

# Workshop

# The Role of the College Tutor and

# Educational Supervisor in Supporting Trainee Revalidation

Dr Alistair Thomson

Vice-President (Education) RCPCH

And Associate Medical Director

DATE

(Medical Education) MCHFT

PATRON HRH The Princess Royal

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# Aim

## This workshop will explore:

- How to develop systems to
  - Capture good information for
  - Recording and
  - Verifying performance related complaints
  - Assessing development for revalidation



# Objectives

By the end of the workshop participants will understand how

- Trainee revalidation will work
- The duties of Educational Supervisors and College Tutors in the development of trainees
- How Educational Supervisors and College Tutors can contribute to the revalidation process



# Revalidation for Trainees

- Postgraduate Deans are Responsible Officers
- Based on ARCP
  - Probably more robust than career Dr revalidation
- Educational Supervisor's Report
- SUIs/SIs

- Evidence must be cited
- There should be 'no surprises'



# What Can Be Done

- What can College Tutors and Educational Supervisors do?
  - To collect information

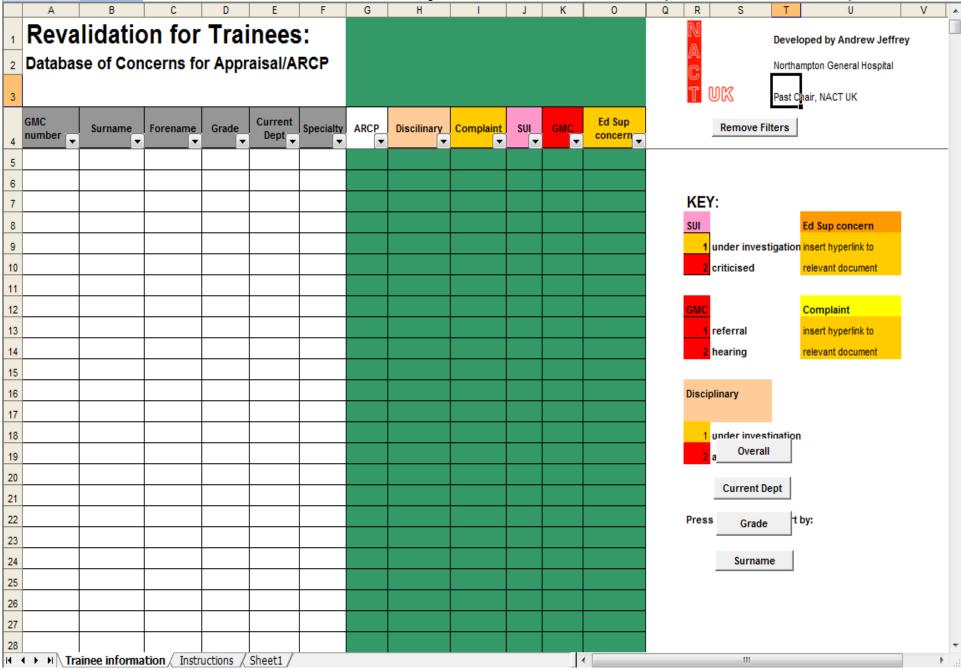


# Advantages of Revalidation for PGMC

- Revalidation of Trainees Committee
  - Task and Finish Group?
- Requires formal links with Clinical Governance
  - Bypass no longer possible
- Allows pro-active approach to trainees
  - Support for SUI involvement
  - Trainee problem identification
  - Early warning for DiD



Data collection spreadsheet (NACT UK)



# What Can Be Done

- What can College Tutors and Educational Supervisors do?
  - To collect information
  - To reflect trainees progress



# **End of Year Report**

- Ed. Sup. report essential to Deanery
- Include information from all attachments in year
- Trust systems
  - Reporting SUIs direct to Ed. Sups. is difficult
  - Centralising in PGMC offers central resource
- Spreadsheet evidence useful to Ed. Sups.
- Identify trainees in difficulty who need support





## Royal College of Paediatrics and Child Health

Annual T	rainer's Re	port						
Supervisor con	npleting report:		Training Unit:	Date:				
Trainee name:								
NTN:			GMC number:	Year of training:				
Placements si	nce last annual Re	wlew:						
Placement/ location	Dates (from - to)	Duration (months)	Clinical Supervisor	FT or less than FT				
Days sick leav	w:							
SAMPLE ONLY								
MRCPCH	om	ple:	te o	Number of enempts:				
Work-based a	asessment to 4	$^{\prime}$	committed of to	Please highlight important comments				
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MSF (SPRAT)		j		ĺ				
DOPS (Covert appropriate to	ng all of required s level)	MEs						
SAIL (level 2 8	Labove)							
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# Educational Supervisor's Report





## Royal College of Paediatrics and Child Health

#### Portfolio Review

A judgement should be made as to whether or not each area of required portfolio evidence is Cause for concern, Borderine, Setsificatory, Above expectations or Cutstanding. Where cause for concern is documented the besid for this must be clear and explicit.

