



# **Medical Education – Handbook for New Consultants & SAS Doctors**

## INFORMATION PACK FOR NEW CONSULTANTS

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The Medical Education Team would like to welcome you to Blackpool Teaching Hospitals NHS Foundation Trust. The team are based in the Education Centre and are here to offer support, advice and help at any time during your time with the Trust. We have an open-door policy for all staff. The team comprises of:



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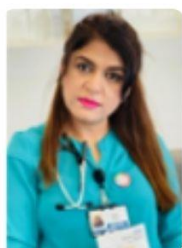
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## ROLE OF THE EDUCATIONAL SUPERVISOR

As we are a teaching hospital with many different learners and an ever-increasing Trainee Doctor cohort, Medical Education encourages all Consultants & SAS Doctors to become a GMC recognised Educational & Clinical Supervisor. Please see information below on this:

### EDUCATIONAL SUPERVISION IN HEALTH EDUCATION NORTH WEST

Each trainee should have a named ES who is responsible for overseeing that trainee's educational progress over a period of time [Gold Guide 4.22]. The GMC defines an ES as:

*“A trainer who is selected and appropriately trained to be responsible for the overall supervision and management of a specified trainee's educational progress during a training placement or series of placements. The Educational Supervisor is responsible for the trainee's Educational Agreement.”*

The ES role is to help the trainee to plan their training and achieve agreed learning outcomes. S/he is responsible for the Educational Agreement and for bringing together all relevant evidence to form a summative judgement at the end of the clinical training placement and/or series of placements.

Some training schemes appoint an ES for each training placement. The roles of Clinical Supervisor (CS) and ES may then be merged. These individuals will require a higher level of educational development for their role than a CS which will usually be significantly more demanding.

An overview of Clinical Supervision can be found at <https://www.nwpgmd.nhs.uk/educator-development/standards-guidance/clinical-supervisor>

In many instances the same person may undertake both CS and ES roles for a given trainee. However, in specialty training (including GP trainees in secondary care attachments) some doctors may act as ES for more than one trainee and receive feedback on trainee performance from multiple CS. Some doctors may act as CS only.

### ROLES AND RESPONSIBILITIES OF AN EDUCATIONAL SUPERVISOR

This is a complex role which spans the areas of educational management, educational supervision and feedback, an understanding of the role of assessment in learning, the use of portfolios as a learning and assessment tool, an understanding of how to identify, support and manage a trainee in difficulty, and of supporting trainee career decision making. It also

requires an understanding of the role of the CS and how to link with that individual in situations where the 2 roles are separated. The standards for trainers are outlined in The Trainee Doctor (Domain 6 pages 30-32) and are met in the outline of roles and responsibilities of an ES given below.

## **EDUCATIONAL MANAGEMENT**

The ES:

- Enables trainees to learn by taking responsibility for patient management within the context of clinical governance and patient safety.
- Ensures that clinical care is valued for its learning opportunities; learning and teaching must be integrated into service provision.
- Is responsible for the educational progress of a trainee over an agreed period of training set against knowledge of a mandated curriculum (foundation, specialty or GP).
- Undertakes supervision of a trainee, giving regular, appropriate feedback according to the stage and level of training, experience and expected competence of the trainee.
- Undertakes or delegates assessment of trainees as appropriate, has been trained in assessment and understands the generic relationship between learning and assessment and particularly that within a specific curriculum.
- Meets with trainees at agreed specified times in accordance with the requirements of foundation or specialty curricula.
- Liaises with Clinical Supervisors to gain an overview of trainee progression.
- Attends Faculty Group Meetings as required and disseminates relevant information to Clinical Supervisors and trainees as appropriate.
- Liaises with the appropriate Trust Specialty Training Lead and Training Programme Director [Foundation or Specialty] over trainee progression.
- Liaises with the Postgraduate centre about requested information on trainee progression.

- Ensures appropriate training opportunities in order for trainees to gain the required competencies.
- Acts as first port of call for trainees who have concerns and/or issues about their training and manages this in accordance with the Trust/LEP & NHSE guidelines.
- Participates in any visiting processes as required.
- Discusses career intentions as appropriate and offers support either individually or via Trust/LEP and NHSE career advice structure.
- Must ensure that all doctors and non-medical staff involved in training and assessment understand the requirements of the curriculum (Foundation, Specialty or GP).
- Must have knowledge of and comply with the GMC regulatory framework.

#### **EDUCATIONAL MEETINGS: INITIAL**

The ES arranges to meet trainees at the beginning of each attachment to:

- Check that the trainee has received a Departmental Induction.
- Ensure that competency check lists have been completed.
- Ensure that the trainee has relevant handbooks, specialty, faculty etc.
- Review the trainee's portfolio, including any feedback from previous placements, ARCP etc. and adapt/monitor learning needs in relation to these and curricular requirements (Foundation, Specialty or GP).
- Discuss trainee learning needs, how these will be developed and which assessment methods will be used to evaluate whether the trainee is meeting required competencies (i.e. complete a learning agreement).
- Discuss the range of evidence which might contribute to the building of a portfolio of training progression.

