

FOI REF: 25/634

19th September 2025

Eastbourne District General Hospital
Kings Drive
Eastbourne
East Sussex
BN21 2UD

Tel: 0300 131 4500 Website: www.esht.nhs.uk

FREEDOM OF INFORMATION ACT

I am responding to your request for information under the Freedom of Information Act. The answers to your specific questions are as follows:

I am writing to request information regarding the NHS Trust's use of the Education and Training Tariff, specifically for postgraduate doctors in training, and request the annual self-assessments. Please could you provide the following:

1) Annual Education and Training Self-Assessments:

A copy of the NHS Trust's annual education and training self-assessment report. Can you please provide the latest report submitted. The reports are mandatory according to the NHS Education Funding Agreement Schedule 3.

Please see the attached document - 'ESHT Response 248633844'.

2) Total amount of Education and Training Tariff funding received by the Trust for postgraduate medical education over the financial year relating to the last Education and Training Self-Assessment report.

Postgraduate funding for 2024/2025 was £13,882,466.

3) Breakdown of Education and Training Tariff for Postgraduate Doctors:

A detailed and itemised breakdown of how the Education and Training Tariff allocated for postgraduate doctors in training has been spent over the same financial period relating to the latest Annual Education and Training self-assessment submitted. Specifically, I would like to know a breakdown of all expenditures covered by this tariff including but not limited to:

Teaching staff salaries (including number of staff employed).

Financial Year 2024/2025 £580,658 Posts 18

b) Administrative staff salaries (including number of staff employed).

Financial Year 2024/2025 £340,421 Posts 11

c) Any contribution of tariff towards Consultants programmed activities (PAs) to educational roles.

Financial Year 2024/2025 £572,024

d) Facilities provided specifically for medical education and training (e.g. libraries, study areas).

Financial Year 2024/2025 £225,000

e) Pastoral support and well-being services for trainees.

Financial Year 2024/2025 £102,947

f) Any contributions towards trainee study leave, clinical exams, and related support activities.

Financial Year 2024/2025 £228,062

The budget for resident doctor's study leave linked to the tariff is managed centrally by KSS Deanery and not the Trust.

4) Does the trust have any mechanisms in place to review if the Education and Training Tariff is providing appropriate educational value to Postgraduate Doctors and what are those mechanisms?

Governance - Local Faculty Groups - Resident Doctors Representative collate feedback from their colleagues to present at the meetings.

Audits/Educational session feedback.

Educational Governance Group - previously Education Steering Group.

Developing Educational Impact Assessment quality metrics.

If I can be of any further assistance, please do not hesitate to contact me.

Should you be dissatisfied with the Trust's response to your request, you have the right to request an internal review. Please write to the Freedom of Information Department (<u>eshtr.foi@nhs.net</u>), quoting the above reference, within 40 working days. The Trust is not obliged to accept an internal review after this date.

Should you still be dissatisfied with your FOI request, you have the right of complaint to the Information Commissioner at the following address:

The Information Commissioner's Office Wycliffe House Water Lane Wilmslow Cheshire SK9 5AF

Telephone: 0303 123 1113

Yours sincerely

Freedom of Information Department esh-tr.foi@nhs.net

NHS England Self-Assessment for Placement Providers 2024

Region Selection

Please do not amend the region you have been allocated to. If you feel this is incorrect pl ease continue to complete the SA and email your regional NHS England WT&E quality tea m.

South East

East of England

Please do not amend (EoE Provider)

No Response

London

Please do not amend (London Provider)

No Response

Midlands

Please do not amend (Midlands Provider)

No Response

North West

Please do not amend (NW Provider)

No Response

North East and Yorkshire

Please do not amend (NEY Provider)

No Response

South East

Please do not amend (SE Provider)

East Sussex Healthcare NHS Trust

South West

Training profession selection

Please select from the list below those professional groups your organisation currently trai n, please select all those which apply. Please select only one option for each row.

	Yes we train in this professional group	N/A we do NOT train in this professional group
Advanced Practice	X	
Allied Health Professionals	×	
Dental	X	
Dental Undergraduate		X
Healthcare Science	X	
Medical Associate Professions	×	
Medicine Postgraduate	X	
Medicine Undergraduate	X	
Midwifery	X	
Nursing	X	
Paramedicine	X	
Pharmacy	Х	
Psychological Professions		х
Social Workers		X

Section 1 - Provider challenges

Example 1: Please choose the most appropriate category for your challenge.

Apprenticeships

Please provide your narrative in the comments box

Employer Funding Costs - Apprenticeships
The continued inflexibility of the Apprenticeship Levy continues to impact on Trust to support staff. The lack of employer support costs to support professional pathways particularly RNA/2+2 is creating bottlenecks and is impacting on recruitment and retention.

Other areas such as AHP and HCS also having problems. Accessibility/Flexibility to apprenticeships is

key current statistics shown nurse training down by 21%

Example 2: Please choose the most appropriate category for your challenge.

Workforce Challenges (recruitment / retention)

Please provide your narrative in the comments box

Ongoing impact of UOB withdrawal from East Sussex, with one cohort/year students faced with increase travel costs to get to placements in Hastings/Rye, at time of financial austerity nationally, and issues of lone travel in winter and concerns for staff safety. This is impacting on us being able to build robust career pipelines from within our local community which has worked so well for the Trust in the past. (Feb cohort of 35-40 student Nurses). AHP courses suffering as late cancellation of courses is impacting on staff development and patient care, e.g SCPHN course cancelled organisations had to source alternative provider.

Example 3: Please choose the most appropriate category for your challenge.

Placement Management / Capacity

Please provide your narrative in the comments box

Placement capacity more challenging, example realignment of medical posts out of London, many posts on offer are Trust funded not tariff which is causing budget pressures creating an inability in many cases for placements to be supported. Concern that increasing numbers as in LTWP of students will saturate key areas such as Medicine, Surgery etc- already some experience of this in Maternity, compounded by lack of supervisors for the numbers.

Experienced supervisors challenging to support as many retiring, and others hesitant to do educational roles often not recognised.

Section 2 - Provider achievements and good practice

Example 1: Please choose the most appropriate category for your achievement.

Increased SIM for Training

Please provide your narrative in the comments box

Friease provide your narrative in the comments box Simulation has expanded greatly in the previous 12 months, is now delivered to medical (under and post grad) nursing (under and post grad) and AHP (under and post grad). Reputationally we deliver national/regional simulation courses, e.g. Basic Surgical Skills and Care of the Critically III Surgical Patient as part of the RCS delivery. We were first to set up PACES course for KSS. Interprofessional simulation we have grown, and feedback is excellent. We offer Coroners Simulation, and now investing in VR and AI one focus is Cardiology and Fraility.

Example 2: Please choose the most appropriate category for your achievement.

Learner / Trainee Support or Wellbeing

Please provide your narrative in the comments box
We gained two national awards, National Preceptorship Interim Quality Mark for providing a high standard of preceptorship and a structured preceptorship programme for newly qualified Nurses/AHP/NA's/Midwives. Provides them with skills, knowledge, confidence. We are currently finalising our new multi-professional Nurse/AHP preceptorship programme. The Trust also achieved a NHS Pastoral Care Quality Award, awarded to recognise the trust's work in international recruitment and its commitment to providing high-quality pastoral care to internationally educated nurses and midwives coming to the Trust. We also have implemented Nurse/AHP clinical educator pastoral fellows to support HCSW/UG and PG Colleagues to support them in practice.

Example 3: Please choose the most appropriate category for your achievement.

Collaboration / Partnerships

Please provide your narrative in the comments box

We have formalised a collaborative partnership with East Sussex Colleges to create an NHS Career Pathway Academy. Board paper was approved this month. T Level students from the college are hosted in nursing, midwifery and Podiatry, a level 2 supervision/early leadership pathway was developed and delivered to our Estates and Facilities staff. We are working in partnership with delivery of Care Certificate, including joint assessment of trainees in the Trust. The creation of an NHS Careers Academy with East Sussex Colleges for the purpose of creating opportunities for a range of careers at ESHT will enable development of a sustainable workforce pipeline from the local community.

Section 3 - Contracting and the NHS Education Funding Agreement

Please confirm your compliance with the obligations and key performance indicators set o ut in Schedule 3 of the NHS Education Funding Agreement (EFA). This should be completed once on behalf of the whole organisation. Please select only on e option for each row.

	Yes	No
There is board level engagement for education and training at this organisation.	Х	
The funding provided via the NHS Education Funding Agreement (EFA) to support and deliver education and training is used explicitly for this purpose.	х	
We undertake activity in the NHS Education Funding Agreement which is being delivered through a third party provider.	х	
The Provider or its sub-contractor did not have any breaches to report in relation to the requirement of the NHS Education Finding Agreement (EFA)		Х
We are compliant with all applicable requirements of the Data Protection Legislation and with the requirements of Schedule 5 of the NHE Education Funding Agreement.	x	
The Provider did not have any health and safety breaches that involve a learner to report in the last 12 months.	x	
The organisation facilitates a cross-system and collaborative approach, engaging the ICS for system learning.	x	
We have collaborative relationships with our stakeholders (e.g. education providers) which provide robust mechanisms to deliver agreed services.	х	

If 'yes' please add comments to support your answer; if 'no' please provide further detail: The Chief People Officer is the Board Level Director for HR Services ,and is co- chair of the Education Steering where strategic decisions and assurances on educational commissioning, finance, educational initiatives and assurance is provided to Trust colleagues. Educational reports are submitted for assurance, decision making, information on GMC Resident doctors survey, Finance Expenditure, Governance across a comprehensive range of Trust and Regional meetings. We attend ICB educational leads system meeting, in addition with partner Trusts across Sussex we have set up an informal Action Learning set for educational leads across all training programmes and international doctors/nurses to share problems and source solutions to educational issues. We are currently involved in the national review of Statutory and Mandatory education.

Please provide the name and email address of the board named individual responsible for education and training.

Name Jenny Darwood

Email Address j.darwood@nhs.net

Signature

I confirm I have completed this section accurately and can provide evidence to support my responses if requested by NHS England Workforce, Training and Education.

Name, email address and role of the person completing this section

Dawn Urquhart- AD HR Education- d.urquhart@nhs.net and Jo Jukes Head of Integrated Education joanne.jukes@nhs.net

Section 4 - Education Quality

Can you confirm as a provider that you...
Please select only one option for each row.

	Yes	No	N/A
We are aware of the requirements and process for an education quality intervention, including who is required to attend.	х		
We are reporting and engaging with the requirements and process to escalate issues, in line with NHS England's education concerns process.	х		
Have developed and implemented a service improvement plan to ensure progression through the Quality and Improvement Outcomes Framework for NHS Funded Knowledge and Library Services.	x		
Has the provider been actively promoting, to all learners, use of the national clinical decision support tool funded by NHS England?	х		
Have a Freedom to Speak Up Guardian and they actively promote the process for raising concerns through them to their learners.	х		
Have a Guardian of Safe Working (if postgraduate doctors in training are being trained), and they actively promote the process for raising concerns through them to their learners.	х		
Are aware of the Safe Learning Environment Charter (SLEC)	Х		
Are actively implementing and embedding the SLEC multi-professionally.	Х		

If 'yes' please add comments to support your answer; if 'no' please provide further detail:

Pastoral Fellows- support all new and existing medical colleagues Trust and Resident Doctors. They provide a quiet and confidential space for colleagues to talk to them. They set up Matron "buddies" for FY1doctors for the duration of their first year of placement. They contact all new starters both through txt and face to face and undertake regular visits to all the placement areas. They are Mental Health First Aid and Trim trained.

