

Performance and Quality Assurance Framework (PQAF)

The Bedfordshire and Hertfordshire Workforce Partnership Group have developed a Performance and Quality Assurance Framework for the provision of academic and practice education in NHS Trusts.

Investment for education will come from the Local Education Training Board via the Workforce Partnership Group for the following elements of our education activity.

- Continuing Professional Development (CPD) for Non Medical Staff
- Salary and bursary support for non-medical undergraduate students
- Service Increment For Teaching (SIFT)
- Support for the infrastructure of doctors and dentists in training
- Salaries and on-costs for doctors and dentists in training
- Strategic development funds

The outcome for this investment is the development of a future workforce with relevant qualifications, skills, competencies and experience to do their jobs effectively.

The Framework provides an annual quality monitoring process to review and agree RAG ratings for the overall quality and performance of education delivery.

The five key performance indicators for education providers are as follows :-

- KPI 1 The organisation is assured that they have robust education governance in place
- KPI 2 The organisation provides high quality learning environments for students
- KPI 3 Students are adequately prepared by the provider organisation to deliver high quality care
- KPI 4 Students are effectively supported, educated and assessed by the provider organisation
- KPI 5 Provider organisations demonstrate effective utilisation of the Multi-Professional Education and Training Levy (MPET) investment:

Please note, in the interest of consistency, throughout the East of England the LQAF weighting for KPI number 5 has been designated a lead criterion. Therefore, if LQAF RAG rating is amber it affects the other criteria.

The results are considered by the Workforce Partnership Group (WPG) and a RAG rating proposed, based on the evidence presented.

Senior Managers from the Trust attend an annual review meeting with the Workforce Partnership Group. The aim of this meeting is to provide an opportunity to discuss the proposed RAG ratings, reach agreement and identify good practice and key actions forward.

Following the meeting WPG's recommended RAG ratings are as follows:

KP1 Green
KP2 Amber
KP3 Amber
KP4 Green
KP5 Amber

Good Practice Points

West Hertfordshire Hospitals NHS Trust were perceived as having 'embraced' the PQAF process and commenced work on the organisational structures to support good governance.. Efforts to align internal process were seen as evident and as forming a good foundation for quality improvements.

Commitment and engagement in partnership working were believed to be valued and strong.

Appendix 1 shows RAG ratings agreed by the Workforce Partnership, with notes made during the meeting.

Next Steps

To submit the West Hertfordshire Hospitals NHS Trust PEP action plan to supports the 12/13 PQAF ARM process and continued partnership working.

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APPENDIX 1 – Post Annual Review Meeting

Key Performance Indicators	Trust Self assessment	Evidence	Agreed Rag rating	
KPI 1				
The organisation is assured that they have robust education governance in place		Governance		Risks highlighted to Information Workforce Governance Risk Group, then escalated. Engages with HEI, with consistency key. Education Risk Group to start to monitor whether commissioning plans are aligned to business plans.
		Investment		LQAF amber.
		Improvement		Pre-Reg student comments (small number) showed deficiency in feedback to students regarding suggested improvements. Trust has process in place. Nursing & Midwifery Group feeds back to sisters on units but Trust not sure how information is disseminated to team. Staff comments on service improvement welcome - tries to align with QIPP agenda. Trust working with HEI to encourage student feedback – will give a prize. Panel asked how the committees combine. There are many groups which feed into one another and this needs to be reviewed. Rating to be Amber as there are processes in place but not yet aligned

Key Performance Indicators	Trust Self assessment	Evidence	Agreed Rag rating	
KPI 2.				
The organisation provides high quality learning environments for students		Governance		No CQC issues. Education Governance Group in place. If there were a CQC issue with students, all areas have internal processes to address this – risks would be assessed and sent to right place.
		Investment		LQAF amber.
		Improvement		<p>Although in small numbers, there was significant comment regarding:</p> <p>(i) Lack of mentors and mentors not enjoying role. To determine true number of mentors, the Midwifery/Adult Nursing databases were being aligned and linked in ESR.</p> <p>(ii) Working with agency staff. Agency usage stopped from 01.12.12. In Midwifery, more senior staff now considering mentorship role.</p> <p>Trust will support students if they felt there were issues to raise, would investigate and work with HEI. Strategically, there were governance meetings and risks go through process, making a very robust procedure. Risk Manager attends meetings. Mock CQC visits held in clinical areas.</p>
KPI 3.				
Students are adequately prepared by the provider organisation to deliver high quality care		Governance		<p>Queries around assurance that AHP students comply with mandatory training. Trust could not give evidence that it is consistent. Measurement will be through OLM system eventually, when it is upgraded, as it will then allow students to be added. Mandatory training tailored to job roles. Programme for students broadly similar to retained staff and plan is for all mandatory training to be delivered by Trust staff.</p> <p>Good involvement in recruitment. Induction covers core values.</p>
		Investment		Lack of awareness of the NHS Pre-registration improvement projects therefore this needs to be considered
		Improvement		<p>Employment of students occurs.</p> <p>Rating will be Amber but benchmarked across region. Action Plan to address Induction training.</p>

Key Performance Indicators	Trust Self assessment	Evidence	Agreed Rag rating	
KPI 4.				
Students are effectively supported, educated and assessed by the provide organisation		Governance		Robust mentor registers in place for Nursing and Midwifery. Registers to be combined in ESR.
				Process in place to manage students giving cause for concern. Charge Nurse/Link Lecturer/Mentor would highlight path to be taken.
				Fitness to Practise Policy in place. Serious issues escalated immediately. Student Nurses supported in serious situations by tutors. PEF has written guidance for mentors. Process considered robust.
		Investment		Demonstrated.
		Improvement		Service users not yet included in assessment of student.
KPI 5.				
Provider organisations demonstrate effective utilisation of the Multi-Professional Education and Training Levy (MPET) investment		Governance		Regular meeting of sub-group
		Investment		LQAF amber – lead criteria. If amber whole KPI is rated amber
		Improvement		What are the plans for systematically considering whether expected outcomes have been achieved?
				Trust is evaluating in many areas. Linking education plans with service delivery. Linking investment in training to improvement in care. Business focussed – business skills training provided. Business intelligence gathers information to inform education planning.
				Operational pressures may cause CPD underspend. Projects will be considered, also the sharing of funds with other Trusts. CPD Investment Plan 2013-14 will link with Transformation Fund projects and identify future training requirements.