

Health Education East of England
Dean's Report April 2014 - Published Items

Item number	Domain	Programme code	Programme name	Priority Specialist	Please list the level of review/audit	Concern/good practice/ concern or good practice	Description of concern/good practice	When was the concern/good practice identified? (DATE: day/month/year)	Concise, DCLL 2.6.5 to October 2013/When initially identified	How was the concern/good practice identified? (GMC Visit, Deanery/LETB Visit, NTS etc.)	List the actions taken. For good practice items, what was the impact and/or the money/LETB encouraged the sharing of this good practice locally/regionally/other?	What further actions are planned to address the concern? For good practice items, how has the money/LETB encouraged the sharing of this good practice locally/regionally/other?	Monitoring, evidence and outcomes and April 2013 update	Update October 2013 What was the outcome, what actions were taken and what monitoring mechanisms are in place?	Update April 2014 What was the outcome, what actions were taken and what monitoring mechanisms are in place?	Concerns ONLY Criteria for concerns/when issue was resolved (DATE: month/year)	Concerns ONLY Criteria for concerns/when issue was resolved (DATE: month/year)	Concerns ONLY Criteria for concerns/when issue was resolved (DATE: month/year)	Person responsible	Name and describe engagement with other stakeholders (school or other healthcare providers if applicable)
EOE012-15	South Essex NHS Trust	5	EE028	Emergency medicine	AM	Concern	The Trust should take steps to address effective team engagement and to be able to provide evidence of the effectiveness of this. (one year)	2012/11	2013/01	Deanery Visit 12 May 2011	Internal representative visited to assess medical and dental Education Committee meetings. Clinical Trust Fire was launched.	The Deanery will also review the Trust on 10 May 2012.	The Trust has confirmed the progress made in EME and the actions taken to address the concerns. The Trust has confirmed the progress made in EME and the actions taken to address the concerns. The Trust has confirmed the progress made in EME and the actions taken to address the concerns.	The Trust has confirmed the progress made in EME and the actions taken to address the concerns. The Trust has confirmed the progress made in EME and the actions taken to address the concerns. The Trust has confirmed the progress made in EME and the actions taken to address the concerns.	Stage 30: Monitoring Progress - Actions are being implemented, and there is evidence of improvement through monitoring.	None	None	None	None	None
EOE012-20	Baillien and Thurrock University Hospitals NHS Foundation Trust	5	EOE028	Emergency medicine	AM	Concern	The levels of non-registrar middle grade support for emergency medicine and GMC staff to be addressed as a matter of priority will be formally reviewed through School visits. (Domains 1 & 3) (3 months)	2012/11	2013/01	Deanery Visit 28 July 2011	The Trust has reviewed the levels of staffing and approved an internal representative to attend medical and dental Education Committee meetings. Trust sought immediate feedback from PCU/GPST trainees regarding night shifts with support supervisor on graduation. Comprehensive feedback also sought from all doctors in EME including middle grade and night shifts in September 2011 confirming that supervision is good despite heavy workload. Subsequent action plan: Planned increase in EME staffing numbers including 4 additional middle grade. Review of night shifts grade cover. PCU and GPSTs not to be engaged in EME at any time. Actions to be reviewed at next School of EME visit.	Trust to provide confirmation and evidence that these actions were delivered and have resulted in the actions being monitored will also occur through School visits, action plan updates and local and GMC surveys.	The Trust has confirmed the progress made in EME and the actions taken to address the concerns. The Trust has confirmed the progress made in EME and the actions taken to address the concerns. The Trust has confirmed the progress made in EME and the actions taken to address the concerns.	A Joint Foundation/EM visit with GMC representation was undertaken in October 2013. The Trust was requested to make any further positive changes to the current EME structure. The Trust has confirmed the progress made in EME and the actions taken to address the concerns. The Trust has confirmed the progress made in EME and the actions taken to address the concerns.	The Trust has confirmed the progress made in EME and the actions taken to address the concerns. The Trust has confirmed the progress made in EME and the actions taken to address the concerns. The Trust has confirmed the progress made in EME and the actions taken to address the concerns.	Stage 30: Monitoring Progress - Actions are being implemented, and there is evidence of improvement through monitoring.	Trust Senior Management Team including Clinical Team and College Tutor.	Yes	None	None
EOE012-26	Cambridge University Hospitals NHS Foundation Trust	1,5	EOE014, EOE041, EOE051	Plastic surgery	AM	Concern	After recognising the positive response to the suggestion of consultant undertaking, the Deanery requires evidence of the actions taken as a result of the review. (one year and re-evaluation 3 months)	12/11/11	12/11/11	Deanery Visit 10 November 2012	Action plan to be reviewed by 15 Feb 13	Monitoring will occur through School visits, review of action plans and local and GMC surveys.	Internal feedback indicates good progress. The Trust has been reviewed by GMC in February 2013. The Trust has confirmed the progress made in EME and the actions taken to address the concerns. The Trust has confirmed the progress made in EME and the actions taken to address the concerns.	The Trust has confirmed the progress made in EME and the actions taken to address the concerns. The Trust has confirmed the progress made in EME and the actions taken to address the concerns. The Trust has confirmed the progress made in EME and the actions taken to address the concerns.	Stage 30: Monitoring Progress - Actions are being implemented, and there is evidence of improvement through monitoring.	Medical Director / Clinical Team / GMC	Yes	None	None	
EOE012-28	Cambridge University Hospitals NHS Foundation Trust	1,5	EOE051	Plastic surgery	AM	Concern	The concerns in Plastic Surgery year on year are addressed that the Deanery requires a more detailed plan of how these will be addressed and how (3 months)	10/11/11	10/11/11	Deanery Visit 10 November 2011 and GMC Training Survey 2011	Action plan to be reviewed by 10 Feb 12	Monitoring will occur through School visits, review of action plans and local and GMC surveys.	Internal feedback indicates good progress. The Trust has been reviewed by GMC in February 2013. The Trust has confirmed the progress made in EME and the actions taken to address the concerns. The Trust has confirmed the progress made in EME and the actions taken to address the concerns.	The Trust has confirmed the progress made in EME and the actions taken to address the concerns. The Trust has confirmed the progress made in EME and the actions taken to address the concerns. The Trust has confirmed the progress made in EME and the actions taken to address the concerns.	Stage 30: Monitoring Progress - Actions are being implemented, and there is evidence of improvement through monitoring.	Medical Director / Clinical Team / GMC	Yes	Royal College of Surgeons Tutor for local schools.	1) The Regional Advisor sits on the Specialty Training Committee. 2) The Head of School provides an annual specialty report to the College. 3) Deanery reports on updates to the Head of School.	
