

CIP GUIDE

Statement of Expectations and Guidance for CiP 6

CiP 6: The doctor is able to manage and lead a multi-professional team delivering a Sexual & Reproductive Health Service.

1 What is this CiP about?

This CiP is designed to ensure that trainees in CSRH acquire the skills, knowledge and attributes needed to lead a Sexual & Reproductive Health Service and manage the multi-professional team delivering the service. The consultant in CSRH is committed to excellence and is able to achieve this through promotion of both staff and service development.

During training doctors should be exposed to and participate in a wide variety of leadership roles both clinical and managerial, as well as attending educational events to support their learning in this area. The ability to reflect on and learn when projects or events have gone well or when they have not, are all skills that should be developed and consolidated as training progresses. Here are the GMC-approved key skills and descriptors.

Key Skills	Descriptors
<p>Demonstrates commitment to provision of a service which is continually monitored and responsive to both positive and negative events</p>	<ul style="list-style-type: none"> • Promotes excellence • Develop competency frameworks for different staff groups e.g. specialty doctor in SRH, health care worker in SRH • Provides leadership and direction to support others to achieve their competencies • Participates proactively in adverse event reporting, identifies patterns and necessity for change • Responds to a complaint appropriately, in line with existing NHS policies and procedures • Sensitively debriefs with another staff member, using constructive feedback where appropriate • Sets up a supportive and positive environment to encourage reporting of adverse events • Participates in review of progress in meeting local/national performance indicators. • Uses audit outcomes to affect change • Uses local/national performance indicators to affect change
<p>Recruits, manages and develops the members of various professional groups that make up multidisciplinary staff</p>	<ul style="list-style-type: none"> • Demonstrates performance management • Understands and applies the key principles of leadership and management • Understands and applies the key principles of competency frameworks as a performance management and development tool • Participates in regular appraisals (of self and other staff members), keeping appropriate records • Compose an effective job description for a new position • Demonstrates an understanding and commitment to the importance of equity within the recruitment and selection process • Participates in an interview/selection panel • Demonstrates a willingness to support all staff in their continuing development • Demonstrates an understanding of staff wellbeing, sickness and absence management policy and how this is applied for both the employer and the employee • Ability to provide a reference for another member of staff or other professional
<p>Manages and sustains financial resources effectively</p>	<ul style="list-style-type: none"> • Demonstrates an understanding of service budget reports • Designs and implements plans for attracting funding from a range of sources • Develops and submits a business case • Demonstrates the principle of financial transparency, openness and accountability • Applies the principles of working with integrity, and with an honest and trustworthy manner • Manages changes in funding resources, while ensuring maintenance of service quality and sustainability

	<ul style="list-style-type: none"> • Sensitively communicates the need to review resource allocation to staff • Demonstrates understanding of the importance of ensuring efficient use of resource, maximising benefits • Manages pharmacy budgets effectively • Is able to describe purchasing processes
Demonstrates commitment to continuous quality improvement and resulting service development	<ul style="list-style-type: none"> • Critically reviews an aspect of service provision and provides recommendations for service redesign • Demonstrate analytical thinking • Leads and responds to a service user consultation on potential service change and on all aspects of service delivery • Demonstrates support for working within a changing and evolving work environment • Monitors the effects and outcomes of service developments • Encourages innovation, supporting a climate of ongoing service improvement

These **Key Skills** also map to a variety of generic professional capabilities developed by the GMC. Evidence supporting progress in this CiP should link to generic capabilities such as dealing with complexity, teamwork and leadership and knowledge of patient safety issues. To help trainees and trainers assess progress in this CiP, there is a Statement of Expectations for trainees at each stage of training. It offers guidance as to what constitutes acceptable progress in each training year.

Descriptors are assigned to each Key Skill. It is important to note that they are given as guidance as to the kinds of activity that will help a trainee self-assess as to their progress with the acquisition of the Key Skill. Other activities that could be said to belong to that Key Skill are not excluded, hence the list is not exhaustive.