- Record all meetings, outcomes of meetings as required and communicate these to trainee, Faculty Group, Trust Specialty Training Lead, Training Programme Director as appropriate.

### **EDUCATION MEETINGS: MID POINT**

The ES arranges to meet the trainee at the mid-point of each attachment to:

- Discuss and review progress to date. If necessary amend learning outcomes.
- Discuss taster opportunities if appropriate and ensure that these are relevant and appropriate to career intentions.
- Review learning portfolio and support trainee development of evidence of competency.
- Ensure that the trainee is appropriately engaging in the assessment process, learning from this, and achieving the expected competencies for the stage and level of training.
- Negotiate remedial efforts if required.

### **EDUCATION MEETINGS: END POINT OF ROTATION**

The ES arranges to meet the trainee at the end of each attachment to:

- Review progress to date in relation to the requirements of the curriculum and the learning agreement for the placement.
- Ensure that all appropriate assessments have been completed, review with the trainee which competencies have been met, and amend professional development plan as appropriate, noting what needs to be carried forward to the next rotation and forward plan future trainee learning needs.
- Ensure that all relevant documentation has been completed including that for the ARCP.

## ANNUAL REVIEW OF COMPETENCE PROGRESSION [ARCP], APPRAISAL, AND ANNUAL PLANNING

The ES:

- Appraises each trainee annually as appropriate using the NHS Appraisal Documentation (Gold Guide 7.11 & 7.14).
- Is responsible for bringing together the structured report which looks at evidence of progress in training and submitting this together with other documentation as required to the ARCP process (Gold Guide 7.13 & 7.35). In the Foundation Programme the Educational Supervisor signs off the FACD which is then countersigned by the Training Programme Director.

## KNOWLEDGE AND SKILLS REQUIRED FOR EDUCATIONAL SUPERVISOR ROLES

ES will need to demonstrate that they have the following core knowledge and skills:

### 1. Coaching, mentoring and pastoral care:

- An understanding of the importance of one to one support for individual learners as appropriate.
- An awareness of the range of support mechanisms available for personal and professional development.
- A basic understanding of the principles of coaching and mentoring, including the differences and overlap between them.
- Promote self-awareness and reflection.

### 2. Careers support:

- Willingness to support learners in managing their career exploration and decision making.
- An awareness of medical careers resources available in order to signpost trainees.
- An appreciation of current and future workforce trends in own specialty.

### 3. Learning agreements/educational needs:

Understand the importance of assessing an individual's needs and appropriate goal setting.

- Is familiar with the framework of a learning agreement.

- Appreciate the need to balance support and challenge for each learner as appropriate.
- Understand the importance of maintaining accurate written records of educational meetings with trainees.

#### **4. Assessment and appraisal:**

- An understanding of the difference between assessment and appraisal and the connection between them.
- An understanding of the importance of both to learning and to learner progression.
- Appreciation of the importance of timely and specific feedback and objective setting.

#### **5. Principles of ARCPs**

- An understanding of the function of the ARCP panel.
- An understanding of the importance of the Educational Supervisors report as key evidence to the panel.
- An understanding of what makes a good quality Educational Supervisors report.
- An appreciation of the importance of the cycle of supervision before and after the ARCP panel.

#### **6. Managing trainee's with difficulties**

- An awareness of the range of symptoms of a trainee in difficulty.
- An understanding of the importance of early diagnosis and intervention.
- Is approachable and open to trainees.
- Has an awareness of when and how to use reporting routes for onward referral.

#### **7. Basics of Quality control – NHSE and GMC standards**

- Understand the importance of measuring the quality of education.
- Understands own role in relation to GMC standards and local educational governance.
- Pays attention to monitoring and improving own educational performance.

#### **Plus the Knowledge and Skills of a CS:**

- Equality, diversity and cultural awareness.
- Core CS Knowledge and Skills, which includes:
- Workplace based ('on the job') teaching, including clinical skills teaching.

- Workplace Based Assessments/Foundation Competency Assessments (including calibration for those involved in supervising secondary care placements for GP trainees).
- Giving feedback to trainees of all abilities.
- Adult learning principles – a brief overview of the following to help understand how trainees learn best.
- Relevant specialty portfolios/e-portfolios/Horus for Foundation.
- Communication/team working.
- Ethics.
- Understanding GMC requirements of CS.
- Recruitment and selection.

All those taking part in recruitment will need to have completed the requisite training.


All CS will be expected to undergo annual appraisal which must include an element of educational appraisal (For more information see: <https://www.nwpgmd.nhs.uk/educator-development/standards-guidance/appraisal>).

The knowledge and skills of a CS are outlined in full in 'Clinical Supervision in Health Education North West' document or found at: <https://www.nwpgmd.nhs.uk/educator-development/standards-guidance/clinical-supervisor>.