EOE012-30	South Essex University Hospital NHS Foundation Trust	1,5	EOE014, EOE049, EOE051	Clinical oncology	AM	Concern	The concerns regarding training in clinical oncology, respiratory medicine and GMC staff to be addressed as a matter of priority will be formally reviewed through School visits. (Domains 1 & 3) (3 months)	12/12/11	12/12/11	Deanery Visit 12 December 2011	Action plan to be reviewed by 5 Mar 12	To be determined after receipt of action plan.	Clinical oncology continues to experience problems but there are positive indicators in some areas of training but the Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year.	HEE's response (February 2014) The Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year.	HEE will continue to monitor progress with the Deanery in the light of the GMC survey 2014.	Stage 30: Monitoring Progress - Actions are being implemented, and there is evidence of improvement through monitoring.	Clinical Head of School	None	None	
EOE012-30	South Essex University Hospital NHS Foundation Trust	1,5	EOE014, EOE049, EOE051	Obstetrics and gynaecology	AM	Concern	The concerns regarding training in clinical oncology, respiratory medicine and GMC staff to be addressed as a matter of priority will be formally reviewed through School visits. (Domains 1 & 3) (3 months)	12/12/11	12/12/11	Deanery Visit 12 December 2011	Action plan to be reviewed by 5 Mar 12	To be determined after receipt of action plan.	Clinical oncology continues to experience problems but there are positive indicators in some areas of training but the Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year.	HEE's response (February 2014) The Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year.	HEE will continue to monitor progress with the Deanery in the light of the GMC survey 2014.	Stage 30: Progress was made in the last year. The Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year.	Head of School / Clinical Head of School / GMC	None	None	
EOE012-33	Devesley Hills	1,5	EOE020, EOE049, EOE051, EOE053	Care Psychiatry Training, Old age psychiatry, Psychiatry of learning disability, Child and adolescent psychiatry, Forensic psychiatry, General Psychiatry	AM	Concern	GMC Training Survey 2011 confirmed School of Psychiatry concerns regarding the quality and outcomes of the training programme. To continue a identified high levels of negative outliers across all domains and training programmes. Overall satisfaction with training in Psychiatry was average the lowest in the UK.	01/01/11	01/01/11	GMC Training Survey 2011 and Deanery Quality Management Framework	The Head of School of Psychiatry undertook a specific specific of post survey confirming the areas of concern, in particular concerns around recruitment and retention and the quality of the academic training programme. The Head of School therefore initiated a number of actions to address these concerns. 1) A specific specific of post survey was undertaken to confirm the areas of concern. 2) A specific specific of post survey was undertaken to confirm the areas of concern. 3) A specific specific of post survey was undertaken to confirm the areas of concern. 4) A specific specific of post survey was undertaken to confirm the areas of concern.	Dean's Performance and Quality Review. Visits have been completed for Mental Health Trusts. While the Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year.	HEE will continue to monitor progress against the action plan. The Head of School will undertake an independent Review of training within the Department by an external Consultant in November 2013. As a result of this review, further changes have been made to practice within the department to further enhance clinical and educational experience and the performance of workplace based assessments.	Stage 30: Monitoring Progress - Actions are being implemented, and there is evidence of improvement through monitoring.	Head of School of Psychiatry / GMC	None	Royal College of Psychiatry through Head of School (post agreement between Deanery and College). Equipment with College Tutors and Mental Health Trusts.			
EOE012-36	Devesley Hills	1, 2, 3, 4, 6, 7, 8, 9	EOE014, EOE053, EOE051, EOE048	Paediatrics and Adolescent Medicine, Geriatric medicine, Clinical pharmacology and Therapeutics, Plastic surgery, Paediatric Radiology, Paediatric Radiology	AM	Concern	The GMC Training Survey 2011 identified a significant number of negative outliers across all domains and training programmes in the UK.	01/01/12	01/01/12	Deanery Quality Management Framework and GMC Training Survey 2011	Internal Health of School and TPOs required to investigate findings and provide the Deanery with an appropriate action plan to address any confirmed areas of practice concern.	1) Geriatric Medicine. The 2013/12 results show an improvement in the GMC survey results for Geriatric Medicine. The Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year.	Progress is being closely monitored by our Head of School of Surgery including training within the Department by an external Consultant in November 2013. As a result of this review, further changes have been made to practice within the department to further enhance clinical and educational experience and the performance of workplace based assessments.	Stage 30: Monitoring Progress - Actions are being implemented, and there is evidence of improvement through monitoring.	Head of School and TPOs	None	None			
EOE012-37	Devesley Hills	1, 2, 3, 4, 6, 7, 8, 9	EOE057	Obstetrics and gynaecology	AM	Concern	The GMC Training Survey 2011 identified a significant number of negative outliers across all domains and training programmes in the UK.	01/01/11	01/01/11	Deanery Quality Management Framework and GMC Training Survey 2011	Head of School of GMC developed action plan in response to the GMC Training Survey 2011. The Deanery will continue to monitor progress through its quality management processes and the GMC survey results 2013.	There have been improvements in the GMC survey results across all domains. The Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year.	Progress is being closely monitored by our Head of School of Surgery including training within the Department by an external Consultant in November 2013. As a result of this review, further changes have been made to practice within the department to further enhance clinical and educational experience and the performance of workplace based assessments.	Stage 30: Monitoring Progress - Actions are being implemented, and there is evidence of improvement through monitoring.	Head of School of GMC	None	Royal College of Obstetrics and Gynaecology. Head of School presented talk on building and enhancing to RCOG. RCOG have major concerns over the RCOG. RCOG have major concerns over the RCOG. RCOG have major concerns over the RCOG.			
