

TRUST POLICY FOR THE SUPERVISION OF DOCTORS IN TRAINING

Reference Number POL-CLIN/1071/20	Version: 1		Status Final	Author: Dr Tracy Tinklin Job title: Director of Postgraduate Medical Education
Version / Amendment History	Version	Date	Author	Reason
	1	2020	Tracy Tinklin	Combined policy for UHDB (previous policies – Derby ‘assurance of competence of medical staff in training’ and Burton ‘supervision of medical staff in training’).
Intended Recipients: All medical and clinical staff at UDHB				
Training and Dissemination: Via Trust policies on Net-i, at Educational Supervisors forum				
To be read in Conjunction with: Medical and Dental Consultant and SAS Doctor Job Planning -Trust Policy and Procedure Dealing with Concerns relating to Medical and Dental Practitioners - UHDB Trust Policy and Procedure				
EIRA stage One	Completed Yes / No		<i>Delete as appropriate</i>	
stage Two	Completed Yes / No		<i>Delete as appropriate</i>	
Approving Body	Trust Delivery Group			
Date of Approval	October 2020			
Review Date and Frequency	October 2023 every 3 years			
Contact for Review	Dr Tracy Tinklin			
Lead Executive Director	Executive Medical Director			
Approving Lead Executive Director Signature	Executive Medical Director			

Section		Page
1	Introduction	3
2	Purpose	3
3	Definitions used	4
4	Roles and responsibilities	4
5	Trainer recognition	8
6	Doctors in Training experiencing difficulties	9
7	Quality Assurance and monitoring effectiveness	10
8	References	10

1. **Introduction**

University Hospitals of Derby and Burton NHS Foundation Trust (the Trust) is committed to the delivery of safe care for patients. It is important to ensure that doctors are trained early in their careers to provide safe patient care, and are confident and competent in managing ill patients. An important element in achieving this is to provide appropriate supervision from senior staff.

It is necessary to have systems in place to ensure that no doctor in training is required to assume responsibility for, or perform, clinical, operative or other techniques in which they have insufficient experience and expertise without the appropriate level of supervision. This Policy outlines the Trust's approach to the supervision of doctors in training which follows national guidance from the General Medical Council (GMC) and Health Education England (HEE), including the 'Gold Guide' (see references).

Educational excellence requires a Trust environment that allows it to flourish. The Trust aims to provide a supportive environment that is conducive to learning. This support requires time that is not directly related to service provision or financial gain. The Trust recognises the need to support doctors in training, including remuneration of senior medical staff for educational activities. It is the Trust's intention that doctors in training have a good experience, with the hope that they will choose to return for substantive roles in the future.

HEE has overall responsibility for the provision of education for doctors in training, delegated through the Executive Medical Director, the Director of Postgraduate Medical Education (DPGME) and Royal College, Foundation Programme or Speciality Tutors within the Trust. The quality of training provided at the Trust is assessed by reports of trainee feedback (departmental, School, GMC and NETS) and quality assurance visits from HEE.

2. **Purpose**

This Policy applies to any doctor who is employed in a GMC approved training post.

The aim of the Policy is:

- To ensure that doctors in training are allocated a named Educational Supervisor for each placement
- To ensure that Educational Supervisors are trained and recognised by the GMC, with regular updates, and are supported by the DPGME and education team
- To reinforce with doctors in training that they must not undertake procedures for which they are not competent without supervision
- To ensure that doctors in training have ongoing supervision (including meetings as described by their specialty / UK Foundation Programme) throughout the placement

Doctors in training can only be expected to act outside of their area of competence when faced with a life-threatening situation, provided this is deemed reasonable in light of the need for an immediate response.

3. Definitions Used

Educational Supervisor (ES)	A named trainer who is selected and trained to be responsible for overall supervision and management of a specified trainee's educational progress during a training placement (or series of placements).
Clinical Supervisor (CS)	A named trainer who is selected and trained to be responsible for overseeing a specified trainee's clinical work, including providing feedback during a training placement.
Doctor in Training (DiT)	A doctor in training as part of the two year Foundation Programme, a 'stand alone' training post or with an allocated National Training Number in a specialty (core and higher). Also referred to as 'trainee'.