Section	Level	Comments to support judgement
Examinations, Work based assessments and clinical competency appropriate to stage of training		
Evidence of clear educational objectives documented in a PDP, and progress towards agreed goals		
Evidence of reflection (clinical questions, reflective events, critical incidents, education events, CPD)		
Skills log up to date with appropriate verified entries		
Teaching appropriate to stage of training	ĺ	
Research / Presentations / Publications appropriate to stage of training	ĺ	
Clinical Governance activity (Audit, guidelines, risk management)		
Management (management responsibilities / participation appropriate to (lage of the ling)		VIII

### Overall Summary

Portfolio

Areas for development

Annual Trainers Report form - 2007/2008

# Educational Supervisor's Report



Where cause for con, are is documented the basis for this is until a clear and explicit

# Monthly Trainee Report

Monthly returns on trainees by consultants

Month/year

Please mark the appropriate column for each doctor and e-mail/send back to me. Thanks. Dr (College/Specialty Tutor)

+		Little contact	At expected level	Above expected level	Mild concern*	Serious concern*	*Comment
	Fl		<b>V</b>				
	F2		<b>V</b>				
Ì	GP ST1		<b>V</b>				
t	GP ST2		٧				
t	ST1		٧				
	ST2		<b>V</b>				
t	ST3		٧				
	ST4		٧				
	ST5		<b>V</b>				

<sup>\*</sup>Nature of concern; suggested remedy/support

Consultant/Clinical Supervisor:

Date: (APJT after AHSackey2009)



# Assume

- Serious issues often call into question Drs fitness to practice
- This may impact on livelihood
- If livelihood is threatened
  - Doctors will react
  - Challenge will be the main response
  - Counter-attack is possible, maybe probable
- A systematic approach is a defence



# What Can Be Done

- What can College Tutors and Educational Supervisors do?
  - To collect information
  - To reflect trainees progress
  - To act on information





## Managing Trainees in Difficulty

Practical Advice for educational and clinical supervisors

January 2008

# National Association of Clinical Tutors UK

(Revised 2012)

NACT UK: Supporting Excellence in Medical Education



# Identification - plus

- Failure to
  - Book appraisals
  - Complete WPBAs
  - Spread WPBAs throughout post
  - Collect sufficient evidence for year
  - Complete eportfolio
  - Undertake mandatory training
  - Produce a PDP



# What Can Be Done

- What can College Tutors and Educational Supervisors do?
  - To collect information
  - To reflect trainees progress
  - To act on information
  - To support trainees



# Framework for Remediation

- Identify venue for meeting
- Decide time frame
- Agree the problem(s)
- Document goals and objectives
- Plan remedial programme
- Set type of (and date for) reassessment
- Decide return to practice after reassessment
- Ongoing monitoring
- Document <u>everything</u>: copy to trainee and ? Deanery



# Information

- Documentation and processes should be uniform
- But will differ between countries and deaneries
- Consult
  - GMC website
  - Deanery website
  - Revalidation support team website
  - Postgraduate education managers



# How to Help

- Train
  - Educational supervisors
  - Clinical supervisors
  - Assessors (medical and non-medical)
- Consultant hot weeks
  - Better care for patients
  - Better supervision for trainees
- Specific Examples



# Action List for College Tutors 1

- Publicise trainee revalidation with reassurance
  - 95% trainees will not see difference from now
  - 5% will need support
  - 1-2% need Deanery input (as now)
- Remind trainees
  - Complete eportfolio
  - Enter reflective note for SUIs/SIs
  - Declare SUIs/SIs
  - Consult websites



# Action List for College Tutors 2

- Ensure trainers trained to Deanery standards
- Ed Sups to check eportfolio
- Record concerns about trainees
  - Present evidence i.e. facts, then opinion
- Discuss recording of SUIs/SIs with PGMC/DME
  - Set up dialogue with PGMC to receive/provide info about trainees
  - Clarify support roles if any Drs in Difficulty



# Action List for College Tutors 3

- Introduce monthly reports on trainees
  - Collect information from nurses and others depts
- Write a policy for escalation of trainee problems (liaise with PGMC & use NACT UK documents)
- Present about trainee revalidation to:
  - Trainees
  - Educational Supervisors
- Ensure info can be passed from placement to placement/Deanery to Deanery