EOE012-41	Baillien and Thurrock University Hospitals NHS Foundation Trust	1,5, 6	EOE031	Anaesthetics	AM	Concern	The GMC Training Survey 2011 identified a significant number of negative outliers across all domains and training programmes in the UK.	01/01/11	01/01/11	GMC Training Survey 2011	These findings have also been identified by the Trust staff and their action plan included: 1) Further training of educational and clinical supervisors. 2) The establishment of an anaesthetics educational body group to quality control training and 3) the introduction of competency assessments. The Deanery will continue to monitor progress through its quality management processes and the GMC survey results 2013.	There have been improvements in anaesthetics at Baillien as the Trust is in the top 10 of the GMC survey 2012. The Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year.	Progress is being closely monitored by our Head of School of Anaesthetics including training within the Department by an external Consultant in November 2013. As a result of this review, further changes have been made to practice within the department to further enhance clinical and educational experience and the performance of workplace based assessments.	Stage 30: Monitoring Progress - Actions are being implemented, and there is evidence of improvement through monitoring.	Head of School of Anaesthetics	None	Equality for the visit will be sought from the Royal College of Anaesthetics.			
EOE012-43	Devesley Hills	3	NA	NA	AM	Concern	The report appears to indicate that the Deanery has a low level of overall "positive" outcomes compared to the rest of the UK. The Deanery will continue to monitor progress through its quality management processes and the GMC survey results 2013.	01/01/11	01/01/11	GMC ACP/PRITA Data Collection	The Deanery will continue to monitor progress through its quality management processes and the GMC survey results 2013.	At this stage, the Deanery has been unable to complete a full review analysis of the data submitted to the GMC. The Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year.	HEE will continue to monitor progress with the Deanery in the light of the GMC survey 2014.	Monitoring is ongoing.	Senior Management Team	At all stages - through the provision of education to the ACP/PRITA process.				
EOE012-09	West Hertfordshire Hospitals NHS Trust	1,6	EOE028	Emergency medicine	AM Foundation	Concern	The following concerns were identified as a result of the GMC Training Survey 2011: 1) The Deanery requires a more detailed plan of how these will be addressed and how (3 months)	01/10/11	01/10/11	Deanery Visit	The Deanery with representation from the GMC and North Thames Foundation School visited in April 2012. The Deanery will continue to monitor progress through its quality management processes and the GMC survey results 2013.	Monitoring will occur through School visits, review of action plans and local and GMC surveys.	The NTS Survey 2013 indicated that the training programme was being delivered in a satisfactory manner. The Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year. The Deanery has been reviewing the training in the last year.	HEE will continue to monitor progress against the action plan. The Head of School will undertake an independent Review of training within the Department by an external Consultant in November 2013. As a result of this review, further changes have been made to practice within the department to further enhance clinical and educational experience and the performance of workplace based assessments.	Stage 30: Monitoring Progress - Actions are being implemented, and there is evidence of improvement through monitoring.	Senior Management Team	Royal College of Emergency Medicine and the Foundation School. 1) The Regional Advisor sits on the Specialty Training Committee. 2) The Head of School provides an annual specialty report to the College. 3) Deanery reports on updates to the Head of School. The North West Thames Foundation School Director attended the visit.			

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Item number	Trust	Domain	Programme code	Programme name	Trust Specialty	Please list the level of concern or good practice	Concern/good practice concern or good practice	Description of concern/good practice	When was the concern/good practice identified? (DATE: day/month/year)	Expected DCLL 245 to October 2013/When initially identified	ACTION PLAN (This action plan will be published on the GMC website)		Monitoring, evidence and outcomes and April 2013 update	Update October 2013 Were any DR systems, what actions were taken and what monitoring mechanisms are in place?	Update April 2014 What was the outcome, what action's status and what monitoring mechanisms are in place?	Concerns ONLY Describe by month/quarter issue was resolved (DATE: month/year)	Concerns ONLY Date of the issue or reporting	Person responsible	Name and describe engagement with colleagues/medical school or other healthcare regulators if any
											How was the concern/good practice identified? (GMC Visit, Desmery/LETB Visit, NTS data, etc)	List the actions taken. For good practice items, what was the impact and/or the improvement achieved?							