4. Roles and responsibilities

Executive Medical Director

The Executive Medical Director is responsible for all medical staff employed by the Trust. For doctors in training, educational responsibility is delegated to the Director of Postgraduate Medical Education and Educational and Clinical Supervisors as appropriate.

Guardian of Safe Working

The Guardian of Safe Working (GoSW) is responsible for overseeing compliance with the safeguards outlined in the Doctor and Dentist in Training 2016 Terms and Conditions of service for doctors and dentists in training. The GoSW sees all exception reports related to safe working hours and can escalate issues raised if they have not been addressed at departmental level.

Director of Postgraduate Medical Education (DPGME)

The Director of Postgraduate Medical Education provides educational leadership and is responsible for the delivery of postgraduate medical and dental education. This includes ensuring that supervisors are trained and supported and that doctors in training experience excellence in training. The DPGME is supported by a team of senior educators including Foundation Programme Directors, College / Specialty tutors and ES's.

The DPGME will liaise with HEE and Specialty Schools to ensure that the Trust provides training in accordance with national and regional requirements.

The DPGME has overall responsibility for the provision of named CS and EC's (sometimes these roles are combined for an individual doctor in training).

The DPGME is available to discuss and act on any concerns raised by a supervisor or doctor in training and has the full support of the Trust in dealing with trainees in

difficulty, in conjunction with HEE, Foundation or Postgraduate Specialty Schools.

The DPGME will champion continuous quality improvement in the provision of postgraduate medical education and training within the Trust, including responsiveness to trainee feedback and external quality visits.

Divisional Medical Directors / Clinical Directors / Associate Clinical Directors

Divisional Medical Directors / Clinical Directors / Associate Clinical Directors will ensure the Medical Education Department have current descriptions (and / or work schedules) of the clinical work encountered during the placements in the department. In addition, they will:

- Ensure that trainees are allocated time to attend training and teaching sessions
- Respond promptly to concerns raised in quality reviews, developing action plans to address deficiencies in training in conjunction with College / Specialty tutors
- Retain responsibility for the conduct of trainees within their department

Foundation Programme Director / Tutor

The Foundation Programme Directors and Tutor provide educational leadership for doctors in the Foundation Programme. With the support of the Postgraduate Medical Education Team, they will ensure that all Foundation Programme doctors are allocated a trained ES and CS for each year of the programme. In addition, they will:

- Support the ES, CS and those undertaking clinical supervision in their role particularly when there is a trainee who requires additional support
- Escalate concerns about doctors in difficulty to the Clinical Director, DPGME and Training Programme Directors or Head of School where necessary
- Ensure the quality of the education and training delivered within the programme meets local, regional and national standards

College / Speciality Tutor

Each department with doctors in training should have a Specialty or College Tutor who is directly responsible to the DPGME and the relevant specialty school.

The College / Specialty Tutor will:

- Ensure that each doctor in training is allocated a named ES, CS or both, who is recognised by the GMC for their role, (see Section 5) as needed prior to the beginning of each placement. (In some specialities, allocation of supervisors may be completed by Training Programme Directors)
- Ensure that the educational, pastoral and career planning needs of all trainees in the department (on all programmes) are addressed. This may include 'signposting' the trainee to support within HEE or the Trust
- Maintain an environment within the department conducive to training and ensure that the multi-professional team understand their role in providing clinical supervision to the trainee
- Support the ES, CS and those undertaking clinical supervision (for example in ward / assessment units) in their role particularly when there is a trainee who

requires additional support

- Escalate concerns about doctors in difficulty to the Clinical Director, DPGME and Training Programme Directors or Head of School where necessary
- Ensure the quality of the education and training delivered within the department meets local, regional and national standards
- Support the delivery of departmental education programmes
- Support the educational environment for Locally Employed Doctors (LED's) and Specialty and Associate Specialist (SAS) doctors

Educational Supervisor (ES)

The ES is responsible for planning and guiding doctors in training to optimise their educational opportunities, and for signing off their progress at the end of placements. This is achieved through regular planned meetings and will be guided by the needs of the trainee relevant to their Foundation or specialty curriculum. N.B. educational meetings may be held virtually.

The ES should meet with the doctor in training (or exceptionally a delegated person) within two weeks of starting their placement. During that meeting, the doctor's personal objectives should be discussed, including any necessary competences that require clinical supervision or are curriculum requirements. There should be agreement about how these objectives can be achieved and measured along with the support the trainee is likely to need.

In addition, the ES should agree a personalised Work Schedule that is specific to the individual doctor's learning needs and the opportunities in the placement within the first four weeks of the trainee commencing in post. The ES will monitor the doctor's work schedule, responding to Exception Reports as necessary within the time frame specified by the New 2016 Junior Doctor's Contract. This may require discussion with the CS if the trainee is in a different department.

The ES will meet regularly with the trainee, depending on individual needs, but at a minimum of the beginning (within four weeks of the trainee commencing in post), middle and end of placement to review the doctor's progress against their objectives and the curriculum by reviewing the learning portfolio.

The ES will offer support to the doctor in training in difficulty. They are responsible for notifying the Foundation Programme Director / College Tutor, DPGME and Specialty Training Programme Director if a trainee gives them cause for concern.

The ES will produce, with the trainee, an appropriate report of their educational and professional progress at the end of the placement, in preparation for Annual Review of Competence Progression (ARCP).

The ES will offer career advice and support as required by the doctor in training, signposting them for further support by HEE as needed.

The ES will have protected time within their job plans to deliver educational supervision as per GMC and HEE guidance see 'Medical and Dental Consultant and SAS Doctor Job Planning -Trust Policy and Procedure'

The ES will ensure they include their educational role in the scope of practice for their annual appraisal, recording educational activities to meet the GMC criteria for trainer recognition (section 5).

The ES will update the postgraduate team with supporting information of their education as a trainer.

Clinical Supervisor (CS)

The aim of CS is to ensure that the doctor in training is safe to carry out the clinical work expected of them within the department. For some placements, the CS and the ES will be the same person and it is important that he / she understands the different roles.

The CS is responsible for:

- Monitoring, supporting and assessing the trainee's clinical and professional work, including undertaking Work Base Placed Assessments / Supervised Learning Events.
- Supervising clinical activity appropriate to the competence and experience of the individual trainee
- Delegating aspects of clinical supervision to colleagues with appropriate training and experience where appropriate
- Remaining responsible and accountable, for the actions of the doctor in training and care of the patient
- Contributing to the Supervisor's report on the progress of the doctor in training
- Ensuring that the ES – where different – is aware of any difficulties the doctor in training is experiencing

Ensure they include their educational role in the scope of practice for their annual appraisal, recording educational activities to meet the GMC criteria for trainer recognition (section 5)

The CS will update the postgraduate team with supporting information of their education as a trainer

Additional clinical supervision

Clinicians (medical and non-medical) additionally provide training and educational support for doctors in training on the wards, assessments units, emergency departments, outpatient clinics, in an operative list and out of hours. This relationship may vary from a brief encounter to overseeing a week of ward work or regular contact throughout the placement

All trainers should be prepared for their role and understand teaching and assessment methods and giving constructive feedback. Trainers should maintain supporting evidence for their appraisal.

Doctor in training

The doctor in training is responsible for:

- Understanding their responsibility for the safety of those patients in their care. A doctor will not perform any aspect of patient care for which he / she is not competent. It is the responsibility of the doctor in training to recognise their own limitations and not act beyond these
- Attendance at Induction (Trust and regional where available) and compliance with mandatory training as required by the Trust
- Making themselves aware of Trust guidelines and policies and following these appropriately
- Arranging regular supervisor meetings with the ES, including arranging a meeting within four weeks of commencing in post to discuss and personalise their Work Schedule
- Maintaining a portfolio of training progress including: supervision meetings, completing a Personal Development plan, work based assessments / supervised learning events as required by their Foundation Programme / Specialty. This portfolio will be used by the Foundation / Specialty School at the end of each training year in preparation for the ARCP
- Raising any concerns regarding their educational supervision with the Specialty / College Tutor, Foundation Programme Directors of DPGME

Placement Supervision Groups for Foundation Programme doctors

The Placement Supervision Group consists of trainers nominated in each placement by the named CS. Their observations and feedback will inform the CS's end of placement report.

The composition of the Placement Supervision Group will vary depending on the placement, but could include: Doctors more senior than F2, including at least one consultant or GP principal Senior nurses (band 5 or above) Allied Health Professionals.

The Placement Supervision Group is responsible for:

- Observing the foundation doctor's performance in the workplace; providing feedback on practice to the foundation doctor; providing structured feedback to the named clinical supervisor; undertaking and facilitating supervised learning events (SLEs).

5. Trainer recognition

All Supervisors must be fully accredited by the GMC to undertake the role. The Trust will provide access to the necessary training and continue to provide regular updates, mostly at the Educational Supervisor Forum. The Postgraduate Medical Education Team maintains a database of trainers on behalf of the Trust and forward information for trainer recognition to the GMC via HEE.

The GMC criteria for trainer recognition are derived from the 2014 Academy of Medical Educators Professional Standards for Educators. It is mandatory that all Supervisors maintain recognition with the GMC. The 7 standards are:

1. Ensuring safe and effective patient care through training

2. Establishing an effective environment for learning
3. Teaching and facilitating learning
4. Enhancing learning through assessment
5. Supporting and monitoring educational progress
6. Guiding personal and professional development
7. Own continuing professional development as an educator.

Supervisors and educators are required to maintain a record of their educational activities mapped to the GMC criteria. CS's should achieve standards 1- 4 and 7. ES's, Tutors, Programme Directors and the DPGME should complete areas 1-7.

The DPGME and Medical Education Department are required to inform the GMC of doctors recognised as supervisors within the Trust. The ES is expected to maintain records of their personal development as an ES and the Medical Education Department may ask for supporting information in order to update the GMC.

If the College / Specialty Tutors or Foundation Programme Directors are concerned about the performance of an ES, further training should be offered. However, if there is no improvement, the DPGME may be required to remove trainer recognition.

All educators must include the role in their scope of practice for appraisal, completing CPD activities that map to the criteria at least once in every 5 year revalidation cycle.

College / Speciality Tutors (SAS and Simulation Tutors) and Foundation Programme Directors will be offered an educational appraisal with the DPGME or nominated deputy.

6. Doctors in Training experiencing difficulties

If concerns are raised regarding a doctor in training by the doctor themselves, colleagues or patients, the issue should initially be raised with the doctor's ES. It may need to be discussed with the College / Specialty Tutor and if appropriate escalated to the DPGME and / or Executive Medical Director.

The ES or DPGME will determine the nature and extent of the problem and the most appropriate action depending on the nature of the concern. This will be done according to the Trust policy on 'Dealing with Concerns relating to Medical and Dental Practitioners - UHDB Trust Policy and Procedure' if the concerns are not purely an educational issue.

All involved should be mindful of the need for confidentiality, but also ensure that concerns are shared appropriately. It is strongly recommended that conversations about doctors in difficulty are documented for future reference.

Support is available from Occupational Health and the Professional Support and Wellbeing Units in HEE. Trainees can refer themselves to either, or the ES / CS can refer.

The Postgraduate Dean is the Responsible Officer for doctors in training and the DPGME should discuss any serious concerns (including potential suspension from duties) with the Dean.

7. Quality Assurance and monitoring effectiveness

The College / Specialty Tutors, Foundation Programme Directors, DPGME and Medical Education Department will review feedback from doctors in training (including departmental/ end of placement, NETs and GMC surveys). This will ensure good practice is identified and shared, but also areas for improvement are recognised.

Themes noted from Exception Reports regarding training and educational supervision will be identified. They are discussed at the Junior Doctor's Forum to ensure that doctors in training are given the opportunity to suggest improvements. They will be reported to the Trust Board annually.

There will be external quality assurance visits from HEE, Colleges or the GMC and members of the education team will ensure that the necessary information and feedback from trainees and educators is made available if required. Action plans will be developed for any areas identified as requiring improvement and these will be monitored by the Medical Education Group

1. References:

GMC	Good Medical Practice	Published 2013, updated 2019
GMC	Promoting Excellence: Standards for Medical Education & Training	2015
GMC	Excellence by Design (Standards for Postgraduate Medical Curricula)	2017
GMC	Recognition and approval of trainers: https://www.gmc-uk.org/education/how-we-quality-assure/medical-schools/recognition-and-approval-of-trainers	Based on Academy of Medical Educators Professional Standards for Medical, dental Educators 2014
The 'Gold' Guide	A reference guide to Postgraduate Foundation and Specialty Training in the UK 8 th edition	2020
Academy of Royal Colleges	Various publications relating to assessment of competence	