

Visit report on HEE North East and North Cumbria

This visit is part of our regional review of undergraduate and postgraduate medical education and training in the North East.

Our visits check that organisations are complying with the standards and requirements as set out in [Promoting Excellence: Standards for medical education and training](#). This visit is part of a regional review and uses a risk-based approach. For more information on this approach, please see <http://www.gmc-uk.org/education/13707.asp>.

Education provider	Health Education England North East and North Cumbria
Sites visited	Health Education England North East and North Cumbria Head Office
Date of visit	6 December 2018
Were any serious concerns identified?	No serious concerns were found on this visit.
Summary	<p>We visited Health Education England working across The North East and North Cumbria (HEE NE&NC) as part of our regional review of medical education and training in the North east of England. The Dean and her team are responsible for coordinating postgraduate medical education within the region to standards that are set by the General Medical Council.</p> <p>Throughout this report we refer to HEE NE&NC with the express understanding that this umbrella term is inclusive of the Dean and her team.</p> <p>During the review we visited six local education providers (LEPs), one of these being psychiatry focused, and Newcastle University Medical School. During our visit, we</p>

met with HEE NE&NC senior management and quality teams, key regional stakeholders, Training Programme Directors (TPDs), Foundation Programme Directors, Heads of School (HoS), lay and patient representatives, programme management and the Professional Support Unit team.

Despite a few restructures over the past five years the GMC visit team found effective training management processes and strong links between HEE NE&NC and its stakeholders, and heard compelling examples of collaborative working from both sides.

During the visit, we identified several areas that are working well, predominantly in the areas of educational governance and opportunities available to learners that drive improvement in education and training. The HEE office has introduced two notable educational initiatives: The Faculty of Patient Safety and The Faculty of Clinical Informatics, both of which provide learners with the benefits of cross-organisational working and diverse learning opportunities.

Overall, we found that HEE NE&NC had good educational governance systems in place supported by the stakeholders with which they are linked. We met with enthusiastic staff committed to further increasing initiatives and driving improvement within the region.

Areas that are working well

We note areas that are working well where we have found that not only our standards are met, but they are well embedded in the organisation.

Number	Theme and Requirements	Areas that are working well
1	Theme 1 (R1.20, R1.22)	The Faculty of Patient Safety effectively supports the delivery of safe patient care in training environments.
2	Theme 1 (R1.22)	Although in its infancy, the commitment to developing the Faculty of Clinical Informatics is excellent.
3	Theme 2 (R2.1)	Despite multiple restructuring, HEE NE&NC

		work effectively with Newcastle University Medical School and the trusts within the region to support postgraduate and undergraduate medical education and training.
4	Theme 2 (R2.1)	The governance structure allows for effective communication and engagement between the leadership of the Schools and the senior management within HEE NE&NC.
5	Theme 2 (R2.5)	The enhanced Equality and Diversity training delivered by HEE NE&NC was highly valued by patient and lay representatives.

Recommendations

We set recommendations where we have found areas for improvement related to our standards. Our recommendations highlight areas an organisation should address to improve in these areas, in line with best practice.

Number	Theme and requirements	Recommendations
1	N/A	HEE NE&NC* should work with Local Education Providers (LEPs) to address the recommendations identified at the LEP visits.
2	2 (R2.1)	HEE NE&NC should continue to review their quality management processes in order that they identify areas of concern consistently and efficiently.

Requirements

We set requirements where we have found that our standards are not being met. Each requirement is:

targeted

outlines which part of the standard is not being met

mapped to evidence gathered during the visit.

* This should be led by the postgraduate dean of HEE NE&NC.

We will monitor each organisation's response and will expect evidence that progress is being made.

Number	Theme and requirements	Requirements
1	N/A	HEE NE&NC* must work with Local Education Providers (LEPs) to address the requirements identified at the LEP visits.

Findings

The findings below reflect evidence gathered in advance of and during our visit, mapped to our standards. Please note that not every requirement within *Promoting Excellence* is addressed; we report on 'exceptions' eg where things are working particularly well or where there is a risk that standards may not be met.

Theme 1: Learning environment and culture

Standards
<p>S1.1 <i>The learning environment is safe for patients and supportive for learners and educators. The culture is caring, compassionate and provides a good standard of care and experience for patients, carers and families.</i></p> <p>S1.2 <i>The learning environment and organisational culture value and support education and training so that learners are able to demonstrate what is expected in Good medical practice and to achieve the learning outcomes required by their curriculum.</i></p>

Raising concerns (R1.1), Dealing with concerns (R1.2), Educational and clinical governance (R1.6),

- 1 The local office management team have a proactive approach to managing concerns. Every trust within the region is visited every year (Annual Dean's Quality Meetings (ADQMs) as part of the local office's routine quality process which encourages dialogue between the two organisations and identifies both areas of concern as well as areas of good practice for sharing.
- 2 The Medical and Dental sub-group is part of the governance structure within Health Education England North East and North Cumbria (HEE NE&NC) and is chaired by a Trust Chief Executive and comprises of Directors of Medical Education of healthcare providers where specialty trainees are placed and HEE NE&NC directors and senior

* This should be led by the postgraduate dean of HEE NE&NC.

staff as appropriate. The meeting is used to facilitate discussion and sharing of information e.g. patient safety concerns, quality of educational etc.

- 3 Throughout each year, the quality team at the local office performs a cycle of quality monitoring, visits and reporting that they use to triangulate with external sources of data such as the Nation Training Survey (NTS).
- 4 If training concerns identified either at a departmental or at an organisational level within an LEP reach an escalation level requiring wider system monitoring, the HEE NE&NC quality team works with the wider NHS via Quality Surveillance Groups, Improvement Boards and Risk Summits where they create joint plans for improvement with the LEP and agree actions to be carried out within a realistic timeframe.
- 5 In addition to triggering visits based on reviews of data such as trainee surveys, visits can also be triggered by other sources of intelligence such as the press or from other professional bodies. The quality team told us that the reporting of concerns by trainees was sometimes inconsistent but that they communicate the reporting process to all doctors in training at their induction at beginning of the programme.
- 6 The local office has a policy for managing trainer concerns, to provide a route to raise a concern if a trainer is not meeting the sufficient standards. This information is confidential and could result in the Postgraduate Dean as the Responsible Officer (RO) for trainees contacting the RO at the trust to speak about it.
- 7 A Trainee Executive Forum (TEF) was created in 2012 to enable doctors in specialty and foundation training, and dentists in training, to raise concerns and offer any feedback on behalf of their fellow colleagues in training. The forum meets on a quarterly basis to share and discuss issues related to education and training. Any issues are then fed back to senior management who discuss them at their quality meetings.

Seeking and responding to feedback (R1.5)

- 8 We met with key stakeholders of the local office, such as the Chief Executives of some of the trusts in the region and the Head of School from Newcastle University Medical School and, although not formally part of this review, Sunderland University School of Medicine.*
- 9 Newcastle University Medical School work closely with HEE NE&NC and let them know where they intend to place students. They monitor the quality of these placements

* Sunderland University approached us in early 2017 to begin the GMC's New Schools procedure to become a recognised medical school. The school is currently undergoing the process to gain full GMC accreditation and the first cohort of students will begin their MBBS degree in 2019.

and also checks that the trusts have sufficient SIFT (Service Increment for Teaching) funds that they need to support the quality of education. To monitor potential variation in quality of placements across the region, when HEE NE&NC undertakes local Foundation School quality assurance activity, Newcastle University Medical School meets with the students to get feedback.

- 10 We spoke to the Heads of School (HoS) and Training Programme Directors (TPD) at the local office, whose role it is to have an overall view of all the programmes under their remit. The HoS consider it their responsibility to ensure they are delivering the relevant curriculum effectively and getting feedback and supporting TPDs in their development.

Appropriate capacity for clinical supervision (R1.7), Appropriate level of clinical supervision (R1.8)

- 11 Postgraduate Heads of School (HoS) and Training Programme Directors (TPDs) told us that they made sure the level of supervision for different levels of doctor in training was appropriate by asking for feedback from them. The feedback was collected by the TPDs and fed up to the HoS which acts as a filtering system for issues worth escalation.
- 12 The standard of supervision is evaluated at the ARCPs on a feedback form that doctors in training complete. 85% of doctors in training scored their supervisors eight out of ten in their feedback last year. The feedback is sent back to college tutors if there are any issues, and the directors try to resolve the issue locally. The panel at the ARCP also gives feedback to the supervisors and that goes back to the trust.

Accessible technology enhanced and simulation-based learning (R1.20), Access to educational supervision (R1.21)

Area working well 1: The Faculty of Patient Safety effectively supports the delivery of safe patient care in training environments.

- 13 The Faculty of Patient Safety (FPS) was set up in 2014 to contribute to the delivery of high quality and safe care, encouraging cross-organisational working to share resources to maximise their benefit.
- 14 We heard from the management team that there are various areas covered by the work of the FPS; simulation, human factors and technology enhanced learning. The faculty reflects on what could be improved within the health service and how to support curricular delivery around patient safety and human factors. They consider what is required regionally but also consider specific topics such as the top ten reasons for death in the region, delirium and sepsis training.
- 15 The faculty shares best practice and resources regionally using a cross-organisational, multi-professional approach. As such, the FPS comprises staff members from each

trust in different professions; e.g. doctors, nurses, dentists, the ambulance service. as well as representatives from the university.

- 16 Two sub faculties sit below the FPS; a simulation group that looks at how to share resources and collaborate across the region, and a human factors group that looks at how it is being taught, how human factors are investigated and how to make people more open when something has gone wrong.
- 17 An example of where the work of the FPS has been concentrated in the past is the implementation of a delirium work-stream. The work-stream addresses the requirement to educate staff and raise awareness of delirium and has been shared via several conferences.
- 18 A regional sepsis group has also been a successful project intending to standardise the treatment of sepsis across the region. The group worked on the development of a standard sepsis learning package that doctors in training can take with them from trust to trust.
- 19 Overall we heard that the region's organisations are not in competition with each other, they are working collaboratively and the faculty has won various awards from bodies such as The British Medical Journal (BMJ).

