

Progress+ Survey Feedback Report 2024/2025

Introduction and Purpose

This report covers findings throughout this academic year on the impact of the Progress+ curriculum across four UK nations. An anonymous feedback survey was circulated to key stakeholders including the Heads of School, College Specialty Advisor Committees (CSACs), College Tutors, Training Programme Directors (TPDs), Educational Supervisors and Trainees.

We received over 200+ responses and will continue to gather feedback on how Progress+ continues to improve the training standards for each region. Key themes emerged around longitudinal supervision, enhanced trainer support, more structured feedback, the changes in MRCPPH timings, and inclusivity for protected groups. The results align closely with ongoing case study and interactive insights published on the RCPCH [Progress+ - Areas of Good Practice Map](#).

Insights Shared Across the Regions

- ***How feasible has it been for trainees to retain the same supervisor for the duration of their stage of training?***

In England, the majority of feedback highlighted that longitudinal supervision is generally *feasible* and already in practice in many deaneries. Trainees and training programme directors (TPD) noted having the same educational supervisors (ES) support continuity, professional growth, and mentorship. Additionally, supervisors and college tutors largely agreed on the benefits and noted pilot schemes alongside wide efforts to embed this retention model.

In Scotland, feedback confirmed that longitudinal supervision has '*long been established*' and is the default approach. Trainees and trainers reported minimal issues, and flexibility to change supervisors exists when needed. Whereas in Wales, responses were largely positive, citing that trainee had retained the same ES for up to 2-years, although maternity leave or subspecialty transfers could require changes. Overall, the model was described as beneficial and manageable.

Additionally, in Northern Ireland, feedback showed a strong regional structure where ST1 – ST3 trainees retain their ES for 3 years, even across different hospitals, with virtual meetings supporting continuity.

Whilst the ongoing longitudinal supervision has increased flexibility and put into practice across regions, the College continues to implement Educational Supervision roadshows to support educational supervisors when overseeing trainees by exploring supervision, updates on the Progress+ curriculum and

RCPCH assessments. The roadshow is implemented termly and can be accessed via [Courses – Educational Supervision](#) on upcoming roadshow dates.

- ***What impact has Progress+ had on the support for trainers, including guidance on careers advice?***

In England, feedback reported the broadest range of initiatives – from early subspecialty application webinars to career guidance tools and supervisor training days. Both TPDs and trainees described Progress+ as having a positive impact on structuring career discussions and improving clarity around training pathways. Some mentioned increased flexibility and clearer expectations from trainers. Feedback responses from Scotland were generally positive and recognised that *'the platform has made significant strides in facilitating easier access to training progress and feedback.'*

In Wales, there was feedback that training sessions have been provided for supervisors which are improving clarity and usability. Respondents felt that both trainers and trainees were learning together, with resources helping guide the transition using Progress+. Whereas, in Northern Ireland, there were specific mentions of early discussions about career paths, including specialty application timelines and trainer development sessions, suggesting proactive efforts to align support with the training programme.

Whilst some feedback suggests the *'College tutors have had to spend a lot of time supporting trainees and supervisors'*, the College have implemented guidance to help educational supervisors oversee the overall training: [RCPCH ePortfolio guidance for supporting training](#). There are dedicated virtual events for College Tutors to help support with their regional education, trainee support and supervision - [College Tutors resources and updates | RCPCH](#)

Additionally, feedback also indicated that *'some supervisors required more knowledge about the eportfolio'*, the College have focused on streamlining guidance on how to support trainees and supervisors with much depth, for example our: [ePortfolio guidance for Supervisors](#). Alongside this, the College have refined the existing resources on what is expected throughout this role supporting resident doctors in the workplace, including supporting neurodivergent trainees: [Educational supervisors – what is expected](#).

- ***Has the focus on better structured and unbiased feedback improved trainee satisfaction?***

Some survey respondents in England described that Progress+ helped improve feedback delivery by making it more structured and fairer. For instance, respondents reported a more constructive and easier approach to receiving and providing feedback using the multi-source feedback form (MSF+). The form was

described as more concise and user-friendly, which increased satisfaction and usability.

Similarly, in Scotland, the MSF+ tool was praised for being streamlined and clearer, making it easier to reflect and receive input.

Additionally, feedback from Wales were generally positive, with trainees and supervisors appreciating less repetition and improved form usability. Some highlighted better transparency.

The College continues to provide regular updates and enhanced written and video guidance to ease the navigation and usability of the ePortfolio with confidence – [ePortfolio guidance for paediatric doctors in training](#). Alongside this, a comprehensive guidance for both trainers and trainees in relation to paediatric care development – [Career development for Paediatrics](#).