EDE1013-20	East and North Hertfordshire NHS Trust	1,6	EDE054, EDE058, EDE059, EDE060, EDE061, EDE062, EDE063, EDE064	Trauma and orthopaedic surgery, Emergency medicine, General Surgery, General Internal Medicine, Respiratory medicine, Acute Internal Medicine, Ophthalmology, Clinical oncology	Trauma and orthopaedic surgery, Emergency medicine, General Surgery, General Internal Medicine, Respiratory medicine, Acute Internal Medicine, Ophthalmology, Clinical oncology	Foundation Core, Higher	Concern	The 2013 NTS free text comments identified patient safety concerns in these specialties. PSC - known items: 1-FA-389, 1-199-46, 1-108-141, 1-108-233, 1-102-581, 1-238-107, 1-108-2, 1-102-581, 1-102-581, 1-107-191, 1-102-323, 1-102-108, 1-218-040, 1-238-342, 1-105-10, 1-108-181, 1-238-261, 1-111-12, 1-191-329, 1-238-34, 1-108-329, 1-107-389, 1-199-207	01/05/13	NTS data	All patient safety concerns were shared with the Trust's Medical Director and Clinical Team for investigation and a response formulated. Responses were reported as required by the GMC in the spreadsheet submitted in July 2013. All Trusts now have action plans in place to address both known and previously unknown concerns which will be monitored through HEED's quality management processes. In addition, HEED has carried out an in-depth analysis of the free text comments on a Trust by Trust basis comparing each concern raised according to locally defined criteria. The statistical outcome of this analysis is in the process of being disseminated to each Trust, the relevant Quality Surveillance Groups, Health Education England, and a preliminary report has already been shared with the GMC. These concerns are linked to the DR items EDE043-91; EDE044-046.	HEED will continue to monitor the actions taken by the Trust through its quality management processes.	Monitoring is ongoing		HEED will continue to monitor progress with the actions taken by the Trust and will review and integrate these with the 2014 GMC survey results and patient safety concerns free text comments. The findings will inform both HEED's next Quality and Performance Review visit to the Trust and the Trust's quality management processes.		Trust and HEED		
EDE1013-21	Hertfordshire PCT	1,6	EDE016	General Practice	General Practice	GP	Concern	The 2013 NTS free text comments identified patient safety concerns in the specialty. PSC - new item: 1-198-115	01/05/13	NTS data	All patient safety concerns were shared with the Trust's Medical Director and Clinical Team for investigation and a response formulated. Responses were reported as required by the GMC in the spreadsheet submitted in July 2013. All Trusts now have action plans in place to address both known and previously unknown concerns which will be monitored through HEED's quality management processes. In addition, HEED has carried out an in-depth analysis of the free text comments on a Trust by Trust basis comparing each concern raised according to locally defined criteria. The statistical outcome of this analysis is in the process of being disseminated to each Trust, the relevant Quality Surveillance Groups, Health Education England, and a preliminary report has already been shared with the GMC. This concern is not linked to a DR item but are known items subject to routine Desmery quality management processes.	The concern was fully investigated at a local level by the responsible Trusting Programme Director who interviewed both patient and the trainee. The issue proved to be a false alarm and appropriate support has been provided. HEED will continue to monitor the actions taken by the Trust through its quality management processes.	Monitoring is ongoing	HEED will continue to monitor progress with the actions taken by the Trust and will review and integrate these with the 2014 GMC survey results and patient safety concerns free text comments. The findings will inform both HEED's next Quality and Performance Review visit to the Trust and the Trust's quality management processes.		Trust and HEED			
EDE1013-22	Hertsghouse Health Care NHS Trust	1,6	EDE054, EDE057, EDE058, EDE060	Trauma and orthopaedic surgery, Ophthalmology, General Internal Medicine, Rheumatology	Trauma and orthopaedic surgery, Ophthalmology, General Internal Medicine, Rheumatology	Foundation Higher	Concern	The 2013 NTS free text comments identified patient safety concerns in these specialties. PSC - known items: 1-104-311, 1-104-395, 1-104-100, 1-222-440, 1-104-100, 1-104-311	01/05/13	NTS data	All patient safety concerns were shared with the Trust's Medical Director and Clinical Team for investigation and a response formulated. Responses were reported as required by the GMC in the spreadsheet submitted in July 2013. All Trusts now have action plans in place to address both known and previously unknown concerns which will be monitored through HEED's quality management processes. In addition, HEED has carried out an in-depth analysis of the free text comments on a Trust by Trust basis comparing each concern raised according to locally defined criteria. The statistical outcome of this analysis is in the process of being disseminated to each Trust, the relevant Quality Surveillance Groups, Health Education England, and a preliminary report has already been shared with the GMC. These concerns are not linked to a DR item but are known items subject to routine Desmery quality management processes.	HEED will continue to monitor the actions taken by the Trust through its quality management processes.	Monitoring is ongoing	HEED will continue to monitor progress with the actions taken by the Trust and will review and integrate these with the 2014 GMC survey results and patient safety concerns free text comments. The findings will inform both HEED's next Quality and Performance Review visit to the Trust and the Trust's quality management processes.		Trust and HEED			

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Item number	Domain	Programme code	Programme name	Post Specialty	Please list the level of response achieved	Concern/good practice concern or good practice	Description of concern/good practice	When was the concern/good practice identified? (DATE: day/month/year)	ACTION PLAN (This action plan will be published on the GMC website)			Monitoring, evidence and outcomes and April 2013 update	Update October 2013 Were any actions taken, what actions remain and what monitoring mechanisms are in place?	Update April 2014 Were any actions taken, what actions remain and what monitoring mechanisms are in place?	Concerns ONLY Confirmed by GMC/CPDs/CPDs Date received (DATE: month/year)	Concerns ONLY CPDs at the time of reporting	Concerns ONLY CPDs at the time of reporting	Person responsible	Name and describe engagement with colleagues/clinical school or other healthcare regulators if any
									How was the concern/good practice identified? (GMC Visit, Deans/LETB Visit, NTS data, etc)	List the actions taken	What further actions are planned to address the concern? For good practice items, how has the Deans/LETB encouraged the sharing of this good practice locally/proxy/through/LETB?								