Supporting improvement (R1.22)

Area working well 2: Although in its infancy, the commitment to developing the Faculty of Clinical Informatics is excellent.

- 20 HEE North East and North Cumbria launched the Faculty of Clinical Informatics in 2018 to enable the multi-professional health workforce to deliver high quality digital health provision for patients in the region. This initiative in its early stages brings together the expertise of healthcare professionals within the region and consolidates their knowledge rather than developing informatics in several different ways and as separate professions.
- 21 As the future of healthcare will increasingly use digital health technologies, the faculty has been looking at five different work-streams;
 - The future digital health workforce
 - Development of the clinical informatics workforce with links into digital healthcare projects in healthcare providers
 - The development of a nationally recognised Credential in Clinical Informatics in collaboration with national bodies such as the NHS Digital Academy, national Faculty of Clinical Informatics (FCI) and Federation of Informatics Professionals (Fed IP)

- Influencing the national digital healthcare agenda
- Supporting research projects using digital health technologies in association with the National Institute of Healthcare Research (NIHR) and influencing the national digital healthcare agenda.

22 In addition to the liaison with national bodies to develop a Clinical Informatics Credential, the faculty is developing links with national health organisations and initiatives to assist the work-streams. The intention of the FCI is to promote opportunities for training in the form of Clinical Informatics Fellows in HEE NE&NC. The fellows will develop their digital health skills whilst being supervised in a supportive environment.

23 HEE NE&NC has already recruited a Leadership Fellow who has been undertaking Clinical Informatics projects in a partner secondary care provider throughout 2018. In 2019 HEE NE&NC plans to pilot a Flexible Portfolio Training programme (FPT), a joint initiative between HEE and the Royal College of Physicians. Doctors in training will pursue medical specialty training, following existing specialty curriculum with a protected day per week to develop clinical informatics skills and to work with partner trusts in the region on digital health project work.

Theme 2: Education governance and leadership

Standards
S2.1 <i>The educational governance system continuously improves the quality and outcomes of education and training by measuring performance against the standards, demonstrating accountability, and responding when standards are not being met.</i>
S2.2 <i>The educational and clinical governance systems are integrated, allowing organisations to address concerns about patient safety, the standard of care, and the standard of education and training.</i>
S2.3 <i>The educational governance system makes sure that education and training is fair and is based on principles of equality and diversity.</i>

Quality manage/control systems and processes (R2.1), *Accountability for quality (R2.2)*

Area working well 3: Despite multiple restructuring in HEE NE&NC, along with Newcastle University Medical School and the trusts within the region they work effectively together to support postgraduate and undergraduate medical education and training.

Area working well 4: The governance structure allows for effective communication and engagement between the leadership of the Schools and the senior management within HEE NE&NC.

Recommendation 2: HEE NE&NC should continue to review their quality management processes in order that they identify areas of concern consistently and efficiently.

- 24** It is clear that HEE NE&NC have cohesive, mutually supportive relationships with their stakeholders such as Newcastle University Medical School and the trusts within the region. The relationship between the local office and the school has resulted in collaboration on projects such as the implementation of the NUMed programme in Malaysia and the office has contributed to Newcastle University Medical Schools' new curriculum.
- 25** A key role of HEE NE&NC is to provide assurance to HEE at a national level and also to external bodies such as regulators including the GMC that the quality of medical education is being met and upheld. The office has a strong governance system that works to meet the standards set out by the HEE Quality Framework and those set by the GMC in *Promoting Excellence*.
- 26** Routine annual meetings are held between Newcastle University Medical School, the Foundation School and the trusts to discuss quality.
- 27** All English deans meet once a month to discuss all professions under their remit and their discussion feeds into the national DEQ group, headed by Wendy Reid, Director of Education and Quality then that feeds into Health Education England.
- 28** Whilst the Quality Framework is national as it is implemented by HEE, there is some lee-way to take regional differences into account. Despite this, the local office and those around the country work on the premise that they are 'one HEE'.
- 29** HEE NE&NC has strong relationships with the Local Education Providers (LEP) within the region and they talk regularly in an informal capacity. The Medical and Dental Sub Group meets quarterly and the Postgraduate Dean visits every trust every year in a formal ADQM process. In addition to formal meetings, issues are managed on an individual basis by discussions and open dialogue which both sides find effective. Education management meetings are held throughout the year involving all trusts in the region, allowing them to discuss issues with each other.
- 30** An annual conference for programme directors allows all Directors of Medical Education to meet with the Training Programme Directors. They said they find it useful to put a face to a name and to meet with each other for the networking opportunities it provided.
- 31** Both the TPDs and HoS told us that they acted as a conduit between the director of specialty training and the relevant postgraduate school. They meet regularly to share and resolve problems and have a strong relationship with them and with the local office who they feel very supported by.
- 32** When visiting Northumbria Specialist Emergency Care Hospital, Northumbria Healthcare NHS Foundation Trust, we discovered a serious concern. We heard from all groups of trainees and supervisors that foundation year one and two doctors in training at Hexham General Hospital, North Tyneside General Hospital and Wansbeck

General Hospital (all within Northumbria Healthcare NHS Foundation Trust) did not have the required supervision on site between the hours of 17:00 and 21:00. In addition, on some occasions a foundation year two doctor is the most senior medical person onsite at Hexham General Hospital overnight.

- 33** There are no consultants working at the base units during the weekend; however a doctor in specialty training does visit the sites during the afternoon to review patients who have been selected by foundation doctors in training. Doctors in specialty training confirmed these arrangements, however admitted that when they visit the sites they sometimes find patients who are sicker than expected and the system is heavily dependent on foundation doctors in training identifying the patients who ought to be reviewed by them.
- 34** In both scenarios we noted there is an Advanced Nurse Practitioner (ANP) on site and access to the '7777' on call service that connects, as appropriate, directly to either a specialty consultant or ICU consultant during this period. Overall we found there is evidence of the absence of senior clinical supervision for foundation doctors in training in the three base units during the evenings as well as overnight at Hexham General Hospital. The concerns relate to the awareness of both foundation doctors in training and the ANPs of the supervisory arrangements the ANPs provide and potentially to the level of training and competence of all ANPs to supervise foundation trainees to the required level.
- 35** When we raised this with the HEE NE&NC quality management team, they were unaware of the issue, as it had never been raised previously by doctors in training at their quality management visits. They reviewed the issue within 24-48 hours of the identification of this concern and are putting the necessary steps in place to prevent this reoccurring by raising the awareness of the supervisory role of ANPs and revising the supervisory arrangements, particularly out of hours and on weekends. We therefore recommend HEE NE&NC continue to review their processes, to better identify areas of concern such as this, in future.

Considering impact on learners of policies, systems, processes (R2.3)

- 36** The local office created the North East and North Cumbria Trainee Executive Forum (TEF) to encourage the involvement of doctors and dentists in training in the development of their policies, strategies and processes.
- 37** The TEF is run and chaired by both doctors and dentists in specialty training and provides them with the opportunity to feed back any training issues and ideas they may have. It gives them the facility to input into strategic and management issues around educational governance and quality assurance.
- 38** The TEF group feeds back directly to the Postgraduate Dean (or the deputy) and the management team via quarterly executive committee meetings. The doctors and dentists in training that attend the forum meetings represent the whole of the North

East and North Cumbria region so have the chance to discuss ideas with each other and bring the views of their colleagues.

Evaluating and reviewing curricula and assessment (R2.4)

- 39 We met with Training Programme Directors whose role is to manage the training on a local level, ranging from placement of doctors in a post, ensuring coverage of the curriculum, quality of training in the post and supporting the learner and educators.
- 40 The Heads of Postgraduate Schools we spoke to have an overall view of all the programmes under their remit. They ensure the requirements of the curriculum are met by gathering feedback from the TPDs and support the TPDs in their development.
- 41 TPDs and the Heads of PG Schools told us that they ensured the curriculum will be covered via a Specialty Training Committee (STC) for each training programme that has oversight of the training. The STC ensures adequate coverage of the curriculum and adjusts the programme accordingly. Each committee is made up of representatives from all of the trusts.
- 42 The ARCP process is consistent across the region as the local office has a regional ARCP policy that must be followed by all schools. The ARCP process is linked to the Gold Guide; all new panel chairs are invited to an ARCP training day to ensure they assess fairly and consistently.

*Collecting, analysing and using data on quality, and equality and diversity (R2.5),
Managing concerns about a learner (R2.16), Sharing information of learners between
organisations (R2.17)*

Area working well 5: The enhanced Equality and Diversity training delivered by Health Education North East and North Cumbria was highly valued by patient and lay representatives.

- 43 HEE North East and North Cumbria recruits lay and patient Representatives for varied roles such as recruitment, appeals, ARCPs, quality interventions and school boards. As a result, it is critical these representatives act with complete integrity and that they have a good understanding of the place of equality and diversity (E&D) within medical education.
- 44 The lay and patient representatives we met with told us they had all received excellent training, which they valued hugely. The advanced E&D training uses actors to perform scenarios and enable more realistic learning conditions. They said the training was far better than the previous online e-learning platform.
- 45 HEE NE&NC decide what information is shared about doctors with differing needs based on which organisations are involved. Depending on what the issue is, if it is a

training issue, then support and guidance would be sought from the Director of Specialty Training and from the Training Programme Director on a need to know basis.

- 46** The TPD is responsible for transferring the information to the Educational Supervisor and the Medical Director at the trust may need to know as well, where needed. Any information sharing must be considered on a case by case basis, and with the involvement of the doctor in training.

