

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

Trust Board Bulletin – 6 September 2018

The following reports are attached to this Bulletin as an item for noting, and are circulated to UHL Trust Board members and recipients of public Trust Board papers accordingly:-

- **2018-19 quarter 2 multi-professional education and training update** – lead contact points Ms E Meldrum, Acting Chief Nurse and Mr A Furlong Medical Director (0116 258 5488 and 0116 258 3871) – **paper 1**
- **System Leadership Team minutes (19 July 2018)** – Lead contact point Mr J Adler, Chief Executive (0116 258 8940) – **paper 2**
- **Key UHL Committee dates 2019 (Trust Board, Trust Board thinking days, Board Committees)** – lead contact point Mr S Ward, Director of Corporate and Legal Affairs (0116 258 8615) – **paper 3**

It is intended that these papers will not be discussed at the formal Trust Board meeting on 6 September 2018, unless members wish to raise specific points on the reports.

This approach was agreed by the Trust Board on 10 June 2004 (point 7 of paper Q). Any queries should be directed to the specified lead contact point in the first instance. In the event of any further outstanding issues, these may be raised at the Trust Board meeting with the prior agreement of the Chairman.

Multi-professional Education Update: September 2018

Author: S Carr, Director of Medical Education, E Meldrum, Acting Chief Nurse Sponsor: A Furlong, Medical Director
Trust Board Bulletin paper 1

Executive Summary

Context

Provision of high quality education and training is an essential part of promoting UHL as an excellent training organisation and to support recruitment and retention of students and all healthcare staff.

Feedback from Quality Management Visits and the University of Leicester student satisfaction survey indicates that we can improve UHL as a learning organisation.

In particular the retention and recruitment of medical students and junior doctors remains low.

The establishment of a strong learning culture and a supportive training environment with good education facilities will support UHL's care delivery and patient safety by delivering a well-trained and motivated workforce.

Input Sought

For information

We would welcome the Board's support for:

1. Developing a supportive learning environment in UHL
2. Improving the accountability for medical education funding at CMG level
3. Demanding action to address education and training quality issues and a commitment to improve education quality outcomes
4. Establish a Leicester Healthcare Education Academy with UoL to maximise UHL potential in educational innovation, and scholarship as a means to enhance recruitment and retention of trainees

For Reference

Edit as appropriate:

1. The following objectives were considered when preparing this report:

Safe, high quality, patient centred healthcare	[Yes /No /Not applicable]
Effective, integrated emergency care	[Yes /No /Not applicable]
Consistently meeting national access standards	[Yes /No /Not applicable]
Integrated care in partnership with others	[Yes /No /Not applicable]
Enhanced delivery in research, innovation & ed'	[Yes /No /Not applicable]
A caring, professional, engaged workforce	[Yes /No /Not applicable]
Clinically sustainable services with excellent facilities	[Yes /No /Not applicable]
Financially sustainable NHS organisation	[Yes /No /Not applicable]
Enabled by excellent IM&T	[Yes /No /Not applicable]

2. This matter relates to the following governance initiatives:

Organisational Risk Register	[Yes /No /Not applicable]
Board Assurance Framework	[Yes /No /Not applicable]

3. Related Patient and Public Involvement actions taken, or to be taken: [Insert here]

4. Results of any Equality Impact Assessment, relating to this matter: [Insert here]

5. Scheduled date for the next paper on this topic: [Trust Board 6 December 2018]

6. Executive Summaries should not exceed 2pages. [My paper does comply]

7. Papers should not exceed 7 pages. [My paper does not comply]

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT TO: TRUST BOARD REPORT

DATE: 6 SEPTEMBER 2018

REPORT BY: Mr ANDREW FURLONG, MEDICAL DIRECTOR
ELEANOR MELDRUM, ACTING CHIEF NURSE

REPORT FROM: PROFESSOR SUE CARR, DIRECTOR OF MEDICAL EDUCATION
ELEANOR MELDRUM, ACTING CHIEF NURSE

SUBJECT: UHL MULTI-PROFESSIONAL EDUCATION REPORT

Medical Education Update

GMC National Trainee Survey 2018

- As a trust overall, UHL has no red flags in the 2018 survey
- UHL maintained a ranking of 3rd for 'Overall Satisfaction' in the East Midlands region

Trust / Board	Overall Satisfaction	Clinical Supervision	Clinical Supervision out of hours	Reporting systems	Work Load	Teamwork	Handover	Supportive environment	Induction	Adequate Experience	Curriculum Coverage	Educational Governance	Educational Supervision	Feedback	Local Teaching	Regional Teaching	Study Leave	Rota Design
Chesterfield Royal Hospital NHS Foundation Trust																		
Derby Teaching Hospitals NHS Foundation Trust																		
Kettering General Hospital NHS Foundation Trust																		
Northampton General Hospital NHS Trust																		
Nottingham University Hospitals NHS Trust																		
Sherwood Forest Hospitals NHS Foundation Trust																		
United Lincolnshire Hospitals NHS Trust																		
University Hospitals of Leicester NHS Trust																		

- Specialty (department) outcomes have been shared with CMGs (Appendix 1)
- Programme level outcomes (e.g. Foundation, Core, HSTs)
 - There are 75 red flags (Appendix 2). The new HEE quality process requires an action plan for each red flag. CMGs will be providing this information before 14/09/2018
 - There are 38 green flags (Appendix 3). HEE invites the Trust to share examples of good practice in these areas.

