Procedure for Governance for Clinical Trainees

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Bodies consulted:	
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1   Introduction

The Tavistock and Portman NHS Foundation Trust (hereafter the Trust) is committed to ensuring that students are provided with adequate training and information in relation to governance.

The Trust recognises the vital contribution that effective governance makes to the clinical management of individual patients and the efficient management of services and resources.

The Trust recognises that it is of paramount importance to ensure that information is efficiently managed, and that appropriate policies, procedures and management accountability provide a strong governance framework for information management, that enhance the use of information whilst taking all reasonable steps to minimise the risks of misuse and/or loss of information.

Furthermore the Trust is committed to the safety of its patients, staff and students and as such requires the completion of certain trainings to ensure that responsibilities and reporting mechanisms are understood and followed. This will equip students to work within our structures and assure our patients that they are to be treated in a safe environment.

All trainees that will be conducting clinical work with a patient of the Trust are required to obtain a governance passport and a Letter of Completion before they begin this work. The conditions of receipt of this passport are the completion of a range of trainings and checks as follows:

- Disclosure and Barring Service Check
- Information Governance Training
- Carenotes (patient record system) training
- Acceptance of all Trust policies and procedures

- Acceptance of policies relating to supervision and health records and completion of a quiz on these areas
- Clinical Induction both onsite and online

2 Purpose

The purpose of this procedure is to set out the process by which students on clinical trainings seeing patients in Trust services obtain their governance passport.

It details the training that is required, the method for recording compliance and sets out the responsibilities of staff and students in relation to governance for clinical trainees from both within the Directorate of Education and Training and in clinical directorates.

3 Scope

This procedure applies to all students on a Trust course that has a clinical component and that entails seeing a patient of the Trust. These courses are as follows:

- Child, Community and Educational Psychology
- Psychological Therapies with Children, Young People, and Families
- Psychodynamic Psychotherapy
- Psychodynamic Psychotherapy with Couples
- Forensic Psychodynamic Psychotherapy
- Inter-Cultural Psychodynamic Psychotherapy
- Interdisciplinary Training in Adult Psychotherapy
- Systemic Psychotherapy
- Professional Doctorate in Advanced Practice and Research: Social Work and Social Care

Exceptions
Some students and trainees are not required to follow this procedure as outlined below.

Trust Staff

Trust staff (including those on Child Psychotherapy training that are employees of the Trust) are exempt and this training is provided as a condition of their employment. Human Resources will contact all Trust staff when training is due and staff are expected to comply as a condition of their employment.

Students on a Clinical Training that are not seeing a patient of the Trust

Students on the courses listed above that are **not** seeing a patient within the Trust are not required to obtain a governance passport.

However students should note that it is often the case that placements fall through or change during the academic year. Therefore all students not seeing a patient of the Trust are encouraged to complete all of the training, with the exception of Carenotes, so that they are prepared should this happen. Training cannot easily be arranged later in the academic year and students that do not complete the training early in the year may find that they are delayed in beginning their clinical work.

Students on the Child, Community and Educational Psychology course seeing a patient at Camden and North West London NHS Trust.

Students studying Child, Community and Educational Psychology seeing a patient at Camden and North West London NHS Trust (CNWL) are required to complete the governance passport, with the exception of Carenotes as this is a condition of their contract with CNWL.

They must also have an honorary contract with the Tavistock and Portman as a condition of their contract with CNWL. This will be arranged by the Dean's Office Manager on completion of all training.

Students not studying on a Department of Education and Training course

Specialist Clinical Psychology Placement (SCPP) students and all other students of other institutions that are working in the Trust but that are not studying on one of the courses listed above are not covered under this procedure and should discuss their training needs with their line manager.

4   Definitions

Student: A student is any person studying on a course offered by the Trust.

Moodle: Is our electronic learning platform

Moodle Page: This is the page "Governance for Clinical Trainees" which can be found on Moodle

Welcome Week: An introductory week held for all new students held in the week prior to their beginning their programme of study

The Trust: Tavistock and Portman NHS Foundation Trust

Governance Passport: Refers to the mandatory components of training that students seeing patients at the Trust are required to complete before they can commence clinical work

Letter of Completion: This is the letter student will receive when they have completed their Governance Passport

5   Duties and responsibilities

Associate Dean, Academic Governance and Quality Assurance: Is responsible for overseeing the implementation of this procedure and ensuring that the requirements are up to date and are applied across all courses.

