

# **Clinical and Educational Supervisors – UPDATE in respect of GMC Regulations August 2014, revised October 2015**

## **Recognition and Approval of Trainers by the GMC**

Faculty Registered Trainers (FRTs) and other FSRH members may have received contact from their employing authority about whether or not they meet the criteria to be approved as clinical and / or educational supervisors. The notes below aim to give you some background to the issue and to help answer some of the questions about the changes on the horizon. FSRH is keen to be supportive and facilitative of the process, although does not have any direct responsibility for the implementation of the changes.

## **BACKGROUND at the GMC**

Further to the GMC document *'The Trainee Doctor and Tomorrow's Doctors'* the importance of ensuring that trained teachers undertake the supervision and training of doctors has been recognised.

To quote the document:

*'We know that high quality training is essential for safe, high quality patient care. Even during times of resource constraint, service reconfiguration and organisational change, working together, we must ensure that education and training is valued, protected and improved.'*

## **What do the GMC changes mean for us as doctors who participate to a greater or lesser extent in teaching?**

The arrangements only relate to doctors undertaking the roles detailed below – if you undertake such teaching then they will apply to you:

- a. Named educational supervisors in postgraduate training
- b. Named clinical supervisors in postgraduate training
- c. Lead coordinators of undergraduate training at each local education provider
- d. Doctors responsible for overseeing students' educational progress for each medical school.

## **What are the GMC requirements for recognition and approval of trainers?**

The GMC has agreed to use seven areas originally set out by the Academy of Medical Educators to provide a structure for ensuring that trainers meet relevant standards:

- a. Ensuring safe and effective patient care through training
- b. Establishing and maintaining an environment for learning
- c. Teaching and facilitating learning
- d. Enhancing learning through assessment
- e. Supporting and monitoring educational progress
- f. Guiding personal and professional development
- g. Continuing professional development as an educator.

## **GMC ADVICE November 2014**

The GMC has reiterated to us that it is the responsibility of the local Dean to specify the requirements for Examiners but that the FSRH advice detailed below is consistent with their requirements. Clinicians who are concerned about their position as a clinical or educational supervisor are advised to contact their local Dean who has ultimate responsibility for setting the standards for supervisors. It remains the responsibility of the employer to ensure that employees meet those standards. Further information on this topic can be found in a document produced by the Academy of Medical Royal Colleges in relation to Examiners and Assessors:

<http://www.aomrc.org.uk/general-news/requirements-for-colleges-and-faculties-in-relation-to-examiners-and-assessors.html>

## **What is the definition of a Clinical Supervisor?**

A trainer who is designated and appropriately trained to be responsible for overseeing a specified student or trainee's clinical work in a clinical environment, providing constructive feedback during that training period, and informing the summative judgment at the end of that clinical training period and/or series of periods.

## **What is the definition of an Educational Supervisor?**

A trainer who is selected and appropriately trained to be responsible for the overall supervision and management of a specified student or trainee's trajectory of learning and educational progress during a clinical training period and/or series of periods. Every student and trainee must have a named educational supervisor. (See further details below.)

## **How is the GMC Trainer Provision being implemented?**

The GMC has already established a phased process for implementing arrangements for recognising trainers – GP Trainers have been passing through this process for the last year. All trainers in four specific roles will be fully recognised by 31 July 2016.

## **Does this affect me as a Faculty Trainer now?**

At present the changes do not appear to affect the majority of our Faculty Registered Trainers. Those affected will already be aware of the position – in particular GP Trainers who are already on the GMC trainers' lists and a few SRH Specialty Consultants and SAS doctors who have a role as clinical and educational supervisors for those in specialist training.

FSRH has now received advice directly from the GMC, the aim was to clarify the position of our Faculty trainers.

**Recognition will not be necessary** for other doctors whose practice contributes to the teaching, training or supervision of students or trainee doctors.

## **What about the FSRH teaching qualifications?**

FSRH has already recognised the importance of our teachers reaching the required standards for trainers. The PGA Med Ed (SRH) and our revised recertification requirements (mandatory as of 1 January 2015) is recognition of this.

## **How do the FSRH teacher qualifications relate to the GMC structure?**

### **1. Eligible for certification as an Educational Supervisor:**

- a) **FRTs who have attended both of the 2014** stand alone Keele single medical education days held in London and Birmingham
- b) **FRTs who have attended both of the 2015** stand alone Keele single days on assessment and reflection
- c) **FRTs who attend the two day residential PGA course but do not** submit the essay or portfolio of work to gain the PGA Med Ed (SRH)
- d) **FRTs who hold the PGA Med Ed(SRH)**

PLEASE NOTE: With respect to the above FRTs, you may need to undertake some local training (provided by your Trust or other employer) to ensure that you are familiar with whichever portfolio your trainee uses. You are in a position to be recognised as a clinical or educational supervisor for a Foundation Year or Specialist Trainee doctor. Keele University will be happy to issue documentation to FRTs that attests to meeting the requirements. Please contact Debbie Roberts at FSRH [dr@fsrh.org](mailto:dr@fsrh.org) if you would like such certification. **Recertification of your FRT status** using the FSRH criteria as of 1.1.15 ensures that you maintain your educational supervisor status. <http://www.fsrh.org/pdfs/RecertApplicationFRT.pdf>.

