

## **Health Education England (North West)**

### (HEENW)

Developing people		
for health and healthcare	2980	
www.hee.nhs.uk		



# To Recognition and Beyond!

How to Continue Recognition as an Educational or Clinical Supervisor

Dr Alistair Thomson Associate PG Dean, HEENW PGME Conference 8 September 2016

# Background, Aim and Objective



- From 1 August 2016 **GMC requires** that:
  - Postgraduate trainees and
  - Undergraduate medical students are supervised by
  - Recognised Educational Supervisors (ES) and
  - Recognised Clinical Supervisors (CS)
- Trainers must maintain recognition as part of their professional appraisal and revalidation

### **Aims and Objectives**



- Workshop explores HEENW model of how trainers can
  - Maintain recognition status over the revalidation cycle
  - Acquire trainer status, if not recognised
  - Use the AoME 7 domains of medical education
- Aims to enhance understanding of scope of evidence
- **Objective** of writing SMARTER objectives for PDP
- Small group and plenary work referring to
  - Standards outlined in 'Promoting Excellence'
  - Education opportunities offered by HEENW

### Plan

**NHS** Health Education England

- Background
- Where are we now?
- What should you be doing?
- Questions

### Background

- GMC
  - Good Medical Practice 2013 (3)
  - Recognising and Approving Trainers
- Doctors should
  - Contribute to teaching/training doctors and students
  - Make sure all (*sic*) staff have appropriate supervision



Good medical practice

rking with doctors Working for patients

Genera Medica

Counci







### Promoting excellence:

standards for medical education and training

General Medical Council

Working with doctors Working for patients

**NHS** Health Education England

### Published 30 July 2015

### Active 1 January 2016



- Learning environment and culture
- Educational governance and leadership
- Supporting learners
- Supporting educators
- Developing and implementing curricula and assessments

## Theme 1: Learning environment *Health Education England*

- S1.1 The learning environment is safe for patients and supportive for learners and educators. The culture is caring, compassionate and provides a good standard of care and experience for patients, carers and families.
- S1.2 The learning environment and organisational culture value and support education and training so that learners are able to demonstrate what is expected in Good medical practice and to achieve the learning outcomes required by their curriculum.

### Requirements – 4:



- R1.7 Organisations must make sure there are enough staff members who are suitably qualified, so that learners have appropriate clinical supervision, working patterns and workload, for patients to receive care that is safe and of a good standard, while creating the required learning opportunities.
- R1.8 Organisations must make sure that learners have an appropriate level of clinical supervision at all times by an experienced and competent supervisor, who can advise or attend as needed. The level of supervision must fit the individual learner's competence, confidence and experience.

### **Roles:**



- Trainer =
  - Clinical Supervisor
  - Educational Supervisor
- Both
  - Active
  - Inactive (but recognised)
- <u>https://trainerdatabase.nwpgmd.nhs.uk/</u>

## GMC Recognising and Approving *Health Education England*

- All CS and ES (and UG roles) need recognition by EO
- Data collected by HENW/ Medical School
- Submitted to GMC
- Recognition by GMC
  - cf. GPs Approval
  - Legislation underway
- 2012 document under review



Recognising and approving trainers: the implementation plan

August 2012

General Medical Council Regulating dectors auting good medical practice

## Summary – ES vs CS



- <u>Named ES</u> are responsible for the overall management and supervision of a trainee's educational progress during a placement or series of placements (and write a summative report at end of placement/year)
- <u>Named CS\*</u> oversee a trainee's clinical work throughout a placement and contribute to the final decision on whether a trainee should progress to the next stage of training

\*N.B. HEENW require all trainers to be at least CS

## **GP Education Governance**





### Monthly Returns on Trainees by Supervising Consultants

Month/year

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

	Little contact	At expected level*	Above expected level	Mild concern**	Serious concern**	*Comment
		$\checkmark$				
F2		$\checkmark$				
GP ST1		$\checkmark$				
GP ST2		$\checkmark$				
ST1		$\checkmark$				
ST2		$\checkmark$				
ST3		$\checkmark$				
ST4		$\checkmark$				
ST5		$\checkmark$				

\* How above expected level. \*Nature of concern; suggested remedy/support

Consultant/Clinical Supervisor:

