

Public Board Meeting, 26 July 2012

Junior Doctors/Deanery Update Report

Presented by: Colin Johnston, Medical Director/Director of Patient Safety

This report apprises the Board of progress in relation to the action plan in place to address outstanding issues following the re-visit by the Deanery and GMC on 26 April. The formal report was received in June and much of the feedback reflected in the briefing reported to the May Board meeting is consistent with the final report. The following sets out the decisions reached and further actions required by the Deanery Quality Team:

"Decision of Deanery Quality Team

The provision of medical education and training at West Hertfordshire Hospitals NHS Trust has: *met with conditions* the requirements of the NHS East of England Multiprofessional Deanery under the standards required by the General Medical Council and therefore is given conditional approval for one year.

The Trust is required to provide an action plan by 26th July 2012 including confirmation of completions of action on the immediate conditions, and to complete actions agreed within the specified time periods.

A formal update on the action plan is required by 26th October 2012 unless otherwise stated under the conditions section below.

Specialty Training Programme School and Foundation Programme formative visits will continue with their planned frequency and subject to the findings of those, routine visits will continue.

Subject to receipt of the action plan, unless otherwise triggered, the next full Deanery Performance and Quality Review will be in April 2014.

The monitoring of the implementation of these action plans to meet these conditions will be through the relevant Deanery Heads of School reporting to the Deputy Postgraduate Dean for Quality.

Ongoing conditions

Condition 15.2 Whilst the tracking of surgical outliers has been addressed, there continues to be significant concerns with regard to medicine in general. This condition continues to be extant. An updated action plan is required within one week of receipt of this report.

Condition 15.6 The continued reporting of a culture of undermining in the Radiology Department is a serious concern. The Medical Director is asked to investigate urgently and report his findings directly to the Postgraduate Dean. An action plan is required to be reflected in the action plan to be submitted on 26 July.

Condition 15.4 Engagement of College Tutors remains extant as it was a 12-month condition.

Recommendations

The recommendations of the previous visit remain extant as updated herein.

New areas of concern

No new areas of concern were identified during this targeted revisit".

Subsequent to the receipt of the final report, the Trust also received the GMC Trainee Survey Feedback which formed the responses to a question relating to any patient safety concerns the trainees had. There were 26 concerns about patient handover. It was noted that this theme was reflected in the Trust's internal survey and that the issues raised by the trainees are well known and already a key area of focus with significant further work underway to improve handover. This issue received considerable attention at the 12 July meeting of the Trust's Integrated Risk and Governance Committee which will monitor the progress in implementing in full the Junior Doctors' Action Plan.

A junior doctors' forum was recently dedicated to reviewing the work in place and to consider the further changes needed, including to the junior doctors' rota, to foster greater ownership of patients. Handover issues will also be strengthened via the induction programme for trainees.

Junior doctors were being encouraged to participate fully in the Trust's incident reporting system and the Trust has developed a doctor specific incident form to encourage reporting as well as producing an information booklet for junior doctors on reporting incidents.

Radiology issues were being addressed with the Clinical Director and an action plan has been finalised and presented to the Deanery.

The Deanery Taskforce Group continues to meet every two weeks and is making good progress implementing the original action plan with no actions beyond agreed deadlines. The action plan has been updated following the report and was submitted well within deadline.

The Trust continues to await a response from the CQC in relation to evidence submitted in support of a removal of the minor concern related to CQC Outcome 14.

Colin Johnston
Director of Patient Safety, Medical Director