

Annual Report of the Clinical Fellowship Programme – Medical & Nursing 1 July 2019

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Agenda Item No: 8.4

Trust Board Report

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|---------------------------------------|---|
| Meeting Date: | 1 July 2019 |
| Title: | Annual Report of the Clinical Fellowship Programme – Medical & Nursing |
| Report of: | <p>To provide an update to the Trust's board on the achievements of the Clinical Fellowship Programme during 2018/19.</p> <p>The report is presented under the following sections;</p> <ul style="list-style-type: none"> • Background • Programme Governance arrangements <p>Medical Clinical Fellowship Programme</p> <ul style="list-style-type: none"> • Recruitment and retention • Quality and safety • Education • Partnerships • Finance <p>Nursing Clinical Fellowship Programme</p> <ul style="list-style-type: none"> • Recruitment and retention • Education • Developments |
| Action Requested: | Receive |
| For the attention of the Board | |
| Assure | <ul style="list-style-type: none"> • As at 31 March 2019 the Trust had 172 clinical fellows in post. • During 2018/19 18 clinical fellows have exited the programme to take up HEE training posts. • The CFP programme team are currently working closely with Worcester Acute Hospitals NHS Trust, to support the recruitment of a total of 27 clinical fellows to 17 vacancies at clinical fellow level and 10 at senior clinical fellow level. • The Nurse CFP has made a total of 75 offers of employment. • The Trust has been nominated 'Best organisation for Learning and Development' by The Nursing Times. |
| Advise | |
| Alert | |
| Author + Contact Details: | Zoe Marsh, Deputy Head of Education Tel 01902 307999 ext. 6175 Email zoe.marsh@nhs.net |

Trust Board Report

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| Links to Trust Strategic Objectives | <p>1. Create a culture of compassion, safety and quality</p> <p>2. Proactively seek opportunities to develop our services</p> <p>4. Attract, retain and develop our staff, and improve employee engagement</p> |
| Resource Implications: | None |
| CQC Domains | <p>Safe: patients, staff and the public are protected from abuse and avoidable harm.</p> <p>Effective: care, treatment and support achieves good outcomes, helping people maintain quality of life and is based on the best available evidence.</p> <p>Responsive: services are organised so that they meet people's needs.</p> <p>Well-led: the leadership, management and governance of the organisation make sure it's providing high-quality care that's based around individual needs, that it encourages learning and innovation, and that it promotes an open and fair culture.</p> |
| Equality and Diversity Impact | EIA assessment completed |
| Risks: BAF/ TRR | <p>4562 - locum spend</p> <p>5247 - Risk ID tbc- GMC Sponsorship</p> |
| Risk: Appetite | |
| Public or Private: | Public |
| Other formal bodies involved: | <p>The University of Wolverhampton</p> <p>The General Medical Council</p> <p>The Nursing and Midwifery Council</p> |
| References | |
| NHS Constitution: | <p>In determining this matter, the Board should have regard to the Core principles contained in the Constitution of:</p> <ul style="list-style-type: none"> • Equality of treatment and access to services • High standards of excellence and professionalism • Service user preferences • Cross community working • Best Value • Accountability through local influence and scrutiny |

Report Details

1. Background

1.1 In 2016 The Royal Wolverhampton NHS Trust, in partnership with The University of Wolverhampton - Academic Institute of Medicine established the Clinical Fellowship Programme (CFP). A high quality training programme for junior doctors seeking experiential service based learning outside of the standard UK training programmes.

1.2 The objective of the CFP is to attract high quality medical staff with an attractive training and benefit package thereby reducing reliance on costly short-term locum staff to support service delivery.

1.3 Clinical Fellows undertake duties from Core Trainee level up to and including consultant equivalent, depending on their skills and experience. Clinical fellows support the Trust's on-call rota, support 7 day service provision and in certain specialties undertake lists i.e. endoscopy lists.

1.4 In late 2018 the Trust approved a business case to expand the CFP to include Nursing, to support the recruitment of 320 nurses to the programme over a period of 4 years.