Overall, the general consensus on trainee and trainer satisfaction and career advice have been positive. For example, in some regions in England where there *'subspecialty application support from ST1/2 to provide information / support by introducing annual webinars'* has been rolled out, and additionally are developing a career guidance tool from ST1 onwards, offering informal or voluntary annual career reviews for ST2 and ST4s with Heads of School and Training Programme Directors.'

This suggests some regions are proposing personalised career support with structured guidance and networks to help trainees early on and increasing confidence throughout their paediatric training.

- ***Has moving the point by which the full MRCPC must be achieved improved pass rates? We have internal data but if you have any further information to add, please do.***

In England, feedback indicated a reduction in pressure due to extended timelines. Many TPDs and trainees felt this change improved wellbeing and exam preparedness. Supervisors agreed that pass rates likely improved as trainees had more flexibility. Whereas in Scotland, feedback indicated that high pass rates were already the norm.

Furthermore, in Wales, feedback suggested that change was positive but less impactful for those who already completed exams early. However, a few trainees shared personal experiences of managing exam timelines effectively with the new structure. Northern Ireland provided feedback of strong pass rates, and the change helped trainees feel less pressure and gave more time to focus on training and wellbeing.

While pass rates have increased flexibility, Progress+ highlights the move to capability-based competencies to ensure trainees build the necessary skills at each stage of training – [Paediatric Training and capability-based progression](#). The programme is designed to recognise and support trainees who demonstrate

the required capabilities early and to discuss with supervisors and TPDs to ensure they achieve the necessary standards.

- ***In your view, has Progress+ had any impact on protected groups?***

Several respondents in England, particularly trainees, indicated that Progress+ promoted greater inclusivity, flexibility, and more structured unbiased assessments. The feedback highlighted its value for international medical graduates (IMGs) and trainees with neurodiverse needs. Additionally in Scotland, Progress+ was seen as having potential to improve fairness, through effectiveness depends on consistent and unbiased implementation.

For Wales region, the feedback highlighted trainee's personal experience with ADHD and how this impacted their training in a supportive way. For example, the trainee reported a reduced repetition in forms which leads to better engagement.

Whilst positive engagement for protected groups via Progress+, feedback on the impact of training for IMGs noted '*more insight*' about the shortened training programme and the '*timing opportunities for preparation*'. The College signposts to resources such as the [Soft-Landing Programme](#) and exam preparation guidance to improve further pass rates – [Examinations – resources to support your revision](#). These initiatives provide IMGs with a structured path into UK training and help them build confidence in clinical and cultural settings.

Less Than Full Time (LTFT) trainees and those on maternity or paternity leave have also '*experienced some challenges*' on the impact of training. While Progress+ is based on competence, the College implemented guidance on [LTFT training](#) by providing grace periods around curriculum cut-offs and offering supervisor guidance on how to fairly assess trainees returning from extended leave. Additionally, the [College Tutor toolkit](#) and [ePortfolio guidance](#) can help create fairer, more structured re-entry plans for these trainees.

Neurodivergent trainees requested more '*structure and clarity*' in regard to support and efficiency for their training. The Equality and Diversity team alongside a working group of paediatric clinicians and College staff with lived and/or clinical experience, co-produced this guidance - [Embracing neurodiversity and supporting neurodivergent paediatricians guidance](#) to help supervisors understand and support neurodivergent learning styles. Training for Educational Supervisors now includes neurodiversity awareness, and clearer, more structured communications about changes are being introduced. The [RCPCH Thrive Paediatrics Hub](#) also features lived experience stories, drop-in sessions, and practical case studies that supervisors and trainees can use to foster better team dynamics and personal wellbeing.

Furthermore, trainees returning from Out-of-Programme (OOP) leave provided feedback on the '*adaptability of Progress+ after time away*'. While Progress+ offers flexibility by valuing skills over time served, its benefits can only be fully realised with strong support from supervisors. The College has provided the latest [ePortfolio guidance](#) and [Returning to work in paediatrics - guidance for](#)

