

The RCPCH College Tutor handbook

A practical guide for new and aspiring
College Tutors

Version 2 (10th March 2024)



www.rcpch.ac.uk/college-tutors

This document provides information and guidance for new, aspiring, and existing paediatric College Tutors.

This is Version 2.0. As the document is updated, version numbers will be changed, and content changes noted in the table below.

Version number	Date issued	Summary of changes
1.1	18 October 2019	RCPCH College Tutor Person Specification – Essential Criteria updated to include SAS doctor working at an equivalent level (page 17).
1.2	24 Feb 2022	Adaptions
1.3	5 May 2022	Updated to reflect current practice
2	10 March 2024	Updates in line with Progress+

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1. Introduction from the Assistant Officer for Trainer Development

Whether you are thinking of taking on the role of College Tutor or you are already established in the role, I hope that this handbook provides you with helpful information. This document is designed to help you with the day-to-day issues that you may face. For more information there is also more information and support on the RCPCH website

The role of the RCPCH College Tutor is a vital position at health board / trust level to support trainees and trainers and can be both rewarding but equally challenging. In this role, you are in a unique position to positively influence the quality of education and training for our paediatric trainees. This is not without its challenges, especially at a time of staff shortages, low morale, and financial difficulties. Despite these many units manage to achieve excellent trainee feedback and I hope to share with you how that may be possible.

The aim of this handbook is to provide you with the information that you need to make the most of what is locally available and help enable you to support the development of a rich and safe training environment for your trainees. I will also try and answer common questions that come up regarding training and specific situations. If you feel that there are any areas that have been missed out then please do get in touch so that it can be included in the next version of the handbook.

As the Assistant Officer for Trainer Development, I would love to hear the great work you are all doing including solutions that you have found to the challenges that you face, so that we can together, develop and inspire the next generation of Paediatricians. across the UK.

Dr Lizzie Starkey

Assistant Officer for Trainer Development

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(April 2024)

2. An overview of the College Tutor role

Introduction to the role

As College Tutor (CT), you are responsible, on behalf of your Health Board / Trust, for delivering the educational contract agreed with the Postgraduate Dean. You are immediately accountable to your Clinical and Specialty Directors but ultimately accountable to your Health Board / Trust Chief Executive and Postgraduate Dean. You report to the Director of Medical Education (DME) within your health board / trust.

The term of office for a College Tutor is 3 years with a further extension of 2 years if appropriate. Some tutors choose to reapply for a further term after 5 years, but it may be worth considering a related role such as Program Director for example.

How you are appointed as College Tutor in your organisation will vary according to where you work. The National Association for Clinical Tutors (NACT) recommends that the College Tutor is jointly appointed by the Clinical/Specialty Director, the Head of Specialty School, and the Health Board / Trust (Medical Director or DME). The interview panel should represent all parties with a legitimate interest, and this might include a RCPCH representative.

The role will be discussed and formalised at job planning with the Clinical Director. This may require a reduction in Direct Clinical Care (DCC) as time is required during work hours to fulfil the role. NACT UK strongly recommends a minimum of 1 programmed activity (PA) for each 20 trainees in the specialty, shared between specialty and sub-specialty tutors as appropriate.

Occasionally, tutors are allocated the role of College Tutor on appointment to their first consultant post while most apply later in their careers when they have more experience. What matters is what you do with the role and that your contribution is supported and respected by your colleagues and the organisation in which you work and that you are passionate about education and training. I would strongly recommend a period of shadowing for before starting or in larger Health Boards / Trusts sharing the role with a colleague.

A good handover from your predecessor about the roles and responsibilities is key.

College Tutor roles and responsibilities

*Please see **Annex 1** for the RCPCH College Tutor role profile and person specification*

The roles and responsibilities expected of the paediatric College Tutor include:

- Co-ordination of and oversight of the delivery of the RCPCH Progress+ curriculum ensuring that high standards are met and that learning opportunities are maximised both informally and through programmed sessions in a safe environment.
- Ensuring trainees are being provided adequate opportunities to undertake Supervised Learning events (SLEs) and ensure that trainees are released for training appropriate to their needs which might include clinics, local and regional training. This will require working with clinical workforce and HR teams to support this.

