

**GUIDE FOR EDUCATIONAL AND CLINICAL SUPERVISORS
OF
CORE MEDICAL TRAINEES
(SOUTH YORKSHIRE)**

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Introduction

The NES e-portfolio helps trainees plan and develop learning throughout CMT to attain the competences defined in the curriculum.

The e-portfolio has other important functions:

- A record of training experience
- Reflection on learning
- A collection of evidence of competence
- A record of career discussions
- A personal library

Roles and Responsibilities of Educational Supervisors

The Educational Supervisor is responsible for overseeing the clinical and educational progress of a named trainee over a period of 1 year, across posts. The trainee will have one Educational Supervisor for the year at STH, and another Educational Supervisor for the year in the DGH.

Educational Supervisors should:

- be trained to offer educational supervision and undertake appraisal and feedback
- be trained to perform work place based assessments (WPBA)
- oversee (and perform) work place based assessments (WPBA)
- be trained in equality and diversity
- assist the trainee to develop a personal development plan (PDP), and sign an educational agreement with the trainee. The learning needs of the trainee should be conveyed to the trainers.
- have regular appraisals with the trainee (in consultation with Clinical Supervisor), which should take place at the beginning, in the middle (optional but advisable) and at the end of a placement to:
 - agree/review educational agreement
 - agree/review learning objectives
 - discuss/review assessments, including MRCP (UK) examinations
 - provide feedback
- ensure that the trainee maintains an up-to-date e-portfolio, including assessment of CMT competences
- monitor attendance at formal educational sessions; CT1 trainees are expected to attend 8 days of regional teaching in addition to either 1 full day of Procedural Skills and 1 ASCME day, CT2's must attend 8 days of regional teaching and be clinically independent in Procedural Skills by the end of CT2.
- mentor and ensure that trainees are making both clinical and educational progress, with regular feedback to the trainee on their progress
- provide the trainee with specialty information and general career guidance
- be responsible for their educational role to the training programme director and locally to the RCP Tutor and the employer's lead for postgraduate medical education
- provide an Educational Supervisor's Report at the end of the year
- know the structure of the training programme and be able to discuss the curriculum, the e-portfolio and WPBA with the trainee
- work in close collaboration with the Clinical Supervisor
- identify trainees in difficulty (see **page 9 for details of Deanery Policy**)

If a trainee is not reaching the required standard the Educational Supervisor should discuss this with the trainee and keep a written record. The local Royal College of Physicians Tutor should also be informed. The trainee will address the deficiencies and other actions agreed. The TPD should be informed of any significant problems.

Roles and Responsibilities of Clinical Supervisors/Trainers

The Clinical Supervisor for each placement is the consultant to whom the trainee is attached, who is responsible for the day-to-day clinical supervision of the trainee.

Clinical Supervisors should:

- ensure that there is induction to the Clinical Department/Specialty e.g. duties of the post, handover, etc
- teach and train the trainee in the workplace, provide feedback and undertake WPBA
- offer a level of supervision appropriate to the trainee's level of training
- ensure adequate clinical supervision of the trainee; including direct supervision, indirect supervision, regular reviews and feedback
- ensure that trainees only perform tasks without direct supervision when the supervisor is satisfied that they are competent so to do; trainee and supervisor should be aware of their direct responsibilities for the safety of patients in their care
- ***ensure that no trainee is expected to work beyond their level of competence and experience.***
- facilitate the trainee's professional and personal development
- be trained in equality and diversity
- be able to discuss the curriculum, the e-portfolio and WPBA with the trainee
- work in close collaboration with the nominated Educational Supervisor

Training for the role of Supervisor

All Educational and Clinical Supervisors should have been trained to arm them with the necessary knowledge and skills. Courses run at the Deanery and are also being rolled out in blended e-learning/ face-to-face sessions.

https://www.yorksandhumberdeanery.nhs.uk/faculty/educational_supervisor_training

The above skills should be refreshed every 3 years.

Appraisals – should occur at the start and end of every post. The mid-post review is **not** mandatory but advisable particularly if there are concerns or the posts are 6 month placements. It is the trainee's responsibility to arrange appraisal meetings and to maintain an up-to-date e-portfolio. Appraisal meetings must be recorded on the appropriate forms in the trainee's e-portfolio.