Concerns about quality of education and training (R2.7), Sharing and reporting information about quality of education and training (R2.8), Collecting, managing and sharing data with the GMC (R2.9)

- 47** The quality management team at the local office told us they identify region wide issues by analysing data such as the National Training Survey (NTS) and school data. Each PG School owns an area of the overall quality dashboard which details issues and the TPDs review their content.
- 48** Each specialty has issues specific to their programme as well as good practice. If good practice is found, they discuss at this at the Dean's Executive Meeting for Quality (DEMQ) and decide if it should be on the GMC Online Dean's Report (ODR).
- 49** A quality event is run by the local office where good practice is shared across professions and across sites. The Heads of PG Schools also have the opportunity to do that at the Training Programme Director events.
- 50** HEE NE&NC has an issues log which records issues and feeds into the DEMO monitoring and escalation processes that escalate to the Health Education England executive team and to the wider local NHS and regulators where necessary.
- 51** The quality team look at the findings from their previous annual visit and the NTS before conducting the next visit. They will then visit each trust, taking a lay representative, doctor in training representative and senior representation. Feedback is given to the trust as well as subsequent detailed summary report on what was found. The trust has the opportunity to correct any factual inaccuracies then take the report to their board.

Monitoring resources including teaching time in job plans (R2.10)

- 52** The management team at HEE NE&NC ensures there is sufficient time in job plans for educators to fulfil their duties. By analysing the GMC's National Trainer Survey (NTS) data at the Annual Dean's Quality Meetings (ADQM) they can confirm that the provision is sufficient.

Managing progression with external input (R2.12)

- 53** The use of both lay and patient representation within a variety of the local office's procedures provides external input within these areas. Representatives express the needs of service users and provide valuable insight.
- 54** The representatives are recruited via formal appointment processes and hold rolling three yearly contracts, which are renewable.
- 55** Once a year HEE NE&NC runs a development day for the lay and patient representatives. They discuss national issues within medical education, are provided with an update on Annual Review of Competence Progression (ARCPs) and enhanced E&D training. The representatives said they found this meeting helped to clarify the expectations of their role.
- 56** The lay and patient representatives attend board meetings, ARCPs, quality visits and have contact with local hospitals where they can triangulate what they have heard at meetings they have attended and seen at assessment centres.
- 57** All the representatives that we met said their roles were very broad and covered a wide range of duties, including some ad hoc responsibilities. They told us that they had been moved onto different duties in the past couple of years, and that it took a while to get used to working with a new specialty. HEE NE&NC's intention was that there would be a cycle, and the representatives would continue to rotate through the duties. This rotation is currently on hold while a further recruitment process is undertaken in early 2019 to replenish sufficient numbers of representatives.
- 58** Although the primary role of the representatives is to make sure the local office policies are being followed, their role includes a pastoral element in ensuring trainees are treated fairly and with respect as well as being patient advocates for the local population.
- 59** The appraisal process is a mutual evaluation. During the ARCP process, the representatives appraise the chair and the chair appraises them in return. Basic topics are covered such as how well prepared they were. They said there was currently no annual appraisal, but that they felt this would be helpful for them.

Recruitment, selection and appointment of learners and educators (R2.20)

- 60** Although HEE and the local offices do work as 'one HEE', there are variations among regions and inconsistencies in resources to support recruitment. The management team at HEE NE&NC told us they have to undertake recruitment in other regions as a result of this.
- 61** A policy decision has been made to develop two geographical hubs of recruitment to enable the region's standalone recruitment processes as there are local challenges for both. Recruitment has challenges for both the North East and North Cumbria. These

include basic operational issues or those around visas and sponsorship where international doctors are recruited outside the timelines that are set nationally. The HEE local office management team said they are aware that this can cause issues with out-of-sync inductions, but that they resolve this by discussions with the Local Education Providers (LEPs). The Medical and Dental sub group meet quarterly, to discuss this informally and the Postgraduate Dean visits every trust every year, to try and manage issues.

- 62** HEE NE&NC has created a strategy to tackle region-wide recruitment issues increasing the number of international places they can offer, along with 40 distance learning certificates and increased qualities of Clinical Teaching Fellows and Post-CCT Fellows, along with academic opportunities.
- 63** The HEE local office said the challenges are not simply about recruitment but also about retention. Funded and supported collectively by the LEPs an initiative called 'Find Your Place' aims to promote the success of training in the area. They promote this via British Medical Journal careers fair every year and have an active social media network.

Theme 3: Supporting learners

Standard

S3.1 *Learners receive educational and pastoral support to be able to demonstrate what is expected in Good medical practice and achieve the learning outcomes required by their curriculum.*

Learner's health and wellbeing; educational and pastoral support (R3.2), Undermining and bullying (R3.3) and Information on reasonable adjustments (R3.4),

- 64** The Professional Support Unit team we spoke to told us they had a doctor in training support service with two arms; a contracted occupational health service and the educational support service. The referral will come into the service from one of these forums then they will match the doctor in training to the right services.
- 65** Each year they meet with approximately 50-55 doctors in training and can direct them to various support services, such as a dyslexia coach that helps with repeat exam failure.
- 66** The Training Programme Directors (TPDs) and Heads of PG Schools (HoS) gave us a few examples of how they had dealt with 'Doctors with Differing Needs' (DWDNs) in the past. They described one individual who had occupational health requirements that dictated reasonable adjustments to the workplace itself. They arranged for the doctor to remain working there and for the adjustments to the workplace to be kept for the convenience of both parties.
- 67** A further example of considerations for DWDNs was of a doctor in training who was struggling on a busy rota. The TPDs identified the issue quickly and were able to organise a period of shadowing for them to gain skills and confidence in a different trust. The doctor then returned when their confidence had increased.
- 68** The TPDs also told us they had arranged for one of the doctors in training with caring responsibilities to have a six month transfer to a different placement, so they were able to work nearer the ill relative.
- 69** HEE NE&NC have a Bullying and Undermining policy which states that where a potential issue is identified, then they will investigate both at school and trust level. Issues are usually raised via an individual's supervisor then escalated to the TPD and onto the HoS if needed.
- 70** The trusts' medical education departments in the region strongly encourage doctors in training to report any concerns. As these departments are seen as separate to the school, this can help if the doctor in training does not want to come to the HEE local office and vice versa.

Information and support about academic opportunities (R3.8)

- 71** HEE NE&NC provide an out-of-programme experience called the Leadership and Management Fellowship available to any post-foundation doctor in training with an Outcome 1 at ARCP. Three fellows are appointed per year to spend 12 months developing their leadership and management skills whilst working in an apprenticeship role to the Postgraduate Dean.
- 72** Skills are developed within the workplace and through formal academic study. The fellows are encouraged to work on a variety of projects to gain an understanding of how an organisation works. They regularly attend monthly Dean's Management Team meetings along with trust-level meetings to gain insight and experience.
- 73** Each fellow is expected to design and lead their own project. Past projects have included developing and running a peer-paired leadership program for doctors in training and NHS managers, developing a regional workshop to help doctors develop resilience skills, and hosting a symposium on professionalism for doctors.
- 74** The intention is that each fellow will attain a Postgraduate Certificate (PGCert) that complements the learning objectives of the fellowship. The initiative has been highly successful in the past and some fellows have presented their projects at national conferences such as Leaders in Healthcare, Developing Excellence in Medical Education and the Association for the Study of Medical Education.

Supporting less than full-time training (R3.10), Support for learners in difficulties (R3.14)

- 75** The Lead for Equality and Diversity told us that it is a continual challenge to communicate to all Training Programme Directors and Supervisors that Doctors with Differing Needs does not only cover doctors in training who are failing exams, but includes those training Less Than Full Time (LTFT) and those who may require further support.
- 76** To manage doctors with differing needs, including LTFT doctors, there is local office guidance and the Lead of E&D holds workshops to coach educators on how to handle issues. A trainers development session called Train the Trainer helps the educators to identify early signs of doctors exhibiting difficulties leading to an increasing number of known 'doctors with differing needs'.

Career support and advice (R3.16)

- 77** The local office has various career guidance initiatives. A Career Management Programme is delivered to doctors in foundation training at the various base units around the region. Individual career guidance appointments are available to all doctors in training and are always offered to any individuals potentially facing an adverse ARCP outcome. Training is given to the supervisors of these learners on how to deliver the necessary careers advice.

- 78** Widening participation into medicine is led by the local office via community-based programmes that encourage applications from non-traditional applicants to the Newcastle medical undergraduate programmes. An 'Insight into Medicine' and 'Applying to Medicine' session was delivered with youth engagement programme, NE1CAN, who work with some of the most socio/economically challenged secondary schools.
- 79** HEE NE&NC are supporting the Doctors New to the UK Programme co-ordinated by the Learner Support and Faculty Development Team. They are also managing a programme of accelerated English tuition and clinical placements for refugee health professionals, in conjunction with North Tees and Hartlepool Trust and Investing in People and Culture (IPC).
- 80** The Careers Directorate at HEE NE&NC hosts the HEE Medical and Dental Recruitment Selection Careers Planning sub-group. This group involves members from all four nations and advises HEE and the Conference of Postgraduate Medical Deans (CoPMED) on careers support for doctors in training. CoPMED provides a forum for those to meet who are responsible for the strategic overview and operational delivery of postgraduate medical training in the UK.

Theme 4: Supporting Educators

Standards

S4.1 *Educators are selected, inducted, trained and appraised to reflect their education and training responsibilities.*

S4.2 *Educators receive the support, resources and time to meet their education and training responsibilities.*

Induction, training, appraisal for educators (R4.1), Time in job plans (R4.2)

- 81** HEE NE&NC do not directly employ any Educational or Clinical Supervisors but does provide sufficient funding for all trainee placements for LEPs to remunerate the recommended minimum 1 hour per week of job planned supervisor time. The responsibility for the direct provision and remuneration of sufficient supervisors lies with the trusts. The Directors of Medical Education and the Medical Directors have roles in relation to their recognition as trainers and for their appraisal as trainers. HEE NE&NC do however have a policy that illustrates the requirements they must meet.
- 82** The Training Programme Directors (TPD) and Head of PG Schools (HoS) hold an annual conference for the supervisors which allows the opportunity for discussions around educational governance and when to escalate. The HoS themselves have additional training that is run and managed by the Postgraduate Dean, which is based around examples of incidents and concerns that have happened in the past. This provides educators with a framework that describes where particular issues would lie and who is qualified to deal with.
- 83** The Directors of Medical Education within the trusts are responsible for ensuring all educational supervisors have appropriate training and recognition. They told us this relied on their service appraisal, which can be challenging as these sit with the Medical Director and there is no separate educational appraisal. It does however encourage a good working relationship with the Medical Director and the appraisal is tailored to ensure that each supervisor is meeting the requirements for accreditation.
- 84** The management team at HEE NE&NC cross checks GMC National Trainer Survey data to monitor educators reporting that they have sufficient time in their job plans to reflect the funding provided to LEPs by HEE. In addition, when HEE NE&NC visits a trust including at the ADQM meetings, they have a standard question that checks the local policies that ensure educators have enough planned time for supervision.