Training Concerns

- Winter pressures impacted on training in a number of ways: cancellation of lists impacted on training, movement of trainees between services to cover high pressure areas- this is a concern again for this year
- Problems with recruitment of Trust grade doctors (Tier 2 visa issue now resolved which will improve)

Services with training challenges

HEEM re-visit to Cardiology/Respiratory Units 4th May 2018

Generally a very positive visit, visiting team congratulated UHL for significant improvements made, Trust Exec level support noted and appreciated. They recognised the extreme winter pressures and the impact this has had this year (HEE Letter- Appendix 4). The following verbal issues were raised:

1. Acknowledged UHL had funded improvements but stressed the need to see action within 3 months to address the lack of senior presence on some Cardiology wards
2. Need to improve support for Foundation doctors on wards
3. Need to resolve JDA issues
4. Need to plan for education around winter pressures next year
5. Off risk register but need to submit regular reports for monitoring

	Update- August 2018
Cardiology and Respiratory	<p>The recent GMC survey shows improvement since 2017 for the department overall. The survey results for the Higher Specialty Trainees include a number of red flags (Appendix 3)</p> <p>Ongoing challenges</p> <ul style="list-style-type: none">• Recruitment and retention of Trust Grade doctors
GP trainees	GP trainees have indicated dissatisfaction with UHL experience in both the 2018 GMC and UHL surveys. Meetings have taken place with the GP TPD and APD, and a further meeting is scheduled with the GP trainees to explore issues. There are a number of red flags in the GMC survey results (Appendix 3)
T&O- Core/ wider	T&O outcomes in the 2018 GMC survey were very positive. Winter pressure challenges, particularly at LGH, were reflected in the GMC survey outcomes for junior (FY2 and GP) surgical trainees.
	Where concerns have been identified in the GMC survey, meetings with CMG Education Leads and Heads of Service are underway to investigate these further.

Undergraduate Medical Education Issues

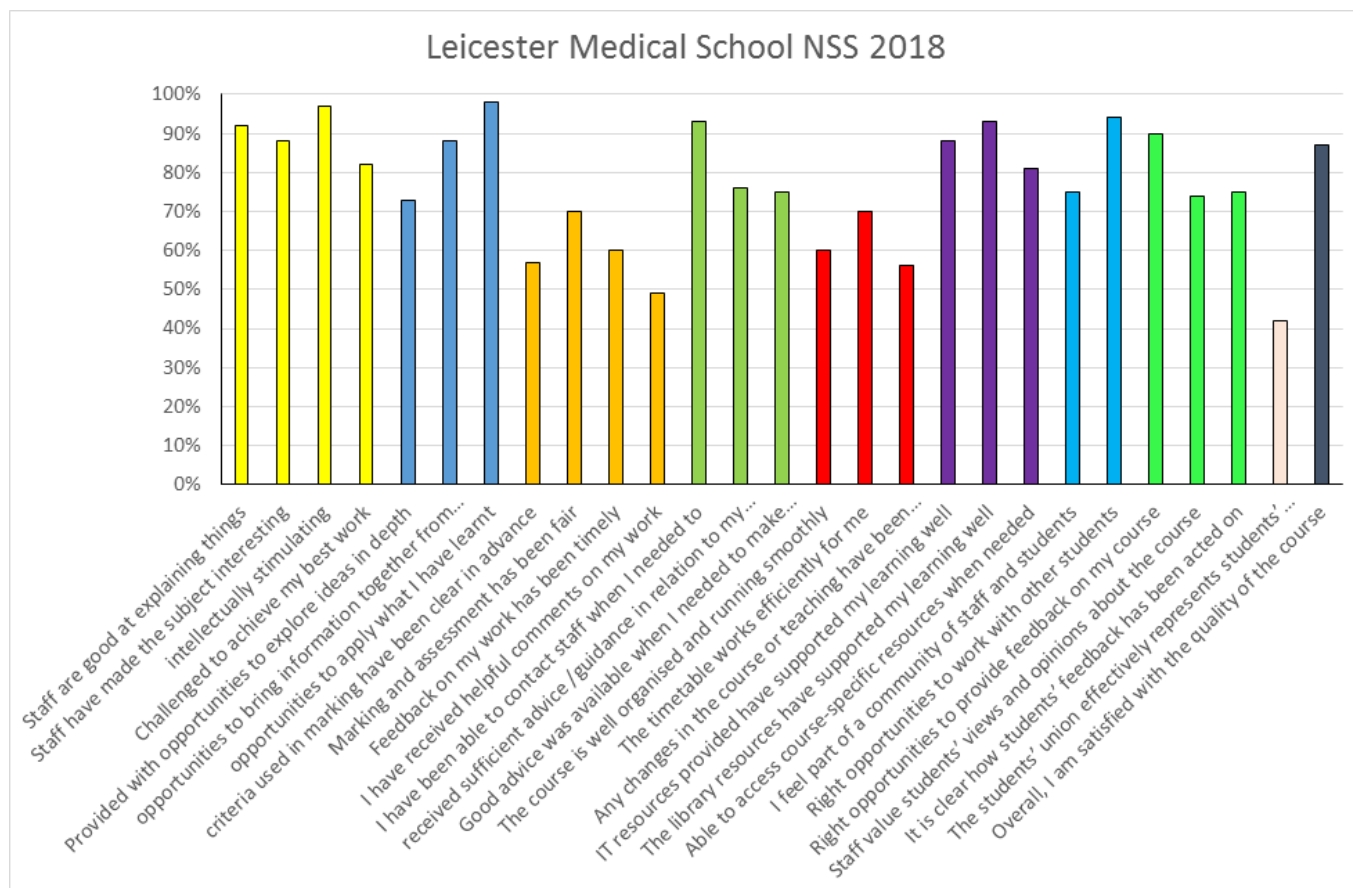
1. Medical students

National Student Survey

Encouraging improvements in the Leicester Medical School NSS scores

Overall satisfaction - increased from 83% to 87%

Leicester is now 18th out of 33 medical schools reported on overall satisfaction



2. DMU Physician Associate Students:

From August 2018: ?15+ 1st year (½ day week)
12 2nd year PA students in clinical placements

As medical students numbers increase alongside PA student places and need to train more ANPS then training and trainer capacity needs to be carefully considered

UHL Medical Educator Awards

The new UHL Educator Awards will be presented at the end of the Consultants Conference on 21st September – we have received over 80 nominations and receive a lot of positive feedback from Consultants and trainees about this event