- Making sure your training unit is working in line with the Paediatric Trainees Charter and monitor local progress across the key domains.
- Ensuring that an adequate induction program is in place for new starters and that they are warmly welcomed to your department. It is important to regularly update this in line with trainee feedback.
- Allocation of the most appropriate longitudinal educational (depends on how this is done per region) and Clinical supervisors for individual trainees. For example, a SPIN trainee should ideally have a supervisor with experience in that area of interest.
- Provision of additional training support to either trainees or supervisors.
- Ensuring that there are good channels of communication with your trainees through Local Faculty Groups and Junior doctors forums.
- Working closely with your Deanery / Head of School, DME, and other tutors in your Health Board / Trust both to review formal GMC, regional or local feedback and ensure that action plans are made and adhered to
- Attending trainee interviews, ARCPs and other meetings as required by your School of Paediatrics.
- Training of GP trainees or Foundation Year doctors within Paediatrics and allocation of Clinical Supervisors
- developing and supporting your Non-Training Grade doctors and other associated staff and ensuring that they have equivalent opportunities to trainees.
- Working with your Guardian for Safe Working to ensure that exception reporting is encouraged and acted upon.

How to prepare for the role

The best way to prepare for the role is to speak with those who have been College Tutors before and ideally undergo a period of shadowing with the current College Tutor. If that is not possible you could link up with an experienced tutor in your area for support or ask one of the Programme Directors in your School of Paediatrics to support you.

There are many ways to familiarise yourself with resources available and meet with those who you will be working with in the future, for example:

- Read through the RCPCH College Tutor's resources and updates.
- Attend RCPCH College Tutor virtual training sessions These meetings are a chance for discussion with other RCPCH tutors including networking and learning from each other.
- Familiarise yourself with the Progress+ Curriculum.
- Familiarise yourself with the General Practice Vocational Training Scheme (GPVTS) paediatric competencies and link up with your local GPVTS teams.
- If you have academic trainees within your organisation learn more about their needs too and link up with your Academic TPD.
- Ensure that you have attended a range of courses and training days that will help you e.g. Effective educational supervision courses, managing trainees in difficulty, careers support etc. Your Deanery should have details of local events or see the College website for RCPCH training opportunities.

- Learn how to use ePortfolio efficiently. There's lots of guidance notes and short 'how to' videos on the [RCPCH website](#). This is key when supporting your trainees but also your departmental supervisors. Another good way of increasing your familiarity with ePortfolio is to attend regional ARCPs.
- Meet with the Training Programme Directors and Head of School in your area to familiarise yourself with priorities and issues regionally. Within your Health Board / Trust meet with the Director of Medical Education, Learning and Development teams, Workforce, rota coordinators, HR, and tutors in other specialties (including Foundation and GPVTS teams) and learn what is available in your area and place of work, what local issues are, when meetings happen.

Being well supported by your School of Paediatrics, Director of Medical Education and colleagues is very important to help you get the job done and support you through local and regional challenges.

College support and resources

New tutors must ensure that RCPCH is notified of your appointment, so that the College can provide you with support as you undertake your role. Please ensure your Health Board / Trust have completed and sent the 'change of tutor' form available to download from the [College Tutor webpage](#).

Virtual College Tutor sessions are held and recorded for all tutors. These include briefings on current and future developments in training, workshops, and networking opportunities.

The College produces and periodically updates a range of written resources to support tutors in their role, which can be downloaded, used, and adapted as required.

3. Common tasks and responsibilities

Your exact responsibilities will vary from region to region, but are likely to include many of the following tasks:

Welcoming new trainees to your department

Organising induction is your chance to warmly welcome your new starters and make sure that they are as ready as they can be to come and work with you. It can be a challenging aspect of the role and is dependent on good links with your School of Paediatrics to ensure that you receive accurate information. You also need to work closely with your own managers, with other departments such as Human Resources, Workforce, Learning and Development, and clinical departments relevant to your post. Meeting well in advance to agree the process that you will follow in your organisation is strongly advised. If you are lucky enough to have a good administrator to help you then hold them close and don't let them go. Try to embed sustainable systems that will reduce your workload for future inductions.