2. Programme structure and governance arrangements

2.1 The CFP organisational structures can be found in Appendix A and the governance reporting structure in Appendix B.

Medical Clinical Fellowship Programme

3. Recruitment and retention

3.1 The table below shows the numbers of fellows in post as at 31 March 2019.

Table 1: Number of Clinical Fellows

| | Total 172 | |
|---------------------------|------------------|----|
| Clinical Fellows | Div 1 | 15 |
| | Div 2 | 52 |
| | Div 3 | 3 |
| Senior Clinical Fellows | Div 1 | 63 |
| | Div 2 | 22 |
| | Div 3 | 9 |
| Advanced Clinical Fellows | Div 1 | 3 |
| | Div 2 | 5 |
| | Div 3 | 0 |

3.2 The Trust is delighted to have appointed Dr Mark Whitsey as Consultant in Care of the Elderly. Mark spent 2 years with the Trust as a Senior Clinical Fellow before continuing his specialty training with HEE and will be returning to the Trust as a consultant in September this year.

Visas and sponsorship

3.3 The CFP was awarded GMC sponsorship status in June 2018. This has allowed the CFP to recruit doctors by sponsoring for both GMC registration and Tier 2 visa.

3.4 During 2018/19 the CFP sponsored 48 doctors through the scheme.

Table 2: GMC sponsored by division

| | Total 48 | |
|---------------------------|-----------------|----|
| GMC sponsored by division | Div 1 | 18 |
| | Div 2 | 28 |
| | Div 3 | 2 |

Exit Routes

3.5 **58** fellows left the programme during 2018/19. The exits routes of these fellows are shown below.

Table 3: Clinical fellow exit route data

| Clinical Fellow Exit Route | Total |
|----------------------------|-------|
| UK HEE Programme | 18 |
| Other NHS Trust | 10 |
| Return to home country | 18 |
| Unknown | 13 |

4. Quality and safety

Serious untoward incidents

4.1 The table below the numbers of trainees and clinical fellows directly involved in Serious Untoward Incidents during 2017/18 and 2018/19.

Table 4: Serious untoward incidents

| 17/18 Serious Untoward Incidents | 18/19 Serious Untoward Incidents |
|----------------------------------|----------------------------------|
| Trainee doctors | Trainee doctors |
| 7 | 2 |
| Clinical Fellows | Clinical Fellows |
| 0 | 2 |

Appraisal and revalidation

4.2 As at 31 March 2019, 100% of clinical fellows are compliant with their annual appraisal requirements. There were 98 positive recommendations, 1 deferral (request for more time) and 0 non-engagement recommendations made to the General Medical Council for clinical fellows during the 2018/19 revalidation cycle to-date.

Table 5: Clinical fellow revalidation recommendations

| Recommendation Type | Total |
|---------------------|-----------|
| Positive | 98 |
| Deferral | 1 |
| Non-engagement | 0 |
| TOTAL | 99 |

Service improvement projects and audits

4.3 16 clinical fellows have completed, or are in the process of completing, service improvement projects and audits. Examples of the service improvement projects and audits can be found below;

Table 6: Clinical fellow service improvement projects/audits

| Specialty | Project/Audit title |
|----------------------------------|---|
| Surgery | Improving patient flowthrough the fast track colonoscopy service by introducing referral criterion to include blood test |
| Paediatrics | Improving junior doctors paediatric clinical skills |
| T&O | Reducing need for blood cultures and antibiotic therapy in post-operative patients exhibiting pyrexia as a normal inflammatory response |
| O&G | Improving the quality of hand-over process in the labour ward |
| Trauma & Orthopaedics | Introduction of a pre and post-operative ultrasound bladder scan protocol for arthroplasty surgeries to manage post-operative urinary retention |
| Diabetes Endocrinology | To improve compliance with national and local guidelines for glucose monitoring in stroke patients |
| Cardiology | Improving compliance with local guidelines regarding the measurement of venous blood glucose and glycated haemoglobin in patients with acute coronary syndrome. |
| Respiratory | Reducing duplication of blood sampling (and therefore blood loss) in critical care patients by improving documentation |

| | |
|----------------------------------|---|
| Anaesthesia Critical Care | Improving patient temperature monitoring in recovery |
| Dermatology | Reduce reporting times for skin cancer biopsies by introducing orange lids on high priority biopsy pots |
| Paediatrics | Standardising blood culture practice to reduce contaminated samples (competency framework) |
| T&O | Enhance patients flowthrough in Fracture Clinic |
| Urology | Improving handover process to capture referral workload |
| EPAU | Reducing waste of scan slots in medically managed miscarriage |
| General Surgery | To improve the compliance with local and national guidelines in prescribing prophylactic antibiotics |
| Stroke | Improving the management of constipation in the elderly |

5. Education

5.1 The table below shows MSc in Clinical Medicine activity since the start of the programme in August 2016 to 31 March 2018.