## ACHIEVING THE KNOWLEDGE AND SKILLS OF AN EDUCATIONAL SUPERVISOR

Trusts are responsible for providing training to ensure these requirements are met. NHSE has a contract with Edge Hill University to provide a bespoke PG Cert and the first two modules provide training to the standard of ES (followed by Educational Lead in module 3). More information about this course can be found at <https://www.nwpgmd.nhs.uk/pg-cert>. It is recognised that other bodies, such as Royal Colleges, Universities, and other education providers also provide training which individuals may be able to use to demonstrate that they have met the required standards. More information on other training available can be found at <https://www.nwpgmd.nhs.uk/conferences-courses>.

Demonstrating equivalence by portfolio (formerly known as the 'Grandfather clause'): It is recognised that some clinicians will have many years' experience as a trainer and some may have previously undertaken training which may go some way towards meeting these requirements. These individuals will have had the opportunity to submit a portfolio of evidence to their Trust DME (or designated deputy) to ascertain if they meet the new standards at the time they were introduced (January 2010).



All ES will be expected to demonstrate that they continue to meet the standards outlined through annual appraisal. This will form part of the five yearly revalidation process. More information on appraisal can be found at <https://www.nwpgmd.nhs.uk/educator-development/standards-guidance/appraisal>.

Under the GMC's quality assurance proposals it is the LEP's responsibility to ensure that all ES are adequately prepared for their role and this forms part of the annual Quality Control report to NHSE. Corroboratory evidence is sought at the biannual NHSE Quality Monitoring visits.



## ROLE OF THE CLINICAL SUPERVISOR

### CLINICAL SUPERVISION IN NHSE NORTH WEST

#### OVERVIEW

The purpose of this document is to outline the roles, responsibilities, knowledge and skills required of a Clinical Supervisor (CS) working in Postgraduate Medical Education in NHSE North West

This guidance will also support Trusts and other Local Education Providers (LEPs) in quality control as they educationally support, manage, audit and resource the educational role of a CS.

This guidance is mapped to the Gold Guide to Specialty Training [May, 2014]; The GMC Trainee Doctor [February 2011] and the Foundation Programme.

#### DEFINITION OF A CLINICAL SUPERVISOR

The GMC define a CS as:

“A trainer who is selected and appropriately trained to be responsible for overseeing a specified trainee’s clinical work and providing constructive feedback during a training placement.”

It goes on to say:

“Some training schemes appoint an Educational Supervisor for each placement. The roles of Clinical and Educational Supervisor may then be merged.”

An overview of Educational Supervision (ES) definition, roles, responsibilities, knowledge and skills can be found at <https://www.nwpgmd.nhs.uk/educator-development/standards-guidance/educational-supervisor>.

In many instances the same person may undertake both CS and ES roles for a given trainee. However, in specialty training (including GP trainees in secondary care attachments) some doctors act as CS only.

## ROLES AND RESPONSIBILITIES OF A CLINICAL SUPERVISOR

The standards for trainers as outlined in The Trainee Doctor are met in the outline of roles and responsibilities of a CS given below:

- Enables trainees to learn by taking responsibility for patient management within the context of clinical governance and patient safety.
- Ensures that clinical care is valued for its learning opportunities; learning and teaching must be integrated into service provision.
- Undertakes clinical supervision of a trainee, giving regular, appropriate feedback according to the stage and level of training, experience and expected competence of the trainee.
- Undertakes assessment of trainees (or delegates as appropriate), using the dedicated workplace based assessment tools has been trained in the use of these and understands the generic relationship between learning and assessment.
- Liaises with the appropriate Educational Supervisor over trainee progression.
- Must ensure that all doctors and non-medical staff involved in training and assessment understand the requirements of the curriculum, including the workplace based assessment tools (foundation, specialty or GP) as it relates to a particular trainee.

## **KNOWLEDGE AND SKILLS REQUIRED OF A CLINICAL SUPERVISOR**

A CS will need to demonstrate that they have knowledge and skills in the following:

### **1. Equality, diversity and cultural awareness.**

### **2. Core CS Knowledge and Skills, which includes:**

- Workplace based ('on the job') teaching, including clinical skills teaching.
- To understand how adults learn best and the relevance of this to teaching.
- To understand how best to teach a clinical skill.
- To have some knowledge of a variety of teaching techniques/methods/tips and to practice them as appropriate.
- To understand the importance of evaluating teaching.

### **3. Workplace Based Assessments/Foundation Competency Assessments (including calibration for those involved in supervising secondary care placements for GP trainees):**

- To understand the role, types and formative nature of workplace based assessments (WBA's) appropriate to the relevant specialty.
- Have an understanding of what is acceptable progress.
- To understand the importance of appropriate feedback as part of WBAs.
- Have an understanding of the relationship between WBAs and the Educational Supervisors ARCP report.
- To identify the initial steps in managing trainees with problems.

### **4. Giving feedback to trainees of all abilities:**

- An understanding of some common frameworks for giving feedback.
- Encourage reflection and self-assessment in learners.
- Ability to identify and communicate what was done well and what could be done differently.
- Importance of giving positive and specific criticism.
- Importance of encouraging learners to agree a plan of action.

### **5. Adult learning principles – a brief overview of the following to help understand how trainees learn best:**

- Learning cycle.