Date:

### Monthly Returns on Trainees by Supervising Consultants

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	Little contact	At expected level*	Above expected level	Mild concern**	Serious concern**	*Comment
		$\checkmark$				
F2		$\checkmark$				
GP ST1		✓				
GP ST2		✓				
ST1			✓			Always runs handover on time.
ST2		$\checkmark$				
ST3					<ul> <li>✓</li> </ul>	Late at handovers, dishevelled, disorganised, and argumentative.
ST4		$\checkmark$				
ST5		✓				

\* How above expected level. \*Nature of concern; suggested remedy/support

Consultant/Clinical Supervisor:

Date:

### HEENW\* Strategy – Principles Health Education England

- To build on what we have
  - Evolution not revolution
- To further develop current CS and ES
  - But not make it excessively arduous
- To ensure all new CS and ES have been appropriately trained before recognition
- To introduce educational development into everyone's CPD, appraisal & revalidation process

### \*N.B. Other LETBs may differ

# Summary of HEENW Approach - 1

July 2015	NHS	Gaining provisional and full recognition
Health Ed	lucation North West	Here is a reminder of the HENW requirements to be provisionally and/or fully recognised as a named Clinical or Educational Supervisor:
nearth Lo	ideation North West	<ul> <li>Individuals who are listed on the HENW Trainer database as 'Trained' CS or ES will be provisionally recognised.</li> </ul>
Trainer Standards Update         Welcome to the July edition of the HENW Trainer Standards update. We hope y these bulletins useful but please let us know via our e-mail address if there is other to see included in future editions: nwd.educatordevelopment@nw.hee.nhs.uk         GMC recognition and approval of trainers         The GMC released their implementation plan for the recognition and approval o which requires LETBs (i.e. HENW) as Learning Organisations to formally recognise Clinical and/or Educational Supervisors: GMC Implementation Plan.         Following the integration of the Mersey and North Western deaneries one framework trainers will apply across HENW to ensure that the GMC standards are fur deadline. This includes the implementation of a live, online trainer database to record the status of Named Clinical Supervisors (CS) and Educational Supervisors         Meeting the GMC standards – HENW requirements	information you would like f Trainers in August 2012 se trainers in their roles as ork for the recognition of ly met by the July 2016 o enable LEP's (Trusts) to	<ul> <li>To become fully recognised by July 2016 and to retain recognition thereafter each 'trainer' will need to have an annual appraisal which includes evidence of Educational CPD. This would be demonstrated by providing one piece of evidence covering domain 7 (CPD) per annum, with 3 separate types of evidence in any 5 year period (see documents below).</li> <li>Anyone not on the HENW trainer database <u>and</u> new Consultants/Trainers will need to attend a taught course that is externally accredited e.g. by Academy of Medical Educators, a Royal College or HEI to prepare them for the supervisor role. See section 'Externally accredited courses'.</li> <li>In addition new trainers will need to provide a minimum of 1 piece of evidence from each of domains 1 – 4 for CS and 1 – 6 for ES to become fully recognised.</li> <li>To retain recognition trainers are required to undergo annual appraisal which includes evidence of educational CPD. This would be demonstrated by one piece of evidence covering domain 7 (CPD) per annum, with 3 separate types of evidence in any 5 year period.</li> </ul>
To be fully recognised as a 'Named' Clinical or Educational Supervisor, trainers evidence from the domains, as indicated below, to demonstrate their engagement	are required to document ent in educational activity	Guidance on Examples of CPD as Evidence for Trainers an Educator.doc
Clinical Supervisor Domain Requirement	Educational Supervisor requirement	SAS Doctors as Named Clinical and Educational Supervisors Please refer to the following document for HENW policy on the recognition of SAS Doctors as Named Clinical Please refer to the following document for HENW policy on the recognition of SAS Doctors as Named Clinical
✓ 1. Ensuring safe and effective patient care	~	and Educational Supervisors. This is in accordance with the GMC Standards for the Recognition of Trainers (paras 60 and 61):
<ul> <li>2. Establishing and maintaining an environment for Learning</li> </ul>	√	
<ul> <li>✓ 3. Teaching and Facilitating Learning</li> </ul>	~	SAS Drs as Trainers 2014.doc
<ul> <li>✓ 4. Enhancing Learning through Assessment</li> </ul>	~	
5. Supporting and monitoring educational progress	×	
6. Guiding personal and professional development	×	
<ul> <li>7. Continuing professional development as an educator</li> </ul>	~	

Please note that although the Academy of Medical Educators (AoME) have recently updated their domains, the GMC has confirmed it will still be approving trainers based on the domains above.