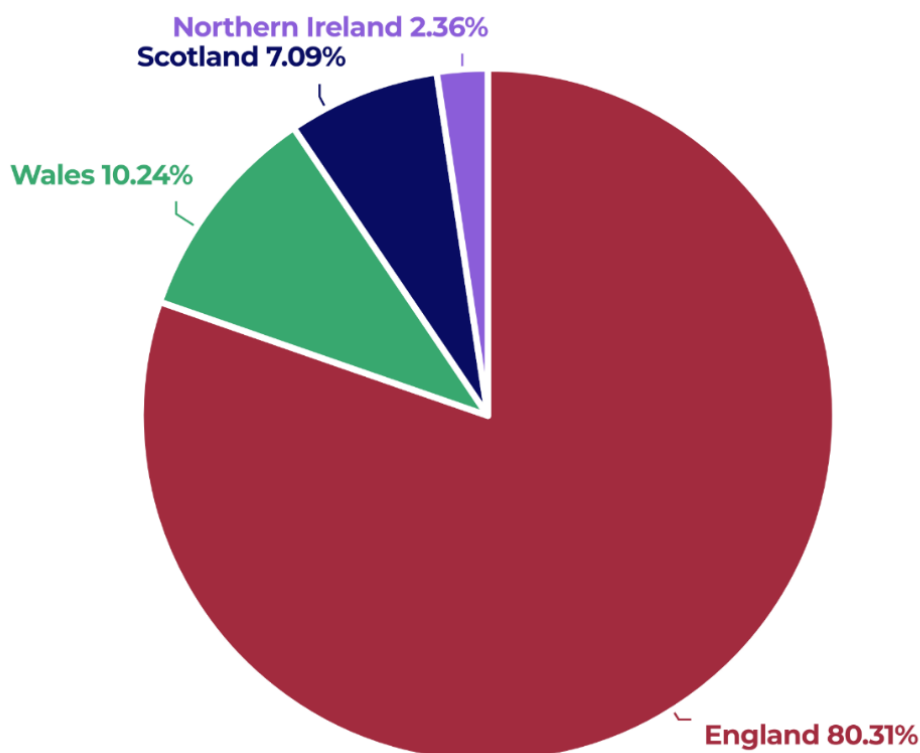
doctors which provides a structured timeline and practical checklist for trainees returning from Out-of-Programme (OOP) leave, supporting them through early planning meetings with supervisors, ensuring confident reintegration when returning to paediatric training in the UK.

Regional Positive response Rate Summary

The chart below outlines the key findings from the survey responses collected across the four regions – England, Scotland, Wales and Northern Ireland. The feedback has been grouped by region and highlights both common themes and specific examples of effective practice.

England had the most positive responses. TPDs, supervisors, and trainees

reported
strong



— England — Wales — Scotland — Northern Ireland

implementation of longitudinal supervision spanning multiple training stages. East and West Midlands regions in particular have established this where trainees

are assigned the same supervisor from ST1-ST4 or beyond. This consistency helps built trust, offers tailored support, and enables meaningful progress tracking. Several responses also reflected positively on the support provided to supervisors, highlighting the availability of career advice and accessible guidance. Alongside this, feedback on structured and unbiased feedback were seen to improve trainee satisfaction significantly.

Some good practice examples include:

- *'There has been lots of information available for educational supervisors and more clarity on what is expected in terms of career advice.'*
- *'Improved trainee satisfaction.'*
- *'There is greater adaptability for those in less than full-time training or additional support have better improved their progress.'*

Wales had several responses from TPDs and supervisors. The feedback consisted of the same positive outcomes where longitudinal supervision was also applicable for trainees, improving relationship building and further support. There was also feedback on improved guidance for career discussions and more meaningful engagement between trainees and supervisors. Wales appears to have embraced the usability of Progress+, especially in relation to consistency in supervision and accessible support.

Wales reflected a strong endorsement of Progress+, particularly in continuity and accessibility. Responses are highlighted below:

- *'Very feasible longitudinal supervision.'*
- *'Lots of resources available. Trainers and trainees alike know where to find careers advice and are encouraged to explore early.'*
- *'My trainees have always made positive comments on the transparency of feedback under the new structure of Progress+.'*
- *'Those who are clinically competent but were struggling with exams have more time and adaptability now.'*

Scotland contributed to positive feedback and good practice, demonstrating efforts to align with Progress+ through organised training and supportive supervision. Respondents mentioned improved transparency in training goals and the value of regular feedback cycles. The responses indicate a clear recognition of the benefits of long-term supervisory relationships and more focused career conversations initiated earlier in training.

Scotland's responses highlighted a focus on transparency, consistency and high-quality feedback, as showcased below:

- *'Progress+ has had a positive impact on support for educational supervisors and trainees around careers, to which guidance is now embedded in the process.'*
- *'MSF+ feedback is easier to give and receive as the structure is now more regular and formalised.'*
- *'Progress+ has the potential to positively impact those with additional needs or requiring training adjustments.'*

Although few responses were received from Northern Ireland, the feedback still presented examples on the effectiveness of Progress+ and implementing good practice within their region. One TPD shared that trainees are assigned a supervisor at the start of the training and often retain them for 3 years, even when rotating across hospitals. This approach, supported by virtual meetings, maintains continuity while accommodating training placements for trainees. Early career discussions and a taking early action approach to training progression were also highlighted.

