

**Health Education North West** 

# enhance



#### Guidance notes for Foundation Programme Directors

## **Background**

The Enhance programme is an educational offer to healthcare professionals in training. It looks to help create a healthcare workforce that are adept at working across organisational boundaries to support excellent patient care.

The broad goal of Enhance is to address the educational priorities that recognise that tomorrow's healthcare workers will work within an increasingly complex system. This complexity arises from three main sources:

#### Increased clinical complexity

•as patients live longer with more multimorbidity

#### Increased societal complexity

•as we learn to make population health, access to healthcare and environmental sustainability key considerations of our day to day clinical work

#### Increasing system complexity

•where the primary-secondary care boundary becomes more blurred and there are more layers and levels of management and leadership organisations (CCGs, ICBs, PCNs) than ever before.

As a response to these challenges, the Enhance programme offer a vision of how future healthcare should be delivered. In this vision, future healthcare professional will be part of an integrated care system where everybody has the enhanced generalist skills to work collaboratively across multiprofessional teams, champion person-centred care, reduce health inequalities and improve population health.

Patients will benefit by having better patient experience, improved health outcomes, more accessibility and equity in health and better continuity of care. Trainees will benefit by having more opportunities for place-based training, individualised professional development, greater flexibility in working and training and greater job satisfaction. The whole health system will benefit by having a more resilient and flexible workforce aligned to emerging integrated care systems, improved retention of workforce, improved collaboration and productivity across teams and organisations and increased patient safety.

Health Education England (HEE) North West, using the Longitudinal Integrated Foundation Training (LIFT) model, supports integrated community and hospital based training. Such placements are the main learning pathway to deliver Enhance in the School, with particular focus on the health and wellbeing of deprived community, vulnerable populations and health inequalities. These Enhance placements aim to provide useful learning opportunities for Foundation Trainees by supporting their acquisition of foundation competencies, while they explore the wider impact of healthcare and their place in the healthcare system.

## Format of training

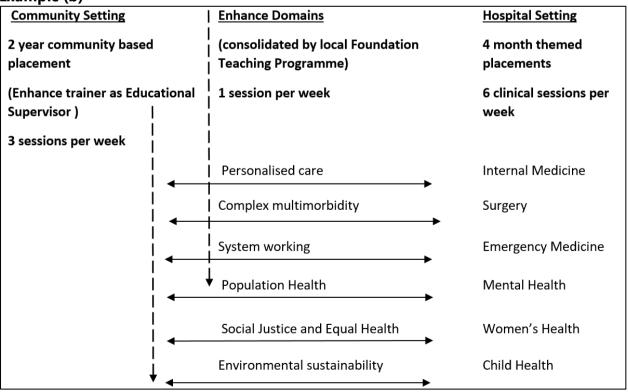
At present most trainees within the School undertake six separate four-month placements in two years, alternating between hospital settings (Medicine, Surgery, ED) and community/off-site settings (GP, mental health Trusts and other specialities). Each placement provides a separate Clinical Supervisor (CS). Educational Supervisors (ES) are often hospital consultants who may have limited exposure to the trainee over the two-year period see **example (a)** below.

Within Enhance, trainees have a named Enhance trainer, the Educational Supervisor (ES) for two years. The trainee has 3 sessions per week in this community setting. The trainees undertake six, four-month, themed hospital attachments (at 6 sessions per week) over the two years. The themed hospital attachments will augment and consolidate knowledge of the Enhance domains through different settings in the health care system – see **example (b)** below. Learning support is consolidated within the hospital attachment by the attendance at the formal Foundation teaching program, 1 session per week, which will also support professional peer networking (see appendix 1 for example)

#### Example (a)

Track	FY1	FY1	FY1	FY2	FY2	FY2
Placement	Diabetes	Neurosurgery	Old Age	General	Accident	Care of
			Psychiatry	Practice	and	the
					Emergency	Elderly
Site	Hospital	Hospital	Mental	Community	Hospital	Hospital
			Health			
			Trust			

#### Example (b)



### **Enhance domains**

The HEE Enhance programme has developed the Enhance Handbook. The handbook outlines the background to the programme, its structure, expectations on participants, and guidance on the types of learning activities that may be usefully undertaken to meet the programme's outcomes.