Working with other educators (R4.5)

- 85** HEE NE&NC were involved with the application processes for the expansion of medical student numbers across existing providers and also including the development of a new medical school at The University of Sunderland and have a good relationship with the new head of the medical school as a result. They were

clear that it was the right decision to support both increased student numbers and bringing another medical school to the region.

Recognition of approval of educators (R4.6)

- 86** HEE NE&NC ensure that their educators and assessors are competent and they monitor their competence by referring to the GMC standards within *Promoting Excellence*. Their requirements were aligned to the GMC Recognition of Trainers in 2012 and they discuss the requirement to become a supervisor with the trusts who work with them to refine the data.
- 87** There is a policy for managing trainer concerns, and a confidential database to provide a route to raise an issue if a trainer is not satisfactory. Depending on the concern, this may be communicated by the Postgraduate Dean to the Responsible Officer at the trust to discuss the issue.

Theme 5: Developing and implementing curricula and assessments

Standard

S5.1 *Medical school curricula and assessments are developed and implemented so that medical students are able to achieve the learning outcomes required by graduates.*

S5.2 *Postgraduate curricula and assessments are implemented so that doctors in training are able to demonstrate what is expected in Good medical practice and to achieve the learning outcomes required by their curriculum.*

GMC outcomes for graduates (R5.1), Informing curricular development (R5.2), Undergraduate curricular design (R5.3)

88 The relationship between HEE NE&NC and Newcastle University Medical School is excellent, having worked together on projects such as NUMed (the medical school's MBBS programme delivered at their campus in Malaysia) along with the development of Newcastle's new MBBS curriculum, which HEE NE&NC contributed to. The Head of the Medical School at Newcastle University attends both the monthly Dean's Management Team meetings and quarterly Medical and Dental Sub Group thereby promoting a mutually supportive relationship.

Undergraduate clinical placements (R5.4)

89 Undergraduate clinical placements in the region will be shared in the future between Newcastle University Medical School (NMS) and the new medical school at Sunderland University. The first cohort of students at Sunderland will start in 2019, so will be placed in trusts in their third year, in 2021.

90 We spoke to key stakeholders of HEE NE&NC that included the two medical schools who told us there is support from whole region regarding the implementation of the new school. They have been working together, along with HEE NE&NC to ensure the capacity is sufficient for the amount of students that will study and undertake placements in the region. There has been an acknowledgement that Sunderland is doing something different to Newcastle and that it will be beneficial for the region.

91 The stakeholders told us that education was embedded in all 11 of the region's trusts and review has concluded that there is capacity for the new Sunderland Medical School student intake.

92 Currently, clinical placements are only used for students on the Newcastle University Medical School MBBS programme. Newcastle University Medical School inform HEE NE&NC where students will be placed and quality assure these placements by carrying out regular visits. During the visits to the LEPs the medical school meet with students to get feedback and monitor the quality of education but also to meet with the management team and check they have sufficient funds to support education.

Fair, reliable and valid assessments (R5.6)

- 93** The use of lay and patient representatives by HEE NE&NC throughout assessment processes ensures consistency and fairness. The representatives we met with had all worked for the local office for several years and said they had been asked to do many tasks that gave them the experience and background knowledge needed for their roles.

Training programme delivery (R5.9)

- 94** The role of the TPD is to manage the training; ranging from placement of learners, coverage of the curriculum, training within the post, quality aspect of the training to supporting the trainers and the doctors in training. The Heads of PG Schools have an overall view of all the programmes under their remit and make sure the training delivery is correct in terms of the curriculum.
- 95** When we spoke with the TPDs and HOS they told us there was an effective relationship with HEE NE&NC and that they acted as a conduit between the Director of Specialty Training and the rest of the school. The TPDs and HoS share and resolve problems and communicate informally by telephone or email in addition to regular meetings. They were pleased with the support they receive from the HEE NE&NC to help them ensure the programme delivery is met as well as the cross working and support from other TPDs within the region.

Mapping assessments against curricula (R5.10)

- 96** The Programme Management team told us that for each specialty school, each Training Programme Director has a blueprint produced in 2014 for each of the sites which documents those aspects of the curriculum that can and cannot be delivered there. HEE NE&NC policy specifies that each aspect of the curriculum must be able to be delivered at a minimum of two sites within that programme.
- 97** The management team told us that some aspects of training have to be delivered outside of the region and they have made arrangements to place trainees in these roles to ensure the needs of the curriculum are met. If only one site offers the necessary placement and it is not suitable for a particular individual trainee, the team have previously funded and arranged for the trainee to be placed in a different geographical area. They also have some programmes that are split between regions, for example, paediatrics is split between HEE NE&NC and HEE Yorkshire and the Humber.
- 98** To ensure the curriculum will be covered, each post has to demonstrate how the curriculum requirements will be met. There are also Specialty Training Committees made up of representatives from each trust that have oversight of the training and can make adjustments to the programme accordingly. The management team uses

the ARCP outcomes each year to reflect on whether there are any gaps within training.

- 99** Every year the specialty training handbook given to doctors in specialty training is updated. It provides clear communication to doctors in specialty training of how their curriculum requirements will be met in a particular placement in an up-to-date format.

Team leader	Professor Alastair McLellan
Visitors	Professor Paul O'Neill Professor Gillian Doody Dr Cleave Gass Dr Matko Marlais Miss Philippa Russell Ms Beverley Miller
GMC staff	Chris Lawlor, Education QA Programme Manager Eleanor Ewing, Education Quality Analyst Sophie Whistance, Education Quality Analyst Gareth Lloyd, Education Quality Analyst
Evidence base	DOC 1: HEE Quality Framework DOC 2: Learning Development Agreement (LDA) DOC 3: Terms of Reference: QSC, DEMQ, MQM DOC 4: Terms of Reference: Trainee Executive Forum DOC 5: Patient and Lay Representatives in HEE NE DOC 6: HEE NE Faculty of Patient Safety (inc. Human Factors and Simulation) Terms of Reference DOC 7: Policy for the Escalation of Quality Concerns within HEE NE DOC 8: Visits policy and manual DOC 9: Trainer recognition policy DOC 10: Trainer recognition: managing concerns policy DOC 11: ADQM guidance DOC 12: GMC Survey SOP (standard operating procedures) NE DOC 13: GMC NTS comms and comments management plan 2018 DOC 14: Equality and Diversity Group Terms of Reference DOC 15A AND 15B: Equality Impact Assessment templates DOC 16: Example: data presentation E&D and ARCP outcomes DOC 17: EDG training faculty development: HEENE cases for enhanced training DOC 18: EDG training faculty development: HEENE enhanced training feedback summary DOC 19: Approvals pro- forma DOC 20: Dean's Management Team - Terms of Reference DOC 21: Medical Dental Sub Group - Terms of Reference

DOC 22: Lead Employer Trust - summary of activity and link with HEENE

DOC 23: Recruitment to HEE NE roles

DOC 24: NHS STPs (and other Service Reviews/Reconfigurations) Implications for Education and Training: Guidance on Regulatory & Contractual Requirements

DOC 25 - Guidance for STPs, ACOs and ICSs when considering Doctors in Training

DOC 26: Policy for distribution and amendment of training posts

DOC 27: Management of Postgraduate Medical Training Rotations

DOC 28: ARCP Policy (ST)

DOC 29: Doctors and Dentists (in training) in difficulty

DOC 30: LTFT (Less Than Full Time) Policy (specialty training)

DOC 31: Out of Programme Policy

DOC 32: School board and STC Policy (ST)

DOC 33: Specialty Training representatives in the schools structure (ST)

DOC 34: Risk Assessment for Trainees with Differing Needs (Foundation presentation)

DOC 35: Investigation of Concern

DOC 36: HEE NE Revalidation Policy for Doctors in Training

DOC 37: Return to Practice Guidance

DOC 38: Study Leave Policy

DOC 39: Academic (information and regional management) NIHR extract

DOC 40: Bespoke linguistic support

DOC 41: Differential Attainment poster (Primary Care)

DOC 42: HEE NE PGME- Guidance - addressing bullying and harassment in the workplace

DOC 43: CDDFT Visit Pack

DOC 44: NUTH Visit Pack

DOC 45: NHFT Visit Pack

DOC 46: South Tees Visit Pack

DOC 47: TEWV Visit Pack

DOC 48: Schools Visit Pack

DOC 49: NUMED

North East North Cumbria

Waterfront 4
Goldcrest Way
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Newcastle upon Tyne
NE15 8NY



4 April 2019

Sent by Email

Professor Alastair McLellan, Visit Team Leader
Lyndsey Dodd, Education QA Programme Manager (North Region)

Dear Alistair and Lyndsey

GMC Regional Review of Health Education England, North East and North Cumbria

Following the Regional Review of HEE North East and North Cumbria, we were pleased that the GMC findings reflect the high-quality medical education and training across the region.

The areas working well, along with good practice items identified reflect the region's ability to work together educationally and would not be possible to deliver results such as this without the collaboration we have in place. For this I must both thank and congratulate everyone involved in Postgraduate Medical training within the North East and North Cumbria, and we were pleased to see this acknowledged by the GMC.