Networking and Recognition of Role: The Trust organise a welcome BBQ/Medical Education FY Award Ceremony for the new FY1 doctors and outgoing FY1, attended by the Board Level Executives. This allows for networking.

Restorative Supervision: has recently been introduced in the Trust, a number of staff have been trained, we have also refreshed our Practice Educator/Supervision course, and we continue to grow our PNA network.

Quality Walks- quality assurance initiative led by the DME, in addition we support interprofessional trainee representative induction sessions.

We undertake quality walks across all areas- these are multi professional, this enables the senior team to have that "check in" with learners.

AHP- Our Trust Award-winning EDI Champion has enhanced team learning through the introduction of

AHP- Our Trust Award-winning EDI Champion has enhanced team learning through the introduction of EDI chat sessions, fostering open discussions on topics like unconscious bias, cultural sensitivity, and inclusive care, ultimately improving the workplace for our team and quality of care for all patients.

As an organisation, have you been referred to a regulator for education and training conc erns in the last 12 months (with or without conditions) (e.g., GMC, GDC, HCPC, NMC, etc)

Note: we are not seeking information about the referral of an individual learner.

We have been referred to a regulator and the details are shared below.

If you have received conditions from a regulator please provide more details including the regulator, the profession involved and a brief description

There was an exception report raised by an HEI to the NMC regarding an incident of a student on the

There was an exception report raised by an HEI to the NMC regarding an incident of a student on the professional nurse pathway who was on placement in the Trust. We have not been advised as to the outcome of the referral that was made in early September.

Did you actively promote the National Education and Training Survey (NETS) to all healthc are learners?

Yes

Have you reviewed, at Board Level, and where appropriate, taken action on the outcome of the results of the National Education and Training Survey (NETS).

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Please provide a brief description of the action you have taken as a result; if 'no' please provide further details including your plans to use the NETS data for quality improvement activity in the future.

The NETS Response rate low across the South East, this was highlighted through ESG, and at Board Level and for 24/25 we are working to improve response rates within out trust. (Detail below).For 23/24 links to the survey were circulated to all staff several times and also gone out through our communications team and in meetings Education Steering Group. Any reports from our NETS Survey were shared through a number of forums including Education Steering Group, Professional Advisory Group and reports/action plans will be provided for the People and Organisational Development Group. The Chair of POD is a Non- Executive Director.

We have also recently set up a Non Medical Edcuation Forum which is managed alongside a Local Faculty Group- NETS survey results and actions will be discussed and agreed at this meeting and the minutes shared at ESG, and up to POD

2024's NETS will be open from 1 October 2024 until 26 November 2024. How will your org anisation increase their NETS response rate for 2024?

We have circulated to all educational leads and educators across the organisation, as well as all internal network groups. We continue to highlight through the trust communication process.. Links to the NETS site for 2024 sent to all trainees, using social media such as Apps, Whats App, and internal Trust Communication networks.

However colleagues have identified that the timing of the survey, same as Staff Survey hence staff report surveyed out.

One suggestion is could the GMC Resident Doctors and NETS survey be combined, and it is completed in March/April.- so could link to academic year?

Patient Safety and the promotion of a Patient Safety culture is integral to the Education Q uality Framework. Please provide the following information:

Name and email address of your Board representative for Patient Safety

Vikki Caruth vikkicarruth@nhs.net

Name and email address of your non executive director representative for Patient Safety

Amanda Federo amanda.fadero1@nhs.net

Name and email address of your Patient Safety Specialist/s

Nicky Creasey and Jane Cadman nicky.creasey@nhs.net jane.cadman7@nhs.net

What percentage of your staff have completed the patient safety training for level 1 within the organisation (%)

85.8%

Signature

I confirm I have completed this section accurately and can provide evidence to support my responses if requested by NHS England Workforce, Training and Education.

Name, email address and role of the person completing this section

Dawn Urquhart, AD HR Director, d.urquhart@nhs.net and Jo Jukes, Head of Integrated Education, joanne.jukes@nhs.net

Section 5 - Equality, Diversity and Inclusion

Please confirm whether your organisation has an Equality, Diversity and Inclusion Lead (o r equivalent):

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If 'yes' please add comments to support your answer sharing details of governance and links with education and training alonside the nominated name of your EDI lead for education and training; if 'no' please provide further detail

Sarah Feather is the lead for EDI but she is not specific for education and training her role crosses all areas of EDI issues across the Trust.

Integrated Education support the WRES and WDES submissions.

The Medical Education Manager is the Network lead for the BME (Inclusion and Diversity Network)

Please confirm that you liaise with your Equality, Diversity and Inclusion Lead (or equivale nt) to...

Please select only one option for each row.