Medical Education: Ongoing key priorities

As a University teaching hospital, it is important that UHL provides high quality training to optimise recruitment and retention. Where placement or training posts are not well supported they will risk being removed and allocated to other centres where trainees report a better experience. Reviewing placement capacity is important in light of increasing medical & PA student numbers

1. Continue to improve UHL learning culture and support for trainees
2. Improve UHL education facilities
3. Facilitate “Time for training” in job plans
4. Improve accountability for funding we receive for education and training at CMG level
5. Manage education and training quality issues actively across UHL and commit to demonstrate improved education quality outcomes
3. Work with local universities to maximise our potential in educational innovation, and scholarship as a “USP” for Leicester and as a means to enhance recruitment and retention of local trainees – through the Leicester Healthcare Education Academy

Appendices:

Appendix 1 – GMC Survey by Speciality

Appendix 2 – GMC Survey red flags for individual programmes

Appendix 3 – GMC Survey green flags for individual programmes

Appendix 4 – HEE Letter for CardioResp

INCREASING THE NUMBER OF PRE-REGISTRATION STUDENT NURSES AND MIDWIVES

De Montfort University

DMU have reported that student recruitment to all programmes commencing September 2018 has been successful and it is likely that for all fields of practice (particularly children) will be above numbers but this will be confirmed by the beginning of September.

University of Leicester Pre-registration Nursing and Midwifery Programme

The Faculty of Medicine and Health became an approved NMC education provider in October 2017 with approval for both the nursing programme and midwifery programmes to commence in September 2018. The first cohorts are small but viable with anticipated numbers being no greater than 10 students per programme.

NATIONAL STUDENT SURVEY (DE MONTFORT UNIVERSITY)

DMU's Overall Satisfaction Score is 86%, this is 3% above the sector average of 83%. This is an increase from 1% above the sector average in 2017 (85% and 84% respectively). DMU's performance indicates improvements across all themes with the Student Voice representing the biggest difference.

Table 1: Average performance of DMU against the sector average

NSS Theme	2018 DMU score %	2018 Sector Average %	Difference	2017 DMU score %	2017 Sector Average %	Difference
Overall satisfaction	86	83	3	85	84	1
The teaching on my course	85	84	1	84	85	-1
Assessment and feedback	76	73	3	76	73	3
Academic support	82	80	2	81	80	1
Organisation and management	76	75	1	76	75	1
Learning resources	88	85	3	89	85	4
Learning opportunities	86	83	3	85	84	1
Learning community	80	77	3	81	77	4
Student voice	78	69	9	76	69	7

Table 1 presents DMU's performance across each NSS theme, and compared to the sector average. DMU is above the sector average across each theme

Nursing

Nursing overall satisfaction was 83% which is an increase of 3% from 2017. The breakdown of scores indicates a significant improvement in organisation and management and student voice primarily as a result of improvements in communication of changes in the course. Lower scores in this section were due to dissatisfaction with timetabling. Although significant changes have been made to the nursing timetable some of the feedback relates to the University structures. Timetabling in DMU is a priority across the University for development in 2018/2019 cycle.

Placement feedback has seen a rise in satisfaction of 6%. The overall satisfaction has shown a significant improvement. Although the score remains a little below the sector for all fields of practice the scores are improving.

Midwifery

Midwifery overall satisfaction is 98% which is a 7% improvement from 2017. The breakdown in scores indicates the most significant improvements in student voice and criteria for marking have been clear in advance. Issues around marking and assessment have been fair and the 'timetable works efficiently for me' saw a reduction. There have been some changes to the curriculum assessment and marking which will have more of a positive impact for future cohorts.

Placement feedback has seen a rise of 5%. The overall satisfaction has shown a significant improvement and is 7% above the sector average.

ATTRACTING AND RETAINING NEWLY QUALIFIED NURSES

The trend to successfully recruit from both the local university and external candidates has been maintained. We have noticed an increase in requests from new graduates to work part time i.e. 34.5 hours a week equating to three long days, this is perceived to give the staff increased flexibility and a better work life balance.

Rotation posts continue to prove popular and we have seen an increase in uptake of these across all Clinical Management Groups (CMGs). A Nurse Educator role dedicated to supporting the rotations is crucial to ensure that their move between clinical areas is smooth and supports the nurses in clinical practice as part of their Preceptorship

We continue to attract Newly Qualified Learning Disability and Mental Health nurses to acute areas and we had our first study day dedicated for these nurses in August to get feedback on role to date and develop a strategy in partnership with them to support sharing their skills with the wider teams, developing a 'champion role' and ensuring they receive clinical supervision and opportunities to maintain/refresh skills in their field of practice.

NURSING ASSOCIATES

There are now 91 Trainee Nursing Associates on the Nursing Associate programme; our first cohort of 40 trainees are expected to qualify in January 2019. We are anticipating the final publication of the NMC Standards in October 2018 which will shape the future development of the programme and the way we support our newly qualified Nursing Associates from January 2019. We await further clarification from the NMC around clinical

skills such as enteral feeding and medicines administration and in terms of route and types of medications that can be given by Nursing Associates.

Securing the Apprenticeship levy to deliver the programme has been a slow and cumbersome process, however all systems are now in place to ensure that information is loaded onto the appropriate system to ensure that the funding flows.

VALUING OUR CLINICAL REGISTERED NURSING WORKFORCE

Team around the Patient – Practice Development Ward

UHL have been awarded Health Education England (HEE) funding to support a band seven Nurse Fellow for 12 months to develop the concept of a Practice Development ward at the Leicester Royal Infirmary. The ward is part of our winter plans and will be staffed by UHL nurses (50% nurse educators) to provide a safe start for new staff to the Trust including HCA's, newly qualified nurses including overseas nurses who have completed their OSCE and from January 2019, newly qualified Nursing Associates. The ward will provide an opportunity to work alongside a member of the Education and Practice Learning Team for coaching, clinical supervision, education and support in a clinical area to build confidence and contribute to assessment of competence against the Preceptorship framework, HCA pathway.