### **2. Eligible for certification as a Clinical Supervisor**

- a) **FRTs who have attended only a single day Keele stand alone** course

### **3. Ineligible for either Clinical or Educational Supervisor certification**

**Current LoC MEd holders** are not currently certifiable for the GMC trainer regulations.

a) Those FRTs in such a position who are acting as clinical and or educational supervisors should be aware that under GMC guidance you will need to gain recognition by 31 July 2016.

b) **LoC MEd qualified Faculty Trainers who have submitted for recertification** under the new regulations that are mandatory from 1 January 2015 are also able to register for clinical and educational supervisor status. The re-certification form now states: - "The recertification requirements align with the GMC requirements for the recognition of trainers in secondary care" with mention of the seven AOME criteria.

c) **Faculty Registered Trainers who hold the LoC MEd but have not recertified** under the new rules that came into place on 1 January 2015 **do not** meet GMC requirements for Trainer recognition.

**It is ultimately the responsibility of your employer to ensure that they offer you appropriate training to undertake your role as a clinical and or educational supervisor, not that of FSRH**

**What should I do in order to be recognised by the GMC as a Trainer?**

**GP Trainers** with FRT status are already recognised by the GMC via their local Deanery (GP Training route) or other responsible body

**Other FRTs** should contact their Trust or Health Board Training Lead who will be best able to advise on the process for such recognition, which may vary between localities.

**What about Nurses who are Faculty Registered Trainers?**

This guidance does not apply to our Faculty Registered Trainers who are nurses at the present time. All the Nurse FRTs hold the PGA Med Ed (SRH) and therefore meet the new GMC criteria. However, you should be aware that the NMC is looking at the introduction of similar criteria.

**Support from FSRH**

The General Training Committee is resolved to continue to support Faculty Trainers in gaining GMC recognition and will continue to monitor and work with the GMC to facilitate this agenda.

To this end, the medical education courses that are FSRH badged, either alone or with Keele University will meet GMC requirements.

Those trainers who do not currently meet the standard (LoC MEd holders) may wish to consider taking action to meet the requirements. This can be achieved by

- a) attending an appropriate medical education course,
- b) undertaking the FRT recertification process early, before the end of their current 5-year cycle— before 1 July 2016

The responsibility for ensuring compliance for trainers lies firmly with the employing authority.

**Whose responsibility?**

The responsibility for ensuring that sexual health teachers employed by Trusts or other organisations lies firmly with that employing authority. GP Trainers who are FRTs are already covered through their respective Deanery but those GPs who are FRTs and work within their own practice need to take personal responsibility.

### **Where can I read about this in greater depth?**

The Role of the Trainer has been recognised by the GMC and further details are available at: [http://www.gmc-uk.org/Role\\_of\\_the\\_trainer.pdf\\_53816777.pdf](http://www.gmc-uk.org/Role_of_the_trainer.pdf_53816777.pdf)

The issue is explored in detail on the GMC website: <http://www.gmc-uk.org/education/10264.asp>

## **General Medical Council – THE NOTES BELOW ARE TO BE FOUND ON THE GMC WEBSITE**

### **Definition of Trainer in context of GMC approval**

1. A trainer is an appropriately trained and experienced doctor who has responsibility for the education and training of medical students and/or postgraduate medical trainees, which takes place in the clinical environment.
2. A trainer provides supervision appropriate to competence and experience of the student/trainee and training environment. S/he is involved in and contributes to the learning culture and environment, provides feedback for learning and may have specific responsibility for appraisal and/or assessment.

### ***Roles of trainers***

3. The term trainer incorporates the roles of clinical supervisor and educational supervisor but is not limited to these alone. It also includes all doctors with formally recognised roles in delivering undergraduate and postgraduate medical education locally in the clinical environment, such as clinical teachers, clinical tutors, clinical lecturers, GP trainers, college tutors, specialty tutors, regional advisers, heads of schools, foundation programme directors, specialty (including GP) programme directors, directors of medical education. The trainer is most often a consultant or general practitioner, but can also be a specialty doctor or senior trainee.
4. The General Medical Council is not considering approving these additional roles at this time; its approval of trainers will apply only to the roles of clinical supervisor and educational supervisor in the first instance. At this stage it will not apply to the processes of clinical supervision (that is to say the supervision inherent to the clinical activity being used to provide the educational opportunity) where this does not fulfill the following definitions.
5. As the remit of the General Medical Council now includes both undergraduate and postgraduate medical education and training the current definitions of the roles of clinical and educational supervisor have been amended to reflect this continuity –

### **Clinical Supervisor**

6. A trainer who is designated and appropriately trained to be responsible for overseeing a specified student or trainee's clinical work in a clinical environment, providing constructive feedback during that training period, and informing the summative judgment at the end of that clinical training period and/or series of periods.

## **Educational Supervisor**

7. A trainer who is selected and appropriately trained to be responsible for the overall supervision and management of a specified student or trainee's trajectory of learning and educational progress during a clinical training period and/or series of periods. Every student and trainee must have a named educational supervisor.
8. The educational supervisor's role is to help the student or trainee to plan their training and achieve agreed learning outcomes. S/he is responsible for the educational agreement and for bringing together all relevant evidence to form a summative Judgement at the end of the clinical training period and/or series of periods.
9. Some training schemes appoint an educational supervisor for each training period. The roles of clinical and educational supervisor may then be merged.

[http://www.gmcuk.org/9\\_\\_\\_Annex\\_D\\_\\_\\_Progress\\_report\\_on\\_Approval\\_of\\_Trainesr\\_Task\\_\\_\\_Finish\\_Group\\_41054031.pdf](http://www.gmcuk.org/9___Annex_D___Progress_report_on_Approval_of_Trainesr_Task___Finish_Group_41054031.pdf)

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