

## Annual Quality Assurance Summary

This summary provides an overview of how an organisation is meeting our standards for medical education and training as detailed in [Promoting excellence: standards for medical education and training](#). It provides an overview of the QA activities undertaken over the course of a year and an overview of findings including any areas of notable practice or requirements and recommendations we have set. The summary is published.

<b>Organisation</b>	Health Education England Yorkshire and The Humber
<b>Review period</b>	March 2022 – March 2023 (Year 2 of cycle)

### Overview of findings

Overall findings statement
<p>From the SAQ submission, and the clarification of some points during the SAQ meeting, we consider that Health Education Yorkshire and The Humber (HEE YH) is meeting the standards set out in the GMC's <i>Promoting excellence: standards for medical education and training</i>.</p> <p>The QA activities that we have carried out in this annual cycle have provided good opportunities to observe how HEE YH meets our standards in themes 1 (Learning environment and culture), 2 (Educational governance and leadership) and 3 (Supporting learners).</p> <p>We can set requirements and recommendations where our standards are not being met and identify areas working well or of notable practice. Of note, we have identified the monitoring the learning environment (MLE) meetings as an example of an area working well at HEE YH against theme 2 (Educational governance and leadership).</p>

### Quality Activity undertaken

Activity	Date	Summary
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1	SAQ submission	25 March 2022	<p>The SAQ was submitted on time and covered all five themes of <i>Promoting excellence</i>. The submission included a list of planned HEE YH activities that we could observe for quality assurance purposes.</p> <p>We are satisfied that where further information and/or clarification is still required that this can be provided in the next SAQ submission.</p>
2	SAQ feedback meeting	09 May 2022	<p>This meeting was held to provide feedback to HEE YH on its 2022/23 SAQ submission, and to seek clarification and additional information on the submission where required.</p> <p>We also discussed potential QA activities we could undertake in this annual cycle. These activities were not selected because of risks identified from the SAQ submission.</p> <p>We did not identify areas of risk during the SAQ meeting.</p> <p>Following this meeting, HEE YH was provided with written feedback on the SAQ submission.</p>
3	Annual quality engagement meeting	20 September 2022	<p>The annual quality engagement meeting was attended by members of the GMC's education QA team and the HEE YH Quality team.</p> <p>During the meeting, the 2021 NTS priorities list was revisited, allowing the opportunity for us to learn how these items had progressed since the last engagement meeting. We also discussed the 2022 priority list, NTS comments, the management of enhanced monitoring concerns, and QRS (Quality Reporting System) items.</p> <p>HEE YH provided insight into the 2022 priority list items, and including a summary of next steps for each item and where possible intelligence from the trust, and their plan to address the emerging concerns.</p> <p>The next steps were agreed upon and a summary of the meeting and subsequent actions were circulated for agreement in the weeks following.</p>
4	Observation of a Trainee Forum	31 August 2022	<p>This activity was listed on the SAQ by HEE YH against Theme 2: Educational governance and leadership.</p>