EDE1013-20	Framingham and Safford Hospitals NHS Foundation Trust	EDE017, EDE020, EDE025, EDE028, EDE039	General and geriatric medicine, Acute Internal Medicine, General Practice, General (Internal) medicine, Emergency medicine, General Surgery, Geriatric medicine	General and geriatric medicine, Acute Internal Medicine, General Practice, General (Internal) medicine, Emergency medicine, General Surgery, Geriatric medicine	Conc. Foundation, Higher	Concern	The 2013 NTS free text comments identified patient safety concerns in these specialties. PSC - known items: 1-11P9S-289, 1-1625-160, 1-FA303, 1-HEE-107, 1-2045-52, 1-2237-301, 1-209-240, 1-32P0P, 1-21P118, 1-102A-183, 1-6A478, 1-102B-27, 1-24K-30, 1-10G1-278	01/05/13	NTS data	All patient safety concerns were shared with the Trust's Medical Director and Clinical Team for investigation and a response formulated. Responses were reported as required by the GMC in the spreadsheet submitted in July 2013. All Trusts now have action plans in place to address both known and previously unknown concerns which will be monitored through HEED's quality management processes. In addition, HEED has carried out an in-depth analysis of the free text comments on a Trust by Trust basis categorising each concern raised according to locally defined criteria. The statistical outcome of this analysis is in the process of being disseminated to each Trust, the relevant Quality Surveillance Groups, Health Education England, and a preliminary report has already been shared with the GMC. The concerns are not linked to a DR item but are known items subject to routine Deans/Quality management processes.	HEED will continue to monitor the actions taken by the Trust through its quality management processes.	Monitoring is ongoing.	HEED will continue to monitor progress with the actions taken by the Trust and will review and investigate these with the 2014 GMC survey results and patient safety concerns feedback comments. The findings will inform both HEED's next Quality and Performance Review visit to the Trust and the School's quality management processes.	Stage 30: Monitoring Progress - Actions are being implemented, and there is evidence of improvement through monitoring.	Trust and HEED				
EDE1013-31	Eastford University Hospital NHS Foundation Trust	EDE034, EDE037, EDE038, EDE040, EDE041, EDE042, EDE043, EDE044, EDE045	Trauma and orthopaedic surgery, Gastroenterology, Anaesthetics, Paediatrics, Emergency medicine, General (Internal) medicine, Obstetrics and gynaecology, Emergency medicine, Clinical oncology, Endocrinology and diabetes medicine, General medicine, General Surgery	Trauma and orthopaedic surgery, Gastroenterology, Anaesthetics, Paediatrics, Emergency medicine, General (Internal) medicine, Obstetrics and gynaecology, Emergency medicine, Clinical oncology, Endocrinology and diabetes medicine, General medicine, General Surgery	Conc. Foundation, Higher	Concern	The 2013 NTS free text comments identified patient safety concerns in these specialties. PSC - known items: 1-10GA-331, 1-102B-378, 1-8V1-13, 1-8M4-115, 1-8B-2070, 1-42-165, 1-1027-63, 1-160K-88, 1-1-1027-125, 1-17B-120, 1-1UR8-497, 1-1P1-100, 1-2107-207, 1-8A022, 1-18UR-214, 1-2227-228, 1-1-F1-1894, 1-1UR8-511, 1-18UR-573, 1-18UR-382	01/05/13	NTS data	All patient safety concerns were shared with the Trust's Medical Director and Clinical Team for investigation and a response formulated. Responses were reported as required by the GMC in the spreadsheet submitted in July 2013. All Trusts now have action plans in place to address both known and previously unknown concerns which will be monitored through HEED's quality management processes. In addition, HEED has carried out an in-depth analysis of the free text comments on a Trust by Trust basis categorising each concern raised according to locally defined criteria. The statistical outcome of this analysis is in the process of being disseminated to each Trust, the relevant Quality Surveillance Groups, Health Education England, and a preliminary report has already been shared with the GMC. These concerns are linked to DR item EDE12-30 (D&G and	HEED will continue to monitor the actions taken by the Trust through its quality management processes.	Monitoring is ongoing.	HEED will continue to monitor progress with the actions taken by the Trust and will review and investigate these with the 2014 GMC survey results and patient safety concerns feedback comments. The findings will inform both HEED's next Quality and Performance Review visit to the Trust and the School's quality management processes.	Stage 30: Monitoring Progress - Actions are being implemented, and there is evidence of improvement through monitoring.	Trust and HEED				
EDE1013-32	The Princess Alexandra Hospital NHS Trust	EDE056, EDE054, EDE054, EDE070, EDE070, EDE070	Intensive care medicine, Trauma and orthopaedic surgery, Cardiology, Acute Internal Medicine, General medicine, General Surgery	Intensive care medicine, Trauma and orthopaedic surgery, Cardiology, Acute Internal Medicine, General medicine, General Surgery	Foundation Higher	Concern	The 2013 NTS free text comments identified patient safety concerns in these specialties. PSC - known items: 1-24K-103, 1-42K-863, 1-FS-358, 1-1UC1-442, 1-22P-222, 1-24N-451, 1-FS-106, 1-1UFD-296, 1-CT-246	01/05/13	NTS data	All patient safety concerns were shared with the Trust's Medical Director and Clinical Team for investigation and a response formulated. Responses were reported as required by the GMC in the spreadsheet submitted in July 2013. All Trusts now have action plans in place to address both known and previously unknown concerns which will be monitored through HEED's quality management processes. In addition, HEED has carried out an in-depth analysis of the free text comments on a Trust by Trust basis categorising each concern raised according to locally defined criteria. The statistical outcome of this analysis is in the process of being disseminated to each Trust, the relevant Quality Surveillance Groups, Health Education England, and a preliminary report has already been shared with the GMC. The concerns relating to Acute Medicine are linked to DR item EDE13-25. All other concerns are not linked to a specific DR item but are known items subject to routine Deans/Quality management processes.	HEED will continue to monitor the actions taken by the Trust through its quality management processes.	Monitoring is ongoing.	HEED will continue to monitor progress with the actions taken by the Trust and will review and investigate these with the 2014 GMC survey results and patient safety concerns feedback comments. The findings will inform both HEED's next Quality and Performance Review visit to the Trust and the School's quality management processes.	Stage 30: Monitoring Progress - Actions are being implemented, and there is evidence of improvement through monitoring.	Trust and HEED				