Forewarned is forearmed. A warm welcoming message to the forthcoming trainees as soon as you receive the list of those coming is strongly recommended. This gives you the opportunity to introduce yourself to them and find out about gaps due to parental leave and any other issues that come up when the lists are not accurate. It means that for less than full time (LTFT) or academic trainees slot share days can be confirmed, and gaps filled if at all possible.

Information that is helpful to know ahead of your trainees starting includes:

- preferences with respect to days worked if less than full time (LTFT)
- SPIN modules, MScs, or other courses that they are attending.
- specific training or pastoral needs
- preferred NHS.NET email address so that migration can be arranged.
- specific attributes that they would hope their local Supervisor might have so that you can allocate the right person.
- any education or management type roles that they would be keen help take on.

It is best to share rota information with the incoming team at the earliest opportunity – even if the only information that you have to share is that the rota is not yet ready! In general, the better the communication, the better the long-term relationship between the new starters and the department and this will pay dividends in the long run.

You will need to ensure that their induction programme includes both Trust/Health Board and local requirement and is not boring within reason. You may find some of the resources on the College tutor resources page and also useful information for trainees starting out on their paediatric training journey.

Cover will need to be arranged so that the trainees can complete induction which may involve consultants cancelling clinics and covering trainee responsibilities. Be prepared that however enthusiastic you are and even if you provide a handbook of information before the post and at induction, there will be denial that they were given some of the essential information that you

enthusiastically shared with them. Take a deep breath and don't take it personally. There is a lot to take in when you join a new organisation and most of them will have been absorbed in clinical work at their previous Trust/Health Board.

Allocation of Supervisors

Those providing formal supervision need to have been appropriately trained and need to have time allocated in their Job Plans to train and do their job. Ideally, 0.25PAs per trainee are allocated for named longitudinal Educational Supervisors (ES). With Progress+, longitudinal supervision a trainee ideally keeps the same ES through a whole training level. Trainees therefore may need a clinical supervisor for each post.. The most important thing is that the supervision is of good quality.

As College Tutor, you will:

- allocate trainees to individual supervisors and sometimes need to support trainees or trainers through meetings or joint supervision.
- ensure that your Supervisors are appropriately supported and trained.
- Advise on individual cases where there are challenges and liaise with your Programme Directors, DME and Head of School.
- Support your local ES colleagues with trainees who are struggling or returning from a period of time out.

Rota co-ordination

Particularly when there are inadequate numbers of trainees in your unit, administering or coordinating the junior doctor on call rota can result in a conflict of interest for a CT. How can you fight for the rights of your trainees to get to clinics and essential training opportunities when you are also under pressure to keep a rota covered? This cannot always be possible but, my advice would be for this role to be done by another colleague and supported by an administrator. That way you can find solutions together.

Supporting doctors through to certification

You will need to be familiar with the [RCPCH Training Guide](#) and the requirements for ARCP or Certificate of Eligibility for Specialist Registration (CESR). Be familiar with the routes into entry onto the Specialist register and how to best support trainees, including those on academic programmes and those taking time out of training. This is a continually changing area so keep up to date by regularly visiting the RCPCH website and College Tutor training days.

As College Tutor you may need to support both trainees and your local supervisors with career advice. It is worth knowing about the application process for subspeciality training (previously

known as GRID) as well as options for local SPIN training. You may need to signpost trainees to the appropriate people in those subspecialties to gain further advice.

It is also helpful to be aware about Out of Programme (OOP) opportunities for trainees who want to have a change or break from training. This is becoming much more flexible for trainees. The various OOP options can be found within the [Gold Guide for Postgraduate Training](#).

You will also need to be familiar about how to support those trainees who are having difficulties for whatever reason. You may need to signpost them or their supervisor to get that additional support they need. This may be a referral to Occupational Health if they are having health difficulties or a referral to the Professional wellbeing service (PSW) if they have training difficulties. Sometimes trainees need referrals to both places.

