Professional, Statutory and Regulatory Body Reporting –
Report from School of Health Sciences (SHS)

SHS is required to report to Health Education England and PSRBs concerns raised by students in practice on a monthly basis and an annual report is considered by Board of Studies. The last report was presented to the November 2017 Board of Studies, and one of the recommendations was that the report should be shared with Senate.

The rationale for this is to ensure that Senate is made aware of this important activity; and to note the considerable impact on students who are involved in caring for patients in some serious incidents, and to how the School and University can work together to support students. For example external events, such as major accidents or terrorist incidents, may have a specific impact in SHS, as students may be caring for those directly affected, or they may be involved in lock-down of hospitals.

It is proposed that the annual reporting is presented to Senate.

Recommended action

Educational Quality Committee is asked to:

(i) consider the escalation of concerns outlined in the report

(ii) approve specific actions undertaken by the School of Health Sciences to mitigate against risk to students

(iii) note the auditing and exceptional reporting to PSRBs and the Care Quality Commission (CQC) in relation to these incidents
Escalation of Concerns to Health Education England (HEE):
Report of key themes to SHS Board of Studies:
Annual Report
November 2016-November 2017

1 BACKGROUND

The ‘Concerns Reporting Process’ was implemented by HEE in November 2016 to meet the requirements laid out in the HEE Quality Framework. The Quality Framework sets out HEE’s expectations for quality and represents a single framework through which HEE evaluate, manage and improve the quality of education and training for all healthcare. It is based on six domains that reflect the key components for quality in work based placements for all learner groups. Each domain is then supported by a set of evidence-based quality standards that learning environments are expected to demonstrate. The domains have a small set of metrics that will act as proxy measures to evidence these standards. The aim is that this is facilitated by the triangulation of data and information including insight on patient safety by local teams.

The ‘concerns reporting process’ was developed to ensure that the HEE local office (previously NCEL) we can meet these requirements. The aim is to examine the quality of learning in placements from a multi professional perspective and to triangulate information to determine if a placement quality review is required.

The report is required on a monthly basis and this summary report covers reporting from City between November 2016 and November 2017.

The range of concerns covered in this report include:

- Bullying, harassment or inappropriate behaviour observed/reported by students or academic staff in placement areas
- Regulators requesting exceptional reports, or similar, related to a specific learning environment
- Quality issues that have been raised via another route e.g. whistleblowing by another staff member or serious incident investigation
- Concerns student have raised regarding their safety or the safety of a patient
• Any occasion where students have been removed from a learning environment and reasons why
• Major incidents where students are involved in the care of the pubic, including terrorist incidents

Concerns are reported as low, medium or high risk, this is defined by the HEI submitting the report.

2 SUMMARY OF HIGH-RISK INCIDENTS/REPORTS

• Students involved in incidents that have been treated as ‘never events’ by healthcare providers. These include dispensing of the wrong medication to patients and a retained swab post-surgery. There were a total of five medication errors reported in the period.
• Students involved with violent incidents; these all relate to mental health nursing in the time period. Three incidents related to actual assaults on students, and one necessitated a student giving a statement to the police as a consequence of a patient: patient incident. There was one case of a serious assault (stabbing with a chisel) by a patient on two members of staff which resulted in serious injury and hospitalization. This was witnessed by two first year students.
• Students involved with completed suicide. There was one incident of completed suicide involving a student nurse from City in the reporting period.
• Student reports of restraint and seclusion requiring investigation. One of these has been taken forward by the CQC.
• CQC reports; these related to a number of placement areas in the reporting period and necessitated action plans and reports to the regulator, in addition to a formal minuted meeting at HEE.
• Concerns relating to the capacity of placement areas after over-recruitment by City in 2016/17. This has necessitated a report to the regulator and a minuted meeting at HEE. This relates to our midwifery programmes and affected our recruitment for 2017/18, which was constrained.
• Students reported unacceptable graphic content uploaded to social media by another student.
• Student reported inappropriate touching and racially motivated criticism by a staff member.
• Data breaches reported of personal details of students and lack of NHS SmartCards for students leading to students utilizing NHS employees cards and passwords and therefore having access to confidential files.
• Unprofessional behavior of a male student towards a female member of staff
• A lone student left unsupervised with six post-partum women, some of whom were post-surgery or had serious complications of childbirth. This relates to one incident in one NHS trust.
• Safeguarding lead in a London borough raised a general alert concerning a student midwife at City with respect to assisted delivery contrary to the Midwives Act 1902
• Impact of a ransomware attack which affected the NHS in May 2017. Staff were unable to contact clinical areas, clinics which students were attached to were cancelled, students could not access their on-line rotas, and teaching in practice was cancelled.
• Two students were reported to the School by the Local Authority Designated Officer (LADO) for the London Borough of Islington relating to concerns about the safety of children in their care. This was dealt with by the relevant social services departments; the students concerned were both suspended from practice.
• Two NHS trusts where students are placed were identified as having unsafe cladding in the aftermath of the Grenfell Tower tragedy. A full report was sent to the regulator with fire officer reports.
• The junior doctor’s annual survey raised concerns about safety and patient care in A and E at a trust where our students are placed. We cooperated with an unannounced visit and supplied a report to Health Education England. Nursing students remain in A and E at this trust.

3 SUMMARY OF MEDIUM-RISK INCIDENTS/REPORTS

• There were a number of reports from students feeling unsupported in practice. These included staff shortages, which had an impact on the quality of supervision, lack of understanding of the scope of practice for students, poor mentoring and supervision and concerns about the impact of staff sickness. Staff shortages were reported throughout the period and most commonly in the nursing and midwifery clinical areas. This has continued throughout the year.
• There were reports of poor mentoring and supervision.
• Students asked to perform tasks beyond their capabilities or student remit.
• Students left unsupervised during night duty. There were three separate incidents reported.
• There were three terrorist incidents in the period where students were involved in the care and treatment of the public. These incidents affected nursing students only.
• During the period students at one hospital experienced high press coverage and picketing in relation to one high profile patient. It was intimidating for students.
• There was one reported incident of forgery of signatures in practice. This was in the radiotherapy clinical area.
• There was one reported incident of misplaced paperwork which could have impacted on patient care.

4 SUMMARY OF LOW-RISK INCIDENTS/REPORTS

• Students’ poor communication skills reported by practice staff
• A number of students reported not feeling welcomed into the practice area
• Communication between staff and students; lack of organization relating to placements

5 DISCUSSION AND RECOMMENDATIONS

All the reported incidents been addressed, and these are regularly reviewed. In some cases these have been reported outside of City, this is when safeguarding issues, students’ safety or criminal activity is suspected. We have also completed reports to regulators and the CQC (eighteen reports and two investigations in total in the reporting period).

There has been increased reporting from practice leads since the introduction of the school’s web form in April 2017; although reports have increased it is possible that this is due to the system being in place rather than an increase in actual incidents. Pending approval by this Board of Studies students will be able to directly report their concerns using the web form, so we anticipate higher reporting levels.
The terrorist attacks in London are reported as medium risk, the rationale for this is that the impact on the student’s educational experience was managed by academic and professional staff and students were supported throughout; this is not intended to diminish the actual impact of the attacks on the public.

- The school is currently updating its Business Continuity Plan addressing how support for students involved in caring for the public during and a consequence of major incidents should be managed going forward, particularly with respect to students working when the school is closed (at weekends, evening and nights). This is now in the School’s Business Continuity Plan.
- The web form is proving to be effective in gathering data and subject to approval at this Board of Studies, there is now an approved process.
- The School should consider whether areas that have high incidence of reporting (especially of high-risk incidents) should provide increased support for students in practice, and whether the current support is adequate. Themes are being considered in the Practice Education Committee.

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20th November 2017