	Yes	No
Ensure reporting mechanisms and data collection take learners into account?	Х	
Implement reasonable adjustments for learners with a disability?	Х	
Ensure policies and procedures do not negatively impact learners who may have a protected characteristic(s)?	Х	
Ensure International Graduates (including International Medical Graduates) receive a specific induction into your organisation?	х	
Ensure policies and processes are in place to manage with discriminatory behaviour from patients?	х	
Ensure a policy is in place to manage Sexual Harassment in the Workplace?	Х	
Do you have initiatives to support reporting of sexual harassment?	Х	
Has your organisation signed up to the NHS England Sexual Safety in Healthcare - Organisational Charter?	х	
Does your organisation have a designated sexual safety lead, such as a Domestic Abuse and Sexual Violence (DASV) lead?	х	

If 'yes' please add comments to support your answer; if 'no' please provide further detail:

Dr Simon Merritt is the trust designated sexual safety lead, and we have signed up to Sexual Safety In Healthcare Charter. We have developed and implemented a policy on sexual harassment in the workplace that is aligned to the Sexual Safety in Healthcare Charter. We developed our own e-learning awareness training in Sexual Safety in Healthcare. Our EDI Lead and colleagues in People Engagement team help support colleagues with disabilities who need additional support, in addition for resident and Trust grade doctors we liaise with the PSU at KSS Deanery to get support.

How does your organisation manage sexual harassment reports?

We have recently signed up the the national sexual safety charter. This has involved the creation of training resources, a central hub for information and the update and amendment of the trust policy for "Dignity, Respect and Sexual Safety at Work Policy". The trust ensures that all complaints of incivility, harassment, sexual harm, discrimination and bullying are treated seriously, compassionately and with confidence. We have a policy that details the process for managers and individuals, and an elearing awareness programme for all colleagues.

Postgraduate Deans and their teams are keen to consider responses and initiatives and s hare good practice. Please share details on EDI initiatives that are specific to or have an i mpact on education and training in your organisation and the email address for someone we can contact to discuss this further.

For several years we provided through our tariff 1 PA to support a Lead LED consultant (the first in Sussex), this role is now centrally funded by KSS Dean. We have Trainee Reps for our IMG/LED doctors across both sites, They have already refreshed the welcome pack for IMG/LED doctors and attend LFG. Deputy Director of Medical Education led a review and refresh of local induction practices, processes and resources, including a template handbook with new Trust values for divisions to use. In addition a new Induction checklist devised by Service Managers through new forum chaired by MEM has been circulated to all areas. In December 2024, an audit of local induction will be undertaken post placement rotation (December/April) to review effectiveness of new documents/process. These resources shared with SAS Tutors.

We continue to deliver sessions to our educational supervisors of which some have included unconscious bias training.

For education and training, what are the main successes for EDI in your organisation?

The increased portfolio of educational resources that support EDI within the organisation. There are monthly diversity dialogue sessions covering a wide variety of subjects and delivered by speakers with lived experiences. Sessions on the online learning platform have also been increased following feedback from learners, Include deaf awareness, neurodiversity modules, Inclusive communication in healthcare, and LGBTQI Awareness.

Pastoral support from the pastoral Fellowes for Medical has expanded to include Nurse Fellows (International/New to Care) AHP Fellow (International AHP on placement).

AHP- Our Trust Award-winning EDI Champion has enhanced team learning through introduction of EDI chat sessions, fostering open discussions on topics like unconscious bias, cultural sensitivity, and inclusive care. This initiative has strengthened team cohesion and created a more inclusive, reflective work environment, ultimately improving the workplace for our team and quality of care for all patients. We were awarded and recognised as a Veterans Aware organisation.

For education and training, what are the main challenges for EDI in your organisation?

Whilst we have a very proactive EDI colleagues they are frequently challenged by being able to have the time, funding and capacity to extend further the portfolio of educational resources and new initiatives that we would like to create, implement and evaluate.

Signature

I confirm I have completed this section accurately and can provide evidence to support my responses if requested by NHS England Workforce, Training and Education.

Name, email address and role of the person completing this section
Joanne Jukes - Head of Integrated Education and Sarah Feather EDI Lead joanne.jukes@nhs.net,

Section 6 - Assurance Reporting: learning environment and culture

Thinking about the learning environment and culture of your organisation, we are keen to hear about initiatives and good practice that are specific to or have an impact on educatio n and training. If you would like to share any examples, please provide a very brief descrip tion of the initiative/good practice, the professional group(s) this relates to and the email a ddress for someone we can contact to discuss this example further.

AHP -We have established a foundation skill programme for newly qualified and internationally recruited therapists within our organisation. This will build on consistency and builds on knowledge and skills that all therapists need in our organisation , also developing/reflecting on practice. Development and implementation of the multi-professional preceptorship workshop that will be launching in the new financial year.

Trust Essential skills for nurses Programme piloting a human factors with real work place incidents using Simulation to enhance learning experience and change practice.

Our Postgraduate Dysphagia Course makes us the only Trust in the region offering a comprehensive package, including 30+ hours of recorded theory, experiential learning, case studies, and a viva assessment.

To support knowledge base of colleagues reference patients with mental health needs we have in collaboration with SLAM commissioned a 7 day simulation programme. Pilot cohort of 10 staff started in October 2024.

Our Nursing Home Dysphagia and Mouthcare training, delivered twice monthly via MST, has successfully trained over 1,200 nursing home, care home, and domiciliary workers. By equipping non-Trust staff with the skills to recognise and manage dysphagia. This program enhances working relationships with community care providers, fostering closer collaboration and resulted in integrated approach to patient care

Plans for a new education centre Conquest site, KLS service will include areas for quiet reflection, also planning work pods in main hospital.

One of two pilot sites in KSS for Enhance to enhance leadership skills of FY1 doctors, project led by lead consultant supported by Lead PA.

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Quality Framework Domain 1 - Learning environment and culture Please select only one option for each row.