Introduction

**HENW Requirements** 

Clinical Supervisor	AoME Domain	Educational Supervisor
$\checkmark$	1. Ensuring safe and effective patient care	$\checkmark$
$\checkmark$	2. Establishing and maintaining an environment for Learning	$\checkmark$
$\checkmark$	3. Teaching and Facilitating Learning	$\checkmark$
$\checkmark$	4. Enhancing Learning through Assessment	$\checkmark$
	5. Supporting and monitoring educational progress	$\checkmark$
	<ol> <li>Guiding personal and professional development</li> </ol>	$\checkmark$
$\checkmark$	7. Continuing professional development as an educator	$\checkmark$

### **Embedded Documents**



- Guidance on Evidence for Trainers
  - Evidence against each domain
- Examples of CPD as an Educator
  - Which evidence is acceptable as CPD
- SAS Doctors as Trainers

### **Guidance on Evidence for Trainers**



### Potential Examples of Evidence

### What classes as "evidence"?

Both the GMC and the AQUE have described generic evidence that can be presented to demonstrate competence and on-going development as a trainer. HENW has produced further guidance which gives specific ideas for the types of evidence you may collect. This can be seen below. PLEASE NOTE: This list is not exhaustive. It is up to both you and your appraiser to analyse the evidence collected and make a judgment on whether this is sufficient for each domain.

It is also important to stress that this is NOT a tick box exercise. The emphasis is on reflection and learning from current practice rather than documenting course attendance. This is reflected on the list of possible evidence.



## Domain 1 - Ensuring Safe and Effective Patient Care Through Trainingealth Education England

### **Examples of evidence across Domain 1**

*1a. Courses attended or programmes undertaken inc. face to face & online learning.* PGCE in Workplace Based PG Medical Education at Edge Hill University - Module 1 Specific Trust/College/University/Online course referencing patient safety through learning.

### 1b. GMC Trainee Survey Results

and/or HENW visit and/or Trust/Specialty/Foundation annual report. Can be obtained from GMC website, DME or Specialty education lead. Evidence must demonstrate discussion, reflection and action on these results.

### 1c. Feedback from patients about care received.

Patient survey results, relevant documents displaying **feedback** and evidence of how this was used to develop trainees

## 1d. Details of measures put in place to ensure supervision appropriate to trainee's competence and confidence.

Evidence of induction, regular contact and 1:1s with trainees to discuss patient care. This may include meeting schedules and notes from meetings as well as **reflections** on meetings demonstrating issues carried forward and solved.

# CPD as an Educator (Domain 7) 1

- **Courses** attended, or programmes undertaken, including face to face and online learning
- Results of GMC/HENW/Specialty/Foundation Reports and Reflections
- Involvement in educating others e.g. running workshops at relevant conferences or locally e.g. HENW annual conference, Specialty away days, RC conference or courses
- Involvement in peer **mentoring** (with reflection)

HEENW plan – Continuing Recognition MFS Health Education England

- (5691 CS & ES fully recognised by 31 July 2016)
- To retain recognition CS & ES will need
  - Annual appraisal including 1 piece of evidence covering domain 7 (CPD) p.a. (with 3 separate types of evidence in any 5 yr period)

plus

- Evidence in all domains in 1 cycle (GMC 2016)

or

 Member/Fellow of Academy of Medical Educators <u>http://www.medicaleducators.org/</u>

### HEENW Plan – New Supervisors Health Education England

- I.e. anyone not on GMC database at 1 August 2016
- New CS & ES will need to attend a DME approved and externally accredited course
  - AoME, HEI (Edge Hill, Chester University)
    - RCP, RCS, RCPCH, RCoA, and
- Have evidence in each of the 4 (for CS) or 6 (for ES) domains (e.g. Edgehill course can provide) and
- Annual educational CPD confirmed at appraisal