This Enhance programme outlined six domains and four cross-cutting themes that would enhance the generalist skills of trainees. The six domains of Enhance are the building blocks of the programme. Each of them have five specific outcomes that will guide which learning activities need to be delivered by the trainers and which work-base activities the learners need to experience. The four cross-cutting themes will run throughout the Enhance programme as a link and a support for achieving the outcomes of different domains.

#### The six domains of Enhance

#### Person-centred practice

Treating patients in a holistic, coordinated manner, involving them in their care decisions and supporting them to manage their own health.

#### **Population** health

Improving health and wellbeing for all preventive through measures, addressing wider determinants of health and reducing health inequalities

#### Complex multimorbidity

Working together to optimize care for patients with complex co-morbidity, through shared decision making with patients, carers and colleagues

#### Social Justice and health equity

Promoting a fair and just society and reducing health inequalities, with an ultimate aim of improving health and wellbeing of populations.

#### System

Working beyond and across traditional organisational boundaries in integrated and innovative ways to improve health and wellbeing.

#### Environmental sustainability

Taking responsibility for adoption and spread of sustainable health care practices and being an advocate for action on environmental issues.

#### The four cross-cutting themes of Enhance

#### Wellbeing

Prioritising taking care of yourself and others, with an awareness strategies to support wellbeing may be unique to everyone.

#### **Digital**

Promoting ethical uses of digital technology to optimise healthcare outcomes, reduce health inequalities facilitate collaboration and information sharing.

#### Leadership

of compassionate, Promotion collaborative and inclusive leadership which focuses on improving health and wellbeing.

#### **Transformative** reflection

Using critical reflection to reframe and develop our own decision making, cultivating new perspective on complex, uncertain situations

It is important to highlight that the Enhance is designed as 'outcomes-based'. This allows the learners to determine their own route and pace, designed so that they will be able to evidence their learning and development in a range of ways, including e-learning, reflective accounts, supervised learning events, audits and QI projects.





# **Enhance programme Evaluation**

Trainees within the Enhance programme will be expected to achieve all the requirements of the Foundation Programme Curriculum for each year of the Foundation Programme as set out by the UKFPO, which will be assessed by their ARCP. Evidence for their competency will be provided through the HORUS portfolio as will their progression with the vertical teaching themes.

In addition, the success of the Enhance programme will be evaluated through local feedback questionnaires from trainees, patients and supervisors and the GMC national training surveys. Trainees within the Enhance programme (and control groups) may be asked to perform additional psychometric testing at interval periods throughout the programme to assess improvement in patient centred care.

Foundation Programme Directors (FPDs) and their associates will work closely with the named CS and the Enhance ES. This will support the development of the themed Enhance placements and to ensure the longitudinal Enhance domains are embedded in the Foundation teaching programs. Themed hospital placements will require a competence mapping matrix which will be aligned to the themes for community placement.

# **Implications for Local Education Providers (LEPs)**

The NW Enhance Trailblazer programme started in August 2022 with two pilots in Blackpool and Morecambe Bay (see appendix 2). From August 2023 additional expansion posts in the North West will be delivered following the Enhance format of training.

FPDs and their associates would be required to convert one existing traditional training track (as in example (a) above) to the newer Enhance track (detailed in example (b) above). By doing this, a community setting placement of the traditional track will run throughout the two years of Foundation Training generating an extra four-month themed placement in the hospital setting.

FPDs and their associates will need to work closely with the community based Enhance educational supervisor and hospital consultant trainers to support the development of the themed Enhance placements and to ensure the longitudinal learning goals are embedded in the Foundation Teaching Programs. Themed hospital placements will require a competence mapping matrix which will be aligned to the Enhance domains.

Training and support for the LEP Foundation Faculty, hospital trainers and GP supervisors will be provided by HEE in the set up and implementation of this project. The HEE Enhance faculty throughout the Enhance programme will also provide ongoing support. Professional networking between LEPs and those involved in the supervision of the Enhance trailblazer, for the purpose of sharing of best practise is expected to occur as part of the HEE support networks.

