Contract Management Group described in Schedule 5.

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2.2 Process for reviewing Practice Learning Placements for Medical Health Care Professionals

2.2.1 While the East Midlands Healthcare Workforce Deanery's remit covers education and training of all healthcare professionals, this section of the schedule focuses on the medical workforce and on doctors in training posts only (from Foundation Year 1 to completion of speciality training) and sets out the principles and processes of the East Midlands Healthcare Workforce Deanery's approach to the Quality Management (QM) of Postgraduate Medical Education (PGME) in secondary care. The East Midlands Healthcare Workforce Deanery (EMHWD) must monitor providers of PGME to ensure that their processes of Quality Control (QC) are robust and that there are adequate standards of training.

2.2.2 The East Midlands Healthcare Workforce Deanery's responsibilities for Quality Management :

2.2.2.1 The Postgraduate Medical Education and Training Board (PMETB) has overall responsibility for Quality Assurance (QA) of PGME across the UK, apart from at Foundation Year 1 level, which is the remit of the General Medical Council (GMC)[1]. The EMHWD's remit is for QM of PGME while Service Provider Organisations and other providers of PGME are charged with providing QC.

2.2.2.2 Each Service Provider Organisation will be assessed against the relevant standards outlined in Schedule 4B of the Learning Development Agreement (LDA).

2.2.2.3 The responsibility for some QM functions is devolved to Postgraduate Specialty Schools. However, while the Specialty Schools work with Service Provider Organisations to develop, deliver and monitor some aspects of PGME, they ultimately report to the East Midlands Healthcare Workforce Deanery.

2.2.3 Education Accreditation Review (EAR) cycle

2.2.3.1 The EMHWD will implement an ongoing accreditation review 'cycle' (see 2.2.3.2). This will incorporate :

- A 1-2 year rolling programme of focused visits to the 13 secondary care Service Provider Organisations across the East Midlands, with each Service Provider Organisation receiving an Education Accreditation Review (EAR) visit (constituting the main visit in the review cycle) as well as two interim visits;
- A reporting structure and reporting process between the East Midlands Healthcare Workforce Deanery and Service Provider Organisations (incorporating report outcomes from Specialty Schools, Foundation Schools and Primary Care);

[1] The PMETB and GMC are due to merge in 2010.