The RCPCH ePortfolio even in its current enhanced and improved version can be a little cumbersome to navigate. A good way to become proficient in its use is to attend ARCPs when you are expected to navigate through many trainees' portfolios in a day. By reading a number of portfolios it also gives you a better chance to gauge the performance of your trainees. Short 'how to' videos and ePortfolio guides are available from the [RCPCH website](#).

Less Than Full Time (LTFT) Trainees

There is comprehensive information on the RCPCH website relating to [LTFT training](#). Be mindful of the challenges for trainees returning to work after a period of absence and make the trainees aware of the information around. Supporting doctors returning to training after time out (known as SuppoRTT). In England, SuppoRTT was developed to enable trainees to have a safe, supported return to work by offering a wide range of learning and support resources, which can be used to create a bespoke package of support which suits their individual needs. Hopefully, they will be aware about this as it should have been discussed before they took time out of training. As Tutor, you may be contacted by trainees who are returning after a period of time off and you may need to support them and their supervisor with managing this process including arranging Keeping in Touch (KIT days) or attending SuppoRTT study days. There are equivalent of SuppoRTT in other nations.

Trainees wishing to train LTFT no longer need to give a reason as to why they would prefer to reduce their hours. Paediatrics is one of the most popular specialties for less than full time working both in training and as substantive consultants. Different Schools of Paediatrics have different attitudes to the length of training that they will accept on a LTFT basis. Trainees tend to be in slot shares with anything between 0.5 and 0.8 WTE daytime work. Those on 0.8 WTE may only be able to share a 0.5 WTE slot on the out of hours rota. This takes quite a bit of negotiation at the beginning of the post when there are gaps. Also due to their commitments (e.g. child care) they may only be able to work on a certain half of the week and this also may need some discussions.

The best place to learn about the ins and outs of Less than Full time working is to consult [the Gold Guide](#).

Meetings with trainees and colleagues

It is important that you ensure that your trainees have a place to discuss the day-to-day issues that come up in the post but also a separate meeting dedicated to training. You also need to ensure that your longitudinal supervisors and clinical supervisors' team are kept up to date. Meetings may include:

Junior Doctors Forum (or equivalent name)

These meets are run by the trainees including chairing and setting the agenda for these meetings, which usually take place every few months. It is an opportunity for trainees to meet with senior members of the medical and management staff to discuss the day-to-day functioning of the unit and operational matters. Some teams like for the trainees to meet first and then any issues can be discussed in a more anonymous way; others prefer to discuss together over a longer period. It is an opportunity for trainees to chair and minute meetings and usually a lead and deputy are appointed to the role. Sometimes the best ideas come out of these meetings. At other times, the same insoluble problems are discussed and minuted. Don't lose heart- solutions eventually appear.

Local Faculty Groups

These are regular meetings focussing on Education and Training where essential information can be shared. They are chaired by the College Tutor with help and support from any College Reps that you have in your team. They may be attended by a member of your Medical Education Department. There should be a section whereby trainees are individually discussed relating to their training in a formative way and this meeting may be separate to the one with the trainees or the same day. There should also be the opportunity for consultants, College Tutors, and college reps to meet with the trainees.

Examples of the agenda with the trainees may include:

- feedback from the regional College Reps / College Tutors meetings
- any new updates relating to training e.g. RCPCH Progress+,
- training opportunities e.g. LME evenings, RCPCH meetings, regional meetings
- discussion of GMC and other feedback
- anything else relevant to training.

Trainees Charter

Over the last few years, the trainees and the RCPCH have developed the [Trainees Charter](#) with key domains that all training centres are expected to achieve. The Charter will be a hallmark of

high-quality local training. As College Tutor it is your role to make sure that the key domains within the charter are met and adhered too. It may be worth regularly monitoring these key areas within your role.

Meetings with the Education Team and local colleagues

Within your Trust/Health Board

Meetings with your DME, other CTs and support team should take place bimonthly or quarterly. Here you can discuss educational provision with your DME and share ideas and solutions with other CTs. You will be expected to present and discuss any formal feedback that you have e.g. GMC survey and action plans. If you are very unlucky you will need to discuss how to manage a College Visit or concerns raised by a CQC inspection.