Some key feedback highlighted below:

- *'We have the same ES from ST1-ST3. Educational supervisors from the first day and remains despite site rotation – continuity is key.'*
- *'More discussions early career planning over time and rotation placements.'*
- *'Northern Ireland has excellent pass rates.'*

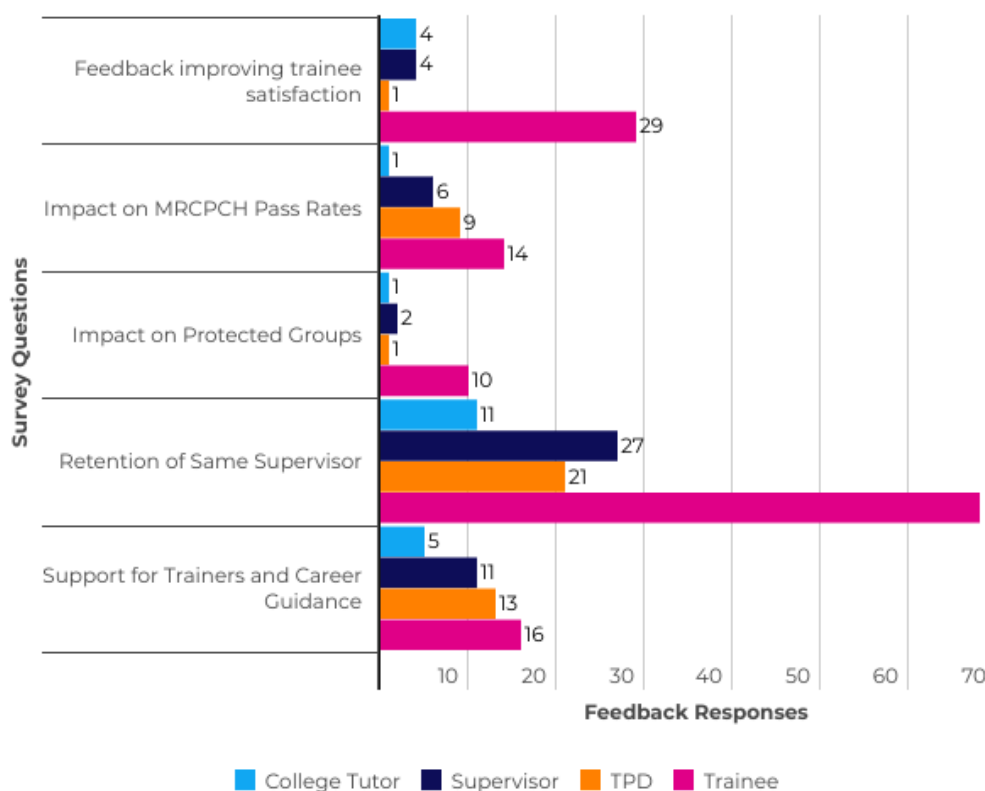
Additional Good Practice Examples

Additionally, below are some other regional examples of excellent training support including

- **East Midlands** – longitudinal supervision embedded across ST1-ST4, recognised as standard practice.
- **Wales** – trainee satisfaction improved via streamlined MSF+ and constructive feedback loops.
- **Scotland** – transparency and structured ARCP reviews ensures fairness for protected groups.
- **West Midlands** – College Tutors run ARCP-linked career sessions to enhance trainee pathways.
- **Northern Ireland** – positive implementation of the ePortfolio updates and MRCPH support tools.
- **Yorkshire and Humber** – training programme directors cite successful supervisor continuity and reduced feedback duplication.

Findings on the overall good practice

The following bar graph also summarises the number of responses from each role representative. Each colour representing college tutors, supervisors, training programme directors and trainees.



Across the board, trainees gave the most feedback, which shows how engaged they are throughout their stages of training. Overall, the data highlights areas of success in training support and supervision, while also indicating a need for continued focus on equity and assessment-related challenges.

Conclusion

The continued integration of Progress+ yielded promising outcomes across the UK during its second year. The findings show that trainees are getting the same supervisor which enhances relationship and understand the trainee's needs which gives more useful support over the period of their training. Whereas there is more advice available for career planning to guide trainees through their career options. Although the approach varies slightly, all regions are making positive changes. All the four regions are putting helpful practices in place.

Overall recommendations are to maintain and expand longitudinal supervision and continue support and reassurance for protected groups. Additionally, to promote regular review of trainer resources and ePortfolio functions and to support regions to adopt the good practices highlighted.