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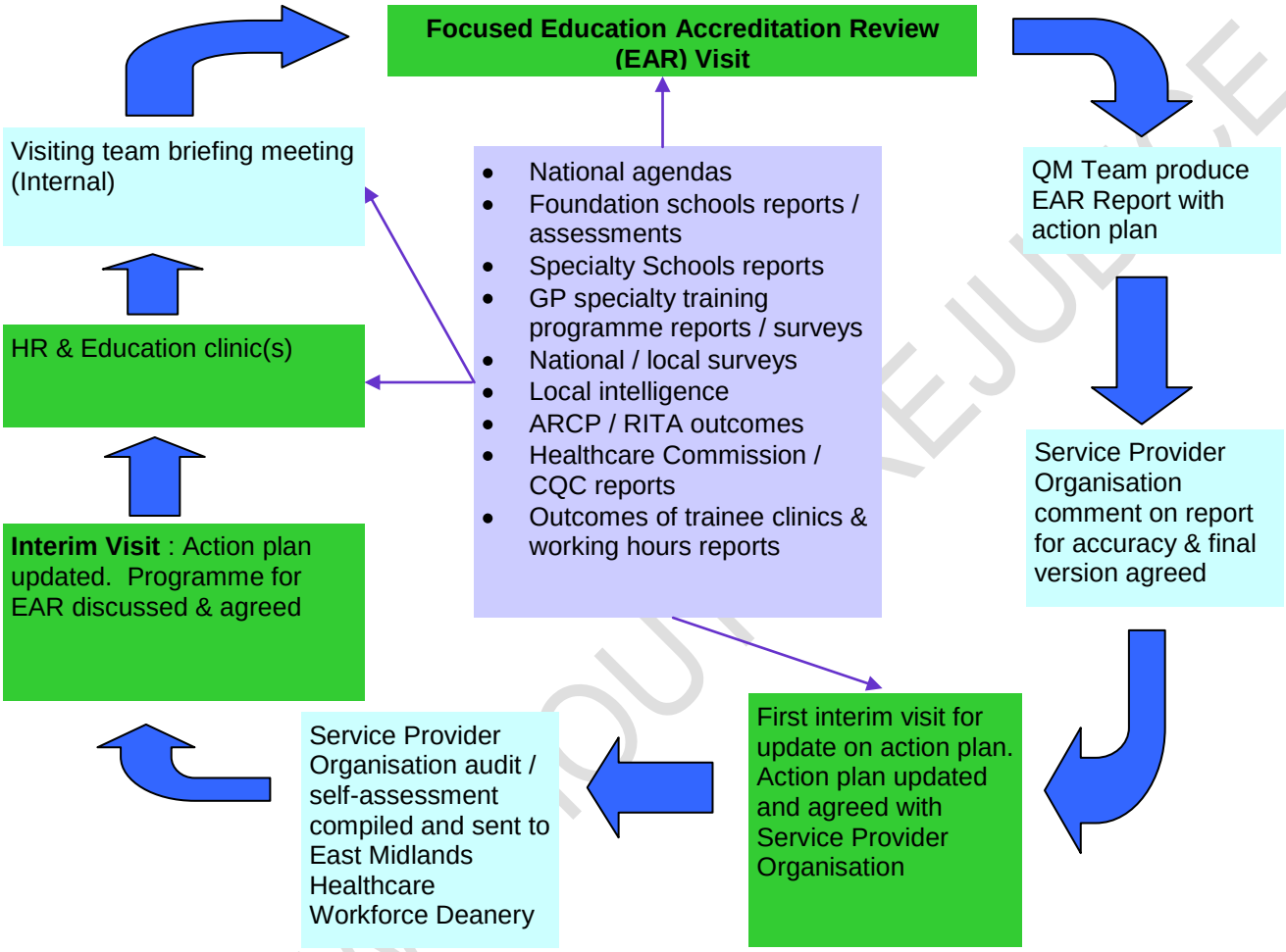
- Ongoing analyses of national and local survey data, local and national reports, local intelligence and training outcomes to feed into the review process.

2.2.3.2 Cycle of accreditation review



2.2.4 Service Provider Organisation self-assessment reports

2.2.4.1 Prior to each EAR visit, the Service Provider Organisation will be expected to submit to the East Midlands Healthcare Workforce Deanery a self-assessment report. This will take the form of a Service Provider Organisation-wide, structured, executive summary of where the Service Provider Organisation sees itself in terms of highlights, recent developments, exceptions, development needs and objectives (since the last EAR visit), taking into account the PMETB's nine quality domains. We would expect Service Provider Organisations to gather the necessary information from each specialty in order to complete this report (the East Midlands Healthcare Workforce Deanery will provide a template for the self-assessment report and for gathering information internally). The report should be submitted to the QM team at least 10 Business Days before the visit.

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2.2.5 Pre-visit HR & Education clinics

2.2.5.1 Five (5) to Ten (10) Business Days prior to the EAR visit, the QM team's Medical HR Adviser will hold one or more HR & Education 'clinics' at each Service Provider Organisation (depending on number of sites).

2.2.5.2 The clinics will be open to all trainees within the Service Provider Organisation to raise and discuss queries and / or concerns they may have around HR issues as well as any other issues about their education and training. Some issues raised at the clinic(s) will be quickly resolved by the Medical HR Adviser, while others will be passed on to the EAR visiting team to raise with the Service Provider Organisation prior to the visit, and if appropriate, to explore during the visit itself.

2.2.6 The Education Accreditation Review (EAR) visit

2.2.6.1 The EAR visit will be the culmination of in-depth review using data from several sources. The visit will usually last for One (1) to Two (2) Business Days (depending on Service Provider Organisation size and number of sites). During this visit, a team from the East Midlands Healthcare Workforce Deanery will meet with trainers, trainees and other relevant Service Provider Organisation staff across a range of departments to discuss the delivery and quality of PGME.

2.2.6.2 The visit will take the form of a focused review of education and training provision based on previous visit outcomes and analyses of data from elsewhere, including intelligence from local and national surveys, Service Provider Organisation self-assessment reports and previous visit outcomes (see below). Conclusions drawn from this analysis will set the context for the EAR visit. Therefore, where the East Midlands Healthcare Workforce Deanery is aware of notable practice, this will be explored further during the visit in order to disseminate good practice across the patch, and where there are deficiencies or areas of concern, these will similarly be explored further during the EAR visit. As a result, particular departments and / or training grades and / or educational facilities and resources may receive greater attention during the EAR visit than others.

2.2.6.3 Overall responsibility for organising and undertaking the visits lies with the East Midlands Healthcare Workforce Deanery's QM team. The Service Provider Organisation should provide a single point of contact only for co-ordination of all visits. Members of the QM team will have allocated responsibility for specific Service Provider Organisations. The team member with responsibility for a Service Provider Organisation will be the point of contact for that Service Provider Organisation.

2.2.6.4 The Service Provider Organisation will be responsible for providing appropriate premises for the review visit to be undertaken.

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2.2.6.5 Dates for each EAR visit will be agreed with the Service Provider Organisation as far in advance as possible, with a minimum of 3 months notice.

2.2.6.6 The EAR visit team from the East Midlands Healthcare Workforce Deanery will comprise a minimum of two individuals, although in most cases the team will be larger (see 2.2.6.7):

- Lead visitor : Medically qualified (e.g. Postgraduate Dean, Deputy Postgraduate Dean, Director of Medical Specialties, Associate Postgraduate Dean (APD);
- Quality Management Team member (e.g Quality Management Adviser)

2.2.6.7 Depending on the focus of the visit, issues identified prior to the visit, and availability of East Midlands Healthcare Workforce Deanery staff, the team may also include other representatives, including the QM team Programme Manager, additional APDs, the East Midlands Healthcare Workforce Deanery's Medical HR Adviser, Lay Adviser(s), local Foundation School Representative(s), and Primary Care Directorate representative(s).

2.2.6.8 Since EAR visits are focussed in nature, each will differ in focus, scope and duration. However, the ***structure*** of each EAR visit will be broadly similar, typically comprising :

- A Service Provider Organisation presentation session attended by senior management (e.g. Chief Executive, Director of Medical Education, Director of Medical Staffing) to highlight notable Service Provider Organisation achievements, new developments and exceptions / issues the Service Provider Organisation is aware of, and any changes to the information outlined in the Service Provider Organisation self-assessment report.
- Interview sessions with trainers and, as far as practicable, a representative sample of trainees from departments within the Service Provider Organisation. Service Provider Organisations should confirm which trainees will attend the sessions in advance of the visit so that the QM team can ensure adequate and appropriate trainee representation;
- Meetings with other individuals or groups within the Service Provider Organisation to explore any specific issues identified in advance of the visit (for example, with the Foundation Training Programme Director, Director of Medical Education, Medical HR Manager, GP Specialty Training Programme Director);
- A feedback session to the Service Provider Organisation on the key issues identified during the visit.

2.2.6.9 The visiting team will not require the Service Provider Organisation to provide documentary evidence in advance of or during the EAR visit

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(such as induction packs, teaching timetables, appraisal forms, policy documents and so on) as a matter of course. However, the Service Provider Organisation must be able to provide evidence of this kind on request either before, during or after the visit.

2.2.7 The EAR visit report

2.2.7.1 Within 20 Business Days following the EAR visit (depending on the size of the Service Provider Organisation), the QM team will produce a visit report, accompanied by a letter indicating the level of approval granted from the Postgraduate Dean (i.e. the extent to which the standards set-out in Schedule 4B of the LDA have been met).

2.2.7.2 Overall, there are three levels of approval :

- ***'Standards met'*** means that, generally, the East Midlands Healthcare Workforce Deanery visiting team is satisfied that the standards outlined in Schedule 4B of the LDA are met. Unconditional approval for training posts will be granted by the East Midlands Healthcare Workforce Deanery for a period of up to 2 years. However, this does not preclude the East Midlands Healthcare Workforce Deanery having issues, concerns or problems that impact on PGME within the Service Provider Organisation – all providers of PGME will have challenges and difficulties to overcome when delivering PGME. Rather, the 'met' judgement means that the standards are still being achieved notwithstanding that actions may be in hand to address such concerns through an agreed action plan.
- ***'Standards met with conditions'*** means that standards have mostly, but not completely, been achieved. It recognises that most standards have been met in most areas, but that one or more standards in a small number of areas may not have been met. Conditional approval for training posts will be granted for between 6 and 24 months subject to satisfactory progress in implementing a Service Provider Organisation action plan.
- ***'Standards not met'*** means that several standards are not being demonstrated and fully reflected in delivery of PGME across a number of areas within the Service Provider Organisation. The Service Provider Organisation will need to work closely with the East Midlands Healthcare Workforce Deanery to address all areas of concern. It is incumbent on both the East Midlands Healthcare Workforce Deanery and Service Provider that immediate remedial action is taken as part of their respective QM and QC responsibilities required by the PMETB. Conditional East Midlands Healthcare Workforce Deanery approval for training posts may be granted for a period of 6 months until the East Midlands Healthcare Workforce Deanery is satisfied that all urgent issues are being effectively addressed.

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2.2.7.3 The EAR report will be assumed to be accurate unless the Service Provider Organisation registers any objections within 28 Business Days of receipt. However, this does not preclude the Service Provider Organisation or the Deanery commencing action during this period to address issues identified at the EAR visit (especially areas of urgent concern).

2.2.7.4 A summary of visit outcomes will be made publicly available (i.e. via the East Midlands Healthcare Workforce Deanery website).

2.2.7.5 The report is divided into directorates / specialties (including a general, Service Provider Organisation overview section), with identified areas of good practice as well as areas for action. The areas for action are assigned a rating of urgency based on a 'traffic light' system :

- 'Green' – indicates that action is required but that the issue is not urgent, with progress not reviewed until the next EAR visit (often these actions will relate to standards which have been achieved but where there is room for quality improvement);
- 'Amber' – denotes that the issue is of some concern and that the East Midlands Healthcare Workforce Deanery expects the Service Provider Organisation to take action and be able to demonstrate satisfactory progress at the next interim visit;
- 'Red' – indicates an issue of serious concern, which requires urgent action (for example, where training is so poor as to raise concerns that doctors will not acquire the competencies required to progress their careers).

2.2.7.6 A section of the report is for the Service Provider Organisation to complete to outline the measures it proposes to take to address the areas for action. This will constitute the ongoing action plan with which the Service Provider Organisation will work to improve quality standards during the course of an education review cycle.

2.2.7.7 The Service Provider Organisation action plan should be returned to the QM team at the East Midlands Healthcare Workforce Deanery within an agreed timescale (usually 10-15 Business Days). Any alterations to the action plan required by the QM team must be made within 7 Business Days. Once agreed, the action plan will be implemented by the Service Provider Organisation and reviewed by the East Midlands Healthcare Workforce Deanery within the timeframe set out in the plan and in line with the review cycle.

2.2.8 Interim visits

2.2.8.1 During the accreditation cycle of visits, two interim visits will take place. A first interim visit will take place approximately 12 weeks following the EAR visit. A second interim visit will take place approximately 12 weeks prior to the next EAR visit.

2.2.8.2 As a minimum, each visit will be attended by the QM team member with responsibility for that Service Provider Organisation. The

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Service Provider Organisation must provide a representative familiar with the previous EAR visit report and having a detailed understanding of the Service Provider Organisation action plan and progress made in implementing that plan (e.g. Director of Medical Education). In some circumstances, the QM team may also request that other Service Provider Organisation staff are present to address specific issues.

2.2.8.3 The purpose of the interim visit is the ongoing review of Service Provider Organisation progress against its agreed action plan resulting from the EAR visit report. The outcomes of this review will be :

- Changing the traffic light rating of some actions (e.g. from amber to green);
- Removing some actions which have successfully been addressed;
- Adding any new actions, which may have been identified since the EAR visit from evidence obtained from other sources (e.g. local and national surveys; correspondence from trainees);
- At the second interim visit, proposals for the focus of the next EAR visit will also be finalised.