The GMC's report is accurate in terms of content and is received with thanks. There is however a lack of clarity within provider reports regarding the process of monitoring all requirements and recommendations via the Postgraduate Dean. As agreed at the HEE NE / GMC wrap up meeting on 28th February 2019, explicit reference to the reporting route is important in clarifying next steps and expectations. This makes Quality Management difficult.

It would be helpful if the event on the 3rd May 2019 and subsequent briefings could highlight and clarify the levels of the Quality Framework, with specific reference to Quality Control, Management and Assurance. In addition, it is important to clarify that all requirements and recommendations are to be reported directly to the Postgraduate Dean for onward assurance and updates to the GMC.

Next steps

We will aim to provide an initial reply to all HEE NE requirements and recommendations by 19 April 2019, so that this preliminary update can be published alongside the regional review reports in May 2019.

Following the publication of all reports, HEE NE will continue to review and respond to the contents of the report via established quality processes and governance. This includes:

- Our Annual Dean's Quality Meetings which are occurring between March and May 2019 for all providers in the region
- The well-established and routine reporting processes based on the close working relationship with our partners in the providers, built up over many years
- Ongoing engagement using established governance with Newcastle University Medical School including the existing joint Annual Foundation School and Newcastle University Medical School visits to providers

As ever, if you have any queries, please do not hesitate to contact me or the team.

Yours sincerely



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2018 Regional Review of the North East

Action plan for Health Education England North East and North Cumbria

Please note: any actions that relate to both postgraduate and undergraduate education are also included on the Newcastle University Medical School action plan. Please work with the medical school to resolve these.

These actions will be shaded in purple to identify them as demonstrated below.



Report	QA Code	Type	Description	Due Date	Action taken by organisation since the visit (if applicable)	Further action planned by organisation	Led by	Health Education England North East and North Cumbria Comments
Health Education North East and North Cumbria	QA11161	Area Working Well 1	The Faculty of Patient Safety effectively supports the delivery of safe patient care in training environments.			Continuing strategies and initiatives from the Faculty of Patient Safety.	PGD and Faculty	HEE NE are pleased to see the inclusion of areas working well from the regional visit as part of the regional review. HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).
Health Education North East and North Cumbria	QA11162	Area Working Well 2	Although in its infancy, the commitment to developing the Faculty of Clinical Informatics is			Continued commitment to the development of the Faculty of Clinical Informatics	PGD and Faculty	HEE NE are pleased to see the inclusion of areas working well from the regional visit as part of the regional review.

Report	QA Code	Type	Description	Due Date	Action taken by organisation since the visit (if applicable)	Further action planned by organisation	Led by	Health Education England North East and North Cumbria Comments
			excellent.					HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).
Health Education North East and North Cumbria	QA11163	Area Working Well 3	Despite multiple restructuring, HEE NE&NC work effectively with Newcastle University Medical School and the trusts within the region to support postgraduate and undergraduate medical education and training.			Continued engagement and commitment to support postgraduate and undergraduate medical education and training.	PGD and Faculty + head of School of the Medical School and Faculty	HEE NE are pleased to see the inclusion of areas working well from the regional visit as part of the regional review. HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).
Health Education North East and North Cumbria	QA11164	Area Working Well 4	The governance structure allows for effective communication between the leadership of the Schools and the senior management within HEE NE&NC.			Continued use of current governance structures with regular review and work to maintain levels of engagement as well as ensuring clarity of structure and processes.	PGD and Faculty	HEE NE are pleased to see the inclusion of areas working well from the regional visit as part of the regional review. HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as

Report	QA Code	Type	Description	Due Date	Action taken by organisation since the visit (if applicable)	Further action planned by organisation	Led by	Health Education England North East and North Cumbria Comments
								<i>sharing practice</i> with the GMC).
Health Education North East and North Cumbria	QA11165	Area Working Well 5	The enhanced Equality and Diversity training delivered by HEE NE&NC was highly valued by patient and lay representatives.			Continued investment and roll out of The enhanced Equality and Diversity training across Faculty and lay and patient representatives.	PGD and Faculty	HEE NE are pleased to see the inclusion of areas working well from the regional visit as part of the regional review. HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).
Health Education North East and North Cumbria	QA11166	Requirement 1	HEE NE&NC ¹ must work with Local Education Providers (LEPs) to address the requirements identified at the LEP visits.	20/12/2019	HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review. All LEP actions and progress will be reported to Postgraduate Dean	This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment	PGD, Clinical Quality Director, Quality Team	

¹ This should be led by the postgraduate dean of HEE NE&NC.

Report	QA Code	Type	Description	Due Date	Action taken by organisation since the visit (if applicable)	Further action planned by organisation	Led by	Health Education England North East and North Cumbria Comments
					<p>using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p>	<p>documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.</p> <p>All items that impact or relate to both Undergraduate and Postgraduate will be considered in partnership with Newcastle University.</p>		
Health Education North East and North Cumbria	QA11167	Recommendation 1	HEE NE&NC ² should work with Local Education Providers (LEPs) to address the recommendations identified at the LEP visits.	20/12/2019	HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review.	This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality	PGD, Clinical Quality Director, Quality Team	

² This should be led by the postgraduate dean of HEE NE&NC.

Report	QA Code	Type	Description	Due Date	Action taken by organisation since the visit (if applicable)	Further action planned by organisation	Led by	Health Education England North East and North Cumbria Comments
					<p>All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p>	<p>Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.</p> <p>All items that impact or relate to both Undergraduate and Postgraduate will be considered in partnership with Newcastle University.</p>		
Health Education North East and North Cumbria	QA11168	Recommendation 2	HEE NE&NC should continue to review their quality management processes in order that they identify areas of concern consistently and efficiently.	20/12/2019	Regular review of quality management processes occurs throughout the year and covers all areas of the quality cycle (this includes escalation,	HEE NE will be reviewing all areas of the quality cycle once more in summer 2019 to ensure continuous improvement and review and development, as needed,		

Report	QA Code	Type	Description	Due Date	Action taken by organisation since the visit (if applicable)	Further action planned by organisation	Led by	Health Education England North East and North Cumbria Comments
					self-reporting, data, visits and meetings and supporting policies, templates and guidance).	following the GMC regional review.		
County Durham and Darlington NHS FT	QA11169	Area Working Well 1	There is a good use of Local Safety Standards for Invasive Procedures (LocSSIPs) as a measure to reduce and prevent serious incidents and near misses.			Further roll-out and education of LocSSIPs at Trust induction.	Dr. Richard Hixson	<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
County Durham and Darlington NHS FT	QA11170	Area Working Well 2	There is a culture of support and learning associated with incidents.			Further work is being undertaken with the Patient Safety Team on	Medical Education & Patient	HEE NE are pleased to see the inclusion of areas working well from site visits as part

Report	QA Code	Type	Description	Due Date	Action taken by organisation since the visit (if applicable)	Further action planned by organisation	Led by	Health Education England North East and North Cumbria Comments
						information gathering at an early stage in the process, to ensure Live-Flow reporting and support for trainees.	Safety Team	<p>of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
County Durham and Darlington NHS FT	QA11171	Area Working Well 3	Levels of competency are easily identifiable within obstetrics and gynaecology.			O & G continue to develop new ways to improve clinical placements/education within their department.	Mr. Damigos	<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as</p>

Report	QA Code	Type	Description	Due Date	Action taken by organisation since the visit (if applicable)	Further action planned by organisation	Led by	Health Education England North East and North Cumbria Comments
								<p><i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
County Durham and Darlington NHS FT	QA11172	Area Working Well 4	Rota design is working effectively across the trust.			Rota team working in Medical Education ensure that educational opportunities are embedded into rota design and further work on Wellbeing charter will take place for August 2019.	Medical Education	<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for</p>

Report	QA Code	Type	Description	Due Date	Action taken by organisation since the visit (if applicable)	Further action planned by organisation	Led by	Health Education England North East and North Cumbria Comments
								further review, and discussion.
County Durham and Darlington NHS FT	QA11173	Area Working Well 5	Students welcome the opportunity to meet regularly with the Darlington Teaching Team prior to their clinical placement and value the undergraduate induction.			Further developments to improve undergraduate education will continue into the next academic year, especially in relation to the new curriculum.	Medical Education	
County Durham and Darlington NHS FT	QA11174	Area Working Well 6	Doctors in training in respiratory medicine are provided with feedback on their input to management of acute cases.				Respiratory Medicine Consultants DMH	<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for</p>

Report	QA Code	Type	Description	Due Date	Action taken by organisation since the visit (if applicable)	Further action planned by organisation	Led by	Health Education England North East and North Cumbria Comments
								further review, and discussion.
County Durham and Darlington NHS FT	QA11175	Area Working Well 7	There are effective education and clinical governance systems integrated within the trust.				Medical Education	<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
County Durham and Darlington NHS FT	QA11176	Area Working Well 8	The portfolio support provided to foundation doctors in training is highly valued by them.				Medical Education	<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are</p>

Report	QA Code	Type	Description	Due Date	Action taken by organisation since the visit (if applicable)	Further action planned by organisation	Led by	Health Education England North East and North Cumbria Comments
								<p>working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
County Durham and Darlington NHS FT	QA11177	Recommendation 1	The trust should ensure that the administration of fifth year medical student placements is consistent, with reliable provision of undergraduate timetables in a timely manner.	31/03/2019	The Undergraduate Department is reviewing their admin staffing and IT systems in order to facilitate over 20/30 timetables across the Trust at any one time, including the provision of professional software for timetables, similar to that used by the University of Newcastle. This will be supported by the increase in SIFT money	Since the visit a timetable timeline has been created to ensure that administration staff are given adequate time and information to upload timetables, as least one week in advance of the courses starting. This will be monitored to ensure that all staff are adhering to this timeline. Our Trust has raised the	Sally Sadisivan & Medical Education	

