

POLICY DOCUMENT

Removal of trainees from a setting or organisation in relation to serious concerns

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1.0 Introduction

- 1.1 The GMC Quality Improvement framework states, “if there are training concerns deans can remove one or more groups of students or trainees from a setting or organization”.
- 1.2 Whilst removal of trainees is a severe sanction that is uncommon it is important that the threat of removal must not be theoretical. This must be a genuine option.
- 1.3 This policy details the process for considering and enacting the removal of trainees. It should be read in conjunction with the relevant patient safety concerns policies, but removal may be on grounds other than patient safety such as failure to fulfil the required curriculum or failure to provide adequate training as described in the GMC’s publication “The Trainee Doctor”. It also follows the framework of the COPMeD (UK) Guidance Document.
- 1.4 Removal is normally an act of last resort after due opportunity has been given to resolve the concerns unless there is an urgent patient or trainee safety matter.

2.0 General Medical Council Policy

- 2.1 Paragraph 43 of the GMC Quality Improvement Framework states: “If there are training concerns, deans can remove one or more groups of students or trainees from a setting or organisation. Such a change should involve the appropriate medical Royal College or Faculty at postgraduate level. It must be reported to the GMC immediately and recorded as part of the school or deanery report to the GMC, setting out the actions taken to remedy the situation where appropriate in the accompanying action plan.¹”
- 2.2 A named Deputy Dean can also make these decisions in the absence of the Postgraduate Dean when designated to do so.
- 2.3 Where the roles of Postgraduate Dean and Director of Education and Quality (DEQ) are held by separate individuals the decision would be made by the Postgraduate Dean with whom statutory responsibility sits. This should normally be in consultation with in consultation with the DEQ and Managing Director, although the decision is the Dean’s alone.
- 2.4 Removal of training approval for a programme, trainer² or training environment is a GMC responsibility and the decision would be made by the GMC Director of Education and Standards or nominated deputy. The Postgraduate Dean, as the Education Organiser, can however remove or re-allocate trainees from a specific programme, trainer or training environment.
- 2.5 The timescale for removal of training approval must be agreed with the GMC. It should be noted that once the GMC is aware of serious concerns, maintaining trainees in that environment is not normally permitted and therefore their timescales are normally short.

¹ The GMC Quality Improvement Framework for Undergraduate and Postgraduate Medical Education and Training in the UK.

² Named clinical supervisor, educational supervisor, clinical tutor or undergraduate tutor/organiser

3.0 “Cause for Concern” risk escalation

3.1 The General Medical Council has determined that the GMC Education and Standards Directorate should be informed promptly of concerns in the following circumstances:

- Persistent or immediate patient safety concerns;
- Educational concerns/ removal of trainees likely;
- Emerging high impact concerns (e.g. media or political interest); or
- GMC advice or support is required.

3.2 HEE has adopted these same four areas with two additional areas. The HEE DEQ, Medical Director or designated deputy should be informed promptly of concerns in the following circumstances:

- Persistent or immediate patient safety concerns;
- Educational concerns/ removal of trainees or students is likely;
- Emerging high impact concerns (e.g. media or political interest);
- GMC or other regulator advice or support is required and therefore HEE should be aware;
- Where HEE advice is required but the level of concern is not sufficient to inform a regulator; or
- Where the actions of the LETB itself may be called into question.

3.3 Therefore when removal of trainees is to be considered the GMC would wish to be aware and would be willing to provide advice and support to the Postgraduate Dean. Therefore this should normally be discussed with the GMC (Director or Assistant Director of Education and Standards). As all LETBs are subcommittees of HEE discussions should also take place with the HEE DEQ or Medical Director. Such discussion should normally be preceded by a discussion with the Managing Director of relevant LETB.

3.4 Examples of circumstances when removal of trainees might be considered include: confirmed undermining, poor or inadequate supervision, inappropriate resources or support, service reconfiguration not fulfilling the requirements of the trainees’ curriculum.

4.0 Consideration of removal decision

4.1 The effect of both removing and not removing trainees on the risks to patient care and the welfare of trainees should be considered, but the primacy of upholding the standards in “The Trainee Doctor” and/ or immediate patient safety concerns raised by trainees shall not be diminished or contingent upon risks identified by service

4.2 Consideration should be given in discussion with HEE to triggering a Risk Summit to ensure open discussion of the issues, triangulation with other bodies, consideration of the risks of the decision and contingency planning. (NB. It is HEE that can trigger a risk summit as the statutory body but the HEE DEQ can delegate this to the LETB DEQ or Postgraduate Dean.)

4.3 Where removal of trainees may impact on service provision this should be discussed with the Regional Medical Director who may call a risk summit at short notice.

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- 4.4 However if immediate removal is required this may proceed in advance of or without a risk summit. (N.B. GP Specialty Registrars in General Practice are supernumerary and therefore removal of these by definition does not impact on service provision.)
- 4.5 Consideration should also be given to other students and trainees attending or placed in the environment and consideration of the impact on the circumstances on these groups.
- 4.6 The Dean or named designated deputy in the absence of the Dean should discuss the concerns and that removal is being considered with Medical Director or Chief Executive of a Trust (and seek confirmation that this will be communicated with those remaining of the Director of Medical Education, Medical Director and Chief Executive) or with the Trainer (Educational Supervisor in a General Medical or Dental Practice) prior to a final decision being made.
- 4.7 The Dean or named Deputy will consider the organisational response to the concerns raised including organisational insight, acceptance of the concern(s) raised, contrary evidence and mitigating actions if offered.
- 4.8 There are three levels of removal:
- Removal of individual trainees due to breakdown of relationships, individual risk or non-approval of the educator to whom they are attached. This is an individual trainee / educator issue and actions taken in this regard will not normally trigger escalation or a risk summit and is therefore not otherwise covered by this policy. The decision to remove individual trainees on this basis may be made by Deputy Deans.
 - Removal of multiple or all trainees (this is potentially a temporary measure).
 - Permanent removal of training approval (whilst a new application for approval can be made this is potentially a permanent removal). The removal of training approval is a GMC decision through a process that is more protracted.
- 4.9 It should be noted that if the GMC require removal of trainees or if they remove training approval then it is not possible for the LETB to place trainees or allow them to remain in that environment. Similarly placement of trainees is dependent upon maintained GMC approval of the programme and in the case of General Practice the educators. Failure to maintain this would result in automatic removal or non-placement.
- 4.10 The time frame of removal of approval must be sanctioned by the GMC.
- 4.11 If removal is temporary consideration should be given to whether funding for the posts should be removed or remain to support interim solutions.

5.0 Exclusions

- 5.1 This policy does not apply to the following:
- Gaps in the programme;
 - Non rotation of trainees due to the inability of fulfilling their personal training requirements, trainee health or equality needs;

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- Removal of individual trainees due to breakdown of relationships, individual risk or non-approval of the educator to whom they are attached (currently GP educators).
- Out of Programme (OOP) decisions;
- The determination of appropriateness of placements for curriculum stage (e.g. ST1 versus ST4); and
- Planned reduction in training capacity to fulfil workforce plans, changes in funding or national training priorities, “decommissioning” which may apply quality criteria;
- The decision of a Local Education Provider (LEP) to reduce training posts;
- Occasions when a training environment (such as a training practice) is left fallow by mutual agreement after difficult circumstances.
- Removal of non-medical students as such decisions are made by their own Higher Education Institution or regulator, for example a University in conjunction with the Nursing and Midwifery Council.

6.0 Notification of other stakeholders

6.1 If a Risk Summit is to be held stakeholders will be present. If it is not then there are key stakeholders that must be informed. Consideration should be given to discussion with these regardless of a Risk Summit being triggered.

6.2 The following should be advised of the removal of trainees:

- NHS England – Region and Area Team;
- Lead Clinical Commissioning Group (normally via NHS England);
- NHS Trust Development Authority (if non Foundation Trust);
- Monitor (if Foundation Trust);
- Care Quality Commission: and the
- Relevant Medical Royal College or Faculty. (This is a requirement of the GMC Quality Improvement Framework. The Medical Director of HEE will normally make this notification.)

6.3 Given HEE’s whole workforce remit and that HEE commission training for a wide variety of professional groups, discussions should be had with all organisations that place students or trainees in the affected setting including Medical Schools and HEIs.

6.4 Whilst quality management of education and training of placements will be the remit of the Postgraduate Dean or DEQ of the geographical LETB if other LETBs rotate trainees into local placements the Postgraduate Dean or DEQ of those LETBs should normally be consulted prior to removal.

6.4 In line with the GMC Quality Improvement Framework the relevant Medical Royal College should be informed of the concerns and possible removal of trainees. Such communication will normally be by the Medical Director of Health Education England in confidence to the President or relevant senior College Officer.

7.0 Communication

7.1 If a decision is made to remove trainees then formal notification should be given to the Chief Executive of the Trust and to the Director of Education and Standards of the General Medical Council.

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- 7.2 It is important that all affected trainees (current and those expected to rotate to the organisation) are informed and supported.
- 7.3 Given the potential impact on service and that removal makes a statement about the provision of education and possibly patient care, public and media interest should be anticipated.
- 7.4 Communication plans should consider print and broadcast media, social media criticism, elected representatives, members of the public, other staff and former staff, students and trainees.
- 7.5 Risk summit conversations are not covered by the Freedom of Information Act as those present must have the freedom to speak openly but the minutes are.
- 7.6 All concerned within HEE should proceed with integrity and candour and reports, minutes etc. should be written accurately whilst protecting the identity of individuals.

8.0 Protection of whistle-blowers

- 8.1 If the consideration of removal is triggered by an individual or individuals raising concerns it is vital that they do so under the protection of the LETB, HEE and the NHS in general in line with The HEE whistleblowing policy. Steps should be taken to support them and where possible protect their identity.
- 8.2 Individual trainees should not be exposed to risk summits or the media.

9.0 Review

- 9.1 This policy will be reviewed annually.