Dean's Office Manager: Is responsible for communicating the training requirements to all new students, tracking and monitoring compliance with this procedure and following up on outstanding training with students and course leads. They will also provide reports as required and review the procedure in conjunction with the Associate Dean.

Course Leads: Are responsible for identifying which students are seeing Trust patients and communicating this to the Dean's Office Manager when requested. They must also advise them of all changes to placement locations during the academic year. They should ensure that all their students have completed their training before they are allocated a patient and support the Dean's Office Manager in enforcing compliance.

Course Administrators: Are responsible for recording the location of student placements in the student record system.

Clinical Leads and Service Managers: Are responsible for ensuring that they do not allow students to commence clinical work with patients until they

have completed all stated training requirements. If they do allow students to do so before completion of the requirements, then they will take the responsibility for doing so. They are also required to sign off requests for email addresses and Carenotes log-ins.

Students: All students that are seeing a patient of the Trust are required to abide by this procedure and to ensure that they keep up to date with changes and developments

6 Procedures

Training Requirements

6.1 The following Trainings must be completed in order for a student to be issued with a Letter of Completion:

6.1.1 **Disclosure and Barring Service (DBS) Check:** This is a check of criminal records and barred lists.

6.1.1.1 DBS checks can be progressed as soon as a student accepts an offer of a place on a programme of study with the Trust. When they do this they will be contacted by their course administrator who will advise them how to proceed.

6.1.2 **Information Governance:** is the way organisations 'process' or handle information. It covers personal information, relating to patients/service users and employees, and corporate information, e.g. financial and accounting records. This training provides a way for students to deal consistently with the many different rules about how information is handled and helps to prevent breaches of patient data.

6.1.2.1 Students should book themselves on to a session by following the link on the Moodle page. Sessions last for one hour.

6.1.3 **CareNotes Training:** CareNotes is the Trust patient record system. Students will use this system to record all appointments, make notes, records outcome measures, complete necessary paperwork and write letters.

6.1.3.1 Training dates will be advertised on the Moodle page and students are asked to book themselves onto a session with the training team. Sessions last 3 hours and are on site. Students must attend the entire session.

6.1.4 **Accept all Trust policies and procedures:** These cover all aspects of working with a patient of the Trust and it is essential that students are familiar with them

    6.1.4.1   There is a link to all the policies and procedures on the Moodle page. Students should read and familiarise themselves with these before completing the "Compliance Confirmation". By completing this confirmation students agree to follow all policies and procedures in the course of their clinical work and study.

6.1.5 **Clinical Induction:** The clinical induction provides an introduction to working clinically within the Trust. This is comprised of two parts:

    6.1.5.1   Onsite: Students must attend the Clinical Induction held during welcome week and sign in and out. This covers:

        6.1.5.1.1 Patient Risk assessment,

        6.1.5.1.2 Caldicott Guardian and Clinical Governance

        6.1.5.1.3 Safeguarding Children.

    6.1.5.2   Those that do not attend the session in welcome week are required to attend a Trust induction at a later date. This may delay the start of their clinical work.

    6.1.5.3   Online: There are 10 videos on the Moodle page that students must watch. These are:

        6.1.5.3.1 Providing and Measuring a Clinically Effective Service

        6.1.5.3.2 Patient Advice and Liaison Service

        6.1.5.3.3 Prevent (Anti-Terrorism strategy training)

        6.1.5.3.4 Information Governance

        6.1.5.3.5 Copyright

        6.1.5.3.6 Patient and Public Involvement

        6.1.5.3.7 Working Safely

        6.1.5.3.8 Safeguarding Adults

        6.1.5.3.9 Safeguarding Children

        6.1.5.3.10   Information Management and Technology

    6.1.5.4   Once they have watched the videos students must complete the quiz that is on the Moodle page which covers all of the videos.

6.1.6 **Clinical Supervision and Health Record Management Policies:** It is essential that all students seeing a patient at the Trust maintain accurate and timely records regarding their patient work and that they receive regular clinical supervision. In addition to section 6.1.4

above students must read and accept all policies relating to clinical supervision and patient record management. These are

    6.1.6.1   Clinical Supervision Procedure

    6.1.6.2   Discharge, Transfer and Closure of Clinical Cases Procedure

    6.1.6.3   Health Records Management Procedure

6.1.7 They must then complete a quiz on these procedures which can be accessed on the Moodle page.

Location of Student Placements

6.2   In late August, prior to the upcoming academic year, the Dean's Office Manager will collect information on all students that are on a clinical course in the next academic year.

6.3   Information will be shared with course leads and they will be required to return this identifying the location of all student placements two weeks before welcome week.

