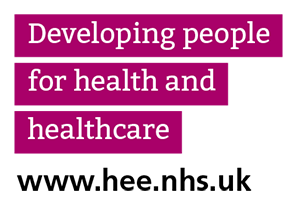
Form 2: Primary Care Network Recognition of Previously HEE Approved Educational Environments and Educators.

HEE London







May 2022

Contents

[Introduction 3](#_Toc115090120)

[Rationale for ongoing monitoring of educational environments and educators 3](#_Toc115090121)

[Responsibilities for Decision Making 3](#_Toc115090122)

[Appendix 1: Primary Care Network Recognition of Previously Approved Educational Environments and Educators. 4](#_Toc115090123)

[Appendix 2: Audit Tool for Primary Care Network Recognition of Previously Approved Educational Environments and Educators 7](#_Toc115090124)

[Appendix 3: Mandatory Actions 15](#_Toc115090125)

[Appendix 4: Sign Off 16](#_Toc115090126)

# Introduction

Health Education England (HEE) is responsible for the quality assurance of education and training of healthcare learners in England. Quality practice placement experiences, within a positive learning environment, support the development of healthcare professionals to deliver safe and effective person-centred care.

The Annual Quality Monitoring of Educational Environments and Educators in Primary and Community Care was created in May 2022 so that those individuals and organisations who provide education and training to healthcare learners understand their responsibilities and expectations in relation to practice placement learning.

This guide and self-assessment tool apply to any structured placement learning in NHS England (London Region) that is accessed by Post Graduate Medical and Dental and undergraduate Nurses, Midwives and Allied Health Professionals, Paramedics, Physician Associates and Pharmacy Foundation year and supported through an educational approval programme by HEE.

Following the launch of the Quality Standards for Practice Placements, this tool was developed in response to accompany and enable ongoing monitoring of the educational placements at organisations within HEE (London region).

It is envisaged that this tool will be used alongside the HEE Quality Framework which underpins all educational quality in England. In addition, this guide supports other tools developed by higher education institutes (HEIs) to meet professional bodies’ requirements of the General medical Council (GMC), General Dental Council (GDC), Nursing and Midwifery Council (NMC) and the Health and Care Professions Council (HCPC).

As such, the tool will become the main tool that practitioners will use annually to evidence the ongoing development and growth in the quality of the learning environment which supports all education in practice.

# Rationale for ongoing monitoring of educational environments and educators

HEE approves the recognition of placements that spans the provider, learning environment and educators. Each year all PCNs will need to undergo a self-assessment paper-based audit that provides assurance to HEE, the HEIs and Regulators that the placement and educators are driving and constantly building on the quality to continue training. Placements and educators will no longer go through a re-validation application after five years, as the initial approval is no longer time stamped. PCNs will conduct the self-assessment at scale and represent all locations and educators, then submit the tool directly to HEE for review.

# Responsibilities for Decision Making

The HEE Primary Care School is responsible for ensuring overall governance that the yearly review is consistent, fair and valid and alongside the QPSC department for advising the Postgraduate Dean accordingly.

# Appendix 1: Primary Care Network Recognition of Previously Approved Educational Environments and Educators.

**Extending current HEE Recognition of a placement provider**

* **This self-assessment tool is for those practices and educators that have already been approved individually by HEE to now be approved as a PCN.**
* If there are practices within the PCN that now wish to undertake training and placements, they must submit Form 1 Initial Recognition of New Educational Environments and New Educators in a Primary Care Network. They cannot be added to this tool, **this tool is solely for practices and educators that have been previously approved by HEE.**
* If they are practices that now wish to be approved, then both Form 1 and 2 can be submitted at the same time.
* The self-assessment tool will therefore need to be co-ordinated and sent in as a single application to represent the ‘at scale’ organisation.
* The applying organisation will therefore need to decide who takes leadership responsibility for the self-assessment tool. The representative conducting the self-assessment should include all sites and clinical professions that take leadership responsibility for education in that PCN.
* The applicant is defined as the person submitting the self-assessment tool on behalf of the primary care network.
* The self-assessment tool can be obtained from the London HEE Quality Team and HEE Website.
* The HEE team will provide information including the:
  + indicative timetable for recognition assessment from receipt of application to outcome
  + process for submission of the self-assessment, supporting evidence and mandatory action plan
* The applicant may initiate a telephone support conversation to discuss completion of self-assessment tool to ensure critical standards are likely to be met prior to a formal assessment. The applicant will be informed of any issues and the actions needed to address any issues.

**Submission**

* Completed self-assessment tool should be submitted to local Training Hub.
* Following submission, the self-assessment tool will be checked for errors and omissions.
* The Training Hub may contact the applicant to ask for copies of evidence used within the tool to meet the standard.