## **Next steps**

Foundation programmes who take part in Enhance are asked to use the Enhance format in all extra training tracks for 2023, both expansion and oversubscription posts. The result should be a broad-based set of 6 placements with the community based Enhance placement in a longitudinal format.

If more than one Enhance track will be placed in your programme, another suitable set of placements will be needed. You may wish to make the second track a mirror image of the first, thus increasing the complementarity of the affected units rather than decreasing it (due to the community sessions).

Suitable community settings capable Enhance trainees, with the resultant extra time commitment, need to be identified.

The following general principles should guide the implementation of Enhance Tracks:

- 1. The LIFT model based in general practice is the preferred and default format for proposals. LIFT based in other broad specialities, such as psychiatry, will be considered.
- 2. The LIFT model of three sessions weekly in the longitudinal element and seven sessions in the 4-month placement should be maintained. Sessions can be varied over time to minimise travel. Out of hours work is not a curriculum requirement, though is often felt desirable where provided, it should not reduce the longitudinal element. Operational guidance is available from the School.
- 3. Should a GP placement not be available for LIFT 2023 (and confirmed by the GP School), but predicted for 2024, the track may revert to the 'conventional' model of a 4-month GP placement in FY2.
- 4. Should a GP placement be predicted to be unavailable for both years, an alternative community-facing placement can be considered (See appendix 2 and 3 for ideas and examples).
- 5. The requirement for 7.5% of all FY1 and 7.5% of all FY2 placements to be with psychiatry remains, this should be factored into proposals over the two years.

Foundation programmes previously involved in Longitudinal Integrated Foundation Training (LIFT), can consider reformulating current LIFT tracks into Enhance tracks. This can be achieved by having one of the 3 primary care sessions dedicated to one of the six domains of Enhance. (see appendix 2 for ideas and examples).

In case of LEPs not previously involved in LIFT, suitable community settings capable of receiving one or more Enhance trainees, with the resultant extra time commitment, need to be identified (See appendix 3 for ideas and examples).

If, under exceptional circumstances, a Foundation programme is unable to set up the LIFT model based in general practice or any of the alternatives listed above, an ideal implementation of Enhance tracks should include a longitudinal element, such as an Enhance-themed QIP, that runs through different placements and settings and accompanies the Enhance trainee during the 2-year Foundation programme.

In order to maximise this longitudinal element of Enhance, Foundation programmes should allocate a minimum rostered time of a session (half-day) per week for the Enhance trainee to work on the Enhance-themed QIP and link them with a relevant team in their hospital or community placement that will support this project. Any significant variation from the LIFT model, as the one described above, should be discussed with HEE faculty during the Enhance tracks approval process.

Level of local ENHANCE implementation	ENHANCE curriculum embedded in local Foundation teaching	ENHANCE- themed Longitudinal QIP	LIFT model
FULLY IMPLEMENTED	<b>/</b>	<b>/</b>	<b>/</b>
IDEAL		<b>/</b>	
ESSENTIAL	<b>/</b>	*	*

Finally, all FDPs and LEP Foundation Faculties should ensure that the content of the Local Foundation Teaching is aligned with the Enhance programme. This does not necessarily mean that new teaching sessions need to be developed, but rather that already established teaching sessions for Foundation doctors should be mapped against the Enhance Domains. While there is no realistic expectation that the whole extent Enhance programme will be covered during these local teaching sessions, LEP should assure that the Trainees can explore all six domains of Enhance over the 2-year Foundation Programme. If a particular domain of Enhance proves to be difficult to be delivered locally, suitable synchronous or asynchronous teaching solutions should be identified. HEE NW will facilitate this process by disseminating learning resources from the national Enhance programme and promoting local project already running in the region (See appendix 4)

## Example of weekly timetable

#### **Trainee 1**

Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM	General GP session in the Community placement	Supportive GP session 1-2-1 or PPD or Tutorial	Ward Round and Acute Ward work	Ward Round and Acute Ward work	Ward Round and Acute ward work	Off	Off
PM	Exploring a specific Enhance domain in the community placement	Formal on Foundation Teaching program	Outpatient Clinic	Endoscopy or specialist themed clinic	Theatre	Off	Off