- Understanding of the variety of learning styles and motivation.
- Role modelling.
- Importance and understanding of reflective practice.
- Evaluation of teaching.
- Educational environment.

#### **6. Relevant specialty portfolios/e-portfolios/Horus for Foundation:**

- An understanding of the use of an educational portfolio to support effective learning and development.
- A working knowledge of portfolio(s) as relevant to own specialty.
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#### **7. Communication/team working:**

- Understand the importance of timely and regular communication with trainees.
- Have a working knowledge of reporting structures within own specialty department and local Trusts as appropriate.
- Is aware of the importance of role modelling and is a positive role model.

#### **8. Ethics:**

- Respect for the learner and the process of learning.
- Understanding of the principles of confidentiality in the educational environment.
- Foster a safe environment in which learners can challenge and discuss issues.

#### **9. Understanding GMC requirements of CS:**

- Have read the GMC Standards for Trainers.
- Have read the definitions of CS and ES.
- Understand their own educational role in relation to the standards.
- Understand their own role in relation to local education structures and processes.
- Recruitment and selection. All those taking part in recruitment will need to have completed the requisite training.
- All CS will be expected to undergo annual appraisal which must include an element of educational appraisal (see <https://www.nwpgmd.nhs.uk/educator-development/standards-guidance/appraisal> for more information).

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## ACHIEVING THE KNOWLEDGE AND SKILLS OF A CLINICAL SUPERVISOR

Trusts are responsible for providing training to ensure these requirements are met. NHSE has a contract with Edge Hill University to provide a bespoke PG Cert1 and the first module provides training to the standard of CS (followed by ES in module 2 and Educational Lead in module 3). More information about this course can be found at <https://www.nwpgmd.nhs.uk/pg-cert>.

It is recognised that other bodies, such as Royal Colleges, Universities, and other education providers also provide training which individuals may be able to use to demonstrate that they have met the required standards. More information on other training available can be found at <https://www.nwpgmd.nhs.uk/educator-development/conferences-courses>.

Demonstrating equivalence by portfolio (formerly known as the 'Grandfather clause'): It is recognised that some Clinicians will have many years' experience as a trainer and some may have previously undertaken training which may go some way towards meeting these requirements. These individuals will have had the opportunity to submit a portfolio of evidence to their Trust DME (or designated deputy) to ascertain if they meet the new GMC standards for named trainers at the time they were introduced in August 2012.

All CS will be expected to demonstrate that they continue to meet the standards outlined through annual appraisal. This will form part of the five yearly revalidation process. More information on appraisal can be found at <https://www.nwpgmd.nhs.uk/educator-development/standards-guidance/appraisal>.

Under the GMC's quality assurance proposals it is the LEP's responsibility to ensure that all CS are adequately prepared for their role and this forms part of the annual Quality Control report to NHSE . Corroboratory evidence is sought at the biannual NHSE Quality Monitoring visits.

More information on GMC Standards on recognition of named supervisors can be found on the website at <https://www.nwpgmd.nhs.uk/educator-development/standards-guidance>.

## UNDERGRADUATE TEACHING OPPORTUNITIES

### **Undergraduate Exams**

Each year Blackpool Teaching Hospitals hosts exams for both Liverpool and Lancaster Universities from year 2 – year 4.

All clinicians are invited to be an examiner and they would be required for a full or half day to examine, these exams are based up in Simulation and Skills Unit.

If you would like further information regarding being an examiner, please contact [bfw.undergraduate.education@nhs.net](mailto:bfw.undergraduate.education@nhs.net)

### **SENIOR CLINICIAN TEACHING**

There is an opportunity for Senior Clinician Teaching which would be held out of hours, if you have an interesting topic you would like to present to our 5<sup>th</sup> year medical students please get in touch. [Bfw.undergraduate.education@nhs.net](mailto:bfw.undergraduate.education@nhs.net)

### **CASE BASED LEARNING**

The CASE BASED LEARNING (CBL) sessions are 2-hour learning tutorials, one each week, for students on placements within Medicine, Surgery, O&G, and Paediatrics. The tutorials should be delivered by senior Clinicians within the specialty. The tutor is provided with pre-prepared teaching material from the University to help deliver the set topics. The information includes a PowerPoint presentation and tutor guide. The students are given a student guide and a feedback form to complete at the end of the session so the tutor can receive feedback. If you would like more information about the CBL tutorials, please contact the Undergraduate Team on [bfw.undergraduate.education@nhs.net](mailto:bfw.undergraduate.education@nhs.net)

## FOUNDATION YEAR TEACHING OPPORTUNITIES

### CLINICAL / EDUCATIONAL SUPERVISOR

We have 36 FY1 and 39 FY2 Doctors on the Foundation Training Programme.

All of these Foundation Doctors must have named Clinical and Educational Supervisors.

They are allocated a Clinical Supervisor for every rotation they undertake, and generally the first Clinical Supervisor they have will stay as their Educational Supervisor for the full 2 year programme.