Statement of expectations: CiP 6	
ST1–3 Meeting expectation	A trainee who is meeting expectations will have an understanding of service development based on continuous monitoring and which is responsive to both positive and negative events. The trainee understands and may have observed recruitment and other staff management processes. The trainee should have an understanding of financial resources and constraints. The trainee should understand the process of Quality Improvement leading to service development and have had some involvement in audit and QI activity. The trainee should have an understanding of the concept of change management.
ST4–5 Meeting expectation	A trainee who is meeting expectations will continue to make progress in the areas

	<p>covered in their earlier training programme. They will demonstrate involvement in service monitoring such as responding to a complaint or participating in adverse event reporting and investigation. The trainee should be able to demonstrate active involvement in managing staff and recruitment. They should be involved in developing competency frameworks for different staff groups. The trainee will participate in local performance review meetings and understand how to utilise indicators and outcomes to effect change. The trainee will continue their involvement in QI, taking on greater responsibility within the process.</p> <p>.</p> <p>The trainee should demonstrate an understanding of service budget reports, sources of funding and the process of submitting a business case</p> <p>They will understand the requirement to manage changes in funding while ensuring maintenance of service quality and sustainability and the need to communicate and implement these changes</p>
<p>ST6 Meeting expectation</p>	<p>In addition to the earlier levels outlined, a trainee who is meeting expectations will lead a service development project, incorporating service user consultation and will be able to monitor the effects and outcomes of the project. The trainee will understand and utilize local and national performance indicators to improve service delivery. The trainee provides leadership and direction to support others to achieve their competencies. The trainee is able to write an accurate job description and participate fully in recruitment and selection processes. The trainee is able to write and submit a business case with advice and support from managerial colleagues. The trainee can sensitively communicate the need to review resource allocation to staff and is able to work effectively in a changing and evolving professional environment</p>

2 What kind of evidence might be relevant to this CiP?

This list is not exhaustive. Trainees and supervisors can discuss and agree other sources of relevant evidence. They should also refer to the [Matrix of Progression](#) which sets out the key overall requirements for progression at each stage of training.

- TO2
- DOC
- Reflective practice
- QI/Service Development or Redesign/Change Management Project
- Local, regional or national training (Leadership, Management, HR processes, recruitment, business planning)
- Participate in an interview panel
- Job description
- Attendance at relevant meetings: Performance Review, Budgetary, Clinical Governance, Operational
- Chairing meetings – eg local staff meetings
- Response to a complaint
- Investigating a DATIX
- Equality and Diversity training
- A written business case/funding request

3 What are the Knowledge Requirements for this CiP?

The [Knowledge Requirements](#) for all CiPs are contained in a single document, available on the FSRH website. They are not listed here because they also constitute the MFSRH syllabus which needs to be a separate document for all examination candidates, some of whom are not CSRH trainees.

4 When can this CiP be signed off?

A trainee can make a self-assessment of their progress in this CiP at any point in the training year. The first question for a trainee to ask themselves is,

- Do I think I meet the expectations for this year of training?

If the answer is yes, then the next questions to ask are:

- Have I produced evidence and linked that evidence to support my self-assessment?
- Is this evidence at the right level of complexity for my year of training?
- Do I understand the knowledge requirements of this CiP? If not, do I need to look at the knowledge requirements/MFSRH syllabus?

Once the trainee has completed the self-assessment the educational supervisor (ES) needs to review the evidence and ask the same questions:

- Is this sufficient evidence to sign off the CiP?

- Am I happy there is evidence to support the acquisition of key skills?
- Is this the best evidence? Would some of this evidence be more appropriate in other CiPs as evidence?
- Is there other evidence that has been missed?
- Is the level right for this trainee? Are they meeting the standards in the statement of expectations?

