

TRUST REPRESENTATIVES

TRAINEE TRUST REPRESENTATIVES (TRUST REPS)

The Trainee Trust Representatives perform a key role in ensuring the quality of patient care and training across GSTT. They are the voice of trainees and are a vital link between local trainees, the departments the medical director and other members of the Trust executive.

SELECTION OF TRAINEE TRUST REPRESENTATIVES

1. All departments must ensure they have at least one Trainee Representative (TR). Ideally, there should be one TR for each level of training - ST1-3, ST4-5, and ST6-8. In departments with fewer trainees, it may be sufficient to have one TR for all trainees.
2. If there is more than one TR in a department, a 'lead' TR should be identified. This is more likely in larger departments with numerous sites.
3. TR should be appointed by the College Tutor/Faculty lead at the start of each rotation.
4. Consultants and/or College Tutors should factor in 30 minutes for discussion at induction to select local representatives. It should be emphasized that this is an important role with responsibilities and time commitments.
5. TR should be selected based on the views of trainees and trainers.
6. No trainee should be forced to be a TR. Trainees should volunteer and be willing to take on the responsibility and commitment the role involves.
7. If a junior trainee wishes to be the lead TR, they should be supported by a more senior trainee.
8. The position of TR should be reviewed 6-12 monthly.
9. Trainees should not remain as lead representative for more than 12 months.
10. Once the TR has been selected, the College Tutors/consultants should inform the PGME.

TRUST REPRESENTATIVES' JOB DESCRIPTION

The trust reps should focus on the following areas:

1. Engagement at pan-GSTT level:

- a. They should attend the GSTT representatives meetings,
If a TR cannot attend, they should nominate another trainee to represent their department.
- b. They should ensure that they receive email updates from the PGME and trainees committee and the department.

2. Liaison:

The trust reps act as a means of facilitating effective multi-directional communication with their trainee colleagues, the college tutor, PGME ,TPD or STC. They also act as a means of disseminating information from the PG centre and medical directors office

3. Shares information and ideas:

The trust reps are in a unique position to share information from the trainee meetings and suggest ideas from other departments and trusts to enable new ways of working or training.

4. Involved in assuring the quality of training in trusts:

- a. To be part of a Local Education Faculty Group and attend all the faculty group meetings which should be held regularly. Trust reps, however, are not expected to be involved in the consultant discussions regarding specific trainees.
- b. The trust reps should arrange monthly meetings between juniors as a local forum to discuss issues regarding training. They may use the proforma attached to structure their meetings and should keep minutes of all meetings.
- c. Work closely with the College Tutor to support them in their role, to feedback concerns from monthly junior meetings and to promote ideas from the trainees
- d. Promote the trainee voice and to represent their colleagues at the Trust and pan-London meetings.

e. Involved in both formal (regular short reports at least one every 6 months) and informal communication with the Trainees Committee. Reports will be kept by the College Tutors PGME

5. Acts as a signpost for solutions to problems:

The trust reps may be able to suggest solutions to recurring problems, or may be able to direct colleagues to someone who can provide that help. They may engage with the College Tutor, Trainees' Committee or STC for assistance in solving problems. In the first instance solutions to problems should always be sought locally.

6. Inspires colleagues and tries to boost morale:

The trust reps should act as role models in their approach to problem solving within the trust.

7. Takes an active role in curriculum delivery in the local trust:

The trust reps are interested in improving the local teaching and education programme, and should encourage other trainees to be actively involved in curriculum delivery locally.

8. Succession Planning:

The trust reps should plan for handover when changing posts or stepping down as a trust representative. They should provide clear direction and an outline of the work they have done for the next trainee representatives. This should be

done in conjunction with the college tutor. We recommend keeping a record of all activity in one place.

GUIDANCE FOR TRAINEE MEETINGS (Junior-Junior Meetings)

· Should be held once a month. The trust reps may use the proforma to structure their meetings and should take minutes.

· This should be a fixed day – for example, the last Friday of the month. The time should also be ideally fixed – for example, lunchtime, after morning handover or after teaching. This arrangement should be left up to the individual Trusts.

· The meetings should include specialty trainees, foundation programme doctors, General Practitioner Vocational Training Scheme (GPVTS) doctors and trust employed doctors. The views of medical students should also be sought.

· Ideally, the college tutor/consultant should attend for some part of the meeting (preferably at the end) to discuss any immediate concerns which are raised.

· Discussions on the quality of training should include but not limited to the following areas/topics:

- Whether training competencies are being met
- Educational supervision
- Ability to complete workplace-based assessments
- In-house teaching programme
- Study leave

- Outpatient clinic attendance
- Support network available
- Rota and staffing levels

GUIDANCE FOR TRAINEE-CONSULTANT MEETINGS (Junior-Senior Meetings)

- The trust reps should feedback following the junior meetings with the relevant senior. In most situations, this will be the College Tutor but in larger departments with several trust reps, this may be with the respective head of department.
- This could be in the form of a meeting, which may or may not include other trainees and seniors. The aim is for the majority of feedback to be reviewed and acted upon internally within the Trust.

ESCALATION

Possible reasons for escalation include:

- Any aspect of care/training that may compromise patient safety.
- Any type of supervision which is thought to be undermining or bullying in nature.
- Inadequate training opportunities with detrimental effect on trainee's ability to achieve competencies.

If there are serious concerns which have not been resolved in the meetings as outlined above, the trust reps should first escalate the matter internally as detailed below:

Internal Escalation:

- **Trust reps should document their concerns in a letter and/or email and present this formally to their College Tutor in the first place.**
- Issues may then be escalated to the clinical director/head of service, director of medical education, the hospital medical director or chief executive if deemed appropriate. This is particularly important for any issues around patient safety.

Trainee Meeting Proforma

Name of Trust: _____

Date of Meeting: ___/___/___

Suggested areas for discussion:

For each highlight whether it's being met or not, what works well, what needs resolving and generate solutions/action plans.

-Competencies -Workplace-based assessments/E portfolio

-Educational Supervision -Outpatients attendance

-In-House Teaching Programme -RSM days attendance (if relevant)

-Study leave -Attendance at MSc days (if applicable)

-Rota and staffing levels

Highlight good points/ areas of good practice:

Areas of concern or requiring improvement:

Suggested action plan:

Trust Rep Report Proforma

(To be completed at least once every 6 months)

Name of department: _____

Trust Rep: _____

Report covering period: ___/___/___ to ___/___/___

Areas of good practice:

Areas of concern or requiring improvement (date when raised):

Action taken:

Subsequent effect of action: