

Inspection of Birmingham Women's and Children's Hospital NHS Foundation Trust

Inspection dates:

28–31 January 2020

Overall effectiveness

Requires improvement

The quality of education

Requires improvement

Behaviour and attitudes

Requires improvement

Personal development

Good

Leadership and management

Requires improvement

Apprenticeships

Requires improvement

Overall effectiveness at previous inspection

Not previously inspected

Information about this provider

Birmingham Children's Hospital merged with the Birmingham Women's Hospital in 2017 to form a larger acute specialist trust. It has several years' experience of delivering apprenticeship learning in conjunction with two local colleges to train its workforce. In March 2017, the trust became a prime contractor. It started delivering apprenticeships in June 2017. At the time of inspection, the trust had 174 apprentices in learning and 12 apprentices on a break in learning. Of these, 115 were on health and care support work standards at levels 2 and 3. A further 57 apprentices were on business administration apprenticeships at levels 2, 3 and 4. Most apprentices study at level 2. There were no subcontractors.

What is it like to be a learner with this provider?

The quality of education apprentices receive is not consistently good. Assessors do not ensure that apprentices' understanding of theory is improved through good teaching. Apprentices do not always make explicit the links between theory and practice in their work. Apprentices are less able to go from familiar to unfamiliar settings.

Apprentices on the level 2 healthcare worker apprenticeship do not consistently use their independent study time well enough. Too many do not complete their work on time. Staff do not adapt the curriculum to meet the needs of the small number of apprentices with special educational needs and/or disabilities.

Too few apprentices in healthcare complete the qualification by their planned end date, and too few achieve merit and distinction grades.

Apprentices develop substantial new skills and behaviours. They use them well in their current job roles. Apprentices demonstrate a professional attitude to work. Line managers value apprentices' contributions to the efficient and safe running of their departments.

Assessors support apprentices so that they build their confidence and resilience. They prepare apprentices well to manage the emotional demands of their work in the hospital. Most apprentices enjoy their work.

Apprentices have a detailed understanding of safeguarding. They understand how to keep themselves, the patients, and colleagues safe. They feel safe at work.

Apprentices receive comprehensive and helpful advice and guidance. They receive a detailed induction programme. They enrol and remain on appropriate courses. On completion of the apprenticeship, they stay in employment and many gain promotions.

What does the provider do well and what does it need to do better?

Leaders and managers have a clear vision for the apprenticeship provision. They are committed to the apprenticeship programme. Their intention is that it will provide a supply of well-qualified staff to meet the employment needs of the trust. For example, the level 2 healthcare worker apprenticeship qualification is an opportunity for apprentices to start on the pathway to nursing. Leaders, with the support of external partners from higher education, plan the curriculum well to provide opportunities for apprentices to progress in their chosen career.

Prior to September 2019, senior leaders did not provide a consistent team of managers and assessors. As a result, too many healthcare apprentices made slow progress. Since September, senior managers have achieved greater consistency in staffing, and have made improvements to curriculum planning.

Despite recent improvements, managers do not have a complete picture of the quality of education. They do not have the processes in place which supply them with regular and comprehensive information on the performance of assessors or the progress of apprentices. As a result, they have been slow to instigate actions to accelerate the progress of apprentices on the level 2 healthcare standard.

Managers now plan the courses coherently. Assessors, supported by line managers, develop the behaviours and skills that are required by the apprentices in their jobs. Apprentices learn how to put patients at ease, for example prior to taking blood from a patient in a real situation. Assessors have expert vocational knowledge and skills. Healthcare apprentices gain high-level skills in clinical practice. For example, apprentices in the children's hospital become skilful in caring for children with complex needs and using assistive technology to enable patients to be more active.

Assessors do not consistently develop learning resources which motivate learners to make rapid progress or to challenge them to extend their knowledge. For example, tutors set tasks which simply reflect the wording of the qualification. Apprentices are not motivated to complete learning activities which are mundane. Assessors do not provide consistently helpful written feedback to apprentices. Too often, apprentices do not know what they need to do to improve. As a result, they do not make progress at the pace of which they are capable.

Some assessors do not provide regular, high-quality reviews of the progress of apprentices. Managers have recently improved the quality and regularity of reviews, but too often, assessors do not ensure that apprentices understand the links between theory and practice. As a result, their understanding is not reinforced or consolidated. For example, one apprentice had previously completed theoretical work on the care of patients with mental health. Prior to the most recent review, they had supported a patient with mental health on the ward. The assessor did not identify the link between the theory and the practice and establish the apprentice's new knowledge.

