

RECOGNISING EDUCATIONAL ROLES IN JOB PLANS FOR CONSULTANTS

Consultants undertaking roles in postgraduate medical education must have explicit time (and resources) to deliver the required outcomes for these educational roles to the standards required by GMC. This requires that time is clearly allocated within their job plan.

Role	Description	Typical Allocation	Comment
Trainer	Timetabled to supervise / coach trainees on ward rounds, in clinic, in operative list and out of hours. Undertake a small number per year of workplace-based assessments (less than 10 a year) and contributing to 360° feedback.	Some SPA time should be added to DCC session to account for time taken within session to train.	The requirement to train & assess trainees should be clearly stated in consultant job description
Clinical Supervisor	Oversees the clinical performance & progress of a named trainee. Meets away from the clinical area regularly (one hour per week) to discuss cases, provide feedback and monitor progress of learning objectives. Ensures those in clinical team provide appropriate clinical supervision and understand the relevant workplace assessments.	0.5 PAs per week - SPA time	Requirement to be familiar with trainee's curriculum & portfolio. Clinical Governance role to ensure that clinical supervision, appropriate to the competences & experience of the individual trainee occurs at all times to ensure patient safety.
Educational Supervisor	Responsible for a named trainee for all aspects of personal & professional development & progress through programme. Performs regular educational & annual NHS appraisal. Attends educational meetings, completes reports, involved in ARCP/RITA and may help in recruitment, Involved in careers guidance and trainees in difficulty.	0.25/trainee-SPA time	Some Educational Supervisors may have more than the average number of trainees and extra PA time may be needed. This may be managed within a Department, still maintaining on average 2.5 SPAs per Consultant.
Specialty / College Tutor	Maintains an environment within dept. & multiprofessional team that supports training & delivers curriculum & relevant assessments. Supports trainees and	1 PA for up to 20 trainees in specialty (excluding Foundation). 1.5 PAs for 20-40	Appointed jointly by the Trust DME (or MD) & the relevant Deanery Head of Specialty School. Most will also have multiple Educational Supervisor

	<p>trainers Attends department & Trust Education Committees and may be required to attend Deanery STC. Ensure systems are in place for specialty induction, quality control of training provided, formal education delivery & study leave management Involved in careers guidance and trainees in difficulty.</p>	<p>2 PAs more than 40 - This is not from SPA time & will require a reduction in clinical PA time</p>	<p>responsibilities and other governance responsibilities. A Tutor or deputy will be needed on each major clinical site, a minimum of 1 PA per site. This role has changed enormously in last 18 months and is now pivotal for educational governance</p>
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Recruitment Support (on top of other)	Shortlisting and interviewing for Deanery. Foundation – once a year Core training – 1-2 per year Specialty training – 2-3 per year Most Educational Supervisors will spend time on this during the year.	Additional professional leave may be required eg. 1 to 6 days per annum.	Centralised recruitment is much more efficient in consultant time, but much more obvious, requiring explicit planned time. Core Medicine and Core Surgery recruitment is particularly onerous requiring the equivalent of 1 day for shortlisting and up to 3 days for interviewing for each recruitment round. 1-2 days/round for Specialty 1-2 days/year for Foundation
Clinical Tutor	Support Educational Supervisors and Tutors with trainees in difficulty and provide pastoral & career support to trainees as necessary. Manage Postgraduate Centre and administer study leave	2 PAs – typically one PA funded by MADEL & one by LEP. Dependent on size of LEP.	Joint Trust / Deanery appointment – typically the DME with an Associate Dean Local individual negotiation whether additional paid PA or reduction in clinical PA time
Director of Medical Education	Maintaining and developing profile of medical education within LEP, ensure delivery of Education Contract and ensure quality control of all PGME training programmes	3 PAs dependent on size of LEP.	Joint Trust / Deanery appointment – typically the Medical Director with the Postgraduate Dean Local individual negotiation whether additional paid PA or reduction in clinical PA time
Foundation Programme Directors	Manages foundation training programmes across a locality-based group of Local Education Providers on behalf of Deanery-based Foundation School	Money allocated to Education Provider for role 1PA / 30 trainees	Local individual negotiation whether additional paid PA or reduction in clinical PA time
Specialty Training Committee members	Provides representation on Specialty Training Committees. <ul style="list-style-type: none"> Helping advise on rotations, flexible training and other administrative matters. Undertaking Quality Management roles within the STC. 	Committee members are usually Specialty Tutors and dealt with as above Other roles require a job plan review and local discussion & agreement about PA or SPA time, up to 1 PA per week.	STC Chairs receive a small sum towards administrative support but this does not cover time required to undertake the role. Training Programme Directors are increasingly receiving direct remuneration from the Deaneries which must be clearly stated within job plan.
Specialty/ Association committees and SAC roles	Provide important link between the Colleges/Specialist Society and the workplace for both postgraduate training and CPD for consultants. Ensure consistency in approach and standards across the UK between provider organisations.	Usually SPA time Additional professional leave may be required	These activities are required for the greater good of the NHS. Local Hospital often benefits from national recognition & knowledge gained. Colleges provide expenses and Hospitals are expected to release the consultant to attend.