2.2.9 Responding to urgent concerns.

2.2.9.1 There are two levels of East Midlands Healthcare Workforce Deanery response to areas of serious concern. The first is to follow a rapid planning and reporting process for tackling urgent issues. The second is to initiate a more substantial Exceptional Assessment meeting (the latter will only occur when the concerns are particularly serious and / or numerous within a Service Provider Organisation).

2.2.9.2 There are three scenarios which will necessitate a rapid Service Provider Organisation response :

- Following an EAR visit, conditional approval has been granted but the visiting team has identified one or more areas for action flagged as ‘red’;
- Following an interim visit, one or more issues previously rated ‘green’ or ‘amber’ are escalated to ‘red’;
- At any time during the course of the accreditation cycle, issues of concern are brought to the attention of the East Midlands Healthcare Workforce Deanery (e.g. via a complaint made directly to the East Midlands Healthcare Workforce Deanery from one or more trainees or trainers), which are of sufficient concern to be highlighted as ‘red’ issues.

2.2.9.3 Once identified, the QM team will notify the Service Provider Organisation of the issue(s) as soon as possible. A meeting will be

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arranged between one or more QM team representatives and an appropriate Service Provider Organisation representative (e.g. Director of Medical Education) to develop a plan of action to address the concern(s). Regular updates on progress against the plan will be expected.

2.2.9.4 There are three scenarios which will trigger an Exceptional Assessment meeting :

- An EAR visit results in an outcome of 'standards not met', with a series of urgent concerns identified;
- The rapid planning and reporting mechanism outlined in 2.2.9.2 – 2.2.9.3 fails to provide a satisfactory outcome (i.e. serious concerns persist through a failure to act or through actions being ineffective and it is the East Midlands Healthcare Workforce Deanery's view that the issues cannot be satisfactorily resolved in another way);
- At any point in the accreditation cycle, one or more serious concerns are identified and are deemed by the QM team to require a more comprehensive response than the mechanism outlined in 2.2.9.2 – 2.2.9.3.

2.2.9.5 Exceptional Assessment meetings will focus on specific concerns.

2.2.9.6 The attendees at an exceptional assessment meeting and the agenda for the meeting will be determined by the nature of the concern(s). However, typically the focus will be on one or more departments and require a meeting involving representatives from those departments, the lead QM team member responsible for that Service Provider Organisation, the QM team Programme Manager and one or more APDs (where appropriate, other East Midlands Healthcare Workforce Deanery staff will take part, including, for example, Foundation Programme Director / Manager, LDA team representative, Primary Care representative, Head of School).

2.2.9.7 Discussions about the concerns will be held and evidence of improvements and/or plans for improvement examined. If necessary, the team will visit clinical settings and speak to trainees and other clinical staff.

2.2.9.8 The Service Provider Organisation will produce an action plan following the meeting. The plan will be monitored closely, with the QM team in regular contact with the Service Provider Organisation for updates on progress. If necessary, one or more further Exceptional Assessment meetings will be arranged.

2.2.9.9 If areas of concern are not addressed satisfactorily through the processes outlined within this schedule then the contractual responsibilities set out in the LDA with the Service Provider Organisation will need to be considered and also issues may need to be flagged to the PMETB.

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3. DEFINITIONS

3.1 *Quality Assurance* shall mean 'the setting and establishment of quality standards.

3.2 *Quality Management* shall mean 'overview of compliance within those standards'.

3.3 *Quality Control* shall mean 'the application of policy and process to achieve required QA standards'.

3.4 *Action Plan* shall mean 'an East Midlands Healthcare Workforce Deanery / Service Provider Organisation agreed document developed following the accreditation review to detail required work / development / action'.

3.5 *Medical Education Review* shall mean 'a programme of accreditation reviews addressing medical (PMETB) standards in detail across secondary care, primary care, mental health and undergraduate providers'.

3.6 Weeks referred to in timescales are working weeks.

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