Table 7: MSc module activity

| Module Title | Completed | Currently Studying Towards |
|------------------------------------|-----------|----------------------------|
| Career & Personal Development | 53 | 12 |
| Service Improvement | 32 | 9 |
| Design & Deliver Medical Education | 2 | |
| Leading transformation and change | 7 | 2 |
| Perspectives on Leadership | 4 | |
| People Development in Healthcare | 1 | |
| Advanced Research skills | 9 | 1 |
| Research Dissertation | 2 | |
| Specialist Practice | 9 | 2 |

5.2 The Trust has 14 Clinical Supervisors and 35 Educational Supervisors supporting clinical fellows.

6. Partnerships

6.1 Whilst The Clinical Fellowship Programme was founded by The Royal Wolverhampton NHS Trust, The programme has now developed into an organisation made up of partners. By having a partnership approach, it allows the programme to be a shared service across NHS organisations.

6.2 The CFP now has a number of partner organisations. To-date the partners are as follows;

- Worcestershire Acute Hospitals NHS Trust

- Black Country Partnership Foundation Trust
- North Staffordshire Combined Healthcare NHS Trust
- Compton Hospice

6.3 The following Trusts have also expressed an interest in a CFP partnership

- University Hospitals of North Midlands NHS Trust
- Walsall Healthcare NHS Trust

6.4 The CFP programme team are currently working closely with Worcester Acute Hospitals NHS Trust, to support the recruitment of a total of 27 clinical fellows to 17 vacancies at clinical fellow level and 10 at senior clinical fellow level.

7. Growing our own consultants through CESR

7.1 The Certificate of Eligibility for Specialist Registration (CESR) is a process for doctors who have not followed Specialty Training programme in the UK, to gain specialist qualification and apply for a Consultant position. Application for CESR typically takes 5 years, at the end of which the applicant needs to provide evidence to demonstrate experience, skills and competency equivalent to that obtained in the Specialty Training programme. Evidence needs to be collected and submitted as per the generic and specialty-specific GMC recommendations.

7.2 The Trust currently has 4 doctors who have completed the CESR process during their employment with us and are now in consultant posts within the Trust, 1 in Obstetrics and Gynaecology, 1 in Trauma and Orthopaedics and 2 in Radiology.

7.3 Through the CFP CESR workstream, there are c20 doctors engaged in the CESR programme which includes;

- An allocated CESR supervisor
- CESR peer group
- In-house training sessions
- Support and validation of evidence through the CESR ARCP process

8. Finance

8.1 As part of the recent Medical Workforce Group (MWG) meetings with divisions, the numbers of required fellows for each directorate has now been confirmed. Through the MWG meetings it was confirmed each directorate has funds within their existing budget to fund these posts. With the exception of the following directorates, who are now required to write business cases to support the expansion of fellows in their directorates;

- Anaesthetics
- Obstetrics and Gynaecology
- Oncology

Nurse Clinical Fellowship Programme

9. Recruitment and retention

9.1 Since the Nurse Clinical Fellowship Programme was established;

- A total of **75** offers of employment have been made, of the 75 offers made;
 - **5** nurses are now in post (UK **1** international **4**)
 - **15** nurses have confirmed start dates ranging between July-September 2019 (UK **7** international **7**)
 - **46** international nurses are completing various components of the NMC process. The anticipated start date for these candidates will be November/December 2019.
 - **9** nurses have withdrawn their application/deferred.

9.2 Recruitment to the programme continues, receiving application from both UK and international nurses.

9.3 The CFP is also open to internal applicants and is advertised 2 times per year. At present the CFP has attracted 8 internal nurses to the programme (cohort 1); the programme is currently inviting applications for cohort 2 where we anticipate a further 30 nurses will join the programme.

10. Education

The University of Wolverhampton

10.1 The Trust has worked in partnership with the University of Wolverhampton to develop an MSc in Clinical Nursing with bracketed routes in Research, Leadership and Management, Teaching and Learning or a chosen clinical specialism. The MSc is due to be validated by the University of Wolverhampton by September 2019. The Nurse CFP is also offered at BSc level through the universities existing BSc Nursing (top-up) degree.

10.2 Of the 8 internal nurses on the CFP, 6 are completing their MSc and 2 are completing their BSc Nursing Studies (top-up).

10.3 The MSc in Clinical Nursing has been designed to mirror the MSc in Clinical Medicine and is supporting joint learning with both nurses and doctors being taught together on nearly all of the modules.