**Assessors**

* An assessment panel is not required to review the tool. The tool should be reviewed by a peer experience educator and a Training Hub lead.
* The experience educator must be a registered member of one of the professions of educators.
* The Training Hub is responsible for making recommendations to the HEE Primary Care School acting on behalf of the Postgraduate Dean.
* HEE will also inform each Training Hub of the assessment result and action plans in place. HEE will follow up on any action plans.

**Outcomes**

The possible outcomes are:

* Recommend continued recognition
* Recommend continued recognition with actions
* Not recommended for continued recognition

**Duration**

* All placements must undertake the self-assessment yearly to continue recognition.

**Feedback**

* Feedback to applicant will be provided by the HEE QPSC team.

**Notification of Outcome**

* The Training Hub will submit the final completed assessment tool to the Primary Care School and HEE QPSC Team.
* The Training Hub will also provide any feedback and, if necessary, advice on where further work or evidence is required.
* HEE will be responsible for notifying the HEI learner providers named in the application for recognition.

**HEE Appeals process**

* Any appeals with respect to the process or outcome must be made in writing within one month of notification of the decision and submitted to the Primary Care School.

**Escalation of Concerns**

HEE is responsible for ensuring that there are high quality learning environments for all healthcare learners in England. HEE recognition of placements in primary care and community settings is undertaken as part of HEEs remit to ensure that people are protected when learners care for them as part of their education and training, and those providing education and training meet HEE quality standards. To protect the public, HEE act on concerns when someone raises them, and the way HEE manages this is set out in ‘Raising and responding to concerns’.

HEE have signed [an agreement](about:blank) to help us share concerns with seven other system and professional regulators more effectively. The [‘Emerging Concerns Protocol’](about:blank) seeks to provide a clearly defined mechanism for organisations with a role in quality and safety of care provision to share information and intelligence that may indicate risks to users of services, their carers, families, or professionals. Such organisations may comprise NHSE/I, CQC and regulators.

Where risk or concerns are raised, HEE Local Quality Teams and Primary Care Schools will work together with placement and education providers and to address these concerns in accordance with the emerging concerns protocol.

With respect to placements:

* In the event of a report of a very serious concern HEE will remove the learner with immediate effect.
* If a concern is raised a whistleblowing report is received, a serious incident takes place, or HEE intelligence suggests that a recognised placement provider is no longer meeting HEE quality standards HEE reserves the right to undertake a review.
* HEE will share information and actions with Education Providers and Regulators and expects Education Providers and Regulators to do likewise.
* The purpose of the review is to identify if the placement provider continues to meet HEE Quality Standards.
* If the outcome of the review identifies concerns, the placement provider will be expected to put an action plan in place to mitigate these concerns and progress with addressing the concern/s via the action plan will be monitored by the HEE Quality Team.
* HEE Quality and the Primary Care School, as well as local Training Hub networks will work with placement providers to develop solutions to concerns raised.
* Any interventions will be in accordance with the HEE Intensive Support Framework. The policy of the Intensive Support Framework is to be supportive rather than punitive, but HEE will suspend training if required in the case of serious concerns.

**Notification of Major Change**

* A recognised placement provider must inform the HEE Quality Team of any major changes such a merger, sale of practice, change to educators as soon as they occur and not wait for the yearly self-assessment.
* The HEE Quality Team, in liaison with the Training Hub will review the change and notify the placement provider of any action needed.

**How HEE Uses Data**

* HEE’s privacy policy explains how HEE will use and protect any information they are given including any information about HEE sponsored training, education, and development.
* HEE process personal information because HEE has a legal obligation to do so or because it is necessary for the exercise of HEEs statutory functions or any other functions in the public interest. This includes the quality assurance of training programmes and ensuring that standards are maintained.
* The Applicants, Training Hubs, HEE Teams and the Primary Care School on behalf of the London Regional Dean must ensure that all data and information is securely stored in accordance with the requirements of HEE and the General Data Protection Regulations.

# Appendix 2: Audit Tool for Primary Care Network Recognition of Previously Approved Educational Environments and Educators

Completion of the audit tool:

• Include all currently approved educators and training locations within the PCN

• Include evidence on how the standard is being met

• Provide a description of the action required for the standard, if an action is currently not met then how it will be met in the future if the organisation is unable to provide evidence of that standard