#### **Trainee 2**

Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM	Ward Round and	Ward Round and Acute	Supportive GP session	Ward Round and Acute	General GP session in the	Rest	On call
	Acute ward work	Ward work	1-2-1 or PPD or Tutorial	Ward work	Community placement		
PM	Theatre	Formal on Foundation Teaching program	Outpatient Clinic	Endoscopy or specialist themed clinic	Exploring a specific Enhance domain in the community placement	Rest	On call

## Examples of themed Hospital and Community placements from Enhance pilots

In August 2022, the NW Enhance Trailblazer programme started in two pilot sites, Blackpool and Morecambe Bay. Each pilot site received six additional FY1 expansion posts earmarked as Enhance programme tracks.

Enhance programme format trialled in the pilot sites allocates six FY1 Enhance Trainee to six Enhance tracks with six four-month themed hospital placements, each linked with a one-day a week themed Enhanced placement in a community setting and a specific Enhance domain for the trainee to explore (see tables below)

It is important to note that this format of training for the Enhance programme adopted in the two pilot sites differs from the format of training recommended in the guidance above. The format of training recommended in this guidance serves as a model for implementation but it is up to the FDP and the LEP Foundation Faculty to adapt the Enhance format to the local health needs and resources. The NW HEE team will support FDP and LEP Foundation Faculty during the process of adapting the Enhance training format to the local reality and to develop a competence mapping matrix aligned to the placement themes.

#### **Blackpool**

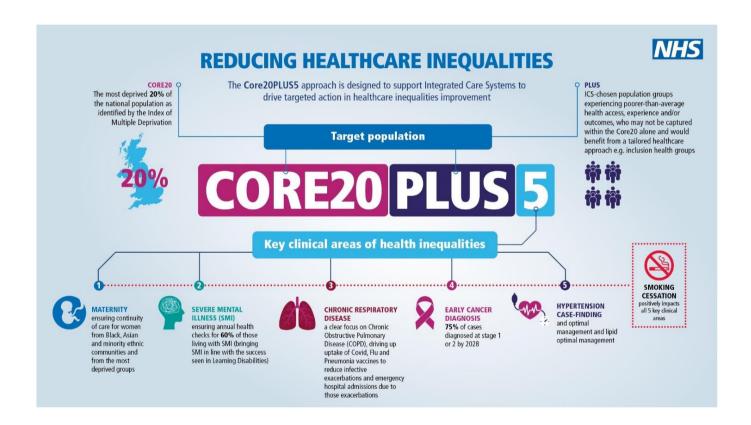
Track	FY1	FY1	FY1	FY2	FY2	FY2
Hospital	Urology	Geriatrics	Psychiatry	Respiratory	Emergency	GP
placement					Department	practice
Enhance	Sexual	IPC/microbiology	Safeguarding	Alcohol and	Frailty Team	CAMHS
session	Health		Team	substance		
	Clinic			abuse		

#### **Morecambe Bay**

Track	FY1	FY1	FY1	FY2	FY2	FY2
Hospital	Gastroenterology	Urology	General Surgery	Emergency	Paediatrics	Public
placement				Department		Health
Enhance	Drug and Alcohol	One	Cancer/Stoma/IBD	SDEC Team	Diabetes	Population
session	Team	Stop	Clinics		Team	Health
		Clinic				Lead
Enhance	Social Justice and	Person-	Complex	Environmental	System	Population
domain	Health Equity	centred	Multimorbidities	Sustainability	Working	Health
		Practice				

## Examples of Community settings and activities for Enhance placements

The focus for the NW Enhance trailblazer is population health and health inequalities. Enhance placements in community setting should be based in deprived areas, targeting vulnerable populations with the aim of reducing health inequalities. The <a href="NHS England Core20PLUS5">NHS England Core20PLUS5</a> approach is a useful tool to identify appropriate community settings for Enhance placements.



#### Core20:

- The most deprived 20% of the national population as identified by the national Index of Multiple Deprivation (IMD). The IMD has seven domains with indicators accounting for a wide range of social determinants of health.
- The <u>UK Government website</u> provide different mapping resources, interactive tools and Open Data facilities to aid user's exploration of the English indices of deprivation 2019.