Clinical Education Facilities

We have received further funding from HEE to develop clinical simulation facilities at the Centre for Clinical Practice at the Glenfield Hospital which will support an increase in the number of nurses we can recruit from overseas who need clinical skills development in order to pass their OSCEs. The facility will also be used to support the clinical development of staff across LLR who work in non-NHS environments. We have also secured additional teaching space at the Glenfield Hospital (the Recreation Hall) that will again increase our capacity to recruit larger cohorts of HCAs and Nursing Associates from November 2018.

Re-introducing the title Senior Staff Nurse and Clinical Development Pathways

The test phase of the Senior Staff Nurse Programme has been completed with 25 members of staff from ITAPS being awarded the title 'Senior Staff Nurse / Theatre Practitioner. Feedback has been very positive and work needs to be completed on finalising the structured programme, learning opportunities and development of the CMG Specific Study Days to enable a full Trust roll out.

The Trust has received copyright approval to use the RCN Emergency Care Competency framework as a template for all competency frameworks we produce for all specialists. This will ensure standardisation and transferability across the Trust.

GMC Survey 2018
UHL Specialties

Post Speciality (all trainees included- FY, Core, GP and HSTs)	Overall Satisfaction	Clinical Supervision	Clinical Supervision out of hours	Reporting systems	Work Load	Teamwork	Handover	Supportive environment	Induction	Adequate Experience	Curriculum Coverage	Educational Governance	Educational Supervision	Feedback	Local Teaching	Regional Teaching	Study Leave	Rota Design
Acute Internal Medicine																		
Anaesthetics																		
Cardio-thoracic surgery																		
Cardiology																		
Chemical pathology																		
Clinical genetics																		
Clinical oncology																		
Clinical radiology																		
Dermatology																		
Emergency Medicine																		
Endocrinology and diabetes mellitus																		
Gastroenterology																		
General (internal) medicine																		
General surgery																		
Genito-urinary medicine																		
Geriatric medicine																		
Haematology																		
Histopathology																		
Immunology																		
Infectious diseases																		
Intensive care medicine																		
Medical microbiology																		
Medical oncology																		
Neonatal Medicine																		
Neurology																		
Obstetrics and gynaecology																		
Occupational medicine																		
Ophthalmology																		
Otolaryngology																		
Paediatric Diabetes and Endocrinology																		
Paediatric Emergency Medicine																		
Paediatric Intensive Care Medicine																		
Paediatric Respiratory Medicine																		
Paediatric cardiology																		
Paediatric surgery																		
Paediatrics																		
Palliative medicine																		
Plastic surgery																		
Renal medicine																		
Respiratory Medicine																		
Rheumatology																		
Sport and exercise medicine																		
Stroke Medicine																		
Trauma and orthopaedic surgery																		
Urogynaecology																		
Urology																		
Vascular surgery																		

If the response is significantly negative or positive compared to the national average, the box is highlighted red or green. Where it is negative or positive but shares a confidence interval with the national average, the box is highlighted pink or light green. If there are <3 respondents, the box is highlighted grey. Where a question isn't relevant to the specialty, the box is yellow

Report By is equal to / is in Programme Group by Trust/Board

and

Indicator is equal to Feedback , Clinical Supervision out of hours , Educational Governance , Overall Satisfaction , Local Teaching , Rota Design , Study Leave , Reporting systems , Handover , Induction , Supportive environment , Adequate Experience , Clinical Supervision , Educational Supervision , Regional Teaching , Work Load , Teamwork , Curriculum Coverage