If you have GP trainees or Foundation doctors, then you will also need to meet with the relevant supervisors or programme directors. You will get separate GMC feedback for GP trainees.

Regional meetings

If you do not meet regularly with other College Tutors in your region do set out to put that right. Meeting regularly, perhaps on the same day as the regional trainees/school board Committee meeting (if you have one) when juniors and seniors are present is one of the richest learning events for CTs. It is also an opportunity to find new ways of delivering training.

Having a safe space to discuss trainees who may be struggling anonymously with other tutors is important and this is a good way for you to learn new methods to support your trainees best. If the identity of the trainee is known, it is important to remain impartial in such meetings and focus on how to best support the trainee and make their rotation to the next post as seamless as possible.

4. Help and support

Common issues and potential solutions

Rota gaps

You have been asked to take on the additional role of 'rota co-ordinator.' Inadequate numbers of trainees have been allocated to your site.

Unfortunately, this is a regular occurrence requiring short- and longer-term solutions. In the short term you will need to advertise the post and if possible, appoint to the role. If you are unable to recruit, then there are various possibilities. Share your problem with the existing trainees and ask for assistance in finding a short-term solution as they may have innovative ideas or have found a solution to the same problem at a previous Trust/Health Board. By reaching out and showing them that you are looking for a solution it becomes more of a shared problem. In the longer term you will need to work with relevant members of your senior management team to look at longer term options. It is paramount that when considering amending a rota that the trainees are consulted in this process and provide their opinions. Sometimes they can come up with solutions or see difficulties that you may not have seen,

Possible actions to be agreed with your teams may include:

- Look at amending the rota so that nights come round more quickly. You would need to follow BMA guidance and study the Junior Doctor Contract carefully and seek the advice of your Workforce department. This is a difficult thing to achieve at short notice and results in more time off in the day and less daytime training opportunities such as ward work and clinic opportunities which you would need to compensate for really carefully.
- Agree appropriate payment in the short or longer term for consultants to join a hybrid rota whereby they do some of the out of hours shifts. This is an expensive solution for an organisation.
- Consider future staffing arrangements if this is a recurring theme, e.g.:
 - Permanent non-consultant grade staff
 - Nurse consultants or Advanced Nurse Practitioners for certain roles
 - International Medical Training scheme – can you link in with a different organisation and create a rotation or post?
 - Complete rota overhaul with combination of consultants and trainees on the out of hours rota
 - Other workforce roles that may help doctors focus on their activities

Whatever your solution it is important that you form a working group with relevant players in your organisation and if you do not have personal experience of some of these solutions visit departments which have implemented some of the solutions and learn from them embarking on a new direction.

Consultant engagement with supervision

Your colleagues have no interest in being longitudinal educational Supervisors and you have too many trainees to allocate.

Why wouldn't they? This is where your enthusiasm comes in! Ask why they are reluctant and help them see the rewards of supporting and developing trainees, and what resources are available to help them. Do find out what training is available for them locally and offer them a period of supervision or support if they are daunted by the task. It does not take a lot of extra training and if you develop a good Local Faculty Group/support network then a lot of the local know-how will be shared there. There are a wide range of video and downloadable resources provided by RCPCH to help Supervisors understand the curriculum and use this within Supervision meetings to guide and assess the trainee, and how to carry out Supervisory tasks in ePortfolio. You can also signpost them to the RCPCH Effective Educational Supervision course and the virtual supervisor roadshow sessions run by the college.

Supervision relationship breakdown

A trainee approaches you to report that they are unhappy with their current Supervisor.

It is important to listen to both sides to understand how the breakdown in relationship has occurred, and whether it may be best to try and resolve the issue or to re-assign the Trainee to another supervisor. Sometimes the match is just not right in which case reallocate the trainee and move on. Sometimes there has been difficult but appropriate feedback in which case you may need to support both the trainee and the supervisor through this.

There may be important learning or personal development points for one of both parties arising from the conflict, for example on how to give and receive feedback, working with others, or ensuring that both the trainee and supervisor have a correct and shared understanding of their roles and responsibilities and how to use the curriculum and ePortfolio appropriately.