	We meet the standardfor all professions / learner groups we train	We have exceptions to report and provided narrative below
The learning environment is one in which education and training is valued and championed.	×	
The learning environment is inclusive and supportive for learners of all backgrounds and from all professional groups.		Х
The organisational culture is one in which all staff, including learners, are treated fairly, with equity, consistency, dignity and respect.	X	
There is a culture of continuous learning, where giving and receiving constructive feedback is encouraged and routine.	X	
Learners are in an environment that delivers safe, effective, compassionate care and prioritises a positive experience for patients and service users.	Х	
The environment is one that ensures the safety of all staff, including learners on placement.	х	
All staff, including learners, are able to speak up if they have any concerns, without fear of negative consequences.	X	
The environment is sensitive to both the diversity of learners and the population the organisation serves.	x	
There are opportunities for learners to take an active role in quality improvement initiatives, including participation in improving evidence led practice activities and research and innovation.	Х	
There are opportunities to learn constructively from the experience and outcomes of patients and service users, whether positive or negative.	X	
The learning environment provides suitable educational facilities for both learners and supervisors, including space and IT facilities, and access to knowledge and library specialists.	х	
The learning environment promotes multi-professional learning opportunities.	х	
The learning environment encourages learners to be proactive and take a lead in accessing learning opportunities and take responsibility for their own learning.	Х	

Areas of exception

From the professional groups you train, please select which professional group(s) are impacted from the list below.

Where you have multiple sites, if the issue is site specific, please select 'site specific' and enter the site name in the comments box.

If required you can add the details of the sub professions / specific specialties in the comments box.

Medicine Postgraduate

Medical Associate Professions

Please provide the details of the learner groups (and site if applicable) in the comments box e.g. mental health nursing, undergraduate dental training, operating department practitioners, pathology, dental nurses

Physician Associates - Practices being challenged as a result of the national social media campaign by the BMA.

Locally Employed Doctors/ (Medicine Post Gradaute) Trust - Cultural with locally employed doctors experiencing negative behaviours and discrimination from colleagues who were from their home country but were perhaps from different parts and would assume a superiority of position and this was reflected in their behaviours.

For the exceptions listed above, please provide further details including; a brief summary of the issues and challenges that are impacting your ability to meet the standard, any barr iers you are facing and what (if any) support do you need from WT&E.

Implemented a lead PA role, it is a 50/50 role with service and education. Their role is to improve and facilitate and improve understanding of the role. This will involve them working with educational leads across all professional groups, will support Enhance project. The Pastoral Fellowes and Chief Medical Officer provided support and met with the PA's regularly.

Medicine Postgraduate - Cultural with locally employed doctors experiencing negative behaviours and discrimination from colleagues who were from their home country but were perhaps from different parts and would assume a superiority of position and this was reflected in their behaviours.

In addition the Speak Up Guardian was available to speak to Medical Assistant Practitioners

Signature

I confirm I have completed this section accurately and can provide evidence to support my responses if requested by NHS England Workforce, Training and Education.

Name, email address and role of the person completing this section
Dawn Urquhart-d.urquhart@nhs.net - AD HR Education, Elaine Tate - Chiropody/Podiatry Managerelaine.tate1@nhs.net

Section 7 - Assurance Reporting: educational governance and commitment to quality

Thinking about the educational governance and commitment to quality of your organisatio n, we are keen to hear about initiatives and good practice that are specific to or have an i mpact on education and training. If you to would like share any examples, please provide a very brief description of the initiative/good practice, the professional group(s) this relate s to and the email address for someone we can contact to discuss this example further.

Peer audits as a service using a tool based on the NHSE Quality standards framework. Will use this tool to audit all learning environments.

Quality walks- these are undertaken every 6-8 weeks, led by the DME, DDME they occur in pairs (medical lead with either AD HR Education, Head of Integrated education and MEM role) across both sites targeting key clinical areas following results of the GMC Resident Doctors Survey and intelligence from the Pastoral Fellows, LFG. Meeting with resident doctors on placement in the clinical areas any concerns are escalated to relevant clinical management, Guardians of Safe Working, Deputy Chief Medical Officer, or Royal Colleges/Dean. Follow ups to issues raised are followed in LFG which are attended by Learner Reps, Educational Supervisors and Senior Service Reps.

University audits- Clinical areas are evaluated as a placement for students, this ensure that the areas meet the needs of the students and the placement areas meet the quality required.

Preceptorship quality award, this meets the national award of quality. This maps to the national preceptorship framework, this enables us to ensure that the requirements are being met to enable a robust preceptorship programme and provide support for newly qualified/newly registered nurses. The plan for 2024 is the development of a multi-professional preceptorship programme.

Quality Framework Domain 2 - Educational governance and commitment to quality Please select only one option for each row.

	We meet the standard for all professions / learner groups we train	We have exceptions to report and provided narrative below
There is clear, visible and inclusive senior educational leadership, with responsibility for all relevant learner groups, which is joined up and promotes team-working and both a multi-professional and, where appropriate, inter-professional approach to education and training.	X	
There is active engagement and ownership of equality, diversity and inclusion in education and training at a senior level.	×	
The governance arrangements promote fairness in education and training and challenge discrimination.	×	
Education and training issues are fed into, considered and represented at the most senior level of decision making.	×	
The provider can demonstrate how educational resources (including financial) are allocated and used.	×	
Educational governance arrangements enable organisational self-assessment of performance against the quality standards, an active response when standards are not being met, as well as continuous quality improvement of education and training.	X	
There is proactive and collaborative working with other partner and stakeholder organisations to support effective delivery of healthcare education and training and spread good practice.	Х	
Consideration is given to the potential impact on education and training of service changes (i.e. service re-design / service reconfiguration), taking into account the views of learners, supervisors and key stakeholders (including WT&E and Education Providers).		Х

Areas of exception

From the professional groups you train, please select which professional group(s) are impacted from the list below.

Where you have multiple sites, if the issue is site specific, please select 'site specific' and enter the site name in the comments box.

If required you can add the details of the sub professions / specific specialties in the comments box.