and

GEO LETB/deanery is equal to Health Education West Midlands

Location

Programme Group	Trust / Board	Indicator	2012	2013	2014	2015	2016	2017	2018
Cardiology	University Hospitals of Leicester NHS Trust	Teamwork						57.14	57.50
Cardiology	University Hospitals of Leicester NHS Trust	Induction	68.64	73.50	70.42	65.56	72.86	59.52	61.00
Cardiology	University Hospitals of Leicester NHS Trust	Study Leave	71.30	76.67	51.46	42.14	43.81	35.71	41.25
Clinical oncology	University Hospitals of Leicester NHS Trust	Handover	28.13	31.25	25.00	45.00	59.72	58.33	50.00
Clinical oncology	University Hospitals of Leicester NHS Trust	Induction	58.33	72.50	74.58	51.67	71.25	68.75	58.75
Combined Infection Training	University Hospitals of Leicester NHS Trust	Local Teaching						67.00	54.44
Combined Infection Training	University Hospitals of Leicester NHS Trust	Regional Teaching						54.88	65.55
Emergency medicine	University Hospitals of Leicester NHS Trust	Clinical Supervision	87.07	86.09	88.75	83.84	89.31	90.00	84.79
Emergency medicine	University Hospitals of Leicester NHS Trust	Teamwork						67.17	55.56
Emergency medicine	University Hospitals of Leicester NHS Trust	Supportive environment				68.68	79.58	69.20	58.96
GP Prog - Medicine	University Hospitals of Leicester NHS Trust	Rota Design							39.38
GP Prog - Obstetrics and Gynaecology	University Hospitals of Leicester NHS Trust	Clinical Supervision	88.50	80.71	77.43	82.50	85.29	77.92	73.75
GP Prog - Obstetrics and Gynaecology	University Hospitals of Leicester NHS Trust	Clinical Supervision out of hours				86.38	88.00	85.83	70.31
GP Prog - Surgery	University Hospitals of Leicester NHS Trust	Overall Satisfaction	48.00	53.14	58.00	69.33	74.00	46.40	42.60
GP Prog - Surgery	University Hospitals of Leicester NHS Trust	Adequate Experience	47.50	50.00	60.00	70.00	75.00	56.50	43.50
GP Prog - Surgery	University Hospitals of Leicester NHS Trust	Curriculum Coverage						53.33	38.33
GP Prog - Surgery	University Hospitals of Leicester NHS Trust	Regional Teaching				72.17	77.44		35.00
GP Prog - Surgery	University Hospitals of Leicester NHS Trust	Rota Design							32.50
Gastroenterology	University Hospitals of Leicester NHS Trust	Overall Satisfaction	70.22	69.50	71.56	72.44	69.60	71.22	68.25
Gastroenterology	University Hospitals of Leicester NHS Trust	Adequate Experience	63.33	67.50	63.33	75.56	66.00	71.39	59.38
Gastroenterology	University Hospitals of Leicester NHS Trust	Curriculum Coverage						64.82	64.58
Gastroenterology	University Hospitals of Leicester NHS Trust	Educational Governance						68.52	65.63
Gastroenterology	University Hospitals of Leicester NHS Trust	Local Teaching	46.67	49.63	51.00	43.44	40.80	51.22	61.25
Geriatric medicine	University Hospitals of Leicester NHS Trust	Curriculum Coverage						72.22	61.46
Geriatric medicine	University Hospitals of Leicester NHS Trust	Rota Design							39.06
Histopathology	University Hospitals of Leicester NHS Trust	Reporting systems					66.25	76.43	61.43
Histopathology	University Hospitals of Leicester NHS Trust	Teamwork						74.07	64.82
Infectious diseases	University Hospitals of Leicester NHS Trust	Overall Satisfaction		83.50	82.67	87.00			50.00
Infectious diseases	University Hospitals of Leicester NHS Trust	Reporting systems							57.81
Infectious diseases	University Hospitals of Leicester NHS Trust	Teamwork							47.92
Infectious diseases	University Hospitals of Leicester NHS Trust	Handover		70.83	62.50	50.00			48.44
Infectious diseases	University Hospitals of Leicester NHS Trust	Adequate Experience		83.75	83.33	85.00			55.63
Infectious diseases	University Hospitals of Leicester NHS Trust	Curriculum Coverage							45.84
Infectious diseases	University Hospitals of Leicester NHS Trust	Educational Governance							39.59
Infectious diseases	University Hospitals of Leicester NHS Trust	Educational Supervision		78.13	75.00	81.25			65.63
Infectious diseases	University Hospitals of Leicester NHS Trust	Feedback		69.05		59.38			33.34
Infectious diseases	University Hospitals of Leicester NHS Trust	Local Teaching	51.88	58.67	55.25				47.92
Infectious diseases	University Hospitals of Leicester NHS Trust	Regional Teaching		61.56	61.50	49.58			48.34
Medical microbiology	University Hospitals of Leicester NHS Trust	Educational Governance						86.67	70.84
Medical microbiology	University Hospitals of Leicester NHS Trust	Local Teaching						79.60	54.58
Medical microbiology	University Hospitals of Leicester NHS Trust	Study Leave						73.75	55.73
Medicine F2	University Hospitals of Leicester NHS Trust	Overall Satisfaction	74.00	77.38	78.36	79.26	75.48	72.17	65.58
Medicine F2	University Hospitals of Leicester NHS Trust	Teamwork							67.36
Medicine F2	University Hospitals of Leicester NHS Trust	Induction	73.53	80.94	78.97	73.14	82.28	75.35	61.94
Medicine F2	University Hospitals of Leicester NHS Trust	Adequate Experience	74.71	77.81	79.23	82.09	76.30	75.42	66.38
Medicine F2	University Hospitals of Leicester NHS Trust	Curriculum Coverage						70.83	62.71
Medicine F2	University Hospitals of Leicester NHS Trust	Study Leave	41.25	48.47	44.17	36.75	45.14	44.79	32.71
Medicine F2	University Hospitals of Leicester NHS Trust	Rota Design							29.59
Neurology	University Hospitals of Leicester NHS Trust	Overall Satisfaction				75.00	87.00	79.75	59.25
Neurology	University Hospitals of Leicester NHS Trust	Local Teaching				56.25	62.00	56.75	59.17
Obstetrics and Gynaecology F2	University Hospitals of Leicester NHS Trust	Educational Supervision				75.00	91.67	87.50	60.42
Obstetrics and Gynaecology F2	University Hospitals of Leicester NHS Trust	Study Leave			46.67	63.33	43.75	27.08	
Obstetrics and gynaecology	University Hospitals of Leicester NHS Trust	Induction	75.18	76.25	81.59	71.11	77.37	83.04	71.88
Paediatrics	University Hospitals of Leicester NHS Trust	Clinical Supervision out of hours				91.08	91.54	90.96	86.15
Paediatrics	University Hospitals of Leicester NHS Trust	Induction	76.39	74.86	80.81	83.40	81.70	80.17	69.63
Paediatrics	University Hospitals of Leicester NHS Trust	Educational Governance						69.07	66.46
Palliative medicine	University Hospitals of Leicester NHS Trust	Educational Governance						83.33	56.25
Radiology F2	University Hospitals of Leicester NHS Trust	Curriculum Coverage						69.44	55.56
Respiratory medicine	University Hospitals of Leicester NHS Trust	Reporting systems					62.22	65.00	58.50
Respiratory medicine	University Hospitals of Leicester NHS Trust	Teamwork						63.54	57.50
Respiratory medicine	University Hospitals of Leicester NHS Trust	Handover	56.25	66.07	58.33	68.75	53.70	54.17	42.50
Respiratory medicine	University Hospitals of Leicester NHS Trust	Supportive environment				80.83	62.22	51.88	57.00
Respiratory medicine	University Hospitals of Leicester NHS Trust	Study Leave	43.89	64.52	41.39	65.00	40.74	33.33	45.42
Respiratory medicine	University Hospitals of Leicester NHS Trust	Rota Design							41.25
Rheumatology	University Hospitals of Leicester NHS Trust	Clinical Supervision out of hours				86.92	94.33		79.17
Rheumatology	University Hospitals of Leicester NHS Trust	Study Leave	31.67	68.33	81.67	76.11	70.00		31.25
Sport and Exercise Medicine	University Hospitals of Leicester NHS Trust	Educational Governance							30.56
Surgery F2	University Hospitals of Leicester NHS Trust	Overall Satisfaction	70.40	68.24	74.53	79.05	77.89	75.00	57.00
Surgery F2	University Hospitals of Leicester NHS Trust	Clinical Supervision	80.40	80.88	87.42	90.86	83.89	84.71	78.13
Surgery F2	University Hospitals of Leicester NHS Trust	Teamwork						72.68	62.72
Surgery F2	University Hospitals of Leicester NHS Trust	Handover	51.67	52.21	61.03	62.50	77.45	64.70	49.19
Surgery F2	University Hospitals of Leicester NHS Trust	Supportive environment				78.10	70.79	63.89	57.11
Surgery F2	University Hospitals of Leicester NHS Trust	Induction	68.33	78.33	66.84	85.48	79.04	71.53	61.51
Surgery F2	University Hospitals of Leicester NHS Trust	Adequate Experience	70.67	72.94	76.84	81.43	83.68	79.17	59.47
Surgery F2	University Hospitals of Leicester NHS Trust	Curriculum Coverage						70.37	60.97