With the development of Longitudinal educational supervision, trainees may already have their educational supervisor in another centre, however you still may be asked to support with managing the breakdown. It maybe that you need to liaise with the College Tutor in their unit or a TPD to discuss these difficulties.

Managing absence

A trainee is returning to work after a period of sickness.

Set out the rules and responsibilities early in the post including the requirement to document absence in the trainee's portfolio as this will be included in the ARCP. It is important that trainees report sickness appropriately and provide relevant documentation as appropriate. Return to work interviews after a period of absence are a supportive means to ensure that there are no immediate or subsequent adjustments or interventions that are needed.

If a trainee needs to adjust their working hours or arrangements due to sickness or pregnancy, then there is a process that you follow. A referral to Occupational Health will be needed to guide the necessary arrangements. Occupational Health appointments can take time to materialise so in the meantime common sense may need to prevail.

If a trainee is struggling for any reason, you should explore the issue with them as soon as practically possible and adjust proactively. At times of rota shortage, you will need to advocate on behalf of the trainee.

Fast-tracking training

A trainee asks to progress more quickly through the training programme.

A trainee can competency progress when they have demonstrated that they have attained capabilities relevant to their level of training. You may be asked to support a senior trainee to 'act up' or apply for a consultant post that has come up and they wish to apply for. Remember that they have to have completed START and their portfolio must be ready for signoff. You may need to encourage them to go through the portfolio with a fine toothcomb and make sure that they qualify. The [RCPCH Training Guide](#) and [Gold Guides](#) comprehensively cover this area. [There is college guidance to support capability-based training.](#)

Deputy College Tutor

It is increasingly common for a Deputy College Tutor to be recruited, and this is strongly recommended if you have 20 or more trainees who you are responsible for. You may find it best to split tasks out by training sites or your respective skills and expertise, or just use them to support you at busier times of the year. Don't forget College Tutor roles can also be managed as a job-share, as an alternative way of sharing the load and benefiting from two people's ideas and strengths.

Non-training grades

Non-training grades can be a vital resource. What is important is that they are treated in the same way as well as your trainees and that you invest in them as people and as doctors working in your organisation.

- If you have recruited from abroad be thoughtful about how the doctor settles into the UK systems both within and outside work. Think about getting them to attend a new to the NHS course in your local region. You might want to also link them to your regional Soft-Landing trainee (Soft Landing is a group created to support Paediatric IMGs from overseas when they start in the UK)
- Ensure that they have excellent training opportunities. You may need to organise bespoke regional training depending on their needs.
- Find ways in which you can develop their skills and entice them to stay with you for longer.
- Consider rotational posts with other departments e.g. starting out doing the job of a level 1 trainee to find their feet and then rotate into a general and then a more specialised post that would otherwise be filled by a senior trainee.
- Keep in touch with your HR department in order to stay up to date with changes in visa rules etc.

Stepping down

After three years as College Tutor, you will be given the opportunity to continue the role for a further two years. Some tutors continue for longer. At some point however it will be time to move on and you will want to share your experience and expertise with a new tutor. The most effective way of handing over is to appoint a shadow tutor for six months (if they are not already in a Deputy College Tutor role) and hand over gradually. If you are a big unit it is worth having more than one tutor and stagger appointments. You will have a wealth of experience and will hopefully be a rich source of information and help for your colleagues.

Please ensure that RCPCH is notified that you have stepped down and who your replacement is, so we can remove you from mailing lists and invite your successor to a welcome meeting. The 'new tutor' form to notify us of this change is available at <https://www.rcpch.ac.uk/education-careers/supporting-training/college-tutors>.

Contact preferences.

Please note that the College may need to share your contact details with those undertaking other specific College roles such as the Senior College Tutor, other College Tutors, Officers, and Regional Leads. This will be limited to name, hospital, and preferred contact email address. If you have any concerns as to how the RCPCH will share your details with these individuals, please contact qualityandtrainingprojects@rcpch.ac.uk.

5. Further guidance and resources

The [RCPCH College Tutor resources page](#) includes a range of resources designed to help tutors in their role. Please let us know if there are any additional resources you would like to see included, or would like to contribute to the toolkit to support others, please contact the Quality and Standards team by emailing qualityandtrainingprojects@rcpch.ac.uk.