EDE1013-33	The Queen Elizabeth Hospital, King's Lynn, NHS Foundation Trust	EDE056, EDE058, EDE059, EDE060, EDE061, EDE062	General (Internal) medicine, General Surgery, Geriatric medicine, Emergency medicine, Trauma and orthopaedic surgery, Acute Internal Medicine	General (Internal) medicine, General Surgery, Geriatric medicine, Emergency medicine, Trauma and orthopaedic surgery, Acute Internal Medicine	F1, F2, CT1, Higher	Concern	The 2013 NTS free text comments identified patient safety concerns in these specialties. PSC - known items: 1-1UR8-278, 1-21Y3-80, 1-21F3-402, 1-160K-88, 1-2207-983, 1-2227-209, 1-22K5-108, 1-102B-202, 1-208-16, 1-471MBE, 1-8K-3008, 1-1UR8-302, 1-1UR8-302, 1-24K-103, 1-42K-863, 1-8B-4-1, 1-8B-223	01/05/13	NTS data	All patient safety concerns were shared with the Trust's Medical Director and Clinical Team for investigation and a response formulated. Responses were reported as required by the GMC in the spreadsheet submitted in July 2013. All Trusts now have action plans in place to address both known and previously unknown concerns which will be monitored through HEED's quality management processes. In addition, HEED has carried out an in-depth analysis of the free text comments on a Trust by Trust basis categorising each concern raised according to locally defined criteria. The statistical outcome of this analysis is in the process of being disseminated to each Trust, the relevant Quality Surveillance Groups, Health Education England, and a preliminary report has already been shared with the GMC. The concerns relating to General Surgery are not linked to a specific DR item but are known items subject to routine Deans/Quality management processes.	HEED will continue to monitor the actions taken by the Trust through its quality management processes.	Monitoring is ongoing.	HEED will continue to monitor progress with the actions taken by the Trust and will review and investigate these with the 2014 GMC survey results and patient safety concerns feedback comments. The findings will inform both HEED's next Quality and Performance Review visit to the Trust and the School's quality management processes.	Stage 30: Monitoring Progress - Actions are being implemented, and there is evidence of improvement through monitoring.	Trust and HEED				
EDE1013-34	West Essex PCF	EDE064	General Practice	General Practice	313	Concern	The 2013 NTS free text comments identified patient safety concerns in these specialties. PSC - known items: 1-8F-677, 1-8E-260, 1-1FA-105, 1-21N-658	01/05/13	NTS data	All patient safety concerns were shared with the Trust's Medical Director and Clinical Team for investigation and a response formulated. Responses were reported as required by the GMC in the spreadsheet submitted in July 2013. All Trusts now have action plans in place to address both known and previously unknown concerns which will be monitored through HEED's quality management processes. In addition, HEED has carried out an in-depth analysis of the free text comments on a Trust by Trust basis categorising each concern raised according to locally defined criteria. The statistical outcome of this analysis is in the process of being disseminated to each Trust, the relevant Quality Surveillance Groups, Health Education England, and a preliminary report has already been shared with the GMC. This concern is not linked to a DR item and the view of our Head of School of General Practice is that this issue is not a patient safety concern and is being pursued through more appropriate processes. HEED therefore considers this issue	HEED will continue to monitor the actions taken by the Trust through its quality management processes.	Monitoring is ongoing.	HEED will continue to monitor progress with the actions taken by the Trust and will review and investigate these with the 2014 GMC survey results and patient safety concerns feedback comments. The findings will inform both HEED's next Quality and Performance Review visit to the Trust and the School's quality management processes.	Stage 30: Monitoring Progress - Actions are being implemented, and there is evidence of improvement through monitoring.	Trust and HEED				
EDE1013-35	West Hertfordshire Hospitals NHS Trust	EDE070, EDE038, EDE070, EDE038, EDE039, EDE039, EDE039, EDE039, EDE039, EDE039	Acute Internal Medicine, General Surgery, Obstetrics and gynaecology, Anaesthetics, General (Internal) medicine, Geriatric medicine, Oncology, Clinical oncology, Endocrinology and diabetes medicine, Gastroenterology	Acute Internal Medicine, General Surgery, Obstetrics and gynaecology, Anaesthetics, General (Internal) medicine, Geriatric medicine, Oncology, Clinical oncology, Endocrinology and diabetes medicine, Gastroenterology	Conc. Foundation, Higher	Concern	The 2013 NTS free text comments identified patient safety concerns in these specialties. PSC - known items: 1-11P9S-289, 1-216D-81, 1-1P74-13, 1-8V1-1, 1-102B-128, 1-HEE-107, 1-FA303, 1-1027-63, 1-1027-125, 1-17B-120, 1-1UR8-497, 1-1P1-100, 1-2107-207, 1-8A022, 1-18UR-214, 1-2227-228, 1-1-F1-1894, 1-1UR8-511, 1-18UR-573, 1-18UR-382	01/05/13	NTS data	All patient safety concerns were shared with the Trust's Medical Director and Clinical Team for investigation and a response formulated. Responses were reported as required by the GMC in the spreadsheet submitted in July 2013. All Trusts now have action plans in place to address both known and previously unknown concerns which will be monitored through HEED's quality management processes. In addition, HEED has carried out an in-depth analysis of the free text comments on a Trust by Trust basis categorising each concern raised according to locally defined criteria. The statistical outcome of this analysis is in the process of being disseminated to each Trust, the relevant Quality Surveillance Groups, Health Education England, and a preliminary report has already been shared with the GMC. These concerns are linked to DR items EDE13-25 (for General Surgery), EDE13-23, EDE13-20 and EDE13-20 (for Emergency Medicine), EDE13-28 (for Anaesthetics and EDE13-28 (for Anaesthetics and GDM). All other concerns are not linked to a specific DR item but are known items subject to routine Deans/Quality management processes.	HEED will continue to monitor the actions taken by the Trust through its quality management processes.	Monitoring is ongoing.	HEED will continue to monitor progress with the actions taken by the Trust and will review and investigate these with the 2014 GMC survey results and patient safety concerns feedback comments. The findings will inform both HEED's next Quality and Performance Review visit to the Trust and the School's quality management processes.	Stage 30: Monitoring Progress - Actions are being implemented, and there is evidence of improvement through monitoring.	Trust and HEED				