Apprentices demonstrate a professional work ethic and apply themselves well. Hospital staff, apprentices, parents and patients respect the code of conduct of the trust. As a result, the hospital wards and education facilities are calm environments conducive to learning. Apprentices are courteous, friendly and professional in their dealings with all with whom they come into contact. They develop the skills to deal appropriately with children and families dealing with life-limiting conditions.

Healthcare apprentices develop high levels of confidence through presentations and working with each other. They demonstrate empathy and concern for colleagues. They understand the stressful nature of the work, particularly in paediatric intensive care. They can correctly identify the signs of stress and whom to contact for support.

Apprentices develop their mathematical and English skills. For example, healthcare apprentices apply their clinical and mathematical understanding when monitoring

the hydration levels of patients. Assessors accurately correct spelling and grammatical errors in the work of business administration apprentices.

Business apprentices develop extensive new skills within their work. For example, they retrieve and distribute patient files efficiently and deal effectively with a wide variety of scans and associated personal information. Managers extend the curriculum in business administration, so that apprentices can train to be a first aider, and fire marshal.

Apprentices' attendance at off-the-job training sessions is high. Managers monitor attendance closely and investigate unexpected absences. Business apprentices receive one-to-one support from their assessor. Most business apprentices make expected progress and achieve their qualifications within the planned timescale.

Managers have recently improved the preparations for the end-point assessment. However, too few apprentices on the level 2 healthcare worker apprenticeship make expected progress from their starting points or complete their qualification by the planned end date.

Many apprentices gain permanent posts and promotion within the trust. They are clear about job opportunities within the trust and are very positive about their career prospects.

The governance function is distributed between senior managers, two committees and two boards. This complicated structure hinders governors' efforts to carry out their role. Governors have the appropriate skills to support the senior managers. They are committed to the provision of apprenticeships. They clearly understand and influence the strategy. Governors do not have a clear framework or set of targets against which they monitor the quality of the provision. They do not provide enough challenge to support the work of senior managers.

Safeguarding

The arrangements for safeguarding are effective.

Leaders rightly make safeguarding a very clear priority in the trust. Leaders have developed a culture of safeguarding. Designated lead staff are appropriately trained. Managers have established well-developed links and partnerships with local safeguarding agencies. They seek advice and share information appropriately. Staff are fully aware of their responsibilities to safeguard apprentices. Apprentices have a sophisticated understanding of their safeguarding duties towards patients. Apprentices feel safe and secure in their learning and work environments. They know how to report concerns about themselves and others.

What does the provider need to do to improve?

- The quality of education is not consistently good. Senior managers need to develop assessors so that they make effective links between theory and practice,

check and reinforce apprentices' learning, and improve the quality of learning resources. As a result, apprentices must have a deeper understanding of the links between theory and practice.

- Assessors should improve the quality and regularity of reviews with apprentices so that apprentices are clear about the progress they are making and what they need to do to improve.
- Too few apprentices on the level 2 healthcare worker apprenticeship make good and swift progress from their starting points. Senior managers need to improve the proportion of apprentices on level 2 healthcare apprenticeships who achieve their qualification with high grades within the planned timescale.
- Managers and tutors should improve the independent learning skills of apprentices, so that they use their study time more effectively. Apprentices need to use the online portfolio to develop a comprehensive and accurate record of their progress.
- Leaders and managers do not have a sufficiently comprehensive view of the quality of education. They must collect and evaluate a wider range of information about the quality of the curriculum, and how well it is implemented, so that they can intervene swiftly to address weaknesses in performance.
- Senior leaders must establish a set of arrangements and a framework against which governors can hold managers to account.

Provider details

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|------------------------------------|---|
| Unique reference number | 1278612 |
| Address | Steelhouse Lane Birmingham B4 6NH |
| Contact number | 0121 333 8607 |
| Website | https://bwc.nhs.uk/ |
| Principal/CEO | Sarah-Jane Marsh Chief Executive |
| Provider type | Employer provider |
| Date of previous inspection | Not previously inspected |
| Main subcontractors | None |

Information about this inspection

The inspection team was assisted by the training and development manager, as nominee. Inspectors took account of the provider's most recent self-assessment report and development plans, and the previous inspection report. The inspection was carried out using the [further education and skills inspection handbook](#) and took into account all relevant provision at the provider. Inspectors collected a wide range of evidence to inform judgements including observing learning sessions, scrutinising learners' work, seeking the views of learners, staff and other stakeholders, and examining the provider's documentation and records.

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