Report By is equal to / is in **Programme Group by Trust/Board**

	Programme Group	Trust / Board	Indicator	2012	2013	2014	2015	2016	2017	2018
EM	ACCS	University Hospitals of Leicester NHS Trust	Regional Teaching	82.25	67.89	68.40	72.22	68.29	73.56	87.50
EM	Anaesthetics F1	University Hospitals of Leicester NHS Trust	Work Load	52.60	50.42				67.36	75.35
EM	Anaesthetics F1	University Hospitals of Leicester NHS Trust	Curriculum Coverage						84.72	86.11
EM	Combined Infection Training	University Hospitals of Leicester NHS Trust	Work Load						51.56	63.19
EM	Dermatology	University Hospitals of Leicester NHS Trust	Work Load	58.33	64.17	54.58	57.92	55.73	50.70	65.28
EM	GP Prog - Emergency Medicine	University Hospitals of Leicester NHS Trust	Regional Teaching		56.58				74.06	82.50
EM	GP Prog - Surgery	University Hospitals of Leicester NHS Trust	Work Load	35.94	54.46	48.26	62.85	61.11	49.17	74.58
EM	Haematology	University Hospitals of Leicester NHS Trust	Overall Satisfaction	89.33	83.50	97.50	88.89	92.40	86.29	97.22
EM	Haematology	University Hospitals of Leicester NHS Trust	Clinical Supervision out of hours				93.33	93.33	92.92	96.53
EM	Haematology	University Hospitals of Leicester NHS Trust	Supportive environment				83.89	81.50	82.14	85.00
EM	Haematology	University Hospitals of Leicester NHS Trust	Adequate Experience	88.33	81.25	96.25	90.00	93.00	84.64	96.67
EM	Haematology	University Hospitals of Leicester NHS Trust	Curriculum Coverage						82.14	90.74
EM	Haematology	University Hospitals of Leicester NHS Trust	Local Teaching	59.50	56.63	73.00	63.22	69.40	77.71	87.22
EM	Haematology	University Hospitals of Leicester NHS Trust	Rota Design							82.64
EM	Medical oncology	University Hospitals of Leicester NHS Trust	Work Load		50.00		47.92			59.38
EM	Neurology	University Hospitals of Leicester NHS Trust	Clinical Supervision out of hours				94.50	96.19	93.75	95.31
EM	Obstetrics and Gynaecology F1	University Hospitals of Leicester NHS Trust	Work Load	41.67	48.44	51.56	66.67	50.52	62.50	61.67
EM	Obstetrics and Gynaecology F1	University Hospitals of Leicester NHS Trust	Rota Design							71.25
EM	Ophthalmology	University Hospitals of Leicester NHS Trust	Clinical Supervision out of hours				96.60	95.13	96.88	96.43
EM	Paediatric cardiology	University Hospitals of Leicester NHS Trust	Clinical Supervision out of hours				93.58	94.33	91.88	95.83
EM	Paediatric cardiology	University Hospitals of Leicester NHS Trust	Curriculum Coverage						81.25	94.45
EM	Paediatrics and Child Health F1	University Hospitals of Leicester NHS Trust	Work Load	64.17	63.33	67.19	47.50	59.58	58.34	60.00
EM	Paediatrics and Child Health F2	University Hospitals of Leicester NHS Trust	Handover	75.00	78.13	78.13	87.50	80.68	78.33	75.23
EM	Paediatrics and Child Health F2	University Hospitals of Leicester NHS Trust	Rota Design							69.38
EM	Pathology F1	University Hospitals of Leicester NHS Trust	Overall Satisfaction						74.33	89.00
EM	Plastic surgery	University Hospitals of Leicester NHS Trust	Handover	53.13	70.83	62.50	50.00	69.44	61.67	79.69
EM	Radiology F1	University Hospitals of Leicester NHS Trust	Overall Satisfaction						84.00	89.25
EM	Radiology F1	University Hospitals of Leicester NHS Trust	Adequate Experience						82.50	91.88
EM	Sport and Exercise Medicine	University Hospitals of Leicester NHS Trust	Work Load							88.89
EM	Trauma and orthopaedic surgery	University Hospitals of Leicester NHS Trust	Handover	71.67	84.17	83.33	87.50	66.35	72.57	75.87
EM	Trauma and orthopaedic surgery	University Hospitals of Leicester NHS Trust	Induction	79.22	72.44	82.00	77.69	79.67	80.80	90.54
EM	Trauma and orthopaedic surgery	University Hospitals of Leicester NHS Trust	Local Teaching	78.88	77.87	75.93	72.64	69.20	75.64	92.14
EM	Trauma and orthopaedic surgery	University Hospitals of Leicester NHS Trust	Regional Teaching	89.84	93.96	90.90	90.08	97.43	93.93	95.95
EM	Trauma and orthopaedic surgery	University Hospitals of Leicester NHS Trust	Rota Design							82.69
EM	Vascular surgery	University Hospitals of Leicester NHS Trust	Handover							88.19
EM	Vascular surgery	University Hospitals of Leicester NHS Trust	Local Teaching							88.33
EM	Vascular surgery	University Hospitals of Leicester NHS Trust	Regional Teaching							100.00
EM	Vascular surgery	University Hospitals of Leicester NHS Trust	Rota Design							85.42

East Midlands Office

Westbridge Place
1 Westbridge Close
Leicester
LE3 5DR



26th July 2018

Professor Sue Carr
Director of Medical Education
University Hospitals of Leicester NHS Trust
Level 2 Jarvis Building
Leicester Royal Infirmary
Leicester
LE1 5WW

Dear Sue

East Midlands Review of Cardio Respiratory Training in UHL

Thank you for your hospitality when we came to visit the Cardio-respiratory unit on the 4th May 2018.

