

POLICY DOCUMENT

# **Achieving and Maintaining Recognition**

**(Trainers based in Secondary Care in the Northern Ireland Deanery)**

2021 (Version 2.17)  
FDG>QMG

## Policy Review Schedule

Date first Approved by QMG: August 2016

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Policy Owner: Senior Education Manager

### Amendment Overview

Version	Date	Pages	Comments	Actioned
2016 – 1.1	05.08.16	11	Created	R Tubman
2015 – 1.2	03.10.16	11	Amended	D Hughes
2016 – 1.3	20.10.16	11	Incorporation of STATUS document	D Hughes
2016- 1.4	25.10.16	22	Addition of appendices	D Hughes
2016 – 1.5	08.11.16	23	Further revising for FDG review	D Hughes
2016 – 1.6	15.12.16	20	Further revisions agreed at FDG	D Hughes
2016 – 1.7	01.02.17	20	Further revisions following workshop	D Hughes
2016 – 1.8	01.02.17	20	Achieving and Maintaining Recognition policy replacing all previous versions	D Hughes
2016 – 1.9	13.02.17	8	Change of Course Titles	B Woods
2016 – 1.10	23.05.17	20	Incorporated section on Locum Consultant	D Hughes
2016 – 1.11	01.06.17	21	Revised cover page. Clarification on timeframe for new trainers to complete training requirements.	D Hughes
2017 – 2.1	13.09.17	21	Reviewed in conjunction with Associate Dean following discussion at FDG.	D Hughes
2017 – 2.2	17.10.17	21	Further revisions following feedback from QMG.	D Hughes
2017 – 2.3	07.11.17	22	Revisions following QUB meeting.	D Hughes
2017 – 2.4	13.11.17	22	Agreed at QMG with minor changes	D Hughes
2017 – 2.5	22.12.17	26	LEP replacing Trust, replacing all previous versions	M Gregge
2018 – 2.6	08.11.18	26	Reviewed for discussion at Faculty Development Group	S McErlean
2018 – 2.7	08.11.18	26	Revised following discussion at FDG	D Hughes
2018 – 2.8-2.9	29.11.18	Various	Revised following comments from PG Medical Dean	S McErlean
2019 – 2.10	28.1.19	24	Allocation for Educational & Clinical Supervisors	M Gregge
2019 – 2.11	05.03.19	Various	Amendments following FDG 01.03.19	B Woods
2019 – 2.12	10.09.19	Various	Amendments following FDG 13.09.19	B Woods
2020 – 2.13	12.03.20	6	Revised Role of the Agency. Trainee Support guidelines updated.	B Woods
2020 -2.14	12.08.20	6	Amendment to the Trainee Support Guidelines	M Hamill
2021 – 2.15	16.02.21	11	Revised following FDG on the 26.02.21	M Hamill
2021 – 2.16	10.02.21	10	Amended to remove the four hours online maintaining recognition section	M Hamill
2021 – 2.17	21.05.21	6, 22-28	Foundation Educational Supervisor Selection Process included	B Woods

2021 – 2.17	31.08.21	7, 11,12	Amendments following FDG 27.08.2021	A Ciepiewska
2021 – 2.17	31.08.21	31,32	Annual Review of Educational Role updated	A Ciepiewska

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## **Role of the Northern Ireland Medical and Dental Training Agency**

The Northern Ireland Medical and Dental Training Agency (NIMDTA) is an Arm's Length Body sponsored by the Department of Health (DoH) to train postgraduate medical and dental professionals for Northern Ireland. NIMDTA also seeks to serve the government, public and patients of Northern Ireland by providing specialist advice, listening to local needs and having the agility to respond to regional and national requirements.

NIMDTA commissions, promotes and oversees postgraduate medical and dental education and training throughout Northern Ireland. NIMDTA endeavours to attract and appoint individuals of the highest calibre to recognised training posts and programmes. NIMDTA encourages doctors to train and remain in NI so that Health and Social Care (HSC) has a highly competent medical and dental workforce with the essential skills to meet the changing health needs of its population.

NIMDTA organises and delivers the recruitment, selection and allocation of doctors and dentists to foundation, core and specialty training programmes. NIMDTA supports trainees with the aim of maximising their potential to successfully progress, complete training and be appointed to permanent posts in NI. NIMDTA manages the quality of postgraduate medical and dental education in HSC Trusts and in general medical and dental practices through learning and development agreements, the receipt of reports, regular meetings, trainee surveys and inspection visits. It works in close partnership with local education providers to ensure that both the training and supervision of trainees support the delivery of high quality safe patient care. NIMDTA provides trainees with a wide range of opportunities to gain experience in leadership, quality improvement, research and teaching.

NIMDTA recognises and trains clinical and educational supervisors and selects, appoints, trains and develops educational leaders for foundation, core and specialty medical and dental training programmes throughout NI.

NIMDTA is accountable to the General Medical Council (GMC) for ensuring that the standards set by the GMC for medical training, educational structures and processes are achieved. Revalidation is the process by which the GMC confirms that doctors are up to date and fit to practice. The Postgraduate Medical Dean, as the 'Responsible Officer' for doctors in training, has a statutory role in making recommendations to the GMC to support the revalidation of trainees. NIMDTA works to the standards in the COPDEND framework for the Quality Development of postgraduate Dental training in the UK.

NIMDTA enhances the standard and safety of patient care through the organisation and delivery of relevant and valued career development for general medical and dental practitioners and dental care professionals. It also supports the career development of general medical practitioners and the requirements for revalidation through the management and delivery of GP appraisal.

NIMDTA carries out these roles on behalf of the DoH by focussing on the needs of people (population, trainees, trainers and NIMDTA staff), in partnership with key stakeholders and by paying attention to HSC Values - openness and honesty, compassion, excellence and working together.

## 1.0 Introduction

In August 2012, the GMC launched their Implementation Plan for Recognising and Approving Trainers. The aim of this plan was to improve the quality of postgraduate medical education and training and to enhance the training environment through better teaching, feedback, assessment and support for educational progress.

In postgraduate medical education, the GMC has defined a trainer as being a Named Educational Supervisor or a Named Clinical Supervisor. From 31 July 2016 those currently occupying these roles are required to be fully recognised as a trainer.

A **Clinical Supervisor** is defined as a trainer who is responsible for overseeing a specified trainee's clinical work throughout their placement in a clinical environment and who is appropriately trained to do so. Their role is to lead on providing day-to-day supervision of trainees, reviewing a trainee's progress and providing constructive feedback.

An **Educational Supervisor** is defined as a trainer who is selected and appropriately trained to be responsible for the overall supervision and management of a trainee's trajectory of learning and educational progress during a placement or series of placements. Every trainee must have a named Educational Supervisor. The Educational Supervisor helps the trainee to plan their training and achieve agreed learning outcomes. He or she is responsible for the educational agreement and for bringing together all the relevant evidence to form a summative judgement at the end of the placement or series of placements.

A **supervising consultant** or supervising clinician does not fulfil a named role but will provide supervision to doctors in training during their sessions in clinical work.

This policy applies to trainers based in secondary care only. NIMDTA's policy on becoming a GP trainer is available on the NIMDTA website under the General Practice section [Becoming a GP Trainer](#).

## 2.0 Achieving Recognition as a Trainer

In Northern Ireland there are six elements that must be delivered to achieve the status of being a Recognised Trainer and these are essential components of **STATUS**:

- Selection for the role
- Training for the role
- Annual educational review
- Transfer of data
- Underperformance management
- Support for role

## 2.1 Selection for the Role

From August 2016, all new Clinical and Educational Supervisors must be selected for their role based on their capability. The selection process requires potential supervisors to demonstrate a commitment to teaching and learning, an ability to assess and appraise trainees, possess teamwork and leadership skills and exhibit the personal and professional attributes that are required to perform well in the role. Sample job descriptions for each role are appended.

Recruitment and Selection of Recognised Trainers may be carried out following completion and assessment of a capability-based application form as follows:

1. Expression of interest in the role
2. Review of application for sole candidate or interview if more than one candidate.

A template for a capability-based application form is provided in Appendix 1.

Appointments are co-ordinated via the Director of Medical Education (DME) in each Local Education Provider (LEP).

### Foundation Educational Supervisors

Foundation Programme Educational Supervisors are selected and appointed jointly and are dually accountable to the DME at Trust level and the NI Foundation School Director at NIMDTA. These posts are remunerated by NIMDTA.

Applications for posts of Foundation Programme Educational Supervisor (FES) are made by completing a capability-based application form set against the domains in 'Promoting Excellence'.

The application form should be completed anonymously and submitted to the DME at Trust level who will score the form and send to NIMDTA to be scored independently by the Director of the NI Foundation School (or Deputy). Appointments will be made on the basis of the candidate(s) with the highest combined score.

A template for a capability-based application form is provided in Appendix 3.

## 2.2 Training for the Role

All Clinical and Educational Supervisors must be fully trained for their role. This training is provided by NIMDTA and LEPs and is defined as:

Supervisory Skills

Teaching the Teacher

Anti-discrimination (Equality and Diversity Training)

Trainee Support

Unique to Specialty / Programme (training unique to specialty – curriculum, WPBAs, supervisor's reports, ARCP decision aids)

Equivalent courses may be offered by Royal Colleges or other providers and are listed on the NIMDTA website. ([Equivalent Courses for Achieving Recognition](#))

Trainers will receive a Recognition of Trainers Certificate when they have completed three recognised half-day generic skills courses (Supervisory Skills, Teaching the Teacher and Trainee Support), Equality and Diversity / anti-discrimination training such as the online module ([www.diversity.hscni.net](http://www.diversity.hscni.net)) or as provided with NIMDTA half day R&S training, and appropriate training unique to the specialty / programme delivered by the NIMDTA Specialty School / Specialty Training Programme, or as defined by the Foundation School or NIMDTA's GP Department.