Report	QA Code	Type	Description	Due Date	Action taken by organisation since the visit (if applicable)	Further action planned by organisation	Led by	Health Education England North East and North Cumbria Comments
					in 19/20 due to increasing student numbers, increased courses and changes in the delivery of the undergraduate curriculum from Newcastle Medical School.	issue of medical student identification during our annual quality visit from the medical school. HEENE has recently developed a coloured medical student lanyard to improve student identification, and our Medical Education Team will be asking the students to wear these when the initiative is rolled out. During the 19/20 Academic year, we plan to give permanent student groups NHS name badges with Medical Student Lanyards.		
County Durham and Darlington NHS FT	QA11178	Recommendation 2	The trust should make sure that there is an effective system for identifying the different training cohorts.	20/12/2019	A Colored Lanyard system has been developed by HEENE and further work will be needed to advertise this across the Trust,		Medical Education	HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review. All LEP actions and progress will be reported to Postgraduate Dean using the

Report	QA Code	Type	Description	Due Date	Action taken by organisation since the visit (if applicable)	Further action planned by organisation	Led by	Health Education England North East and North Cumbria Comments
					and ensure that junior medical staff do not use the term SHO. This needs an official launch with both junior medical staff and other staff within the Trust, to ensure that trainees are clearly identified. Lanyards have just been delivered to Medical Education. All Medical Students will also be expected to have a Medical Student Lanyards with their Newcastle Student Badge. There are some areas where lanyards are not worn i.e. ITU.			<p>established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.</p>
County Durham and Darlington NHS FT	QA11179	Recommendation 3	The trust should review the induction process to ensure that it is consistent across the trust.	20/12/2019	This is related to the quality of local induction within Care Groups and Clinical areas, with some minimal standards and		Medical Education	<p>HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review.</p> <p>All LEP actions and progress will be</p>

Report	QA Code	Type	Description	Due Date	Action taken by organisation since the visit (if applicable)	Further action planned by organisation	Led by	Health Education England North East and North Cumbria Comments
					some excellent standards. Work has started to support local induction standards and improve the quality of information provided in all areas. Target for improved local induction will be August 2019. Further work will also take place to ensure that this quality issues is applied to doctors "out of sync", which was picked up at the GMC visit.			<p>reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.</p>
County Durham and Darlington NHS FT	QA11180	Recommendation 4	The Trust should review the handover to the labour ward at DMH to ensure structure and	20/12/2019	Handover is currently been monitored for 1 month - this will include timings and reasons on		Mr. Damigos	HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review.

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			educational value.		disruptions, handover should be limited to 30 minutes. Patients will be handed over by the doctors (Antenatal, postnatal and gynae) this will improve techniques and ensure all information if given that is required. This should minimize unnecessary discussions. More information will be reported once this monitoring has concluded.			<p>All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.</p>
Northumbria Healthcare NHS FT	QA11181	Area Working Well 1	Feedback is sought from all levels of learners and acted upon by the trust.		As well as our current mechanisms that are in place we have recently	We will assess the impact and role of the Chief Registrar post at the end	DME	HEE NE are pleased to see the inclusion of areas working well from site visits as part

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			Learners recognise changes which have been made based upon previous feedback.		started open sessions with both the Executive Medical Director and the DME. The Trust has also appointed an acting "Chief Registrar" for the next six months to help with this work and to increase our trainees work with Quality improvement projects.	of their six month attachment.		<p>of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
Northumbria Healthcare NHS FT	QA11182	Area Working Well 2	There is an effective and functional educational governance structure which feeds to the trust board via the medical education board.			Whilst recognising that educational governance structures are working well we reflected that the GMC visit identified areas of concern that our internal governance processes had not. We are therefore making changes and	DME	<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as</p>

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						<p>improvements to this structure:</p> <ol style="list-style-type: none"> 1. Creating a new Medical Education Strategy Board with new senior roles in the organisation - senior educational leads in Medicine and Surgery Directorates who will work alongside the Foundation and GP leads. 2. Creating a new Medical Education Delivery Board with new roles leading education and training in each medical specialty rather than just Core Medical and higher Medical Leads 3. Creating a new Medical Education Quality Panel, chaired by Professor Sir Alan Craft. 		<p><i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
Northumbria Healthcare NHS	QA11183	Area Working	The trust provides clear support for learners.					HEE NE are pleased to see the inclusion of areas working well from site visits as part

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FT		Well 3	Students were positive about the academic and pastoral support available to them including the valuable contribution the clinical teaching fellows make to their learning experience. In addition, doctors in training valued the 'better doctor, better patient' programme.					<p>of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
Northumbria Healthcare NHS FT	QA11205	Area Working Well 4	The promotion of zero tolerance of bullying and undermining within the trust.					<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference</p>

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								<p>and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
Northumbria Healthcare NHS FT	QA11206	Requirement 1	The trust must ensure there is adequate supervision out of hours at the three base units for foundation doctors in medicine.	31/05/2019	Immediately following the visit changes were made to ensure all Foundation Doctors at our non-acute hospitals have on site senior supervision at all times. At North Tyneside and Wansbeck this was achieved by returning Core Medical and GP trainees rotas to cover the time period identified (1700-2100). In Hexham, when there is a Foundation Year two doctor on the rota	The options for Hexham hospital will be discussed, planned and reviewed by the local Foundation School.	Business unit Director of Medicine	<p>HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review.</p> <p>All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are</p>

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					call an additional more senior doctor is covering them. We do not feel this is sustainable or appropriate in the long term and several options are being considered to be in place from August 2019.			published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.
Northumbria Healthcare NHS FT	QA11207	Requirement 2	The trust must review the specialty inductions and ensure there is provision for those doctors in training who miss the induction due to being out of sync on the rota.	20/12/2019	We have reviewed all inductions and sought to clarify which inductions had been of concern. We have three types of induction: induction to the Trust, the specialty and to the ward team. Our Trust induction already has provision for any doctor who misses this. It is always reprovided. It was found that on a	The new medical education structure will identify new leads to ensure this is better managed. The responsibility for ensuring the delivery and recording of specialty and ward induction will now be that of newly appointed educational leads in every specialty. There will be monitoring of completion by the L+D team and at the	DME	HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review. All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report. HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.

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					small number of occasions foundation doctors have missed the other inductions due to rotas or night duty. There has been a substantial review of our monitoring systems to better identify when this happens and to prevent it happening again. The Learning and development team now receive a regular update from the education CPD manager when doctors rotate so that a checklist for induction is sent to them and their supervisor.	Education Quality Panel		This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.
Northumbria Healthcare NHS FT	QA11208	Requirement 3	The trust must review formal handover arrangements for the transfer of patients between sites and for	31/05/2019	The Trust Quality improvement team, chaired by one of our Medical Directors, is supporting a major	We will formally review and monitor the handover process at Medical Business Unit level.	DME	HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review.

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			early evenings at base hospitals.		project in Handover using the Nervecentre patient management app.	Progress will be monitored by the Quality Improvement team, the Medical Education Board, the Business Unit Directors and the Medical Directors		<p>All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.</p>
Northumbria Healthcare NHS FT	QA11209	Recommendation 1	The trust should continue work to embed the lanyard identification	20/12/2019	Every trainee who starts in the Trust now receives the appropriate	The lanyard system is being embedded further with the impending	Communications team	HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements

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			system across the trust to ensure all levels of learners are identifiable.		lanyard in their induction pack.	release of a new video clip for Trust computers and a newly designed poster which will be shared widely across the trust		<p>identified from the regional review.</p> <p>All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.</p>

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Northumbria Healthcare NHS FT	QA11210	Recommendation 2	The trust should ensure consistency of access to study leave for learners.	20/12/2019	<p>We have reviewed access to study leave and are happy with access to this in general but what was highlighted was concern in Obstetrics. This has been clarified with the Specialty Lead. Issues were identified with two trainees having difficulty seeking study leave this year because of a shortfall on the rota.</p> <p>An action plan has been put in place by the Obstetric team to ensure equity of access.</p>	We will review access to Study leave by all training groups as part of the role of the new Medical Education strategy group. Access to study leave will be a key indicator of departmental performance.	DME	<p>HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review.</p> <p>All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.</p>

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Northumbria Healthcare NHS FT	QA11211	Recommendation 3	The trust should review feedback given to doctors in training on their contributions to overnight management of acute medical patients to support their learning.	20/12/2019	We have identified that this is referring to doctors working in the medical related specialties. The DME presented at the Medical Directorate meeting where a number of potential solutions were discussed.	The number of educational leads in the medical specialties is being increased and they will be tasked with developing systems to improve this.	Education Lead in Medicine	<p>HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review.</p> <p>All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate</p>

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								Dean, for onward assurance to the GMC via the Online Dean's Report.
South Tees Hospitals NHS FT	QA11212	Area Working Well 1	The trust provides excellent consultant support to doctors in training, the use of a 'floor anaesthetist' was particularly effective in providing support and supervision to all levels of learners.					<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
South Tees Hospitals NHS FT	QA11213	Area Working Well 2	The identification of medical students through brightly coloured and labelled scrubs was very effective.					