The presentation by Suzanne on the progress since the last visit was very impressive and it showed how far things have come since last time I visited two years ago. The whole team have put in a great amount of work to improve morale and education in the department and there is now a real sense of team culture. The education project update was interesting and I am looking forward to hearing more about this as it progresses.

Whilst we still need to be assured of the support for the juniors within the department, I am writing to confirm that I am satisfied with the progress being made and that this item will now be removed from our risk register and return to business as usual monitoring. If there are any subsequent concerns these will be escalated through the School and HEE QA Framework.

Yours sincerely



Dr Adrian M Brooke

Postgraduate Dean (Acting)

**System Leadership Team
Meeting 20**

Chair: Toby Sanders

Date: Thursday 19th July 2018

Time: 10:15 – 12:00

Venue: 8th Floor Conference Room, St Johns House, East Street, Leicester, LE1 6NB

Present:

Toby Sanders (TS)	Chair, LLR STP Lead, Managing Director, West Leicestershire CCG
John Adler (JA)	Chief Executive, University Hospitals of Leicester NHS Trust
Mark Andrews (MA)	Deputy Director for People, Rutland County Council
Karen English (KE)	Managing Director, East Leicestershire and Rutland CCG
Azhar Farooqi (AFa)	Clinical Chair, Leicester City CCG
Steven Forbes (SF)	Strategic Director for Adult Social Care, Leicester City Council
Michelle Iliffe (MI)	Chief Finance Officer, Leicester City CCG
Will Legge (WL)	Director of Strategy & Information, EMAS, NHS Trust
Peter Miller (PM)	Chief Executive, Leicestershire Partnership Trust
Richard Palin (RP)	Chair, East Leicestershire and Rutland CCG
Evan Rees (ER)	Chair, BCT PPI Group
John Sinnott (JS)	Chief Executive, Leicestershire County Council
Chris Trzcinski (CT)	Vice Clinical Chair, West Leicestershire CCG

Apologies:

Andrew Furlong (AF)	Medical Director, University Hospitals of Leicester NHS Trust
Mayur Lakhani (ML)	Chair, West Leicestershire CCG, GP, Sileby Co-Chair Clinical Leadership Group
Roz Lindridge (RL)	Locality Director Central Midlands, NHS England
Sue Lock (SL)	Managing Director, Leicester City CCG
Richard Morris (RM)	Director of Corporate Affairs, LCCG SRO Communications and Engagement
Sarah Prema (SP)	Director of Strategy and Implementation, Leicester City CCG



In Attendance:	
Shelly Heap	Board Support, BCT(Minutes)
Sue Venables (SV)	Head of Communications and Engagement, Better Care Together
SLT 19/07/01 Welcome and introductions	
SLT 19/07/02 Apologies for Absence and Quorum	
Apologies received from Andrew Furlong, Mayur Lakhani (Chris Trzcinski representing), Roz Lindridge, Sue Lock (Michelle Iliffe deputising), Sarah Prema and Richard Morris	
SLT 19/07/03 Declarations of interest on Agenda Topics	
No material conflicts of interest were noted, however, it is necessary to clarify if Item 10, Elective Care Transformation plan is for noting, at this stage and this will mean there are no conflicts at this stage.	
SLT 19/07/04 Notification of Any Other Business	
There were no items for Any Other Business.	
SLT 19/07/05 Minutes of meeting held on 21st June 2018	
The minutes of the last meeting were accepted as a true and accurate record.	
SLT 19/07/06 Action notes of the meeting held on 21st June 2018	
It was noted that each action has a summary on progress detailed in the log.	
SLT 19/07/07 Partnership Directors Report	
The Partnership Directors report (Paper C) is an update for the partners. Items will also be used for the regular public newsletter being produced by SV. Any comments on the content or good news items for inclusion to be emailed directly to SP.	
SLT 19/07/08 Workstream Structure	
<p>The proposal to consolidate the workstream arrangements as outlined in Paper D has been developed by SP and the workstream Senior Responsible Officers to address issues of fragmentation and to improve the co-ordination of interdependencies.</p> <p>The partners discussed the proposal and provided feedback as follows:</p> <ul style="list-style-type: none"> • There was overall consensus for the proposal • 'Out of Hospital' arrangement to co-ordinate the work of Home First, Integrated Locality, Community Services and Frailty was approved • Enabling workstreams will remain the same • Further work is required to look at where to place long term conditions such as Respiratory, Diabetes, and Cardio-vascular • Further consideration on how interdependencies can be co-ordinated more effectively across work streams • Reference the Frailty Task and Finish group under a focus area/task and finish group heading <p>It was agreed that SP and SROs will undertake further work on the proposal and bring it back to SLT.</p> <p>JA told the members that he has recently been discussing Respiratory issues with Tamsin Hooton who is keen to form a Respiratory Task and Finish Group for a specific short period of</p>	SP