6.4   If the location of a placement is unclear then the course lead should indicate so. Students in this position will be encouraged to complete all training, with the exception of CareNotes, and will not be issued with a Trust email or log in until the location of their placement is confirmed.

6.5   During the academic year if further students join the course or if the location of a placement is changed, it is the responsibility of the course lead to inform the Dean's Office Manager of these changes.

Trust Email Addresses and Login's

6.6   Trust email addresses will be provided only to those clinical trainees that are seeing a patient of the Trust.

6.7   The Dean's Office Manager will provide a list of all trainees requiring an email address to the IT Helpdesk a week before welcome week and they will set up accounts for these students.

6.8   The Dean's Office Manager will issue usernames and logins to students during welcome week.

6.9   In the case of trainees that join the course late or if the location of their placement changes the Dean's Office Manager will complete the request when information is received from the course lead as in section 6.5.

Carenotes Access

6.10 Access to Carenotes will not be given until all other training is complete.

6.11 The Dean's Office Manager will action all Carenotes user requests for students and pass them to the relevant clinical directorate for signing.

6.12 Informatics will not process any user requests for students that have not been signed off by DET.

Monitoring of Compliance

6.13 The Dean's Office Manager will contact all students one week prior to welcome week reminding them of the training requirements (some students will be contacted earlier as detailed in section 6.21) and directing them to the Moodle page to complete the training/book onto courses as required.

6.14 A briefing to all clinical trainees will be provided during the clinical induction during welcome week.

6.15 The Dean's Office will hold a spreadsheet detailing the various aspects of the training. Here they will log what training is completed and what is outstanding.

6.16 Training will be marked as complete when the following conditions are met:

6.16.1 **DBS Check**: This will be checked through SITS. Course Administrators are responsible for updating the student record when a DBS check is received.

6.16.2 **Information Governance**: Students must upload their certificate to MyTap when this training is complete. The Dean's Office Manager will run weekly reports to assess completion and keep records for the governance passport.

6.16.3 **CareNotes**: The system trainers will advise the Dean's Office Manager when training is complete and they will update the record.

6.16.4 **Accept Trust Clinical Policies and Procedures**: Once accepted in Moodle an alert will be sent to the Dean's Office Manager and they will update the record.

6.16.5 **Clinical Induction**

6.16.5.1 **Onsite**: Students must attend the session in welcome week. They will be advised of the date when they accept their offer and must sign in and out of the session. The Deans' Office Manager will then update the record.

6.16.5.2 **Online**: When students pass the quiz an alert will be sent to the Dean's Office Manager who will update the record

6.16.6 **Accept Clinical Supervision and Health Record Management Policies and pass quiz**. When students pass the quiz an alert will be sent to the Dean's Office Manager who will update the record.

6.17 When all training is complete the Dean's Office Manager will update SITS to record this and will issue a letter of completion as detailed below.

Letter of Completion

6.18 When all training is complete the students will be issued with a Letter of Completion. This will be sent to the student, course lead and the clinical service manager by the Dean's Office Manager and the student can commence clinical work at the course lead and clinical teams discretion.

6.19 All training is required to be completed by November 1st in the students first year of study.

6.20 The letter is valid for a period of 2 years from the date of issue.

6.21 If any student is on a placement at the Trust for a longer period, or if more regular training updates are required, then the clinical team in which they are based will be responsible for ensuring that training is up to date and in line with local procedures.

Clinical Supervision and Health Records Management

6.22 All students seeing a patient at the Trust must be in receipt of regular clinical supervision regarding their clinical work.

6.23 This will be provided by the clinical team in which they are located.

6.24 The student must ensure they attend the sessions or meeting in which this supervision is provided. The student's clinical supervisor must ensure that they are attending regularly.

6.25 Students must also maintain records in line with the Health Records Management Procedure. Failure to do so may result in students being investigated under the Trust Professional Suitability Procedure and ultimately termination of training.

Non – Compliance with Governance Requirements

6.26 Failure to comply with this procedure may result in clinical trainees being delayed in their clinical work, the Trust will not be held responsible for these delays of for any additional fees incurred as a result of non-compliance.

6.27 The Dean's Office Manager will send weekly emails to course leads and students from welcome week until 1st November reminding them of the requirements and requesting their completion.

6.28 If students fail to complete the training by November 1st the Dean's Office Manager will advise the course lead and the student will be asked to account for their failure to complete the required training.

6.29 The Trust will not be responsible for delays to clinical work that are a result of a student's failure to complete these training requirements.

