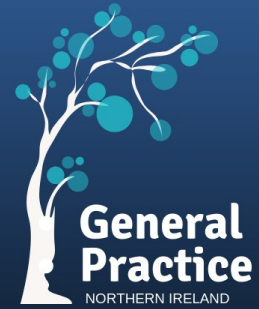


Northern Ireland

General Practice Specialty Training



Clinical Supervisor Guidance

Version 1 (2021)

Produced by GP Specialty Training Team

Introduction

There are over 300 GP trainees currently in the NI GP training programme. Many of them are working in Trusts with Clinical Supervision being provided by GMC approved Supervisors. This leaflet is to provide some information to Trust Clinical Supervisors when they are supervising GP trainees.

Please feel free at any time to contact the GP Department in NIMDTA if you have any queries. Contact details are provided at the back of this leaflet.

Curriculum Mapping for Specialties

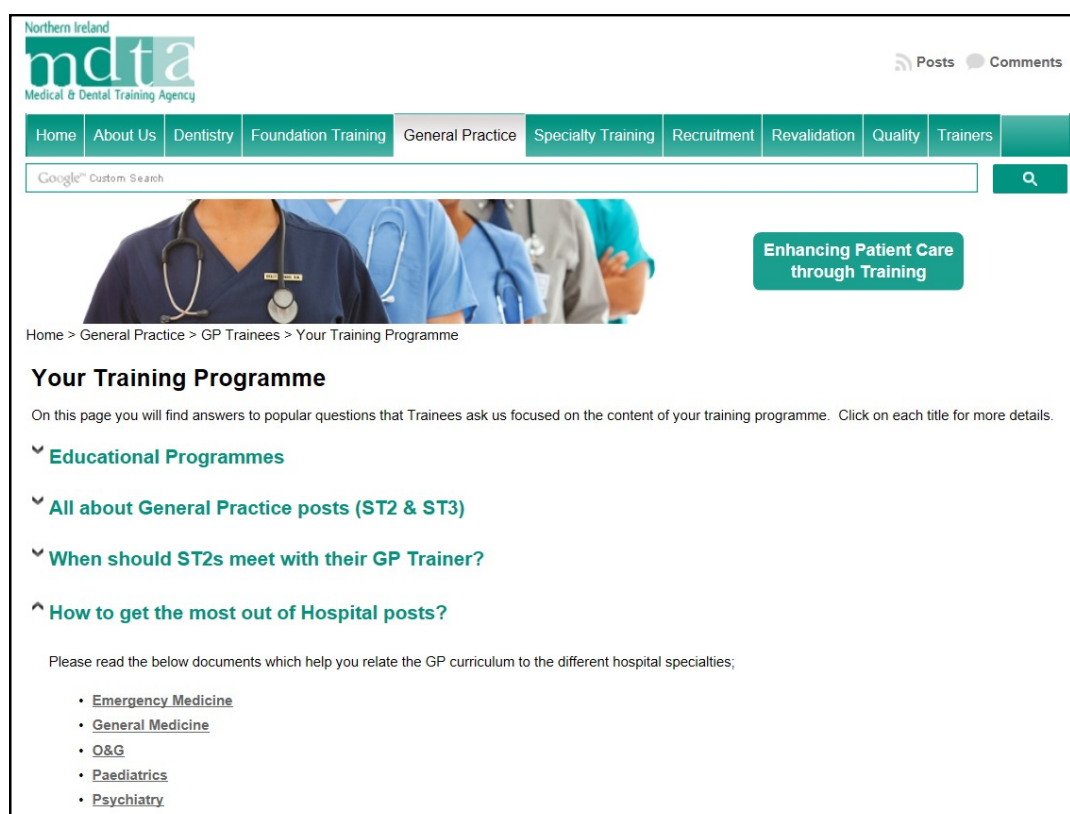
To help identify learning needs in relation to the GP Curriculum, the GPStR should complete the self assessment rating scale tool.

This should be completed before the initial meeting of the Trainee with their Clinical Supervisor. It can then be used to help identify areas that require development. In this meeting an educational plan for the post can be drawn up that identifies how these learning needs can be addressed and how and when they will be assessed.

Please note that it may not be possible to cover all of the GP Curriculum learning objectives within this post. The GP Educational Supervisor will be able to assist the Trainees in identifying ways to cover these potential gaps as part of the overall GP Specialty Programme.

Further information is available on the NIMDTA website:

www.nimmdta.gov.uk/general-practice/gp-specialty-trainees/gp-train-prog/



The screenshot shows the NIMDTA website interface. At the top left is the logo for Northern Ireland Medical & Dental Training Agency (mdta). To the right are links for 'Posts' and 'Comments'. Below the logo is a navigation menu with tabs for 'Home', 'About Us', 'Dentistry', 'Foundation Training', 'General Practice', 'Specialty Training', 'Recruitment', 'Revalidation', 'Quality', and 'Trainers'. A search bar with 'Google Custom Search' is located below the menu. The main content area features a banner image of medical professionals in scrubs with a stethoscope, and a green button that reads 'Enhancing Patient Care through Training'. Below the banner is a breadcrumb trail: 'Home > General Practice > GP Trainees > Your Training Programme'. The section title is 'Your Training Programme'. A sub-header states: 'On this page you will find answers to popular questions that Trainees ask us focused on the content of your training programme. Click on each title for more details.' There are four expandable sections: 'Educational Programmes', 'All about General Practice posts (ST2 & ST3)', 'When should ST2s meet with their GP Trainer?', and 'How to get the most out of Hospital posts?'. Below these sections, a text block says 'Please read the below documents which help you relate the GP curriculum to the different hospital specialties:' followed by a bulleted list of specialties: 'Emergency Medicine', 'General Medicine', 'O&G', 'Paediatrics', and 'Psychiatry'.