### TEACHING PROGRAMME

The FY1 teaching programme is held on every other Tuesday and is now mainly taught through simulated scenarios and is organised by the clinical skills team. If you are interested in helping facilitate or teach on one of these days, please contact [bfwh.foundation.education@nhs.net](mailto:bfwh.foundation.education@nhs.net)

The FY2 programme teaching programme is held every other Thursday and is now mainly taught through simulated scenarios and is organised by the clinical skills team. If you are interested in helping facilitate or teach on one of these days, please contact [bfwh.foundation.education@nhs.net](mailto:bfwh.foundation.education@nhs.net)

### ARCP

In June each year, the Foundation Doctors must have an ARCP (Annual Review of Competence Progression).

Panel members are needed to sit on the ARCP's and the Foundation team will start asking for Consultants/SAS who wish to be involved to contact them about 6 – 10 weeks in advance.

### **Shadowing & Induction**

As part of the shadowing programme for the new cohort of Foundation Doctors, they are expected to attend a shadowing & Induction programme run by Medical Education. This will be held in the last 2 weeks of July.



## GUIDE TO USING HORUS

HORUS is the e-portfolio used by Foundation Trainees in the North West. It can be accessed through the following link: <https://horus.nwpgmd.nhs.uk>.

You use your GMC number as your username. The first time you log on, click the 'unable to sign in' link, and input the email address that you are set up on HORUS with. HORUS will then send you a password to enable log-on. (Keep checking your junk folder). This password must be used within 15 minutes.

If you have trouble logging on, please contact [bfbw.foundation.education@nhs.net](mailto:bfbw.foundation.education@nhs.net) or Ext. 53193.

This site can be accessed outside the Trust.

As a Clinical / Educational Supervisor for Foundation Trainees there are a certain number of forms that you are expected to complete.

If you have been allocated as a Clinical Supervisor for their first placement for an FY1 Doctor, then you will also be the Educational Supervisor for the full two years.

## ACCESSING THE TRAINERS PAGE ON ONEHR

You can access the Trainer's section on our OneHR site which has lots of useful information for Consultants & SAS Doctors who are recognised trainers:

[Trainers | oneHR \(bfwh.nhs.uk\)](http://oneHR.bfwh.nhs.uk)

**NHS**  
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NHS Foundation Trust  
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CLINICAL EDUCATION  
EQUALITY, DIVERSITY AND INCLUSION  
ELECTRONIC STAFF RECORD (ESR)  
FREEDOM TO SPEAK UP  
WELL TEAM  
HUMAN RESOURCES (HR)  
JOB PLANNING NON-MEDICAL  
MEDICAL WORKFORCE  
MOVING AND HANDLING  
NON-MEDICAL E-ROSTERING & TEMPORARY STAFFING  
OCCUPATIONAL HEALTH  
ORGANISATIONAL DEVELOPMENT  
PAYROLL  
PENSIONS  
RECRUITMENT  
NON-MEDICAL REVALIDATION  
STAFF BENEFITS & EXPENSES  
TRADE UNIONS  
WORKFORCE EDUCATION  
CONTACTS

You are here: [oneHR](#) > [Medical Workforce](#) > [Clinical Education](#) > [Medical Education](#) > Trainers

### Trainers

#### Welcome to Medical Education

The Medical Education department provides the infrastructure and staff to facilitate the education, training and continuing development of postgraduate professionals in Hospital Medicine, General Practice and Dentistry across Blackpool, Fylde and Wyre.

This site provides information for all trainers and trainees with links to external sites.

The Medical Education Team are based in the Education Centre and have an open door policy for all trainees and trainers.

<a href="#">Recognition as a Trainer</a>	<a href="#">Educator Development Courses &amp; Meetings</a>
<a href="#">Foundation Information</a>	<a href="#">ST Information</a>
<a href="#">GPST Information</a>	<a href="#">Educational Governance</a>
<a href="#">Trainee Who is Who</a>	<a href="#">Trainee &amp; Student Support</a>
<a href="#">Trust Speciality Training Leads</a>	<a href="#">Support for Trainers &amp; Trainees</a>
<a href="#">Quality Control &amp; Sharing Best Practice</a>	<a href="#">Educator Bulletins</a>

#### Useful Documents for this section:

- [New Consultant & SAS Handbook](#)
- [New Supervisor Factsheet](#)
- [Useful Contacts](#)

#### Useful Resources for this section:

- [Academy Guidance on e-Portfolios](#)
- [Reflective Practitioner Guidance](#)
- [Enhancing Supervision for Postgraduate Doctors in Training](#)
- [Handbook - Enhancing Supervision for Postgraduate Doctors in Training](#)
- [Standards in Supervision](#)

## DEPARTMENTAL INDUCTION

The standards for Medical Education and Training, published by the GMC in January 2016, state that organisations must ensure learners undergo a Departmental Induction in preparation for each of their placements. The Departmental Induction must clearly set out for the trainee:

- Their duties and supervision arrangements
- Their role in the team
- How to gain support from senior colleagues
- The clinical or medical guidelines and workplace policies they must follow
- How to access clinical and learning resources

It is the responsibility of the Training Lead to ensure the delivery of the Departmental Induction, and it is the responsibility of the departmental Rota Coordinator to ensure that all relevant paperwork is completed and returned to the Postgraduate Manager in a timely manner.