6.30 Students that delay commencing clinical work may incur additional course fees.

Child, Community and Educational Psychology Students.

6.31 The course Child, Community and Educational Psychology starts before welcome week and therefore will have an amended procedure as outlined below.

6.32 Students attend for an induction in June. Their email addresses will be requested in advance by the Dean's Office Manager and issued.

6.33 DBS checks will also be completed at this time.

6.34 CareNotes training will be arranged for these students and they will be notified of the date by the Dean's Office Manager.

6.35 They will be registered on Moodle in September and be able to access the relevant pages to enable them to complete their training which should be completed as above.

6.36 Those students that are seeing a patient of another Trust should liaise with the Dean's Office Manager who will advise them of the requirements.

6.37 All sanctions and deadlines as outlined above also apply to students on this course.

Safeguarding Level 2 & 3 and other additional training

6.38 Only the training outlined above is covered by the governance passport

6.39 Trainees may be required to carry out additional trainings as directed by the clinical directorate in which they are working.

6.40 It is the responsibility of the clinical directorate to arrange and monitor compliance with these requirements.

6.41 Students must comply with all training requests issued by their clinical team/directorate.

Annual Review

6.42 At the end of each academic year the Dean's Office Manager will review the status of all students in possession of a Letter of Completion.

6.43 All students that have completed their programme of study will be written to advising that the letter is no longer valid and that any continued clinical work with the Trust must be accompanied by an honorary contract or an employment contract.

6.44 This letter will be copied to the relevant clinical service manager and the clinical lead for the location of their placement.

6.45 From the date of this letter any requirements will be monitored by clinical services and DET shall no longer monitor compliance.

7 Training Requirements

7.1 The Dean's Office Manager will provide training to course leads, recruitment advisors and course administrators on the application of this procedure.

8 Process for monitoring compliance with this Procedure

8.1 Reporting to the Associate Dean for AGQA and course leads will be provided on a weekly basis between welcome week and November 1st. Following this monthly reports shall be provided.

8.2 The Dean's Office Manager will be responsible for regularly updating course leads of students with outstanding training.

8.3 Clinical teams will not allocate patients to students without having been informed by DET that all training is complete. DET will retain responsibility for tracking compliance and following up with those that have training outstanding

9 References

https://tavistockandportman.nhs.uk/training/prospective-students/application-journey/welcome-week/

http://moodle.tavistockandportman.ac.uk/login/index.php

10   Associated documents[1]

https://tavistockandportman.nhs.uk/about-us/governance/policies-and-procedures/

Appendix A : Equality Impact Assessment

1. Does this Procedure, function or service development affect patients, staff, students and/or the public?

YES

If NO, this is usually an indication that the Procedure, function or service development is not relevant to equality. Please explain that this is the case, or explain why it is relevant to equality even though it does not impact on people:

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2. Is there reason to believe that the Procedure, function or service development could have an adverse impact on a particular group or groups?

NO

If YES, which groups may be disadvantaged or experience adverse impact?

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[1] For the current version of Trust procedures, please refer to the intranet.

Age – specific age groups & issues of inter-generational fairness YES / NO

Disability – people with impairments   YES / NO

Gender – women, men, transgender people   YES / NO

Race – people of different ethnic groups   YES / NO

Religion and belief – people of different faiths and beliefs YES / NO

Sexuality – especially lesbian, gay, and bisexual people   YES / NO

Other ……………………………………………………….YES / NO

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*3. If you answered **YES in section 2,** how have you reached that conclusion? (Please refer to the information you collected e.g., relevant research and reports, local monitoring data, results of consultations exercises, demographic data, professional knowledge and experience)*

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4. Based on the initial screening process, now rate the level of impact on equality groups of the Procedure, function or service development:

Negative / Adverse impact:

Low…….
(i.e. minimal risk of having, or does not have negative impact on equality)

Positive impact:

High …….
(i.e. highly likely to promote, or clearly does promote equality of opportunity)

Medium………
(i.e. likely to promote, or does have some positive impact on equality of opportunity)

Low………
(i.e. not likely to promote, or does not promote, equality of opportunity)

N.B. A rating of 'High' negative / adverse impact' means that a Full Equality Impact Assessment should be carried out (available from the Trust's Policy Lead)

A rating of 'Medium negative' or 'Low' positive impact may mean that further work has to take place, especially where the Procedure, function, service development is designed to promote equality of opportunity

Date completed ……………………………………..

Name ……………………………………………

Job Title ………………………………………