

## **Quality Surveillance reporting and management in NW Placement Providers**

# Briefing paper following workshop held on 19th September 2013

#### 1. Introduction

- 1.1 Building on HE NW's 'North West Clinical Placement Strategy' and its commitment to providing safe and supportive learning environments through the North West's 'Placement Charter' and 'Dignity Promise', a workshop held in September 2013 enabled a range of perspectives to be shared to explore a common approach to Quality Surveillance reporting and management.
- 1.2 The focus of the workshop was on the value of the learner experience and learner feedback as a significant source of information on health care services and patient care and safety. Participants at the workshop represented the wide range of healthcare professions, medical and non-medical, including learners across all education and training and work based learning programmes, and practitioners in learner support roles/ learner infrastructure roles in Placement and Education Providers.
- 1.3 This paper provides a summary of discussions, including expectations, requirements and potential implications of the Quality Surveillance approach for North West Local Education and Training Board (NW LETB) stakeholders.

## 2. Summary of key themes

- 2.1 Discussions confirmed that whilst there are processes in place to report Quality Surveillance, there is a need for this to be more systematic at all levels in organisations with a greater focus on the management of the process.
- 2.2 It was agreed that Quality Surveillance needs to:
  - be 'everyone's business' as a continuous and clear process at all levels;
  - focus on patient safety and learner safety;
  - be a learning process for all (learners, mentors/educators/trainers, Placement Providers), with the emphasis on being a formative not punitive process; to support this approach the focus should be on positive practice as well as negative practice;
  - focus on the reporting level, and not the detail;
  - build on common sources of data/ evaluations and be projected back into the system effectively including standardised feedback to learners;
  - be aligned to other systems used by Quality and Patient Experience Leads to enable a balance between the escalation of meaningful issues but at the same time avoid being over prescriptive.
  - be nurtured in a supportive 'learning /caring' environment, to 'support' all parties to recognise and manage effectively.
  - be underpinned by the use of training and education interventions to enable learners to recognise poor practice and to enable staff to manage the process, examples of which are already being utilised in some areas.

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# 3. Next steps

3.1 To build on the above and develop a common and transparent Quality Surveillance approach the following next steps are proposed for completion by March 2014:

### 3.1.1 Engagement:

- -Engage Quality and Patient Experience Leads in Placement Providers and Area Teams to discuss key issues and direction of travel in relation to the Quality Surveillance development, and to identify any tools/ areas of work in organisations this can be aligned to.
- -Engage learner infrastructure groups eg PEFs, WBEFs, Clinical Tutors, Cadet Leads and Pre Employment Coordinators in all NW Placement Providers, and invite opportunities for wider discussion.
- -Use eWIN to provide support for an on line interest group open to all stakeholders.

### 3.1.2 Knowledge management:

- -Call for evidence on any approaches/ resources currently being utilised eg approaches to informally/ formally capture learner feedback on Quality Surveillance such as protocols/ templates; training and education interventions; tools identified by Quality and Patient Experience Leads.
- -Review of the literature to identify current systems being used and transferability;
- -Develop a repository of practice examples against the key principles of Quality Surveillance for sharing on eWIN;
- -Consider a regional approach informed by practice examples e.g. Use of a mobile app that can be used by all learners to capture feedback systematically
- 3.1.3 Develop practical guidance and support resources to enable common learner Quality Surveillance reporting and management.
  - -Guidance 'packs' for the following groups:
    - Learners
    - Learner support roles e.g. mentor, educator, trainer etc.
    - Employers
    - Education Institutions
  - Training interventions for learners and for those in support roles
  - Consider commissioning the development of any mobile technology applications as informed by the repository of evidence collated and its effectiveness.

#### 4. Further information:

- 4.1 Further information on the contents of this paper can be obtained from Victoria.MacMillan@nw.hee.nhs.uk
- 4.2 Additional resources and further updates relating to Quality Surveillance can be found at the following link <a href="https://www.ewin.nhs.uk/resources/item/3156/learners-supporting-their-involvement-in-enabling-quality-surveillance">https://www.ewin.nhs.uk/resources/item/3156/learners-supporting-their-involvement-in-enabling-quality-surveillance</a>

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