Health Education East of England
Dean's Report April 2014 - Published Items

Item number	Trust	Domain	Programme code	Programme name	Trust Specialty	Please list the level of concern/good practice	Concern/good practice concern or good practice	Description of concern/good practice	When was the concern/good practice identified? (DATE: day/month/year)	ACTION PLAN (This action plan will be published on the GMC website)			Monitoring, evidence and outcomes and April 2013 update	Update October 2013 What were the outcomes, what actions remain and what monitoring mechanisms are in place?	Update April 2014 What were the outcomes, what actions remain and what monitoring mechanisms are in place?	Concerns ONLY Describe by concern/date issue was resolved (DATE: month/year)	Concerns ONLY Date of the items of reporting	Concerns ONLY Date of the items of reporting	Person responsible	Name and describe engagement with college/physiological school or other healthcare regulators if any
										Colloquial/DLCL 2/3/4 to October 2013/When initially identified	How was the concern/good practice identified? (GMC Visit, Deans/LETB Visit, NTS etc, etc)	List the actions taken. For good practice items, what was the impact and/or the improvement achieved?								
EDE1013-36	West Suffolk NHS Foundation Trust	1, 6	EDE328, EDE329, EDE338	Emergency medicine, General Internal Medicine, General Surgery	Emergency Medicine, General Internal Medicine, General Surgery	Fr, ST, C13	Concern	The 2013 NTS has had concerns identified patient safety concerns in these specialties. PSC - known items: 1-ER-07, 1-GE-04G, 1-AFA-105, 1-1NHS-026	01/01/13	NTS data	10 patient safety concerns were shared with the Trust's Medical Director and Clinical Team for investigation and a response formulated. Responses were reported as required by the GMC in the spreadsheet submitted in July 2013. All Trusts now have action plans in place to address both known and previously unknown concerns which will be monitored through HEED's quality management processes. In addition, HEED has carried out an in-depth analysis of the free text comments on a Trust by Trust basis collating each concern raised according to locally defined criteria. The final outcome of this analysis is in the process of being disseminated to each Trust, the relevant Quality Surveillance Group, Health Education region, and a preliminary report has already been shared with the GMC. These concerns are not linked to specific DR items but are known items subject to routine Deans quality management	Monitoring in progress	HEED will continue to monitor the actions taken by the Trust through its quality management processes.	HEED will continue to monitor progress with the actions taken by the Trust and will review and integrate these with the 2014 GMC survey results and patient safety concerns free text comments. The findings will inform both HEED's new Quality and Performance Review visit to the Trust and the School's quality management processes.	Concerns ONLY Date of the items of reporting	Concerns ONLY Date of the items of reporting	Person responsible	Name and describe engagement with college/physiological school or other healthcare regulators if any		
EDE1013-37	LETS-Hale	1, 6	AS	AS	AS	AS	Concern	Following the initial analysis that HEED has undertaken (see Good Practice item above), it has clearly been identified that our patient actions are consistently expressing concerns regarding the potential for patient safety issues to arise as a result of high levels of workload and work intensity coupled with issues of understaffing within our acute Trusts. A contributory factor in that our ratings in significantly lower, compared to other trusts. This is highlighted within the GMC's 2013 report. The issue of medical education and practice in the UK 2013 demonstrating that the East of England currently only 6% of the total number of trainees nationally whereas our weighted equivalent indicates that this should be over 10%.	01/01/13	Analysis of GMC NTS Survey	Discussion of analysis HEED with and to the GMC.	Continued representation and dissemination to the appropriate fora.	NA	The GMC is satisfied that appropriate action has been taken and no further update is required.	This is now resolved.	Concerns ONLY Date of the items of reporting	Concerns ONLY Date of the items of reporting	Person responsible	Name and describe engagement with college/physiological school or other healthcare regulators if any	
EDE1013-38	Cambridge University Hospitals NHS Foundation Trust	1, 6		Ophthalmology			Concern	The School of Ophthalmology visited our Quality Management Unit on the 24 January 2014. The following issues were identified: 1) The Consultant body needs to be united in recognizing the value and importance of the role of the Specialist Tutor and trainees in maintaining the training and educational standards within the specialty, rather than allowing the pressure and the demands of the administrative to determine the direction of the Unit. 2) The roles of Specialist Tutor and Educational Supervisor are separated, with the Specialist Tutor can take a more over-arching role in making sure that the collective study of the trainees are met in the department. 3) There is a need to re-visit the arrangements regarding on-call and equate cover of ophthalmic patients. 4) The trainee rota needs to be under direct control of the Specialist Tutor. The Trust has provided an action plan within the required timeframe. However, in view of the gravity of the issues identified by the visit, HEED and the Royal College of Ophthalmologists have decided that it would be desirable that a further and early joint visit to the Department should take place to discuss the current issues more fully in order to evaluate the progress of the implementation of the Trust action plan to address the concerns raised. HEED will therefore undertake a follow up visit in July 2014.	24/01/14	School Visit	The Trust action plan received in light of concerns raised. Request to be undertaken in July 2014 to confirm that progress has been made.	To be determined	NA	NA	01/07/14	Stage 30: Progress not yet apparent - there is no change as yet, but has been ongoing monitoring and evaluation of actions.	Head of School and Training Programme Director	Yes		