- Edge Hill/HEENW PGCE
  - Module 1  $\rightarrow$  for CS recognition
  - Module 2  $\rightarrow$  for ES recognition

Most new consultants from HEENW

• All trainees are offered module 1

### HEENW plan – Past Supervisors Health Education England

- GMC recognised trainers from other LETBs
- If not fully recognised at 1 August 2016
  - Will need to train as New Supervisors
- Exceptions?
  - Legitimate 'deferrals' e.g. maternity leave, sick leave, sabbaticals, etc
  - Discuss with DME and HEENW (via AD)

## So, use the HEENW Information

### Health Education England

### Database of Trainers

HENW have developed a Trainer Database which is in use in all Trusts in Greater Manchester. Cumbria and ancashire and will be rolled out to Trusts in Cheshire and Merseyside from the end of July onwards. he database is managed by Medical Education Managers in Trusts and contains information required by the GMC on named Clinical and Educational Supervisors. We use this information to report to the GMC on trainer standards, as well as for the new GMC trainer survey which will be sent to all trainers in early 2016.

Information on named supervisors is also checked at each Trust monitoring visit as part of our quality management processes. A randomised list of 10% of named supervisors is sent to the Trust in advance of the visit with a request for evidence supporting their trainer status. More information on this process can be ound here:

QM of Trainer Approval - Nov 14.dc

### **Training Needs Analysis outcomes**

Top 10 priority areas for development

Rank	Area
1	Educational supervision: how to get the best out of your trainee
2	Supporting trainees who are not progressing
3	Leadership development including enhancement of current skills and leadership styles
- 4	Interviewing and ARCP assessment skills
5	Education supervisor report writing and feedback
6	Quality control of education
7	Employment Law
8	Coaching
9	Resilience
10	Assertion skills including negotiation and influencing

### Recent Trainer Events in HENW

### Spring Educators' Conference May 2015

The Spring Educators' conference was held in Lancaster in May 2015 and thank you to all those who attended and contributed to a productive two days. The focus for the first day was on the management of trainees in difficulty, with presentations from Blake Dobson (GMC liaison for HENW), Michael Wright (Hill Dickinson solicitors) and Jo Rowell (Associate Dean, HENW). The second day looked at the results of the Trainer Needs Analysis survey carried out in November 2014 and how the results will inform what we deliver to trainers in the coming months. Slides are available to those who could not attend. Please contact wd.educatordevelopment@nw.hee.nhs.uk if you would like to receive copies.

HENW hosted a national trainer forum in Warrington in June 2015, with representatives from LETBs and the GMC. The event focused on the progress LETBs were making towards the recognition and approval of trainers, required by the GMC by July 2016 and it was reassuring to see that all organisations were at a

similar stage of implementation. Our online trainer database was of particular interest to other LETBs who do

### Trainer Forum June 2015

you would like any more information about the trainer database, please contact us: is complete across o wd.educatordevelopment@mw.hee.nhs.uk	I similar in place and we are confident we will meet the Givi ur entire patch in the near future.	c deadane by ensuring rollout	
raining Needs Analysis outcomes Taining Needs Analysis (TNA) at the end of 2014. We term of the term of term o	Clinical Clinical Supervisor	AoME Domain	Educational Supervisor
<ul> <li>the following were identified by our trainers as the top 10 areas they would like development in. We are solving at a number of ways to help support thes areas including running workshops across the region.</li> <li>Rouk Area</li> <li>Rouk Area</li> <li>Educational supervision: how to get the best out of your traines</li> <li>Supporting trainers who are not progressing</li> <li>Leadership development including enhancement of current skills and leadership styles</li> </ul>	al Co s a 'd 2 day an E numt	1. Ensuring safe and effective patient care	✓
4     Interviewing and ARCP assessment skills     Figure are of become required to be recognized Education supervisor report writing and feedback     Figure are of become required to be recognized Education. More information of the state of the state of the state Employment Law       7     Employment Law     Other externally acc to consest and as long courses and as long       9     Resilience     consest and as long	ised: rmati- redite i othe as trai	2. Establishing and maintaining an environment for Learning	~
10     Assertion skills including negotiation and influencing     Software     Contact us       Figure 1     Figure 2     Pigure 2     Pigure 2	es on	3. Teaching and Facilitating Learning	~
Outdance on Futdance for	✓ Tuo!uouno	4. Enhancing Learning through Assessment	✓
Guidance on Evidence for Trainers Examples of CPD as an Educator SAS Doctors as Trainers		5. Supporting and monitoring educational progress	✓
		6. Guiding personal and professional development	~
	✓	7. Continuing professional development as an educator	$\checkmark$

### Discuss What Evidence You Need? NHS Health Education England

- Write down what you need in your role of CS/ES
- Write down what you already have
- What do you need for your next appraisal?
- What do you need before your next revalidation /in the next 5 years?

### What Evidence? - Feedback Health Education England

- Write down what you need in your role of CS/ES
  - Depends if ES/CS
- Write down what you already have
- What do you need for your next appraisal?
- What do you need before your next revalidation?

### What Evidence? - Feedback Health Education England

- Write down what you need in your role of CS/ES
  - Depends if ES/CS
- Write down what you already have
  - Full recognition from 1 August 2016 or nil
- What do you need for your next appraisal?
  - Year 1: CPD
- What do you need before your next revalidation?
  - Year 2? 3?? 4??? 5????

### **SMARTER Objectives**



- S Specific
- M Measurable
- A Achievable
- R Relevant
- T Time-bound
- and
- ER Educationally Relevant

e.g. 'Attend 1-day HEENW course on 'Drs in Difficulty' during next 6 months and make reflective note

# More Information! Trainer Recognition Forum



- Held Friday, 13 May 2016, Cardiff
- GMC spoke at the Trainer Recognition Forum
- Headline updates about trainer recognition
- Notes made direct from GMC slide set
  - N.B. Note content differed from slide text

### GMC will:



- Publish trainers' names on GMC website
  - Planned for Autumn 2016 (maybe early 2017)
- Record CS & ES status on Dr's LRMP record
  - As with GP Trainers
  - <u>All</u> recognised specialty trainers
- Rely on LETBs to ensure that
  - Training processes meet GMC standards
- Quality assure with QAF
  - Deans' reports or
  - Visits

### After July 2016 - 1



- Individuals MUST be fully recognised before they take up the roles
- Trainers who are only provisionally recognised
  will not have their names published
- Initially GMC will not take action, but will ascertain numbers & decide on next steps
- 'No interim concessions'

### After July 2016 - 2



- GMC expect deaneries/LETBs to use the LRMP updates to flag any reasons for non-recognition
  - e.g. ceasing holding a licence or FtP issue
- GMC will also
  - Monitor FtP issues and if concerns raised will
  - Clarify with the deanery / LETB whether it is appropriate for an individual to remain ES/CS
- (GMC paper on FtP due)

# **Trainer Recognition Process**



- Process will be a rolling one
  - cf. GP trainer process
  - Names uploaded at any time on GMC Connect
- Update on GMC website weekly
- GMC plan on pausing post-July 2016
- Reflection on progress to date
- Re-writing implementation plan into guidance

### **GMC** Question Time



- Departments with no ES?
  - Re-align Trainee educational supervision elsewhere
  - Rectify asap or relinquish department training status
- GMC would not clarify which workplace supervisors are regarded as CS\*
  - 'Up to LETBs'
  - ['It's an old chestnut!']

\*N.B. HEENW require all trainers to be at least CS

### GMC Question Time – CS Issue Health Education England

### But if:

- Could have names published locally; and
- GMC will request recognition review if FtP issues
- GMC says <u>non-medical</u> trainers to meet standards

Ergo:

• Surely all CS should be recognised

N.B. HEENW requires all medical trainers to be CS

### In Summary – To Be a Trainer Health Education England

### Continuing

- 1 piece of CPD evidence (domain 7) per year (3 separate types of evidence in 5 years)
- Evidence covering all domains in 5 year cycle

### New

- Attend an externally accredited course = CPD
- 1 piece evidence domains 1-4 (CS), 1-6 (ES)
- Annual appraisal with 1 piece of CPD evidence (domain 7)