Induction meeting with Educational Supervisor

The Educational Supervisor will:

- confirm that the trainee has received generic and departmental induction to the attachment
- confirm that objectives for the attachment have been agreed
- agree a PDP; where a PDP has already been agreed with the Clinical Supervisor, the Educational Supervisor will check that it exists, is realistic, and is linked to the curriculum
- check that the trainee has signed the Educational Agreement and Probity sections
- countersign the Educational Agreement
- check that the trainee is aware of the JRCPTB decision aid and minimum requirements for progression at ARCP reviews, performed by consultants
- reinforce to trainees that they should get their competences assessed by their Clinical and/or Educational Supervisors regularly throughout the year to avoid a last minute rush to get them signed off just before their interim and ARCP reviews. Competences should

only be signed off if they have evidence, such as work place based assessments (mini-CEX, ACAT, Cbd, DoPs), reflective practice (shared log), and attendance at formal teaching sessions

- reinforce to the trainee that QIP is an essential part of training

Midpoint review with Educational Supervisor

Although this meeting is not mandatory it is advisable to check on the trainee's clinical and educational progress. If there are concerns about the trainee's progress, a midpoint review is mandatory and should be recorded in the trainee's e-portfolio. The midpoint review should also address:

- attendance at teaching
- competences and evidence of their acquisition
- areas of concern identified by trainers
- areas of concern identified by the trainee
- PDP, which can be amended if necessary
- WPBA
- progress towards the MRCP diploma

End of placement meeting with Educational Supervisor

The end of post meeting should address:

- clinical and educational progress and record this in the e-portfolio
- results of WPBA and MSF
- JRCPTB decision aid, and assessment of competences
- progress in MRCP examinations
- resolution of issues previously identified as of concern
- areas that need addressing in the next placement – to be added to PDP
- where appropriate the end of placement appraisal meeting can be combined with the induction meeting for the next attachment

Educational and Clinical Supervisors: who does what?

- Appraisals should be performed by the Educational Supervisor in close collaboration with the Clinical Supervisor. The Educational Supervisor may delegate some tasks to the Clinical Supervisor but (s)he shall retain overall responsibility for monitoring the trainee's educational and clinical progress. Where the Educational Supervisor has delegated responsibility to the Clinical Supervisor, (s)he shall also inform the trainee of that arrangement. Tasks that could be delegated to the Clinical Supervisor are the induction and midpoint meetings (see Tables). The end of placement appraisals and the Educational Supervisor's Report should be done by the Educational Supervisor.
- Both the Clinical and the Educational Supervisor can sign off competences. The e-portfolio is configured to allow access to both supervisors. The supervisors do not have to do further WPBA on the competences, but they must be satisfied that each competence they sign off has reasonable evidence, such as WPBA, reflection, and formal teaching. **Competences without e-portfolio evidence of their acquisition must not be signed off.**
- There is now a facility for ES to do a group sign off for Common, Top and Other important presentations. ES is expected to sample & sign off from 10% of the evidence before signing off the whole group. Emergencies & Procedures must be signed off individually.

- A supervisor signing a trainee off as competent is doing so on behalf of the Postgraduate Dean. He/She must have completed the Deanery Educational Supervisors' Course (blended e-learning/face-to-face) within the last three years to be indemnified by the Postgraduate Dean.

	Activity	Educational supervisor	Clinical supervisor	Note
POST 1 (August – November)	Initial appraisal	√		Educational and Clinical Supervisor usually the same person in the first post
	Mid appraisal	√		Usually the same person
	End appraisal	√		Review progress and set educational goals for next post
POST 2 (December – March)	Initial appraisal		√	Induction / timetable / PDP
	Mid appraisal		√	Review progress and release MSF
	End appraisal	√		Review progress, release MSF (if no mid-appraisal) and set educational goals for next post
POST 3 (April - July)	Initial appraisal		√	Induction /time table / PDP
	Mid appraisal		√	Review progress
	End appraisal	√		Review progress
	Educational supervisor report (beginning of June)	√		To cover the whole year (All 3 Attachments)

https://www.yorksandhumberdeanery.nhs.uk/medicine/core_medical_training

Tasks that can be delegated to the Clinical Supervisor are the initial and midpoint appraisals for Posts 2 and 3. The Educational Supervisor's Report should be compiled by the Educational Supervisor because it will inform the ARCP and track the trainee's educational and clinical progress. Both Educational and Clinical Supervisors can sign off competences, provided there is e-portfolio evidence of their acquisition.