OSCE Bootcamp

10.4 It is an NMC requirement that international nurses complete an OSCE examination before they can receive their NMC pin.

10.5 The Trust has a well-established and successful in-house OSCE 'bootcamp' designed to embrace and enhance the existing knowledge and skills of the Trust's international nurses, whilst guiding them in transferring these in line with UK and Trust policies and practices

10.6 3 International nurses recruited through the CFP have recently completed the programme and sat their external OSCE examination 16th June 2019. The results are

expected by 28th June, if successful, the nurses will receive their NMC pin.

11. Achievements

11.1 Through the Nurse CFP, the Trust has been nominated 'Best organisation for Learning and Development' by The Nursing Times.

11.2 The Nurse CFP team has submitted an article to the British Journal of Nursing describing the early success of the programme.

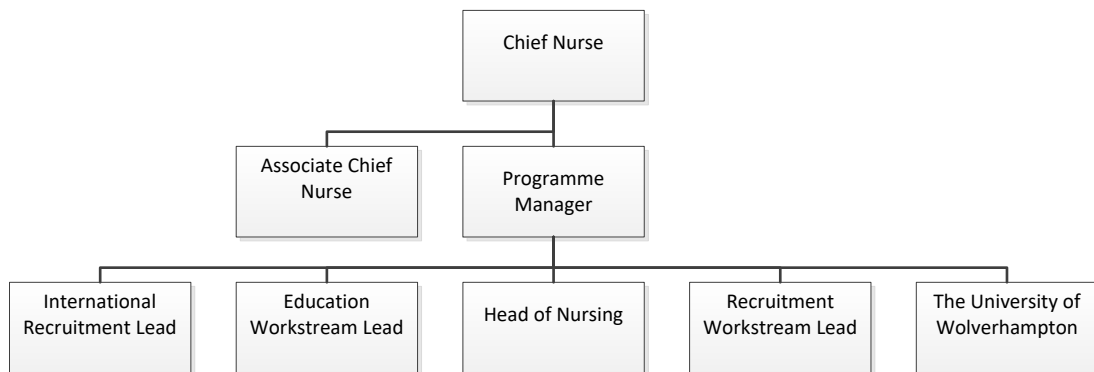
11.3 The Nurse CFP team will be presenting at the International Nurse Education Conference in Barcelona in April 2020.

Appendices

Appendix A – CFP Organisational Structures

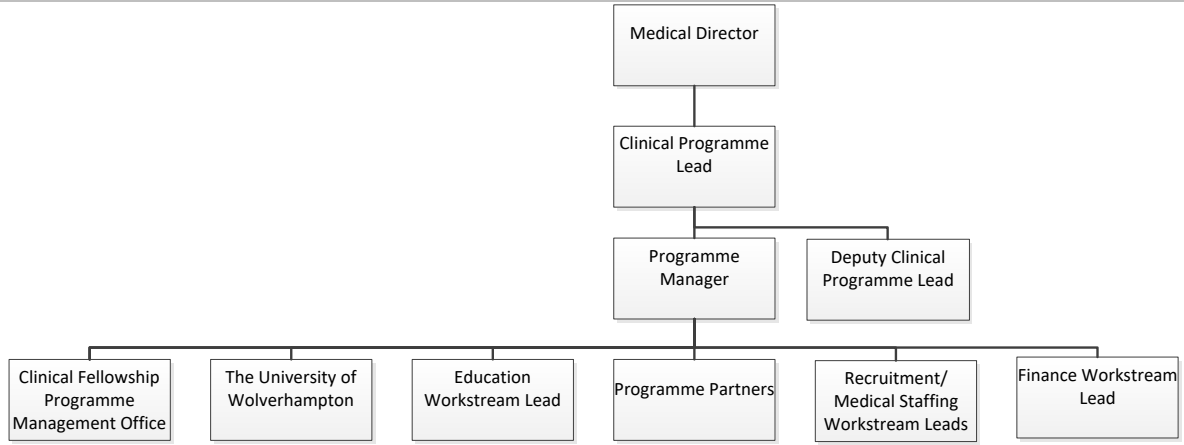
The structures below show the lines of communication for the Medical and Nursing Clinical Fellowship Programmes.

Figure 1: Nursing CFP Organisational Structure



Medical

Figure 2: Medical CFP Organisational Structure



Appendix B – CFP Governance Structure