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South Tees Hospitals NHS FT	QA11214	Area Working Well 3	The approach to rota management accommodated both leave requests and training needs of learners in rotas effectively.					<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
South Tees Hospitals NHS FT	QA11215	Area Working Well 4	The induction process was rated very highly by all levels of learners in anaesthetics and intensive care medicine (ICM), it was found to be comprehensive and robust.					<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with</p>

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								<p>others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
South Tees Hospitals NHS FT	QA11216	Area Working Well 5	We found evidence that the trust places great value on education, all groups that we met with were enthusiastic and positive about their experience at the trust.					<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for</p>

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								further review, and discussion.
South Tees Hospitals NHS FT	QA11217	Area Working Well 6	The twice a year inter professional learning sessions for final year medical students were very effective, with a focus on patient safety and simulated learning.					
South Tees Hospitals NHS FT	QA11218	Area Working Well 7	Undergraduate teaching in the trust was found to be well structured and supervised, and was highly valued by the students.					
South Tees Hospitals NHS FT	QA11219	Recommendation 1	Foundation doctors should be fully inducted into departments where they undertake additional roles out of hours in acute medicine.	20/12/2019	All trainees who undertake out of hours shifts within medicine have been identified and invited to specialty specific inductions	Induction video will be recorded and sent out to all trainees in advance of starting. All front of house trainees who undertake out of hours in acute medicine will attend a specific induction	Mark Burns, Deputy Director of Medical Education (Postgrad)	HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review. All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report. HEE NE is already discussing the GMC visit

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								<p>with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.</p>
Tees, Esk and Wear Valley NHS FT	QA11220	Area Working Well 1	The trust is responsive to feedback identified by medical students on placement and is willing to make changes to its provision of undergraduate education and training as a result of this.		Ongoing monitoring continues led by Snr Undergraduate Tutor through the Undergraduate Committee		Dr Lisa Kwentoh	

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Tees, Esk and Wear Valley NHS FT	QA11221	Area Working Well 2	The trust is making efforts to proactively address its staffing issues; including an international recruitment plan with a good international medical graduate induction programme linked to this.		Continue to deliver enhanced development programme to IMG's. Attempting to evaluate this	Exploration and monitoring of future requirements.	Dr Jim Boylan	<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
Tees, Esk and Wear Valley NHS FT	QA11222	Area Working Well 3	The provision of formal supervision for doctors in training within the trust is generally excellent, despite the gaps in the consultant workforce. There is enthusiastic engagement of clinicians with education and		Discussion taken place with DME and Postgraduate Dean who has now agreed that Senior SAS Doctors can provide the one hour weekly supervision.	Awaiting feedback to evaluate.	Dr Jim Boylan	<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice</p>

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			training, and the trainers are accessible, supportive and clinically competent.					<p>items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
Tees, Esk and Wear Valley NHS FT	QA11224	Area Working Well 4	Departmental and locality inductions are working well at all levels within the trust in preparing learners for their placements and posts.		Operates at all levels in both Postgraduate and Undergraduate programs. Continues to be monitored and reviewed.	3 day Kaizen event scheduled to take place in June around Induction process.	DME/ADME Nurse Leads Specialists	<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits</p>

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								will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.
Tees, Esk and Wear Valley NHS FT	QA11225	Area Working Well 5	The training and support given to core psychiatry trainees in preparation for their MRCPsych clinical assessment of skills and competencies examination is valued and effective.		Continue to deliver IACS and CASC programme. Coordinating individual support to CASC candidates on an ongoing basis	Continue to monitor exam results closely	Dr Jim Boylan	<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
Tees, Esk and Wear Valley NHS	QA11226	Area Working Well 6	Doctors in specialty training at ST4 level and above are supported by the trust to develop their		Continued sponsorship of Leadership & Management	Participants are encouraged to engage in a specific leadership	Dr Jim Boylan	HEE NE are pleased to see the inclusion of areas working well from site visits as part

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FT			professional leadership and management capabilities through in-house training.		programme for Specialist Registrars and Senior Healthcare Practitioners, which is evaluated and continues to be monitored	project, and provide a summary poster presentation of their learning outcomes at the end of the programme		<p>of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
Tees, Esk and Wear Valley NHS FT	QA11227	Area Working Well 7	Trainers are well supported as clinicians and educators in the trust across both undergraduate and postgraduate education by an effective trainer faculty development programme.		Continue to deliver and expand the In House Training Programme	Critical Appraisal Training and Educational Supervisors Update & Peer Support group sessions to be developed. Future proofing in conjunction with HYMS and Sunderland medical schools	Dr Jim Boylan	<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference</p>

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								<p>and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
Tees, Esk and Wear Valley NHS FT	QA11228	Requirement 1	The trust must ensure doctors in training are not asked to take clinical responsibility for management decisions made by clinicians who are not appropriately qualified.	20/12/2019	To be monitored at the PSTC meeting and Junior Doctor forums.	Statement to be prepared and circulated to medical managers, non-medical prescribers and trainees. Statement also to be taken to QUAG (Quality Assurance Group)	DME ADME's	<p>HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review.</p> <p>All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed discussions and ongoing review in 2019/20</p>

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								once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.
Tees, Esk and Wear Valley NHS FT	QA11229	Requirement 2	The trust must ensure all learners feel supported to raise concerns about patient safety without fear of adverse consequences.	20/12/2019	Applies to both Postgraduate and Undergraduate programs. To be taken to PSTC meetings and Jnr Doctor forums for discussion,	To be taken forward for discussion at the Right Staffing Board Meeting and Medical Directorate meeting via Guardian of Safe working. Universities have processes in place to support the Medical Students within the Trust.	DME GOSW	HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review. All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report. HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report. This will be followed by more detailed

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								discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.
Tees, Esk and Wear Valley NHS FT	QA11230	Requirement 3	The trust must ensure the transfer of information and care between acute trusts and mental health providers is safe and provides continuity of care for patients.	20/12/2019	DME to liaise with South Tees DME	Explore Patient Safety Group and seek advice at the Medical Directorate meeting. To be discussed under Patient Safety agenda item. Feedback to be provided back down through committee structure to PSTC's and Junior Doctor forums	DME GOSW	<p>HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review.</p> <p>All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed</p>

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								discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.
Tees, Esk and Wear Valley NHS FT	QA11231	Recommendation 1	The trust should ensure all learners know how to report patient safety concerns, and a robust process is in place to respond to feedback from learners.	20/12/2019	Covered in Induction by DME & Guardian of Safe Working in conjunction with the Freedom to Speak Guardian. Discussed at PSTC's which locality reps attend and Junior Doctor Forums.	DME to explore process with Patient Safety Team to establish what their process is for providing feedback. The DME to develop a process to feedback to members through the committee structure meetings. Newcastle University should have a process? ADME to clarify position.	DME GOSW ADME/ Nurse	HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review. All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report. HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.

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						DME & ADME to discuss current understanding and feedback to MEQAS.	Lead Specialist DME/ADME	This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.
Tees, Esk and Wear Valley NHS FT	QA11232	Recommendation 2	The trust should ensure the administration of medical student placements consistently ensures there is an appropriate level of clinical supervision at all times, and that the students are provided with learning opportunities to meet the requirements of their curriculum.	30/09/19	All medical students receive an individualised timetable specifically created for their placement to ensure this meets the requirements of their curriculum	To continue to monitor at the end of each rotation, evaluation and feedback to be taken to the PIIG meeting and Undergraduate Committee meetings.	Senior UG Tutor & Nurse Lead Specialist	
Tees, Esk and Wear Valley NHS FT	QA11233	Recommendation 3	The trust should ensure learners at different stages of education and	20/12/2019	This applies across both the undergraduate and postgraduate programs.	Discussion to be had with Right Staffing Board around working	DME	HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements

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			training can be reliably identified by all staff members, so they are not asked to work beyond their competence.		<p>Junior Doctors have colored lanyards depicting their current grade and competence level.</p> <p>Medical students are advised that they must wear their university name badge as their ID at all times.</p>	<p>relationships around Junior Doctors and student feedback received.</p> <p>Teesside ADME working with IT to ensure all professional roles are mapped correctly across smartcards and PARIS.</p>	ADME	<p>identified from the regional review.</p> <p>All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.</p>

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Tees, Esk and Wear Valley NHS FT	QA11234	Recommendation 4	The trust should review the resources available to support and supervise the doctors in training timetabled research sessions.	20/12/2019	Being actively addressed between DME and Director of R&D to provide more research supervisors.	To be monitored	DME	<p>HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review.</p> <p>All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.</p>

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The Newcastle Upon Tyne Hospitals NHS FT (Freeman Hospital)	QA11235	Area Working Well 1	There are good feedback mechanisms in place within the trust, which reflect a culture that seeks to respond to medical student feedback.			Continuation with "They say, we do" evaluation concept. Continuation of regular student staff committee meetings.	Dr Richard Frearson, Clinical Sub Dean	
The Newcastle Upon Tyne Hospitals NHS FT (Freeman Hospital)	QA11236	Area Working Well 2	The structure, organisation and delivery of clinical teaching in the foundations of clinical practice programme is valued by the third year medical students on placement.			New curriculum Year 3 Essentials of Clinical Practice to be implemented from September 2019. Trust to adopt structural and organizational template similar to that of Foundations of Clinical Practice Course	Dr Simon Hill, Year 3 and EOCP Trust Lead	
The Newcastle Upon Tyne Hospitals NHS FT (Freeman Hospital)	QA11237	Area Working Well 3	There are effective educational governance systems in place across the trust.			Trust wide review of Governance structures currently underway will include the establishment of a People Committee and subsequent refresh of Trust Education Group	Exec	HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review. HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice

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						(TEG)		<p>items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
The Newcastle Upon Tyne Hospitals NHS FT (Freeman Hospital)	QA11238	Area Working Well 4	Medical students are given good opportunity to access additional educational support from foundation doctors to assist their learning and development through a valued 'buddy system'.		Foundation Doctor Buddy scheme to continue for Year 3 students.		Dr Simon Hill Year 3 and EOCP Trust Lead	<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality</p>

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								Meetings provides an opportunity for further review, and discussion.
The Newcastle Upon Tyne Hospitals NHS FT (Freeman Hospital)	QA11239	Area Working Well 5	The trust provides good support to medical students requiring reasonable adjustments.		To continue. Process regularly evaluated .		Dr Maria McKenna, Pastoral lead/ Ms Fae Hodgson, Undergraduate Manager	
The Newcastle Upon Tyne Hospitals NHS FT (Freeman Hospital)	QA11240	Area Working Well 6	The trust has developed an effective and valued clinical teaching fellow programme.		Recruitment for 19/20 cohort now complete.	Recruitment process regularly evaluated to ensure NUTH attract a high calibre of applicants. TF Steering group to be set up to plan and lead on 20/21 recruitment process.	Mr Andy Bowey, Teaching Fellow Programme Lead, HR Support	HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review. HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC). The HEE NE quality cycle includes triangulation of provider self-assessment