Clinical Supervisor Report (CSR)

The Clinical Supervisors Report (CSR) is a short, structured report from the Clinical Supervisor in each Hospital post. The CSR is designed to be easy to focussed and easy to complete.

Assessment of competence through the CSR

The CSR brings together the 13 capabilities from the WPBA framework in seven 'clusters': professionalism, communication, working with colleague in teams, clinical assessment, management of patients, clinical record keeping and context of care.

Competence rating scale

The rating scale assumes that all trainees 'need further development' (NFD) and encourages assessors to make comparisons with doctors at the same stage of training. This scale proved successful in trials because it is one that secondary care doctors are used to working with. If a trainee is performing above expectations, this can be recorded and reflected in the text boxes.

Completing a CSR

The CSR will be completed by the named clinical supervisor (usually a consultant in the specialty). All sections of the CSR form need to have text entered. In particular, the 'areas to develop' box in each 'cluster' is a very important way of giving feedback to the educational supervisor and should be used for each area of competence.

The final box titled 'Level of Supervision' should be used by the clinical supervisor to provide further information, or recommendations to help the trainee or their Educational Supervisor.

Ideally, the supervisors will confer at the beginning of the attachment to plan educational objectives for the following six months and identify specific learning opportunities within the post. They should also make contact before completion of the CSR – or prior to completion if they have any concerns.

There is detailed guidance available for clinical supervisors via the RCGP website:

[CSR, iESR, ESR and PDP \(rcgp.org.uk\)](http://rcgp.org.uk)

The Clinical Supervisor Report for GP Trainees

GP trainees place great value on the Clinical Supervisor reports that they receive after each hospital placement.

They also have an Educational Supervisor's report done by their supervising GP trainer.

At present the GP reports tend to have a lot more "free-text" comments made and the trainees place great emphasis on what their trainer has written about their competences – not just the actual rating.

We would therefore ask that Supervisors add a written comment specific to each of the competences for the trainee report. The trainees will find this invaluable and it will increase their confidence and make them more aware of areas they should work on in their subsequent posts.

The comments are reviewed by all ARCP panels and are also very important in the panel decision-making process.

What to expect in the clinical supervisors report

Professionalism

Includes being respectful, diligent and self-directed in their approach to patients and others and to their own learning needs, developing resilience, making appropriate ethical decisions

Capabilities: Maintaining Performance Learning and Teaching, Ethics, Fitness to practice

Communication

Includes communication with patients, establishing patient rapport, managing challenging consultations, third-party consulting, the use of interpreters

Capability: Communication and consultation skills

Working with colleagues and in teams

Includes working effectively with others, sharing information with colleagues, leadership, management and team-working skills

Capabilities: Working with colleagues and in teams, Organisation, Management and Leadership

Clinical Assessment

Includes patient history, Clinical Examination and Procedural Skills (CEPS), choosing investigations, and making an appropriate diagnosis or decision. Please also comment on clinical skills that have been observed

Capabilities: Data Gathering, CEPS, Making a diagnosis / decisions

Management of Patients

Includes recognition and appropriate management of medical conditions encountered in the role, prescribing safely, and taking account of co-morbidity, poly-pharmacy. Managing uncertainty & risk

Capabilities: Clinical management, Medical complexity

Clinical record keeping

Includes showing an appropriate use of administration systems, effective and appropriate record-keeping and use of IT for the benefit of patient care

Capabilities: Organisation, Management and Leadership

Context of Care

Includes seeking to understand and support patients through an appreciation of the interplay between their disease and their lives and considering local pathways, formularies and resources

Capabilities: Holistic care, Community orientation

Level of Supervision

In this post, compared to the expected level for a GP trainee at this stage of training, this trainee currently (please tick one of the following)

Level of Supervision	Requires expected levels of supervision in their clinical role
Comment	
Does the trainee need to have any particular supervision in their next post?	No
Details	

Trainee - Time out of Training

Unfortunately, on occasion, trainees become unwell and are absent from work. General Practice is the only specialty training programme which has a specified minimum time. This is set in statute. Trainees must complete this minimum time in order to gain CCT. They can only be absent from training for a period of 2 weeks cumulatively in any training year, over and above annual leave., otherwise there training time gets recalculated.

It is therefore essential that Clinical Supervisors advise us of any sickness absence. Likewise, if there is any adjustment to working hours e.g. not doing nights, reduced hours, we also need to know. Any such amendment to participation in a rota will be reviewed at the next ARCP panel and a decision about additional training time made.

Should the trainee be referred to Occupational Health we would also need to know as there are support services available in NIMDTA for trainees who are facing challenges in their training. We should also be informed if any reasonable adjustments have been made for the trainee in the workplace.

Finally, if you have any queries or concerns about a trainee feel free to contact the GP Department at any time for advice.—gpspecialtytraining.nimdto@hscni.net

Concerns

If you have concerns, or are unable to grade please elaborate further. Do you have any recommendations that might help the learner or the Educational Supervisor?

Revalidation: Details of Concerns/Investigations

Are you aware if this trainee has been involved in any conduct, capability or Serious Untoward Incidents/ Significant Event Investigation or named in any complaint?

No

If yes, are you aware if it has/these have been resolved satisfactorily with no unresolved concerns about this trainee's fitness to practise or conduct?



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