Other useful RCPCH resources include:

- [Paediatric training guide](#)
- [Progress+ Curriculum, syllabi and supporting resources](#)
- [eportfolio guidance for doctors](#)
- [ePortfolio guidance for supervisors](#)
- [Trainee charter](#)
- [Trainee toolkit](#)
- [Subspecialty application guidance](#)
- [Academic toolkit](#)
- [Certification guidance](#)
- [Less than full time training guidance](#)
- [Exams guidance and resources](#)
- [Assessment guidance and forms](#)

Tutors may also find the following external resources to be useful:

- [National Association for College Tutors](#)
- [The Gold Guide \(9th Ed.\): A Reference Guide for Postgraduate Training in the UK](#)
- [Junior Doctor Contract rota rules at a glance](#)
- [Statutory guidance on taking leave](#)

The College offers free training and briefing sessions for all College Tutors twice a year, in addition to the new College Tutor welcome meetings and sessions at the RCPCH Annual Conference. For more information on the College Tutor days, see the RCPCH courses schedule: <https://www.rcpch.ac.uk/courses>

For any queries related to training, including ePortfolio, please email training.services@rcpch.ac.uk.

For any queries related to the College Tutor role or support materials, please email qualityandtrainingprojects@rcpch.ac.uk.

Annex 1: RCPCH College Tutor role profile

The Tutor is the RCPCH Representative in their Trust/Health Board. It is their duty to keep up to date with RCPCH standards in education and training, new educational initiatives and changes to examinations, assessments, and curriculum updates.

Education and Training

The Tutor will:

- Co-ordinate the delivery and ensure the high quality of postgraduate paediatric education and training in their Trust/Local Education Provider with protected teaching time to deliver the RCPCH curriculum.
- Ensure that the educational opportunities and environment within the department meets the standard set by the RCPCH and Trainees charter and fulfils the needs of both the hospital and community trainees of all levels.
- Ensure that strategies are in place that seek to maximise the training value of every patient contact.
- Ensure high quality induction programmes are in place, attended and recorded in line with clinical governance requirements.
- Ensure there is appropriate access to scheduled deanery/LETB-based formal learning opportunities.
- Ensure an appropriate balance between service and training needs is maintained. This includes the avoidance of unnecessary duties without educational benefit and of workloads which regularly prevent attendance at educational activities.
- Ensure trainees have reliable access to appropriate IT and internet learning.
- Ensure trainees participate in audit and Quality Improvement work.
- Ensure there is appropriate access to examination teaching.
- Encourage trainees to undertake presentations, understand research methodology and critical appraisal through appropriately structured journal clubs.
- Encourage attendance at the RCPCH Annual Conference and other suitable meetings.

Educational Supervision

The Tutor will:

- Ensure that all trainees are allocated an Educational / Clinical Supervisor, have timely appraisals, and have access to appropriate career advice, including issues regarding flexible training.
- Ensure educational supervisors have access to ePortfolio accounts and are linked to their trainees.

- Ensure Educational Supervisors are supported and developed to undertake their role, to the standard set by the deanery which reflect the Gold Guide, and GMC requirements.
- Ensure that appraisals are held at the beginning and middle of each post with appropriate development of a personal learning plan.
- Ensure that an end of post review including a review of MSF feedback takes place, where specified.
- Act in a pastoral role where trainees require confidential help from someone other than their Educational Supervisor.
- Ensure that the School of Paediatrics is informed of any concerns relating to trainees in difficulty to ensure they receive optimal support.
- Ensure Educational Supervisors are well informed about the START Assessment and understand their role in providing feedback to candidates following the assessment.

Co-ordination of Continuing Professional Development

The Tutor will:

- Encourage all career-grade Paediatricians in their department to engage in the RCPCH CPD scheme and ensure adequate time is allocated in their job descriptions for this purpose.
- Encourage activities in the department programme to facilitate appropriate CPD and support individual doctors in meeting their CPD needs.
- Co-ordinate with the paediatric department's Clinical Fellows and Staff and Associate-Specialist doctors lead (SASG lead), in collaboration with the deanery/LETB (who will be responsible for their further development).