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								where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.
The Newcastle Upon Tyne Hospitals NHS FT (Freeman Hospital)	QA11241	Area Working Well 7	Doctors in training have good access to information and support for less than full time training.		The Deputy DME acts as Lead for this proportion of the workforce, systems well established to ensure no loss of training opportunities or other disadvantage for trainees in less than full time training.		Deputy DME	<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
The Newcastle Upon Tyne Hospitals NHS FT (Freeman	QA11242	Area Working Well 8	There are good processes in place to facilitate doctors returning to a training programme		As above		Deputy DME	<p>HEE NE continue to use the established quality cycle to recognise areas that are working well.</p> <p>HEE NE also gathers good practice items</p>

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Hospital)			following a career break.					<p>routinely to encourage sharing with others (via a regional quality conference and through national initiatives and sharing with the GMC as part of calls for sharing practice).</p> <p>The established quality cycle includes self-assessment, escalation, visits and meetings and an annual Dean's Quality Meeting with providers.</p>
The Newcastle Upon Tyne Hospitals NHS FT (Freeman Hospital)	QA11243	Area Working Well 9	Educators in Anaesthetics value the quality of training and support made available to them to do their role effectively.			Sharing of best practice through Near Peer learning and structured teaching sessions	Education al Leads	<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality</p>

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								Meetings provides an opportunity for further review, and discussion.
The Newcastle Upon Tyne Hospitals NHS FT (Freeman Hospital)	QA11244	Requirement 1	The trust must ensure service pressures do not compromise the educational and training opportunities for doctors training in respiratory medicine.	20/12/2019	Respiratory Training Group involves CD, Deputy CD, Educational lead, CMT college tutor, DM and respiratory HoD.	<p>Department has plans to introduce the role of Physician Associates, bid being co-ordinated by PA Lead. Potentially in place by Nov 2019</p> <p>Hold trainee focus group to discuss further.</p> <p>Recruitment to a Teaching Fellow Post from August 2019</p>	Respiratory Training Group, DME, Med Ed Team	<p>HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review.</p> <p>All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to</p>

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								provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.
The Newcastle Upon Tyne Hospitals NHS FT (Freeman Hospital)	QA11245	Requirement 2	The trust must ensure the time allocated in its educational supervisors' job plans is adequate for the responsibilities of the roles.	20/12/2019	New job planning measures agreed at CPG with the aim to roll out across Directorates via Clinical Directors during next job planning round.	Continue working with CDs and the Medical Directors Group to ensure policy translates to job plans. To be reviewed after first Job Planning round.	Exec Team, DME	<p>HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review.</p> <p>All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality</p>

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								cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.
The Newcastle Upon Tyne Hospitals NHS FT (Freeman Hospital)	QA11246	Recommendation 1	The trust should ensure all learners know how to raise concerns about safety and bullying and undermining issues, and that a robust process is in place to respond to feedback from learners.	20/12/2019	<p>Senior Management team acknowledge small 'cultural' pockets of B&U issues remain within certain departments</p> <p>Zero tolerance policy established 2012</p> <p>Targeted actions include stress communication workshops and boot camps in O&G</p> <p>Introduction of anonymised system to raise concerns confidentially</p>	<p>Positive action taken to</p> <ul style="list-style-type: none"> encourage open discussion empowering people to challenge and report issues supporting learners to develop and lead interventions and provide effective feedback <p>Steady improvements shown through GMC survey results.</p> <p>Speak in confidence, Toot Toot</p> <p>Civility Saves Lives Campaign</p>	DME, Med Ed Team, FTSUG	<p>HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review.</p> <p>All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents</p>

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						FP shadowing and induction sessions continue to include information on how to raise a concern		returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.
The Newcastle Upon Tyne Hospitals NHS FT (Freeman Hospital)	QA11247	Recommendation 2	The trust should ensure the clinical and educational supervisors within hepatobiliary surgery engage with, and are accessible to, its doctors in training.	20/12/2019	<p>Focus Group held 4th March 19 with cross section of HPB Trainees</p> <p>Supervision – Trainees reported that registrar supervision is very good no issues raised in regards to supervisors not being available or approachable.</p> <p>Departmental Induction – All received departmental induction this was a full morning followed by morning training sessions for the rest of induction week</p>	<p>Review arrangements for protected Clinic/Theatre time for all trainees</p> <p>Consideration to be given to front loading teaching to first 4 weeks of placement. Further discussions to be had.</p>	Foundation Programme Lead, Med Ed Team, Educational Lead	<p>HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review.</p> <p>All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the</p>

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					<p>Departmental Teaching – Trainees reported that this had recently been reintroduced, teaching delivered was good and involved other departments i.e. Vascular trainees. Attendance was variable due to annual leave and it was suggested that teaching should be front loaded to the start of the placement</p>			<p>monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.</p>
The Newcastle Upon Tyne Hospitals NHS FT (Freeman Hospital)	QA11248	Recommendation 3	The trust should ensure all staff members can reliably identify learners at different stages of their education and training, and understand the underlying safety issues relating to this.	20/12/2019		<p>While the Trust have not gone down the route of lanyards because of infection control issues, junior doctors will be wearing badges with coloured stripes matching the lanyard descriptors.</p> <p>To ensure staff can easily identify medical students</p>	Dr John Hanley, DME	<p>HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review.</p> <p>All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p>

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						<p>they are provided with an Trust ID badge with a blue background instead of the standard white.</p> <p>In addition the Trust also uses personalised Theatre Caps and personalised scrubs where appropriate</p>	Dr Richard Frearson, Clinical Sub Dean	<p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.</p>
The Newcastle Upon Tyne Hospitals NHS FT (Royal Victoria Infirmary)	QA11249	Area Working Well 1	Medical students and foundation doctors in training highly value the quality of the education and training provided within obstetrics and gynaecology.			Increase in Teaching Fellow support from 1 to 2 in 2019/20 academic year to support implementation of new Year 3 curriculum	Dr Richard Frearson, Clinical Sub Dean	<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference</p>

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								<p>and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
The Newcastle Upon Tyne Hospitals NHS FT (Royal Victoria Infirmary)	QA11250	Area Working Well 2	There is a demonstrable culture within the intensive care unit setting of supporting the raising of concerns and in pursuing learning around these.			Sharing of best practice through Near Peer learning and structured teaching sessions	Education al Leads	<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for</p>

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								further review, and discussion.
The Newcastle Upon Tyne Hospitals NHS FT (Royal Victoria Infirmary)	QA11251	Area Working Well 3	Doctors in training are provided with good learning opportunities and clinical experience to meet the requirements of their training programmes in intensive care medicine.		Well-structured programme used as exemplar in other areas.	Sharing of best practice through Near Peer learning and structured teaching sessions	Education al Leads	<p>HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review.</p> <p>HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC).</p> <p>The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.</p>
The Newcastle Upon Tyne Hospitals NHS FT (Royal Victoria Infirmary)	QA11252	Area Working Well 4	The use and engagement of clinical teaching fellows within the trust ensures medical students are provided with relevant learning opportunities			Teaching Fellow programme to be developed further with increase in numbers for 2019/20 to facilitate implementation of new	Mr Andy Bowey, Teaching Fellow Programme Lead	

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			and good teaching to help meet their curricula requirements.			Year 3 Regional Medical School curriculum.		
The Newcastle Upon Tyne Hospitals NHS FT (Royal Victoria Infirmary)	QA11253	Area Working Well 5	There are good rest facilities available to doctors in training both during and after shifts on the ICU ward to help mitigate the safety risks of fatigue. This is supported by a culture that actively encourages the doctors in training to use these facilities when required.			SleepWell Steering Group Funding bids for sleep pods Working with estates to identify existing and potential facilities	SleepWell Steering Group	HEE NE are pleased to see the inclusion of areas working well from site visits as part of the regional review. HEE NE continue to use their established quality cycle to recognise areas that are working well and gathers good practice items routinely to encourage sharing with others (via a regional quality conference and through national initiatives such as <i>sharing practice</i> with the GMC). The HEE NE quality cycle includes triangulation of provider self-assessment where all items identified from site visits will be monitored. Annual Dean's Quality Meetings provides an opportunity for further review, and discussion.
The Newcastle Upon Tyne Hospitals NHS FT (Royal Victoria)	QA11254	Recommendation 1	The trust should ensure robust feedback is provided to doctors in training about patient safety concerns	20/12/2019		All datixes submitted by Junior Doctors are discussed with the relevant Educational Supervisor. Junior	DME, Med Ed Team, Educational Leads.	HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review. All LEP actions and progress will be

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Infirmery)			submitted via Datix.			Doctors are encouraged to reflect and include an account in their portfolios,		<p>reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.</p>
The Newcastle Upon Tyne Hospitals NHS FT (Royal	QA11255	Recommendation 2	The Trust should ensure the administration of the rota for foundation doctors in surgical	20/12/2019		Focus groups set up to explore issues in more detail.	DME, Med Ed Team, Education	HEE NE will use their established quality cycle to manage and monitor all recommendations and requirements identified from the regional review.

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Victoria Infirmary)			training allows for an effective management of annual leave and the inclusion of formal learning opportunities.			Closer liaison with Department and Rota Co-ordinators	al Leads.	<p>All LEP actions and progress will be reported to Postgraduate Dean using the established deanery quality processes for onward assurance to GMC via Online Deans Report.</p> <p>HEE NE is already discussing the GMC visit with all providers at all 2019 Annual Dean's Quality Meetings, initially in 2019 in order to clarify reporting pathways via the Online Dean's Report.</p> <p>This will be followed by more detailed discussions and ongoing review in 2019/20 once all regional review reports are published. Providers that were in scope have been asked to add all items to their Quality Improvement Plan (one of the monitoring and self-assessment documents returned to HEE NE as part of the quality cycle) in order to monitor progress and to provide assurance to the Postgraduate Dean, for onward assurance to the GMC via the Online Dean's Report.</p>