Medicine Postgraduate

Please provide the details of the learner groups (and site if applicable) in the comments box e.g. mental health nursing, undergraduate dental training, operating department practitioners, pathology, dental nurses

Development of new services not discussed with DME Rota changes

Movement of trainees without consultation

DME needs to be aware

For the exceptions listed above, please provide further details including; a brief summary of the issues and challenges that are impacting your ability to meet the standard, any barr iers you are facing and what (if any) support do you need from WT&E.

Not barriers as such but more understanding of the requirements of trainees on placement. Service manager set up by MEM to share information and raise awareness and issues

Signature

I confirm I have completed this section accurately and can provide evidence to support my responses if requested by NHS England Workforce, Training and Education.

Name, email address and role of the person completing this section Dawn Urquhart- d.urquhart@nhs.net, AD HR Education

Section 8 - Assurance Reporting: developing and supporting learners

Thinking about how you develop and support learners within your organisation, we are ke en to hear about initiatives and good practice that are specific to or have an impact on ed ucation and training. If you would like to share any examples, please provide a very brief d escription of the initiative/good practice, the professional group(s) this relates to and the e mail address for someone we can contact to discuss this example further.

The pastoral fellows have made a great impact for our medical staff at ESHT, they create a safe and secure environment for learners to be able to share any worries or concerns, which has had a positive impact on the student experience. We have expanded the role to develop clinical facilitators as an educational focus now includes a pastoral remit, as well as doing clinical visits to check on learners. Some, are qualified Professional Nurse Advocates or Restorative Supervisors and able to offer additional support.

We developed an ACP forum provides opportunity to network with other trainees as well as sharing experiences. Guest speakers have included the Chairman of the board. Our Pharmacy team achieved accreditation as a Training Centre for the Universities PG Cert in Pharmacy Practice. Affords good opportunity to self-assess where we are with education and practise supervisors, rotational training plans and resources. In addition, East Sussex Healthcare NHS Trust was one of 6 nominations for a National Trainee Pharmacist award.

We were awarded an HSJ Gold Award for our Dysphagia e-learning programme which has 18,000 users nationwide, in addition our Nursing Home Dysphagia and Mouthcare training, successfully trained over 1,200 nursing home, care home, and domiciliary workers. By equipping non-Trust staff with the skills to recognise and manage dysphagia, we are improving early detection and intervention, resulting in faster, more effective care for patients. These trained care staff can now refer directly into our service, eliminating the need for GP referrals streamlining the care pathway.

Quality Framework Domain 3 - Developing and supporting learners Please select only one option for each row.

	We meet the standardfor all professions / learner groups we train	We have exceptions to report and provided narrative below
There is parity of access to learning opportunities for all learners, with providers making reasonable adjustments where required.	Х	
The potential for differences in educational attainment is recognised and learners are supported to ensure that any differences do not relate to protected characteristics.	Х	
Supervision arrangements enable learners in difficulty to be identified and supported at the earliest opportunity.	х	
Learners receive clinical supervision appropriate to their level of experience, competence and confidence, and according to their scope of practice.	Х	
Learners receive the educational supervision and support to be able to demonstrate what is expected in their curriculum or professional standards to achieve the learning outcomes required.	х	
Learners are supported to complete appropriate summative and/or formative assessments to evidence that they are meeting their curriculum, professional and regulatory standards, and learning outcomes.	х	
Learners are valued members of the healthcare teams within which they are placed and enabled to contribute to the work of those teams.	Х	
Learners receive an appropriate, effective and timely induction and introduction into the clinical learning environment.		x
Learners understand their role and the context of their placement in relation to care pathways, journeys and expected outcomes of patients and service users.	Х	
Learners are supported, and developed, to undertake supervision responsibilities with more junior staff as appropriate.	Х	
Learners are encouraged to access resources to support their physical and mental health and wellbeing as a critical foundation for effective learning.	Х	

Areas of exception

From the professional groups you train, please select which professional group(s) are impacted from the list below.

Where you have multiple sites, if the issue is site specific, please select 'site specific' and enter the site name in the comments box.

If required you can add the details of the sub professions / specific specialties in the comments box.

All professions

Please provide the details of the learner groups (and site if applicable) in the comments box e.g. mental health nursing, undergraduate dental training, operating department practitioners, pathology, dental nurses

Local induction underwent a 12 month review and we have implemented some document and process changes which we are piloting in medicine until March 2025. At next placement rotation in December we will undertake an audit of the local induction to analyse if the new resources have improved the experience. We are also sourcing a digital solution in the form of an Induction App.

For the exceptions listed above, please provide further details including; a brief summary of the issues and challenges that are impacting your ability to meet the standard, any barr iers you are facing and what (if any) support do you need from WT&E.

No Response

Signature

I confirm I have completed this section accurately and can provide evidence to support my responses if requested by NHS England Workforce, Training and Education.

Name, email address and role of the person completing this section
Dawn Urquhart-d.urquhart@nhs.net- AD HR Education and Jo Jukes Joanne.jukes@nhs.net

Section 9 - Assurance reporting: developing and supporting supervisors

Thinking about how you develop and support supervisors within your organisation, we are keen to hear about initiatives and good practice that are specific to or have an impact on education and training. If you would like to share any examples, please provide a very brie f description of the initiative/good practice, the professional group(s) this relates to and the email address for someone we can contact to discuss this example further.

To support educational and clinical supervisors (medical) they are mandated to undertake the Professional Development Framework for Educators every 3 years this covers the seven domains for which Educational Supervisors have responsibility. In addition we signpost them to ongoing professional development courses for this role offered by the Deanery.