When the ES judges that the trainee has met the expectations for that year, they can sign off the CiP. Most crucially, this is a global judgement which does not have to be linked to key skills. One piece of well-presented evidence with some reflection may be enough to sign off the CiP. It is the **quality** of the evidence, not the quantity, which is key. Remember also that one piece of evidence can be used up to three times across the CiPs.

5 Are there any examples or case studies?

Example 1 – ST2 trainee (ES focus)

You are an ES having a meeting with an ST2 trainee, who asks for sign-off of CiP 6 after considering the questions regarding the evidence. They feel that they meet the statement of expectations. They have submitted the following evidence linked to the CiP:

- TO2
- Involvement in completed QI project
- Equality and diversity training
- Regular attendance and contribution to Clinical Governance meetings
- Attendance at CSRH trainee day including HR workshop
- Reflection on a patient complaint and its implications for service delivery
- Reflection on submitting a DATIX of an adverse event

The statement of expectations for an ST2 trainee who is meeting expectations in CiP 6 is as follows:

- A trainee who is meeting expectations will have an understanding of service development based on continuous monitoring and which is responsive to both positive and negative events.
- The trainee understands and may have observed recruitment and other staff management processes.
- The trainee should have an understanding of financial resources and constraints.
- The trainee should understand the process of Quality Improvement leading to service development and have had some involvement in audit and QI activity.
- The trainee should have an understanding of the concept of change management.

Therefore, based on your meetings with the trainee and the breadth and quality of evidence which is linked to the CiP, you can feel confident in signing off this CiP for ST2.

Example 2 – ST6 trainee (trainee focus)

You are an ST6 trainee considering sign-off for CiP 6. You are 7 months into ST6 and have submitted the following evidence linked to the CiP:

- Course on HR/management situations
- eLearning Leadership
- Involvement in 2 QI projects led by a Consultant and a Nurse Manager
- Sitting in at Operational Meetings

The Statement of Expectations for an ST6 trainee who is meeting expectations in CiP 6 is as follows:

- In addition to the earlier levels outlined, a trainee who is meeting expectations will lead a service development or QI project, incorporating service user consultation and will be able to monitor the effects and outcomes of the project.
- The trainee will understand and utilise local and national performance indicators to improve service delivery.
- The trainee provides leadership and direction to support others to achieve their competencies
- The trainee is able to write an accurate job description and participate fully in recruitment and selection processes.
- The trainee is able to write and submit a business case with advice and support from managerial colleagues.
- The trainee can sensitively communicate the need to review resource allocation to staff and is able to work effectively in a changing and evolving professional environment

You discuss this CiP and your request to be signed off with your ES at your next meeting. The ES considers the key questions:

Is this sufficient evidence to sign off the CiP? Am I happy there is evidence to support the acquisition of key skills?

In this case, very superficial evidence has been provided without evidence of application to practice. More evidence of active leadership and management involvement is required such as being a member of an interview panel or leading an aspect of change management in the department.

Is this the best evidence? Would some of this evidence be more appropriate in other CiPs as evidence? Is there other evidence that has been missed?

There is no linked Reflective practice at all. Reflection on the evidence submitted would help to demonstrate how the trainee is building on knowledge and skills gained earlier in training and through theoretical learning.

Is the level right for this trainee? Are they meeting the standards of expectations?

There is no evidence of active participation in the professional activities required to maintain and run a Clinical Service. Observational experience is insufficient at ST6 level and the trainee should be able to demonstrate pro- active involvement, leadership and innovation in these activities.

The ES declines to sign off the CiP and discusses the expectations of an ST6 trainee for this CiP. As part of the discussion the ES points out that the evidence does not show how the trainee is using theoretical knowledge gained earlier in the training programme in their current practice at a more senior level. The ES suggests that they lead on a service development project, demonstrate active participation in meetings or take on the role of Chair in staff meetings and take part in an interview panel at the next recruitment opportunity in the department or the next undergraduate or specialty recruitment round at the Deanery.