For quality control purposes, the Medical Education Department has designed a Departmental Induction 'checklist' and a suggested table of contents for an induction handbook to help your department meet these standards with a view to ensuring consistency and best practice across all divisions.

### CHECKLIST

The checklist will be issued to the trainee, the Rota Coordinator, and the Training Lead. It is the responsibility of the trainee to ensure that the checklist is completed and signed, and to highlight to both the Training Lead and the Medical Education Department any areas of the induction that were omitted, or that they were unable to attend.

For a copy of the Checklist please see the following OneHR Page : [Departmental Induction Checklist | oneHR \(bfnh.nhs.uk\)](#)

### GENERAL GUIDANCE

- Induction is to take place on first or second day of placement ideally and no later than 2 weeks from the doctor starting
- Orientation to the Ward and staff introductions can be undertaken by any member of staff

- Please ensure trainees are not rostered on nights or on call for the day of induction; or hold induction first thing in the morning to enable trainees on these shifts to attend, and they can then claim the time back.

## TRAINEE AND STUDENT SUPPORT COMMITTEE

### What is the purpose of the TSSC?

The Medical Education Department at Blackpool Teaching Hospitals NHS Foundation Trust is committed to providing the best possible education and training programmes to its student and trainee doctors. However, there will be times during training when difficulties arise, and at such times students and trainees may require additional support or remediation.

The Trainee and Student Support Committee (TSSC) is the principal means by which cases involving students or trainees in difficulty are managed, the express function of which is provide a support structure and to facilitate remedial actions: it is not a mechanism for disciplinary proceedings.

The TSSC meets bi-monthly and is chaired by the Director of Clinical & Medical Education or Associate Director of Medical Education. Its principal remit is to:

- Select a case to discuss; identify and agree upon the difficulties involved in the case
- Appoint a member of the group as a named support/link person for each individual student or trainee and/or supervisor
- Assess the current situation from the perspective of the student or trainee, the Trust, NHSE, and the University
- Formulate an action plan
- Maintain frequent follow-up and monitoring of each case if the student or trainee remains in work or on clinical placement
- Ensure appropriate and timely documentation and record keeping

### Information Governance

Any confidential or sensitive information pertaining to an individual is stored in an electronic file, access to which is restricted to those directly involved in the management of the case. Notes from the committee or any informal meetings will be taken by one person only and are strictly factual. Any detailed information is recorded separately and included in the trainee/student's case file. The anonymity of the student or trainee is ensured by assigning a unique identifier to the individual. The minutes also contain a declaration of confidentiality which state which elements of the discussion are to remain confidential. This is to ensure that those aspects of the minutes which are not to be publicly disclosed are identifiable as such in the event that they are requested under the Freedom of information Act.

In the interests of openness and transparency, the student or trainee in difficulty will be updated at all stages of the case and has the right to access any information pertaining to them including minutes, reports, and any subsequent action plans. This information will also be available to any of the stakeholders involved in the case; but the information is strictly confidential and is subject to the Trust's information governance policies.

## SUPERVISOR MEETINGS

Supervisors Lunchtime Update Meetings are run by Medical Education, usually 4 times a year. Since 2020 these have been taking place via Microsoft Teams which seems to be the preferred format with the supervisors and how we will continue going forward.

These provide an opportunity for all Clinical and Educational Supervisors to discuss issues or updates on topics such as Foundation Programme Updates, GOSW & Exception Reporting Updates, Revalidation & Appraisal, Recognition of Trainers and the Trainee Student Support Committee. We also hold workshops or teaching sessions as part of the meeting to inform you of anything you may find useful.

We also hold regular Educational CPD events as part of our Educator Development Programme. These are communicated to you via email.

## RECOGNITION OF TRAINERS

Recognition of Trainers is a process we must follow to ensure that named Clinical and Educational Supervisors have suitable evidence for their role. New evidence must be provided every year during your appraisal to ensure you remain fully recognised.

**To become recognised after 1<sup>st</sup> August 2016, i.e. anyone not on the HEE (NW) trainer database *and* any new Consultants / Trainers** will need to:

- Attend a taught course that is DME approved and externally accredited e.g. by Academy of Medical Educators, Royal College or HEI to prepare them for the supervisor role.
- Present evidence that this maps against the 5 / 7 domains, by providing a minimum of 1 piece of evidence from each of domains 1–4 for CS and 1–6 for ES.

**Alternatively**, trainers may be able to submit 1 piece of evidence from each of domains 1–4 and 7 for CS and 1–7 for ES, acquired gradually from a variety of sources.

**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.
- **Over the 5 year recognition period** trainers must submit 1 piece of evidence from each of domains 1-4 for CS and 1-6 for ES.

Please indicate on the appraisal system if you are a CS and ES and send your evidence to [postgraduate.education@bfwhospitals.nhs.uk](mailto:postgraduate.education@bfwhospitals.nhs.uk)

### EXAMPLES OF CONTINUING PROFESSIONAL DEVELOPMENT AS AN EDUCATOR

In order for Trainers to achieve full recognition and maintain their status thereafter, they must produce **one piece of evidence of domain 7 (CPD as an educator) at each annual appraisal.**

Over a five year period NHSE will require a minimum of 3 different types of evidence in this domain.