Relationships

- The RCPCH College Tutor works closely with the Directors of Medical Education (DME)/Post-graduate Clinical Tutors (PGCT) for the Trust/Health Board to ensure that the local deanery/LETB's learning agreements is met. S/he will represent Paediatrics on the Trust/Health Board's Educational Committee which is responsible for ensuring that the local educational facilities and learning environment are of a high standard. S/he will facilitate local placement feedback and will co-ordinate any necessary visits to review paediatric training.
- S/he will act as a local representative for RCPCH in the Trust/Health Board, ensuring information from the College is passed on to trainees and colleagues. His/her name, hospital and contact email address will be included on an RCPCH College Tutors' webpage register. Restricted access to this register will be limited to members who have direct involvement with the College Tutor role.
- Within the deanery/LETB, s/he will be involved in the deanery/LETB's School of Paediatrics, meeting with other College Tutors.

- The RCPCH College Tutor will attend meetings of the Deanery/LETB School of Paediatrics on a regular basis, in order to work effectively with the School of Paediatrics.
- In this role, s/he will support the regional paediatric training programmes and assist in the Annual Review of Competency Panel [ARCP] process as required, using this opportunity to discuss possible improvements in the educational environment. S/he will also assist in the selection of trainees.

Accountability

- Professionally responsible to RCPCH.
- Managerially responsible to Deanery/LETB School of Paediatrics.
- Contractually responsible to the Trust/Health Board.

Training

It is expected that the Tutor (particularly new tutors) will attend either of the RCPCH Paediatric College Tutor Days (usually held in the autumn and spring) and also, the College Tutors' session held at the annual college meeting. Attendance at suitable updates and other relevant courses held by RCPCH, deanery/LETB and other bodies is strongly recommended.

Resources

- The job plan will state the duties and responsibilities of the Tutor and clearly state the expected time commitment [in PAs]. Most Trusts or Health Boards give 1 PA per week to Paediatric College Tutors. However, this does vary depending upon the College Tutor's Base Trust/Health Board.
- This time commitment may be recognised as additional PAs or by a reduction in other PAs. This is a matter for local negotiation.
- The job plan will describe the annual process of appraisal and objective setting.

RCPCH College Tutor Person Specification

Whilst each deanery may have its own format for a person specification, it is suggested that it should include the following:

Essential criteria	Desirable Criteria	How identified
Be a Fellow, Member or Affiliate Member of the Royal College of Paediatrics and Child Health and a local Consultant in paediatrics or one of the paediatric sub-specialties, or a SAS doctor working at an equivalent level.	Strong sense of professionalism	CV/application Interview

Ability to demonstrate experience as a clinical and educational supervisor.	Meets Gold Guide and GMC criteria for educational and clinical supervisor, with other educational achievements.	CV/application
Have genuine enthusiasm for education and relevant, up-to-date training in teaching methods by having attended Paediatric Educators Programme/Training the Trainers or equivalent.	PG Cert in Education or equivalent	CV/application Interview
Have detailed, up-to-date knowledge of the requirements of postgraduate training, the regulations involved and the examinations, assessments, and appraisals that trainees are required to undertake.	Up to date with all college material	CV/application Interview
Able to demonstrate an active involvement in education and training issues and have an appropriate and current working knowledge of educational requirements.	Educational achievements.	CV/application Interview
Understand the principles of appraisal and assessment and have had appropriate training.	Training within the last 5 years	CV/application Interview
Appropriate training in Selection methods	Training within the last 5 years	CV/application
Awareness of the issues around handling trainees in difficulty	Training within the last 5 years	Interview
Ability to attend relevant national RCPCH Tutors' meetings and joint Tutors' meetings with the Board of the School of Paediatrics		Interview
Contribute to the Deanery School of Paediatrics	Previous involvement with deanery.	CV/application Interview
Excellent organisational skills		Interview
Excellent communication, counselling, and liaison skills – a readiness to listen and empathise		Interview
Problem solving abilities and a flexible, practical approach.		Interview