EDE1013-39	Cambridge University Hospitals NHS Foundation Trust	1, 6		Clinical pharmacology and therapeutics			Concern	HEED School of Medicine in comparison with SAC representation from the RCP and GMC representation via a Quality Management Unit the Trust to review training in the Specialty on 10 March 2014. In light of the issues identified, the Trust was asked to provide an action plan to meet the following: 1. The new TPD should include a structured training programme which clearly demonstrates how trainees will meet all of the curriculum requirements, the proposal include a formal programme of Regional Training Days (currently being with other nearby LETBs) as well as with training days organised by the British Pharmacological Society. 2. The new TPD should map the proposed joint curriculum in order to clearly demonstrate how the CPT curriculum requirements are being met, the proposed joint curriculum should be submitted to the CPT SAC in time for it to be considered at its next meeting. 3. In future, all proposed joint programmes should be approved proactively by HEED and the SAC/PTB (in the relevant SAC) prior to commencement of the joint programme. 4. An assessment of the current programme should clearly state the educational objectives, there should be representatives from both specialties on the short listing and appointments committee. 5. All assesses should receive departmental induction within one week of joining the Programme, to happen on a full programme, this should cover both CPT and the relevant specialty.	10/03/14	School Visit	Action Plan received July 2014.	To be determined	NA	See previous entry	To be determined	Stage 1: Investigation - Verification of concerns is being undertaken and action plan not yet in place.	Head of School of Medicine	Yes		
EDE1013-40	Nottingham and Nottingham University Hospitals NHS Foundation Trust	1, 6	NA	NA	NA	NA	Concern	The School of Medicine visited our Quality Management Unit on the 3 January 2014 to review training in the specialty. In light of the issues identified, the Trust was asked to provide an action plan to address the following concerns by March 2014: • Trust-wide and Antibiotic: The wide copying of critical alerts which either cause or result in delay to identify the individual(s) concerned must cease with immediate effect. • CMT: All placements in A&E should be removed from CMT rotations and replaced by those which optimise the delivery of the CMT curriculum by August 2014 at the latest (ideally from April 2014). • Diagnostics: the workload of the genetics firm must be reduced so that the total number of patients under the firm can be safely managed by the current consultant establishment. An initiative number should be 200 or less patients, possible ways of achieving this include using the appropriate threshold for referring patients for genetic tests to the genetics firm to ensure that there is no responsibility for outliers (as is common in other trusts). Instead of the current practice of the present arrangements on patient safety, this matter should be addressed jointly (i.e. with the relevant SAC). It is recognized that any change will have an impact on the other medical specialties and it is requested that they are closely involved in designing the future service model. • Acute Medicine: Every effort should be made to recruit additional consultant acute physicians. It is anticipated that this will prove difficult, so, in the interim, consultant	09/01/14	School Visit	Action Plan received March 2014. All areas identified in visit report satisfactorily addressed. Ongoing monitoring to ensure sustainable.	To be determined	NA	See previous entry	To be determined	Stage 30: Monitoring Progress - Actions are being implemented, and there is evidence of improvement through monitoring.	Head of School of Medicine	Yes		
EDE1013-41	West Hertfordshire Hospitals NHS Trust	1, 6	Foundation Programme				Concern	The Foundation School visited the Trust on 19 March 2014. Identified a number of serious risk concerns relating to: 1) The management of acute medical patients, namely A&U trainees, lack of regular training systems, unsatisfactory clinical handover: failure to notify duty medical teams of transfers and/or doctors deterring patients deteriorating by ward nursing staff. 2) Concerning surgical procedures undertaken by F2 doctors, which should stop immediately. The Trust was asked to address these concerns as a matter of urgency and provided an action plan as required by 28th March.	19/03/14	School Visit	The Trust action plan received in light of the concerns identified highlighted the following actions relating to the A&U: 1. Reorganisation and necessary use of a structured tool with effect 15/03/14, including RAG - VTE risks. 2. Grand round presentation of the day. 3. Ward clerk (or senior nurse if after hours) in the ward from when a patient is being transferred will be responsible for ensuring the transfer is logged into PAS at the time of transfer. 4. Laminated poster to highlight process to be posted in every clinical ward area. 5. Morning handover A&U Level 1 & 2, all trainees to send representative. Supervised by consultant Acute Physician (AP) in Medicine, or call consultant for Surgery (if on for Surgery, then to Medicine). 6. Handover of patients from to Shift for PACU, from teams not on call, supervised by AP or consultant Physician of the day (PACU) on A&U level 1. 7. On to meet educational requirements by PACU (on A&U level 1). 8. Include a handover or induction training. 9. All 'inlets' or 'outlets' (all patients) must have doctor to doctor verbal handover before transfer. 10. All patients requiring consultant review to be identified in handover, and details given to A&U or PACU discharge consultant on-wardwork. In relation to surgical procedures (2), the Medical Director has confirmed that no consenting of procedures by foundation trainees should take place, unless supervised by a Consultant or suitably qualified higher trainee.	19/03/14	School Visit	The Foundation School will visit the Trust in conjunction with the School of Medicine on 8 May 2014 to review progress with the action plan and ensure that the concerns have been fully addressed.	NA	NA	01/05/14	Stage 2: Implementing Solutions - Action plan received, but not yet in place, but are to be fully implemented and evaluated.	Foundation School Director Clinical Tutor DMPT/PC	Yes