### EXAMPLES OF CPD AS AN EDUCATOR MIGHT INCLUDE:

- Courses attended, or programmes undertaken, including face to face and online learning.
- Results of GMC/NHSE/Specialty/Foundation Reports and Reflections
- Involvement in educating others e.g. running workshops at relevant conferences or locally e.g. NHSE annual conference, Specialty away days. RC conference or courses.
- Involvement in peer mentoring with evidence of reflection on this.
- Evidence of participation in online discussion forums with peers. E.g. anonymised screen shots.
- Results of 360 degree appraisal.
- Trainer MSF on Horus with reflection and development plan.
- Results of peer review or professional observation of teaching. For example: Peer observations and feedback/discussion with reflection and personal development actions identified.
- Review of feedback on educational supervisor reports, reflection and personal development plan.
- Review of formal trainee feedback on teaching and reflection on this with personal development goals.
- Written reflection on any CS/ES experience of choice with development goals.
- New qualifications or certificates obtained.
- Critical comments on relevant books or articles read recently.

For more information, please contact the Postgraduate Education Manager at [Emily.croucher@nhs.net](mailto:Emily.croucher@nhs.net)



## APPRAISAL AND REVALIDATION

### BACKGROUND

Medical Revalidation was launched in 2012 to strengthen the way in which doctors are regulated. The aim is to improve the quality of care delivered to patients, improve patient safety, and increase trust and confidence in the medical system by ensuring that doctors remain up to date and fit to practice.

As a provider organisation Blackpool Teaching Hospitals NHS Foundation Trust (the Trust) has a statutory duty to support the Trust's Responsible Officer (RO) in discharging his duties under the Medical Profession (Responsible Officer) Regulations and the General Medical Council (License to Practice and Revalidation) Regulations Order of council 2012.

The Trust has approximately 300 doctors with a prescribed connection to the organisation. The revalidation of doctors is a key component of a range of measures to improve the quality of patient care and is the process by which the General Medical Council (GMC) confirms the continuation of a doctor's license to practice.

The trusts current RO (Responsible Officer) is the Medical Director, Dr Chris Barben.

For further information on Medical Revalidation & Appraisal please contact the team at [bfwh.revalidation.team@nhs.net](mailto:bfwh.revalidation.team@nhs.net)

### ACTIONS TO TAKE

Please make contact with the Revalidation Team as soon as practicable; it is great for us to meet you and to be able to advise you as soon as possible. Actions for you to take when commencing in post are:

- ✓ Link to Blackpool Teaching Hospitals via GMC connect (become a prescribed link)
- ✓ Provide copies of any past appraisals within this Revalidation Cycle to the Revalidation Team
- ✓ Engage with the Trust's appraisal software system

## **ANNUAL APPRAISAL**

All doctors are required to undergo an annual appraisal which is based on the GMCs Good Medical Practice. The L2P system will allow colleagues to save evidential documents (including scanning onto the system). There are 16 sections in total to complete prior to an appraisal meeting. Following the meeting itself the appraiser will complete the post appraisal documentation to enable the appraisal to be signed off.

Once completed (and signed off), the appraisal document will be sent automatically to the Revalidation Team.

## **MULTI-SOURCE FEEDBACK (MSF)**

Doctors are required to complete an MSF at least once during each 5 year Revalidation cycle. This can be completed via E-360 within Allocate.

## **COLLEAGUE FEEDBACK**

An initial self-assessment form requires completion prior to an MSF exercise being set up. Each doctor is required to invite colleagues both medical and non-medical to complete a feedback questionnaire on their behalf.

## **PATIENT FEEDBACK**

Patient feedback is supported and facilitated by the Revalidation Team. Colleagues are required to let the team know when a MSF is being completed and when and where patient feedback can be undertaken, for example, the date, time and location of a clinical/ward round.

## **REVALIDATION SUBMISSIONS**

Each doctor will be revalidated by the GMC on a 5 yearly basis subject to a satisfactory recommendation by the RO.

The Revalidation Team will collect annual data around Clinical Activity and Clinical Governance. This information will be populated into the Allocate appraisal system in preparation for discussion at each appraisal meeting.

It is the doctor's responsibility to complete:

- ✓ annual appraisals
- ✓ an MSF exercise

The Revalidation team will collate all evidence on behalf of the RO prior to recommendation. This includes clinical governance, any local issues and any HR issues at that time.

Revalidation recommendations are made as close to the revalidation submission date as possible to ensure the date of your revalidation does not change each cycle.

The Revalidation Clinical Lead will notify you by email once your recommendation has been made with the outcome of the recommendation.

The Revalidation Team are here to support and facilitate the Revalidation process on behalf of the Trust and we will do our best to help.

Any individuals with an interest in helping deliver training – especially to our medical students - are encouraged to contact the team and we can discuss opportunities when you may be able to help.

## LIBRARY

[www.bfwh.nhs.uk/our-services/hospital-services/library/](http://www.bfwh.nhs.uk/our-services/hospital-services/library/)

The library can be found within the Education Centre and is **accessible 24 hours a day** (bring your ID Badge to the library desk to have it activated) The library is staffed between 8.30am and 4.00pm daily



**The library has a wide range of resources**

**Borrowing books** – you may borrow up to 10 books for a period of four weeks (fines are payable on books not returned on time). You can renew your books online via the library catalogue, by telephone or app, or in person.

### Services

- Study space and PCs (including three quiet study rooms)
- Print and digital books, journals, and databases
- Inter-Library loans
- Literature searching service
- OpenAthens registrations to enable online access to a range of resources and apps
- Information skills training
- Printing, photocopying, scanning, binding, and laminating facilities



**Quiet study pods offer individual and group study space**

**ClinicalKey** - a collection of more than 600 journals (including The Lancet) 1,200 books (including Davidson's Principles and Practice of Medicine and Macleod's Clinical Examination) and many thousands of procedural and education resources such as videos, images, topic summaries and drug monographs and is an extremely useful resource for education and evidence-based practice.

**DynaMed** – *clinical answers at the point of care. DynaMed is a database of answers to the questions you are most likely to ask in clinical practice. The information is submitted by experts and is updated regularly to provide an evidence-based point of care decision tool.*

**MAH Complete** – Nursing, Midwifery and healthcare Journals to support professional practice, revalidation and CPD

Some of the online resources you may find particularly useful during your time here at our website [Library and Knowledge Services | Blackpool Teaching Hospitals NHS Foundation Trust \(bfwh.nhs.uk\)](http://www.bfwh.nhs.uk/our-services/library/)  
<https://www.bfwh.nhs.uk/our-services/library/>

**ALL OUR RESOURCES ARE ALSO AVAILABLE FROM YOUR PHONE, TABLET OR HOME COMPUTE**

Access resources direct from the intranet

## Library and Knowledge Services

### RESOURCES FOR



Nursing and  
Midwifery



Medical  
and  
Dental



Allied Health  
Professionals



Administrative  
Services

### SERVICES



Current  
Awareness

Let us help you  
keep your knowledge  
up to date!



NHS Library &  
Knowledge Hub



Library  
& Information  
Skills Training



OpenAthens  
and  
Databases



Library Guides  
and Forms



Library News  
and Promotions

## Health and Wellbeing area



We also have a collection of lifestyle and wellbeing books, fiction, and games - so it's not all work!



Contact us: [bfwh.library.services@nhs.net](mailto:bfwh.library.services@nhs.net)

[@BTH Library](#)

Tel: 01253 953831 ext 53831



## SIMULATION AND SKILLS CENTRE

At Blackpool we have a purpose-built Human Patient Simulation and Clinical Skill training unit. We offer a wide range of training opportunities, through simulated based medical education (SBME), utilising full body manikins as well as part task trainers. Throughout the training our focus is on patient safety and error recognition and management, as well as developing the individual practitioner and or team.



The FY1 doctors have a designated training program which encompasses the use of the unit as a whole - including the audio-visual technologies to enhance training debrief and encourage discussion. Subjects such End-of-Life Care Day, Prescribing practice, and Human Factors and Patient Safety are all included in the program. Other themed training days will utilise SBME to enhance individual and team learning activities. Mapped against set curriculum, we will endeavour to give clinicians experience of likely scenarios FY level grade doctor may encounter.

IMT, IMG Doctors, and PA's have training programmes delivered that require senior medical input to be successful.

The undergraduate teaching programme runs throughout the academic year and again relies on support from medics.

The main aim of the training is to increase confidence and competence and thus improve patient safety. Sessions are facilitated by experienced clinicians including consultant grade staff and specialists in human factors training.

The centre also delivers a rolling programme of training (this can be accessed via the Trust web site) to help you with any skills that you feel you need to improve or develop. Training delivered includes, arterial blood gases sampling, massive haemorrhage management and even ultrasound guided chest drain insertion.

The unit is available for all grades of staff to utilise, and we are keen to develop training to fit any specialist area. Please contact the unit to discuss any ideas / training needs you may have, and we will do our best to help.

Any individuals with an interest in helping deliver training – especially to our medical students - are encouraged to contact the team and we can discuss opportunities when you may be able to help.

NAME	TITLE	TELEPHONE	E-MAIL
Clare Lloyd-Walden	Manager - Simulation and Clinical Skills Team	01253 9(55669)	<a href="mailto:clare.lloyd-walden@nhs.net">clare.lloyd-walden@nhs.net</a>
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Melissa Mitchell	Clinical Skills Facilitator Rolling programme and St Nurses	01253 9(52326)	<a href="mailto:Melissa.mitchell@nhs.net">Melissa.mitchell@nhs.net</a>

Mark Hatch	Clinical Skills Facilitator (Simulation Lead)	01253 6(56891)	<a href="mailto:Mark.Hatch@nhs.net">Mark.Hatch@nhs.net</a>
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