For our Advanced Clinical Practice Trainee supervisors we utilise the guidance and criteria set by NHSE South East ACP faculty. As an organisation we have developed a supervisor forum group with the aim to meet on a quarterly basis, this gives the group the opportunity to share learning and experiences together. We have also had the supervision lead from SE NHSE deliver a session, this also included a Q&A session. Any resources or sessions of interest are shared by the ACP lead with the supervisors.

Quality Framework Domain 4 - Developing and supporting supervisors Please select only one option for each row.

	We meet the standardfor all professions / learner groups we train	We have exceptions to report and provided narrative below
Formally recognised supervisors are appropriately supported, with allocated time in job plans/ job descriptions, to undertake their roles.	Х	
Those undertaking formal supervision roles are appropriately trained as defined by the relevant regulator and/or professional body and in line with any other standards and expectations of partner organisations (e.g. Education Provider, WT&E).	X	
Clinical Supervisors understand the scope of practice and expected competence of those they are supervising.	x	
Educational Supervisors are familiar with, understand and are upto-date with the curricula of the learners they are supporting. They also understand their role in the context of learners' programmes and career pathways, enhancing their ability to support learners' progression.	х	
Clinical supervisors are supported to understand the education, training and any other support needs of their learners.	Х	
Supervisor performance is assessed through appraisals or other appropriate mechanisms, with constructive feedback and support provided for continued professional development and role progression and/or when they may be experiencing difficulties and challenges.	×	
Supervisors can easily access resources to support their physical and mental health and wellbeing.	Х	

Areas of exception

From the professional groups you train, please select which professional group(s) are impacted from the list below.

Where you have multiple sites, if the issue is site specific, please select 'site specific' and enter the site name in the comments box.

If required you can add the details of the sub professions / specific specialties in the comments box.

No Response

For the exceptions listed above, please provide further details including; a brief summary of the issues and challenges that are impacting your ability to meet the standard, any barr iers you are facing and what (if any) support do you need from WT&E.

No Response

Thinking about the Educator Workforce Strategy, please confirm that your organisation

	Yes	No
Is aware of the Educator Workforce Strategy.	Х	
Ensures educators/supervisors undertake a skills gap / learning development needs analysis for this role.	х	
Ensures educators/supervisors have formal development to undertake this role.	Х	
Considers the educator workforce in wider clinical workforce planning.	Х	

If 'yes' please add comments to support your answer; if 'no' please provide further detail: We are implementing the Workforce Strategy, Educational and Clinical Supervisors access GMC mandated professional development courses. For ACP we have implemented an Supervisor forum to support and share best practice and issues related to the ACP pathway.

In addition we have implemented Restorative supervision for our non medical colleagues which is built on the PNA network within the Trust and our Supervision Policy has been updated and is currently going through our policy approval process. Legacy mentoring is due to be implemented across the Trust as well as a review of the role of the Practice Educator working with the Deputy Chief Nurse as part of the nursing workforce review.

Implementation of the Educator Workforce Strategy

We have partially implemented the recommendations of the Educator Workforce Strategy.

Signature

I confirm I have completed this section accurately and can provide evidence to support my responses if requested by NHS England Workforce, Training and Education.

Name, email address and role of the person completing this section
Dawn Urquhart- AD HR Education, d.urquhart@nhs.net and Jo Jukes Head of Integrated Education
joanne.jukes@nhs.net

Section 10 - Assurance reporting: delivering programmes and curricula

Thinking about how you deliver programmes and curricula to support training within your organisation, we are keen to hear about initiatives and good practice that are specific to o r have an impact on education and training. If you would like to share any examples, pleas e provide a very brief description of the initiative/good practice, the professional group(s) this relates to and the email address for someone we can contact to discuss this example further.

Skills workshops for midwifery students

Range of inhouse workshops that support skill, competence and confidence. They include full range clinical skills NIPE, PETALS, IT systems (Badgernett) and essential skills including Documentation, Anatomy and Physiology, Infection Control, Teaching technique and practice on SIM models. Highly evaluated by midwifery students of all years, as encourages a safe space for questioning, teamworking and a cohesive learning environment.

Midwifery lead is Nicola Kelly nicola.kelly12@nhs.net

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HCSW: enhanced Induction programme, working in partnership with East Sussex Colleges. In addition new HSCW to the NHS/new to the organisation have support of nurse pastoral fellows in the learning environment. (joanne.jukes @nhs.net)

AHP- Broaden Advance Clinical Practice training and development offers to help develop the strategic and leadership pillars of practice across community services to ensure that we really utilise our clinical leaders. elaine.tat1@nhs.net

Established a foundation skill programme for newly qualified and internationally recruited therapists within our organisation

Quality Framework Domain 5 - Delivering programmes and curricula Please select only one option for each row.

	We meet the standardfor all professions / learner groups we train	We have exceptions to report and provided narrative below
Practice placements must enable the delivery of relevant parts of curricula and contribute as expected to training programmes.	Х	
Placement providers work in partnership with programme leads in planning and delivery of curricula and assessments.	х	
Placement providers collaborate with professional bodies, curriculum/ programme leads and key stakeholders to help to shape curricula, assessments and programmes to ensure their content is responsive to changes in treatments, technologies and care delivery models, as well as a focus on health promotion and disease prevention.	X	
Placement providers proactively seek to develop new and innovative methods of education delivery, including multi-professional approaches.	x	
The involvement of patients and service users, and also learners, in the development of education delivery is encouraged.	х	
Timetables, rotas and workload enable learners to attend planned/ timetabled education sessions needed to meet curriculum requirements.		х

Areas of exception

From the professional groups you train, please select which professional group(s) are impacted from the list below.

Where you have multiple sites, if the issue is site specific, please select 'site specific' and enter the site name in the comments box.

If required you can add the details of the sub professions / specific specialties in the comments box.