#### **PLUS:**

 ICS-determined population groups experiencing poorer than average health access, experience and/or outcomes, but not captured in the 'Core20' alone. This should be based on ICS population health data. Inclusion health groups include: ethnic minority communities, coastal communities, people
with multi-morbidities, protected characteristic groups, people experiencing homelessness,
drug and alcohol dependence, vulnerable migrants, Gypsy, Roma and Traveller communities,
sex workers, people in contact with the justice system, victims of modern slavery and other
socially excluded groups

#### 5 - Five key clinical areas of focus to reducing health inequalities

- 1. Maternity: ensuring continuity of care for 75% of women from BAME communities and from the most deprived groups
- 2. Severe Mental Illness (SMI): ensuring annual health checks for 60% of those living with SMI (bringing SMI in line with the success seen in Learning Disabilities)
- 3. Chronic Respiratory Disease: a clear focus on Chronic Obstructive Pulmonary Disease (COPD) driving up uptake of Covid, Flu and Pneumonia vaccines to reduce infective exacerbations and emergency hospital admissions due to those exacerbations
- 4. Early Cancer Diagnosis: 75% of cases diagnosed at stage 1 or 2 by 2028
- 5. Hypertension Case-Finding: to allow for interventions to optimise BP and minimise the risk of myocardial infarction and stroke

In the context of NW Enhance Trailblazer, community setting is intended in a broad sense that includes a wide set of non-inpatient settings spanning through primary care, secondary care and third sector. In addition to the areas highlighted by the Core20PLUS5 approach, FDPs can explore and consider a wide range of community settings selected based on local resources available and the health needs of the local population. A non-comprehensive list of possible community settings includes:

- GP practices
- Outpatient clinics: e.g. OPAT, Sexual health clinic, CAPD, Frailty
- In-hospital outreach services: e.g. IPC, Substance abuse, Pain Management
- Community outreach services: e.g. COPD, OPAT, DNS
- Mental Health Trusts
- Hospices and other palliative care services in the community
- Wellbeing services for asylum seekers, refugees and migrants
- NHS health check clinics and other health prevention and promotion services
- Public Health projects

In terms of which activities should be conducted in each of the three Enhance session per week, the range of possibility is even broader than the range of community settings. As mentioned in the guidance above, one of the three Enhance sessions should be clinical and should allow direct exposure to patient in a supervised environment appropriate to the level of skills and competences of the Enhance trainees.

- Assess a patient and request relevant diagnostic test
- Review of medication and prescription
- Perform minor procedures
- Provide medical and lifestyle advice
- Explore patient concerns and refer to appropriate health services

The remaining two Enhance sessions can be more flexible and should allow the Enhance trainees to explore one or more Enhance domains in settings not traditionally encountered by Foundation Doctors. The <a href="Enhance Handbook">Enhance Handbook</a> offers a cornucopia of ideas and approaches for each of the Enhance domains and should be consulted to identify relevant activities for these Enhance sessions. Regardless of which domain of Enhance is explored in the Enhance placement, successful Enhance sessions should be designed in a way that:

- Introduce Enhance trainees to vulnerable and hard-to-reach populations
- Promote collaboration between Enhance trainees and allied healthcare professionals, working in a multidisciplinary team
- Link thematically with the hospital placement, allowing the Enhance trainee to follow the patient's journey and experience in different healthcare settings
- Aim at improving health outcomes and the quality the services involved

### Learning resources

- <u>Enhance programme Handbook</u> The handbook outlines the background to the programme, its structure, expectations on participants, and guidance on the types of learning activities that may be usefully undertaken to meet the programme's outcomes.
- <u>Learning Hub</u> This learning hub contains a suite of curated content and resources based around the 6 domains for enhance and its 4 cross-cutting themes.
- <u>Enhancing generalist skills HEE website</u> This website is the repository for all the resources, news and updates about Enhance at national level.
- Project Equal Health an educational programme in the form of workshops and lectures for foundation trainees across the North-West. It aims to hold regular sessions which raise awareness on health inequalities, barriers to accessing care and encourages conversations around tackling barriers within certain minority groups.
- Shared Health Video series coming soon
- RCEM Environmental sustainability workshop Coming soon