• Complete all sections in blue of the tool, if sections cannot be evidenced or answered then a mandatory action plan will be developed to address

|  |  |
| --- | --- |
| PCN Lead’s Name  (Applicant submitting on behalf of PCN) |  |
| Role |  |
| Practice Manager contact details |  |
| PCN/Organisation |  |
| Date completed |  |
| Signature |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Name of all currently approved educators: | | | |
| Name | Professional Registration Number | Education qualifications & define if ES, CS, Trainer/Assessor, or other | Date of last Peer Review Teaching |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | |  | Training Location: | | | |  |
| Training Practice/Location Name & ODS Code | Address | | | Practice Manager contact details | CQC rating | List all current types of learners taken, number and HEI they come from (if undergraduate) | List potential numbers and types of learners that you could  to take |
|  |  | | |  |  |  |  |
|  |  | | |  |  |  |  |
|  |  | | |  |  |  |  |
|  |  | | |  |  |  |  |
|  |  | | |  |  |  |  |
|  |  | | |  |  |  |  |
|  |  | | |  |  |  |  |
|  |  | | |  |  |  |  |
|  |  | | |  |  |  |  |
|  |  | | |  |  |  |  |

|  |  |
| --- | --- |
| Self-reflective Statement of Peer Review Teaching Session | |
| Educator Name | What did you personally get out of the peer review session |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

Section 1 Training Locations

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Primary Care Training Locations are expected to: | | | | |
| **Domain 1** Learningenvironment andculture relates tothe settings withinwhich learnersare located andwhere the activityof education andtraining takes place | Evidence Examples | Does the evidence meet the standard? | | Review Panel Comments  Please describe action required |
| Yes | No |
| Is the PCN working towards standardising all Standard Operating Procedures (SOPs) in place to support patient safety/care? |  |  |  |  |
| What changes has the PCN made based on patient feedback and any incident reports? |  |  |  |  |
| What new QI activities are occurring across the PCN? |  |  |  |  |
| **Domain 2** Educational governance and commitment to quality describes the organisational ethos, priorities, structures, rules, and policies in place to support learning. | Evidence Examples | Does the evidence meet the standard? | | Review Panel Comments  Please describe action required |
| Yes | No |
| What changes have been made in the last 12 months based on multi-professional learner feedback? |  |  |  |  |
| What EDI improvements has the PCN made over the last 12 months. |  |  |  |  |
| Please list what activities the learners have been involved in the last 12 months regarding patient safety. |  |  |  |  |
| **Domain 3**: Developing and supporting learners sets out the resources, support and tools learners need to succeed. | Evidence Examples | Does the evidence meet the standard? | | Review Panel Comments  Please describe action required |
| Yes | No |
| Is the PCN aligned with a multi-professional education group? If so  what activities in the last 12 months has the multi-professional education group undertaken? |  |  |  |  |
| Have any learners required additional support in the last 12 months and what support was provided? |  |  |  |  |
| **Domain 6:** Developing a sustainable workforce underpins the other 5 domains by aiming to significantly improve the retention, progression and development of the whole workforce. | Evidence Examples | Does the evidence meet the standard? | | Review Panel Comments  Please describe action required |
| Yes | No |
| What HR processes does the PCN have in place to manage the GPSTs and the LEO? |  |  |  |  |
| What engagement has the PCN and Training Hub had in the last 12 months to explore ways to expand clinical placement? |  |  |  |  |

Section Two: Educators

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Primary Care Educators are expected to: | | | | |
| **Domain 4:** Developing and supporting supervisors covers the resources and support required by those guiding and overseeing the clinical and educational development and progression of learners. | Evidence Examples | Does the evidence meet the standard? | | Review Panel Comments  Please describe action required |
| Yes | No |
| Have all current educators had an educational PDP and completed mandatory training in the last 12 months? |  |  |  |  |
| Has the PCN made any clinical curriculum changes for learners and if so, what have those changes been and have they been evaluated? |  |  |  |  |
| **Domain 5:** Delivering programmes and curricula articulates how organisations can provide for learners’ education and training needs, including placement providers’ collaboration with the wider system to achieve this. | Evidence Examples | Does the evidence meet the standard? | | Review Panel Comments  Please describe action required |
| Yes | No |
| Has the PCN expanded clinical placements and multi-professional learners over the last 12 months? |  |  |  |  |
| How often and in what format do the educators and PCN review clinical time and patient load of the learner? |  |  |  |  |
| Does the PCN engage with other PCNs or Training Hubs or HEIs on expanding clinical training, curriculum reviews? |  |  |  |  |

# Appendix 3: Mandatory Actions

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Organisation |  | | | |
| Date |  | | | |
| Standard Statement | Action Required | Resources Required | Person  Responsible | Estimated  Achievement or  Review Date |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

# 

# Appendix 4: Sign Off

**Name and title of all assessors:**

|  |  |
| --- | --- |
| **Name** | **Title** |
|  |  |
|  |  |
|  |  |
|  |  |

**Outcome:**

|  |  |
| --- | --- |
| Outcome (delete as appropriate) | Comments |
| ALL criteria met |  |
| SOME criteria met |
| Criteria NOT met |
|  |

**HEE Ratification and Sign off**

|  |  |
| --- | --- |
| Recognition decision confirmed: | Yes  No |
| QPSC sign off: |  |
| Head of Primary Care: |  |
| Date of ratification: |  |