		<p>The trainee forum meeting we observed included attendance and delivery of agenda items by HEE YH representatives. Ahead of the meeting we received an agenda, and terms of reference for the trainee forum.</p> <p>The meeting was attended in a virtual capacity via MS Teams and was chaired by the current Trainee Executive Forum Chair. We joined the meeting, along with HEE YH representatives part way through the agenda, with earlier agenda items being covered in a closed meeting by trainee forum members only.</p> <p>The Chair began by welcoming joining attendees to the later session and ran through the remaining agenda.</p> <p>There was a total of 23 attendees in the session we observed; 18 of these attendees were trainees from the wider and executive forums.</p> <p>MS Teams functionalities: hands up and chat were utilised well throughout the session by attendees and was facilitated well by the chair.</p> <p>The main agenda items consisted of:</p> <ul style="list-style-type: none"><li>• Educational focus: leadership stories</li><li>• GMC National Training Survey (NTS) results</li><li>• Less Than Full Time Training</li></ul> <p>Following the activity, HEE YH informed us how agenda items are decided for the forums. Wider and Executive Forum members are able to influence agenda items, as well as members of the HEE YH quality team. Agenda items can stem from: member feedback, discussions in the TEF, calls for items, HEE YH business, Guardians of Safe Working Hours (GoSWH), Dean’s Management Team (DMT), and the Dean’s Executive Meeting for Quality (DEMQ). The chair of the executive forum attends both DMT and DEMQ, enabling a clear link between these meetings and the forums.</p> <p>Overall, we found the trainee forums to be a good example of how HEE YH supports its learners to undertake activity that drives improvement in education and training to the benefit of the wider health service (R1.22). It provides the opportunity for learners to understand local processes for educational and clinical governance and local protocols for clinical activities (R1.6). The link between the trainees and HEE</p>
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			<p>that the forum creates means the impact on learners of policies, systems or processes can be considered in a more holistic way, with plenty of opportunity for the views of learners to be considered (R2.3).</p> <p>Despite the opportunities, we do recognise that the forums are still in their infancy, and we look forward to revisiting the forums in a later cycle.</p>
5	Observation of a MLE (Monitoring the Learning Environment) meeting.	18 October 2022	<p>This activity was listed on the SAQ by HEE YH against Theme 1: Learning environment and culture.</p> <p>In advance of the meeting HEE YH provided attendees with a number of supporting documents to facilitate the delivery of the session. This included an agenda, and reports and action plans relating to Bradford Teaching Hospitals NHS Foundation Trust (BTHT).</p> <p>The meeting was chaired by an HEE Associate Dean who began with introductions and continued to progress the meeting through the scheduled agenda items. The meeting was drawn to a close with confirmation of the next planned engagement.</p> <p>Following the meeting, attendees were circulated an MLE report which accurately reflected the concerns, action plan and timelines discussed.</p> <p>In summary, we were pleased to see good engagement from the trust and HEE; there was a wide range of trust representatives in attendance, including the Director of Medical Education, and Medical Education Manager. As well as Heads of School and Associate Deans from HEE. This widespread attendance meant each agenda item could be discussed by those with a good understanding of the current issues and their progression, and the ability to drive resolution of these issues forward. A Guardian of Safe Working Hours for Bradford was also in attendance and enabled an independent and impartial viewpoint that supported effective triangulation of issues through sharing of trainee feedback.</p>

			<p>Overall, our observation and a subsequent follow up discussion allowed us to consider the effectiveness of HEE YH's processes in providing opportunities for low level concerns to be managed in line with HEE YH risk management processes. Based on our observation and the detailed documentation we have reviewed, we consider the MLE meeting and the supportive processes to be an area working well for HEE YH (R1.2, R2.6, S2.2).</p>
6	Equality, Diversity and Inclusion action plan (including differential attainment)	December 2021 to September 2022	<p>This year we asked all postgraduate training organisations to submit an action plan detailing how they are working to address the attainment gap in their region.</p> <p>We met with HEE YH to discuss their action plan shortly before the annual engagement meeting. The purpose of this discussion was to explore the interventions in the action plan, to understand why they were selected and how the impact will be measured and evaluated.</p> <p>Within their action plan, HEE YH has identified a wide range of interventions in place to help minimise the differential awarding gap in their region. These spanned many areas, showing good insight into the issues which trainees and trainers face. Within their submission HEE YH also referenced the national research and work being done more broadly to address these concerns, providing further background to their plan.</p> <p>During the meeting we had an insightful discussion about what has worked well and not so well in the plan so far. To keep focus to the meeting, we discussed only a few of the areas of the action plan rather than each one. This included ARCP attainment gaps; reverse mentoring and conscious decision making. We were encouraged by the conversation and valued the candid discussions we had around the challenges faced. We understand the complexities of these interventions and commend the work of HEE YH to continue progressing plans despite barriers.</p> <p>Following this meeting, HEE YH was provided with written feedback on their action plan, which includes</p>

			<p>the areas where we would like to receive an update in the next submission.</p> <p>We will follow-up with HEE YH on progress against the action plan through our proactive quality assurance process, and we will require an updated action plan alongside the next SAQ submission in March 2023. This updated action plan will be reviewed alongside the SAQ, and we will discuss potential quality activities from both documents.</p>
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### Quality Reporting System (QRS)

We use the QRS to monitor concerns raised by organisation when they identify that our standards are not being met in a training environment. Concerns are managed locally by the responsible organisation until resolution.

Activity	Date	Summary
Quality Reporting System (QRS)	Ongoing	<p>At the time of this report, HEE YH have six open items on the QRS.</p> <p>In the last 12 months, two concerns have been resolved and four have been opened.</p> <p>HEE YH is engaged with the QRS system and continue to provide frequent and detailed updates. We are assured that our thresholds for reporting via the QRS are embedded and adhered to.</p> <p>We will continue to work with HEE YH to ensure our thresholds for reporting via the QRS are embedded and adhered to.</p>

### Enhanced Monitoring

Enhanced monitoring is used to promote and encourage local management of concerns which adversely affect patient or trainee safety, doctors' progress in training, or the quality of the training environment. During enhanced monitoring, the GMC provides an increased level of monitoring and participate in activities organised by the deanery/HEE local office. We tailor our support to each enhanced monitoring case to help address the concern(s) and develop a sustainable solution. We have summarised the enhanced monitoring activity this organisation has undertaken over the last 12 months below. For further information on enhanced monitoring please [visit our website](#).

Activity	Date	Summary
Enhanced monitoring activities	Ongoing	<p>HEE YH currently have no open enhanced monitoring cases within the region. Within the current reporting year, one enhanced monitoring case has been closed. Part of this enhanced monitoring case, relating to the Scunthorpe site was de-escalated to the QRS in March 2022, with the Diana Princess of Wales aspect remaining in enhanced monitoring until December 2022, when it was also subsequently de-escalated to the QRS.</p> <p>We welcomed HEE YH's approach over the last year to progress their most recent enhanced monitoring case. More frequent interactions have occurred between HEE YH and the GMC quality teams to provide assurance on the progress made.</p> <p>The GMC has been involved in quality visits alongside HEE YH as part of the enhanced monitoring process, and further information on enhanced monitoring visits can be found on the GMC website.</p>

### Areas that are working well

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

Number	Theme	Areas working well
1	<p>Theme 1: Learning environment and culture (R1.2).</p> <p>Theme 2: Educational governance and leadership (S2.2, R2.6).</p>	<p>We identified HEE YH's MLE meetings as an example of an area working well for the organisation. The MLE was identified as part of the proactive quality assurance process, we conducted a quality activity which involved observation of one of the MLEs to determine its effectiveness to deliver our standards. To learn more about the MLE's outside of our observation, we met with HEE YH and had a follow up discussion to learn more about the processes the MLE sits within.</p> <p>Overall, our observation and follow up discussion allowed us to consider the effectiveness of HEE YH's processes in providing opportunities for low level concerns to be managed in line with HEE YH risk management processes. Based on our observation and the detailed documentation we have reviewed, we consider the MLE meeting and the supportive processes to be an area working well for HEE YH (R1.2, R2.6, S2.2).</p>

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## Next steps

The GMC's responses to the information submitted in the SAQ gives feedback on each theme to help HEE YH complete the updates to the questionnaire in the next annual cycle. These include:

**Theme two** – Any updates on the development and launch of the good practice app (EGL2-10).

**Theme three** – An update on the roll out of the Professional Support Unit (PSU) within the region and any reflections on how this has gone (SUL1-02); and any updates on the introduction of the new electronic study leave system (Accent) (SUL1-08).

**Theme four** – An update on how the reintroduction of face-to-face training events have gone (SUE1-01).

**Theme five** – GPCs and how the work done to evaluate each course has been cascaded to trainees (DCA3-02); and how ARCP equality and diversity training compliance is overseen by HEE and what steps are taken if non-compliance is observed.

## Organisation's response

The organisation has the right to reply to the AQAS; if they have responded it will be included below.

### Organisation's response

HEEYH acknowledges that the recent AQAS report confirms that all the standards for education and training are fully met. We are pleased that the GMC has noted the innovation of the DME/HoS virtual call and the PARE trainer accreditation process.

With the challenges we have had to meet during the pandemic it is vital that high quality training remains at the core of what we do. The PG dean, senior faculty and quality and programme management teams have gone above and beyond to achieve this.

We have found the new GMC process to be constructive and proactive and look forward to continuing to work with GMC colleagues.