time as this is a significant pressure point and a driver for a high level of admissions over winter. The task group would match where we are against best practice and undertake targeted work to develop an improved clinical pathway as there is the expertise locally to undertake the work. It was agreed that SLT should be the sponsor for this and that the task group would report back to SLT.	
SLT 19/07/09 Leadership and Governance Review Final Terms of Reference	
<p>Louise Guss (LG), Interim Head of Corporate Affairs, West Leicestershire CCG joined the meeting to consider the draft Terms of Reference for the Leadership and Governance review of Better Care Together (BCT) as outlined in Paper E.</p> <p>SLT partners discussed the purpose of the review and determined that it was premature, given the current circumstances, to continue until the reconfiguration of the three CCGs has been agreed.</p> <p>Instead, SLT agreed to arrange a facilitated 'away day' in September in order to clarify the strategic partner direction for our local system working. Outputs from that away day will inform the second stage of more detailed work on future leadership and governance arrangement.</p> <p>As a consequence of this decision, the work of the Steering Group will be temporarily paused.</p>	TS
SLT 19/07/10 Draft of LLR STP Elective Care Transformation Plan	
<p>Helen Mather (HM), Planned Care Programme Lead joined the meeting to provide an update on the approach and progress to develop an STP Elective Care Transformation Plan as outlined in Paper F. It was clarified that this item is for note and not for approval at this stage.</p> <p>NHS England (NHSE) and NHS Improvement (NHSI) jointly wrote to each STP, requesting an Elective Transformation Plan that draws together key elective care initiatives being undertaken and focussed plans for two key national transformation priorities (First Contact Practitioner and Ophthalmology). However, this work has been underway in LLR for around 18 months and is currently at the roll out stage. For example, the first contact practitioner model is being tested in 40 sites and work in UHL is progressing well. Best practice nationally has been considered and there has been significant patient engagement.</p> <p>The first draft of the plan is due to go to NHSE on 23rd July 2018 for their feedback by the end of July and the final plan will come back to the August SLT meeting for approval.</p> <p>Feedback and comments from the partners was as follows:</p> <ul style="list-style-type: none"> • There was overall support for the plan and it was acknowledged that planned care works very well and is integrated across commissioning • Ensure adequate evidence of clinical and patient engagement • There was a query regarding 5% saving for Rutland and noted that this was a slightly cautious prediction. • Be clear about the use of facilities away from Community Hospitals such as GP treatment rooms etc. • The plan supports the next steps and shifting services closer to home is good. 	TS
SLT 19/07/11 Frailty Programme 18/19 update	
<p>JA provided an update on the Frailty programme outlined in Paper G.</p> <p>The Task Force and working group are working very well and JA is pleased with progress and that there is buy in from all the agencies involved.</p> <p>TS said that work was progressing well and that it was encouraging, however, if there are any barriers to implementation going forward, that they be brought to SLT to help resolve.</p>	

Date, time and venue of next meeting	
9am-12pm Thursday, 16 th August 2018, 8 th Floor Conference Room, St John's House	

University Hospitals of Leicester NHS Trust – Key Trust Board & Board Committee meeting dates for 2019

Trust Board	Trust Board Thinking Days	Audit Committee	Charitable Funds Committee	Finance and Investment Committee (FIC)	People, Process and Performance Committee (PPPC)	Quality and Outcomes Committee (QOC)
Formal meeting from 9am to 1pm	From 9am to 3.30pm <i>usually the Board Room LRI</i>	9am to 12noon	2pm to 4pm <i>same venue as TB</i>	From 9am to 11am <i>Board Room LRI</i>	From 11.15am – 1.45pm <i>(ends with joint 30-minute session with QOC)</i> <i>Board Room LRI</i>	From 1.15pm to 4pm <i>(Starts with joint 30-minute session with PPPC)</i> <i>Board Room LRI</i>
Thursday 3 Jan 2019 (venue TBA)	Thursday 10 January 2019	Friday 4 January 2019 Board Room, LRI	-	Thursday 31 January 2019	Thursday 31 January 2019	Thursday 31 January 2019
Thursday 7 Feb 2019 (venue TBA)	Thursday 14 February 2019	-	Thursday 7 February 2019	Thursday 28 February 2019	Thursday 28 February 2019	Thursday 28 February 2019
Thurs 7 March 2019 (venue TBA)	Thursday 14 March 2019	Friday 8 March 2019 Board Room, LRI	-	Thursday 28 March 2019	Thursday 28 March 2019	Thursday 28 March 2019
Thurs 4 April 2019 (venue TBA)	Thursday 11 April 2019	-	Thursday 4 April 2019	Thursday 25 April 2019	Thursday 25 April 2019	Thursday 25 April 2019
Thursday 2 May 2019 (venue TBA)	Thursday 9 May 2019	Friday 24 May 2019 Board Room, LRI	-	Thursday 30 May 2019	Thursday 30 May 2019	Thursday 30 May 2019
Thurs 6 June 2019 (venue TBA)	Thursday 13 June 2019	-	Thursday 6 June 2019	Thursday 27 June 2019	Thursday 27 June 2019	Thursday 27 June 2019
Thursday 4 July 2019 (venue TBA)	Thursday 11 July 2019	Friday 5 July 2019 Board Room, LRI	-	Thursday 25 July 2019	Thursday 25 July 2019	Thursday 25 July 2019
Thursday 1 Aug 2019 (venue TBA)	Thursday 8 August 2019	-	Thursday 1 August 2019	Thursday 29 August 2019	Thursday 29 August 2019	Thursday 29 August 2019
Thursday 5 Sep 2019 (venue TBA)	Thursday 12 September 2019	Friday 6 Sep 2019, Board Room, LRI	-	Thursday 26 September 2019	Thursday 26 September 2019	Thursday 26 September 2019
Thursday 3 Oct 2019 (venue TBA)	Thursday 10 October 2019	-	Thursday 3 October 2019	Thursday 24 October 2019	Thursday 24 October 2019	Thursday 24 October 2019
Thursday 7 Nov 2019 (venue TBA)	Thursday 14 November 2019	Friday 8 Nov 2019 Board Room, LRI	-	Thursday 28 November 2019	Thursday 28 November 2019	Thursday 28 November 2019
Thursday 5 Dec 2019 (venue TBA)	Thursday 12 December 2019	-	Thursday 5 December 2019	Thursday 19 December 2019*	Thursday 19 December 2019*	Thursday 19 December 2019*

Notes: * December 2019 FIC/QOC/PPPC meetings brought forward a week due to Christmas.