

Review Framework for Educational Roles

Name:

Date:

GENERAL INFORMATION

List educational role (s)

Type of role / activity	Start date	Time /week	In job plan? Y/N

Document your Educational activities *or provide spreadsheet of activities*

Activity	Brief description of YOUR achievements this year. Any challenges / issues?
Teaching (formal & informal)	
Assessment / Observation	
Appraisal / Coaching	
Organising / Managing training	
Evaluation of education / training	
Programme / Course review & development	

SUPPORTING INFORMATION

KEEPING UP TO DATE

What CPD for your educational role have you done in the previous 12 months?

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.....

REVIEW OF YOUR PRACTICE

Evaluating the quality of your educational work including incidents, complaints & compliments

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.....

FEEDBACK ON YOUR PRACTICE

What feedback have you received from trainees, colleagues etc?

.....

.....

Personal Development Plan – please carry this forward onto your final PDP eg section 19 of the MAG form
As an educational supervisor you should have something educational on your PDP

Learning / development needs?	How will you go about addressing them?	By when?	How will you show it is met

Sign off. Form to be copied & forwarded to specialty tutor for ST / local Foundation Administrator for FP.

Signed by consultant

Signed & Name of Appraiser

Exact model / process to be determined locally

Review framework for educational roles - Explanation for Appraisers

This review framework allows the trainer to reflect on the multiple aspects of being a trainer and provides a structure for a discussion about the role at appraisal.

Educational & Clinical Supervisors

The GMC has identified two groups of postgraduate trainer – the named Educational Supervisor and the named Clinical Supervisor. Training programmes / packages have been developed in all regions to provide baseline training for these Trainers. These identified Trainers are required to demonstrate that they are working to the Standards of Trainers as described by the GMC (see fig 1). Standards 1-5 apply to Clinical Supervisors. Standards 1-7 apply to Educational Supervisors.

Figure 1:
Standards for Trainers
GMC August 2012

1. Ensuring safe & effective patient care through training
2. Establishing & maintaining an environment for learning
3. Enhance learning through assessment
4. Teaching & facilitated learning
5. Continued professional development as an educator
6. Supporting & monitoring educational progress
7. Guiding personal & professional development

Who should do this?

Strengthened Medical Appraisal covers the “whole scope of work” of the doctor and so all educational roles must be included and considered. NACT UK suggests that the most practical solution for the present is for ***Named Educational & Clinical Supervisors to have their educational role reviewed within their Annual NHS Appraisal*** and those with more significant educational roles have an annual review with their line manager.

Appraisers should inquire from the Educational/Clinical Supervisor how they comply with the GMC Standards for Trainers and use their professional judgement as to whether the answers / information provided demonstrates that the Trainer is “fit to practice” as a trainer. In a similar way the Appraiser uses their professional judgment to ensure that the doctor is complying with “Good Medical Practice”.

However it is acknowledged that in some areas / specialties significant work is already underway for these educational roles to be reviewed by a more senior member of the educational team eg. the Specialty Tutor (or Patch Tutor) who has overview of the learning environment. In this case the review meeting should be documented and included in the doctor’s portfolio.

Leaders in Medical Education – Tutors & Directors

Specialty/College/Patch/Clinical Tutors & Training Programme Directors/ Heads of Schools require an annual review meeting of their role with their line manager. The output of this review meeting should be placed within their portfolio for their NHS Appraisal.

Questions for Appraisers

1. How has your CPD developed your knowledge & skills in educational roles (s)
2. What impact has this learning had on quality of training & patient care / patient safety
3. What has changed in your behaviour / practice
4. What further learning needs do you have

Supporting Information

It is NOT suggested that supporting information is provided / mapped against the seven headings of the Standards for Trainers. Standards are set nationally to ensure consistent practice across the UK and to provide a reference point for trainers to be clear about the national expectations of them in their role. Suggestions for supporting information are overleaf.

Supporting information should be considered under the 4 headings as determined by the GMC:
General Information, Keeping up to date, Review of your practice, Feedback on your practice

Additional information can be provided in Section 14 of MAG

Trainers can include any issues that they wish to be discussed under section 17 of MAG

Ideas for discussion / documentation under GMP headings & documented on the MAG form

List your educational roles – Section 4

Educational Supervisor for named trainee
Clinical Supervisor for named trainee
Formal & Informal Teacher for trainees / other HCPs
Provide Clinical Supervision of trainees & students - *observe, teach, assess, give feedback*
College / Specialty Tutor
Training Programme Director – Foundation / Specialty
Director of Medical Education / PG Organiser
Clinical Skills Lead / Simulation Lead
Associate Postgraduate Dean

Knowledge Skills & performance

Job Description of Educational Role
Recent meeting with senior – *reviewing performance, programme, professional development*
Attendance at meetings for wider CPD – *train the trainers, leadership, NACT*
Progress on previous PDP & sharing learning with others
Personal Reading - *of journals, updates from GMC, HEE, College, CfWI etc*
Feedback – *Personal/Dept/Trust Performance Feedback from colleagues / trainees / team / LETB or deanery / postgrad team – formal (360) and informal*

Safety & Quality

From patient safety / patient care perspective

Dept collating & discussing complaint/ serious incidents involving trainees
System to collect trainee concerns about patient safety
Learning environment where concerns shared – no-blame culture

From trainee safety / improving training perspective

Trainers all trained, have job description & role discussed at appraisal
Medical Education Audit / Service Improvement – what initiatives have you established to improve training / experience of trainees
Supporting trainers in dept - dept educational group (Faculty Group)
Educational Learning environment – involves whole MDT, Placement Support Group
Dept report from GMC surveys with action plan
Internal quality metrics – exam pass, ARCP progress, job success, popularity/competition rates, trainee feedback, end-of-placement forms
Engagement with external quality visits

Communication, Partnership & Team-working

Contribution to educational operational meetings
Communication strategy – from LETB/Deanery – hospital - dept.
Educating others – *faculty development programmes, one-to-one meetings, mentoring new trainers*
Feedback – *360, Trainee surveys*
Constructive feedback – *following complaints / incidents*
Faculty Group – *culture, effectiveness, support network*
Supporting colleagues with trainees in difficulties
Working with Trust Board, Governance, Finance, Workforce
MultiProfessional Education Committee - *Integrated with Nurse, AHP and Training departments*
Junior Doctors Forum

Maintaining Trust *With colleagues, trainees, postgrad staff, administrators, deanery, & patients.*

Working in partnership with trainees – *not hierarchical*
Trainee support – *mentors, buddy scheme, Junior doctor forum*
Managing doctors in difficulty with objectivity & integrity
Being Consistent
Informed Consent from patients to be involved in training
Patients Feedback – *patients confident trainees adequately supervised, do appropriate tasks & make appropriate “supported” decisions*
Patient Satisfaction questionnaires