Site specific

Medicine Postgraduate

Nursing

Allied Health Professionals

Please provide the details of the learner groups (and site if applicable) in the comments box e.g. mental health nursing, undergraduate dental training, operating department practitioners, pathology, dental nurses

Medicine Postgraduate: this is Foundation Year, GP and IMT resident doctors on placement in the main across medical specialties and sub-specialities in the main but there are also some pressures from the a small number of surgical subspecialty.

Nurses/AHP- as with their resident doctor colleagues, the service pressures and workload impacting on the Trust have resulted in staff being pulled from training - recently this has been observed in Core Skills Training and Preceptorship training.

For the exceptions listed above, please provide further details including; a brief summary of the issues and challenges that are impacting your ability to meet the standard, any barr iers you are facing and what (if any) support do you need from WT&E.

Workload/Service Impacts-the significant increase number of patients accessing through ED departments shows no sign of decreasing as evidenced from national media scrutiny.. In addition, the mix of patients coming through ED departments & medical wards is changing with higher numbers of patients with mental health needs. This is impacting on divisional financial and human resources. In addition, attacks on staff are impacting on sickness levels putting more pressure on their colleagues . This will require a national solution.

Post Expansions- The LTWP highlights needs for additional placements and demand will increase over the years. However, posts being offered are Trust and not Tariff funded posts, the result is significant financial pressure on service budgets already stretched. This will require a national solution.

Educational Supervision- as current staff retire the lack of colleagues wanting to undertake this role is increasing. Greater recognition from a national level as to the value of educational support roles across all professional programmes needs a national solution.

Signature

I confirm I have completed this section accurately and can provide evidence to support my responses if requested by NHS England Workforce, Training and Education.

Name, email address and role of the person completing this section
Dawn Urquhart-d.urquhart@nhs.net- AD HR Education and Joanne Jukes Head of Integrated
Education joanne.jukes@nhs.net

Section 11 - Assurance reporting: developing a sustainable workforce

Thinking about developing a sustainable workforce within your organisation, we are keen to hear about initiatives and good practice that are specific to or have an impact on education and training. If you would like yo share any examples, please provide a very brief description of the initiative/good practice, the professional group(s) this relates to and the email address for someone we can contact to discuss this example further.

NHS Career Academy with East Sussex College Group: this initiative will enable us as a Trust to develop robust sustainable career pathways into all roles across the organisation. With the withdrawal of the UoB from both the Hastings and Eastbourne sites, the ability for the Trust to recruit from the local community is critical. With T Levels placements growing across nursing, midwifery, AHP we are hosting a digital T Level student in 2025 and looking to source additional placements across clinical and non-clinical roles. In addition we are working with the college to develop the full range of career pathways across full range of NHS roles.

Careers Evening for Foundation Doctors: We support an annual evening for all FY doctors with speakers who talk about their own career journeys across the professional groups, including experience as an F3 doctor doing a 50/50 educational role. There are opportunities to speak to Service/educational leads and also get portfolio and interview skills advice and techniques. Postponed for 2024 due to service pressures the rotational initiative with the Hospices will be revisited in 2025. The aim of this project is to enable a robust workforce with the option for staff to try areas they may not have worked in without the commitment of a substantive post. The project will also include a "Bootcamp" intense training programme covering the educational requirements of all areas included. For further information contact Jo Jukes joanne.jukes@nhs.net

Quality Framework Domain 6 - Developing a sustainable workforce Please select only one option for each row.

	We meet the standardfor all professions / learner groups we train	We have exceptions to report and provided narrative below
Placement providers work with other organisations to mitigate avoidable learner attrition from programmes.	Х	
Does the provider provide opportunities for learners to receive appropriate careers advice from colleagues	Х	
The provider engages in local workforce planning to ensure it supports the development of learners who have the skills, knowledge and behaviours to meet the changing needs of patients and service.	×	
Transition from a healthcare education programme to employment and/or, where appropriate, career progression, is underpinned by a clear process of support developed and delivered in partnership with the learner.	X	

Areas of exception

From the professional groups you train, please select which professional group(s) are imp acted from the list below.

Where you have multiple sites, if the issue is site specific, please select 'site specific' and enter the site name in the comments box.

If required you can add the details of the sub professions / specific specialties in the com ments box.

No Response

For the exceptions listed above, please provide further details including; a brief summary of the issues and challenges that are impacting your ability to meet the standard, any barr iers you are facing and what (if any) support do you need from WT&E.

No Response

Signature

I confirm I have completed this section accurately and can provide evidence to support my responses if requested by NHS England Workforce, Training and Education.

Name, email address and role of the person completing this section
Dawn Urquhart- d.urquhart@nhs.net- AD HR Education and Joanne Jukes Head of Integrated Education, joanne.jukes@nhs.net

Section 12 - Final Submission

Board level sign-off (Premises, Learning Environment, Facilities, and Equipment)

I confirm that our premises, learning environments, facilities and equipment are: suitable for the performance of the Services; accessible, safe and secure; comply with any applicable Health and Safety Legislation, any other Applicable Law, Guidance, appropriate risk management clinical guidance, good healthcare practice and the requirements of any relevant Regulator, and are sufficient to enable the Services to be provided at all times and, in all respects, in accordance with the NHS Education Funding Agreement.

Board level sign-off

I confirm that the responses in this SA have been signed off at board level

Name, email address and role of Board representative for education and training Jenny Darwood- Interim Chief People Officer-j.darwood@nhs.net

Please confirm the date that board level sign off was received:

* 28/10/2024

Final Submission (please only tick this box when you ready to submit your self-assessmen t)

I confirm that all sections of this self-assessment have been completed and that this is the final version for submission