Process	Tasks before meeting (by trainee)	Tasks during meeting
Post Induction Appraisal (Clinical/ Educational Supervisor)	Review curriculum Initially complete self-assessment Review record of competence (for later appraisals) Review progress with WBA	Agree objectives of post to include in PDP Complete post timetable Sign educational agreement Sign induction appraisal form
Mid-point review* (Educational Supervisor)	Review curriculum and self-assess competences Review objectives in PDP Review progress with WBA	Use PDP and portfolio to review progress and identify future development needs Amend PDP Highlight any training concerns Discuss outcomes of Workplace-based assessments Sign off competences Sign mid-point review form
End of post appraisal (Educational Supervisor)	Review curriculum and self-assess competences Review objectives in PDP Review progress with WBA	Use PDP and portfolio to review progress and identify future development needs Highlight any training concerns Sign off competences Sign end of post appraisal form

SPECIALTY TRAINING CURRICULUM FOR CORE MEDICAL TRAINING August 2009 (with amendments August 2013) Administrative Changes June 2015

The curriculum can be accessed electronically:

https://www.jrcptb.org.uk/sites/default/files/FINAL%202009%20CMT%20Curriculum%20%28AMENDMENTS%20Aug%202013%29_0.pdf

ARCP's (Annual Review of Competency Progression)

Provisional ARCP Dates (all dates to be confirmed but indicative of time frame to complete portfolio competences).

Month 8 and Month 20 interim review

E-Portfolio review 19 March –30 March 2018

Interim Review 09 April 2018

ARCP

E-Portfolio Review 03 –09 June 2019 (without trainees)

Remote ARCP panel week beginning 11 June 2019 (without trainees). ARCP with selected trainees to attend week beginning 08 July 2018

CMT ARCP Decision Aid for CMT (Revised August 2017)

<https://www.jrcptb.org.uk/sites/default/files/CMT%20ARCP%20Decision%20Aid%20%28August%202017%29.pdf>

Except in DOPs, Consultants should complete a minimum number of WPBA

Most of the assessments will be familiar to you: MSF, CbD, mini-CEX, DOPs, ACAT

One **MSF** should be completed/ year – ideally this should be done in one placement (minimum of 12 responses required and must include at least 3 Consultants). The request list should be approved by the Educational Supervisor and should include the Clinical Supervisor. It should be done around 6 months into the year (**01 – 22 January 2019**). If any concerns are highlighted, there is an opportunity to repeat the MSF. The results of the MSF should be discussed with and released to the trainee.

ACAT (Acute Care Assessment Tool)

The assessment is done over a take shift (or could be a busy day on the ward **not** an out-patient clinic). A minimum of five patients should have been assessed over this period.

An Educational Supervisor's report covering the whole year of training, should be completed before the ARCP (months 11&23)

Enrolment with the JRCPTB

Trainees have been informed to enrol with the above in order to get their CCT in CMT at the end of the 2 years and have access to the e-portfolio.

If they are not enrolled the e-portfolio will lock them out after 4 weeks.

Quality assessment

All trainees are expected to complete a HEE YH placement feedback questionnaire in October/November. The Feedback Questionnaire has been designed to capture the views of trainees about postgraduate medical education training posts that they have occupied in HEE YH (Yorkshire and the Humber Postgraduate Deanery). The questionnaire can be found in the Quality Assessment section on the website. They **MUST** complete the generic questionnaire, which is part of the educational agreement they have signed up to. Completion of the questionnaire will take approximately 10 - 15 minutes. They are encouraged to collect a time-stamped ticket on completing the questionnaire which should be printed and shown to you, their Educational Supervisor, as evidence of completion.

Trainees in difficulty

Please inform/ involve your College Tutor.

Guidance on the lines of responsibility is within the Deanery Policy "**Policy for supporting Doctors & Dentists in Difficulty**"

https://www.yorksandhumberdeanery.nhs.uk/learner_support/policies/trainee_support

E-Portfolio support

Contact your local Postgraduate Centre who may be able to help or the College Tutor.

Regionally contact Catherine Smith CMT Coordinator csmith52@nhs.net or telephone 01709 424543

Please inform Catherine Smith of any changes with named Clinical/ Educational Supervisors, so amendments can be made to allow e-portfolio access by emailing csmith52@nhs.net

Acknowledgements

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References

The Gold Guide: <https://www.copmed.org.uk/publications/the-gold-guide>

How to Guides: <https://www.jrcptb.org.uk/eportfolio-information/user-guides>

Who's who!

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