

# Information for Trainers

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## **Who manages Training?**

There is a clear structure of training in post-graduate medical education which is delivered locally by postgraduate deans.

The training programme at local level is managed by the Training Programme Director (TPD), appointed by the local Deanery/Local Education and Training Board (LETB) through open competition.

An educational supervisor is allocated to each trainee within the specialty training programme. Although the educational supervisor takes the leading role in the trainee's development, the process is very much a team effort.

Trainees themselves have the prime responsibility for their learning; this reflects the importance of developing lifelong learning skills as the basis of ongoing fitness to practice. The explicit learning outcomes of the CSRH curriculum and logbook competences enhance accountability and support trainees as learners capable of assessing their own progress. Self-managed learning is supported by the inclusion in the curriculum of learning resources, not only placing responsibility for learning on the trainee but also supporting the means for achieving it.

## **Role of the Faculty of Sexual and Reproductive Healthcare**

FSRH supports all education, training and assessment requirements for the requirements of the specialty training in CSRH. A Specialty Advisory Committee (SAC) of the FSRH is in place to deal with all issues that arise from training in CSRH.

## **The Training Programme Director, Educational and Clinical Supervisors**

Their roles are defined in the "Gold Guide" sections 4.12 to 4.23.

<https://specialtytraining.hee.nhs.uk/news/the-gold-guide/>

In some CSRH training programmes the TPD will also be the Educational Supervisor *and* clinical supervisor.

## **Training Programme Director**

TPDs are responsible for designing and maintaining fit for purpose educational experiences for trainees, including a range of CSRH community and hospital posts linked with programmes of seminars and courses matched to the needs of learners and the FSRH curriculum. TPDs work with a team of trainers with specific responsibility for the progress of one or more trainees. Trainers are accountable to the TPD.

Gold Guide on the role of the TPD:

4.13 TPDs have responsibility for managing all specialty training programmes. They should:

- participate in the local arrangements developed by the Postgraduate Dean to support the management of the specialty training programme(s), work with the Specialty Advisory Committee (SAC) to ensure that programmes deliver the specialty curriculum and enable trainees to gain the relevant competences, knowledge, skills, attitudes and experience
- take into account the collective needs of the trainees in the programme when planning individual programmes
- provide support for clinical and educational supervisors within the programme
- contribute to the annual assessment outcome process (ARCP) in the specialty
- help the Postgraduate Dean manage trainees who are running into difficulties by supporting educational supervisors in their assessments and in identifying remedial placements where required
- ensure, with the help of administrative support, that employers are normally notified at least three months in advance of the name and relevant details of the trainees who will be placed with them. From time to time, however, it might be necessary for TPDs to recommend that trainees be moved at shorter notice.

4.14 TPDs also have a career management role. They will need to:

- ensure that there is a policy for careers management which covers the needs of all trainees in their specialty programmes and posts
- have career management skills (or be able to provide access to them)
- play a part in marketing the specialty, where there is a need to do so, to attract appropriate candidates e.g. coordinating taster sessions during foundation training, career fair representation.

### **Educational and Clinical Supervisor in CSRH**

Named educational and clinical supervisors (“trainers”) are required to be recognised and/or approved in line with General Medical Council (GMC) guidance on the Role of the Trainer and the implementation plan.

<http://www.gmc-uk.org/education/10264.asp>

Deaneries/LETBs and the FSRH provide training and guidance for trainers in their training roles.

Each CSRH trainee has a nominated CSRH **Educational Supervisor** for their entire training programme. The Educational Supervisor must be a consultant or senior SAS doctor within Sexual & Reproductive Health. FSRH keeps a record of the Educational Supervisor for each trainee. The Educational Supervisor will delegate day-to-day supervision to named **Clinical Supervisors** (e.g. colleagues in O&G, GUM, Public Health etc.) in many placements and for many modules of the CSRH

training programme. Appointment of Clinical Supervisors is at the discretion of the Educational Supervisor and/or TPD and does not need to involve FSRH in a formal approval process.

The Educational Supervisor retains ultimate responsibility for trainee's educational agreement and for monitoring progress and must be in regular contact with the trainee. There should be a structured review meeting between the Educational Supervisor and the trainee at least every four months.

The Educational Supervisor should complete the Induction/Appraisal forms and the Annual Assessment Review Forms for the ARCP panel meeting.

Although the Educational Supervisor may delegate assessment of competence to other named Clinical Supervisors, it is good practice for the Educational Supervisor to review the trainee's assessments undertaken by other (Clinical) Supervisors, and counter sign them. It is *a requirement* for the Educational Supervisor to counter sign the following: every obligatory assessment (such as those that confirm competence or confirm continuing competence thereafter); and any completion of an entire module within the trainee's e-portfolio.

CSRH trainers oversee the day-to-day work of the trainee during his or her posts in the community or in hospital settings. The trainer is expected to hold feedback meetings with the trainee on a regular basis. Trainers are the trainee's initial point of contact in issues relating to the training opportunities, progress and resources. Trainers are responsible for maintaining the learning environment within their training center to national standards of quality, which are defined by the local Deanery/LETB and quality assured by the GMC.

Trainers are also responsible for the ongoing assessment of the trainee through workplace-based assessments (WPBAs). It is through this process that curriculum coverage will be monitored and gaps identified.

Gold Guide on the role of the Educational supervisor:

4.22 An educational supervisor is a trainer who is selected and appropriately trained to be responsible for the overall supervision and management of a specified trainee's educational progress during a training placement or series of placements. The Educational Supervisor is responsible for the trainee's Educational Agreement.

Gold Guide on the role of the Clinical supervisor:

4.23 Each trainee should have a named clinical supervisor for each placement. A clinical supervisor is a trainer who is selected and appropriately trained to be responsible for overseeing a specified trainee's clinical work and providing constructive feedback during a training placement. (Some training schemes appoint an Educational Supervisor for each placement. The roles of Clinical and Educational Supervisor may then be merged.)

### **Patient safety**

Deciding when it is appropriate to let the trainee see patients without direct supervision is a matter of judgement for the trainer. The decision will be helped by direct observations. Often these

observations will be documented using WPBA tools. The formative use of the workplace assessments will allow more objective exchanges between trainee and trainer, which should provide high-quality feedback, helpful to both confident and under-confident trainees. Patient safety is a key issue in medical training and should never be compromised by a training need. Trainees and trainers should at all times be aware of their responsibilities for the safety of patients in their care particularly the special context of care surrounding a planned training encounter.