There is no requirement for Trainers who are new to this region to retrain in the above areas as GMC Trainer status is recognised in all four nations. It is recommended however for Recognised Trainers who are new to this region to attend a NIMDTA delivered Trainee Support session.

All Trainers should maintain a personal Trainer Education Portfolio which should contain supporting information including relevant CPD, to inform annual review of their educational role, as part of their annual whole practice appraisal and allow 5-yearly Recognition of Trainer recertification (see section 4.0).

## 2.3 Annual Educational Review

Trainers are required to undergo an annual educational review by the DME / deputy in the LEP or to have their educational role specifically considered within their annual appraisal in the LEP. This annual educational review or appraisal should:

- a) review how they have kept their knowledge and skills in postgraduate medical education and training up to date, including hours completed towards maintaining recognition status as a GMC recognised trainer
- b) review how they have applied that knowledge to their educational role (training, supervising, teaching and supporting trainees),
- c) review how they have worked with colleagues and other organisations to support education
- d) consider a Personal Development Plan for their postgraduate medical education and training role

Each LEP is required to train **all** Appraisers in the requirements of the role of a Recognised Trainer. Appraisers should consider supporting information from the four areas as outlined above; a sample Annual Educational Review proforma is appended (Appendix 5).

Following educational review there should be a record of agreed actions and a Recognised Trainer personal educational development plan indicating key educational objectives and actions, with an agreed timescale.

LEPs should ensure compliance with annual educational review / appraisal and evidence of engagement and delivery of supervision and training.

If an annual educational review / appraisal is not completed then the DME or nominated representative should discuss the individual Recognised Trainer's job plan with the service lead and the appropriateness of them continuing in this role.

Recognised Trainers are required to sign an agreement with the LEP Educational Leader (Medical Director, DME or Deputy) about their role and associated responsibilities (*Appendix 4 - Recognised Trainer's Agreement*). This process commenced in 2017 with Recognised Trainers providing the signed agreement at their appraisal in 2017 for work carried out in calendar year 2016.

## 2.4 Transfer of Data

The DMEs and their teams require the co-operation of Recognised Trainers to maintain an accurate database of the number and type(s) of trainees each Recognised Trainer is supervising and job planning allocation. Each LEP needs to transfer this data to NIMDTA twice annually to enable NIMDTA to undertake its role in the Recognition of Trainers process on behalf of the GMC.

## 2.5 Underperformance Management

Concerns may be brought to the attention of NIMDTA that trainees are not receiving adequate clinical or educational supervision, complaints from trainees that are not being listened to or addressed, or that supervisors' reports are not being completed adequately. Adverse feedback on Trainer performance may come from a variety of sources and there may be a range of reasons for underperformance including:

- Personal and health issues
- Inadequate training for the role
- Inadequate time within job plan to supervise or train (service pressures)
- Environment not supportive to supervision and training
- Lack of support from colleagues
- Trainer non-engagement in training
- Non-engagement by Trainer or Appraiser in Annual Educational Review / appraisal

These concerns need to be assessed and if validated the underperformance of Recognised Trainers needs to be addressed. Underperformance issues should be addressed first by the employing LEP but may require discussion with NIMDTA. This might involve additional training or support from the Education Department in the LEP or from NIMDTA.

If Trainer underperformance is not resolved satisfactorily then consideration should be given to the temporary suspension of Trainer Recognition status and temporary withholding of any payment associated with the Recognised Trainer role until the matter is resolved satisfactorily. This may involve the re-allocation of relevant trainee(s) to another Recognised Trainer or re-allocation of trainee(s) to another training unit / LEP.

If there is persistent underperformance from a Recognised Trainer despite additional training and support, it will not be possible for them to continue in the role. An appeal mechanism will be available to Recognised Trainers within the LEP.

Further information can be found in the [NACT UK Guidance 'Supporting Educators'](#).



## 2.6 Support for the Role

Trainers carry out a vital role in ensuring safe and effective care through good clinical supervision and in supporting and monitoring educational progress through effective educational supervision. It is the responsibility of LEPs to support the professional development of Recognised Trainers and to ensure that training responsibilities are reflected in job plans.

The GMC requires Education Organisers to ensure that Recognised Trainers have enough time in their job plans to perform their educational responsibilities so that they can carry out their role in a way that promotes safe and effective care and a positive learning experience. It is therefore necessary that the full scope of a trainer's responsibilities for education (undergraduate and postgraduate) is considered before a job plan for a Trainer is agreed.

From August 2016, NIMDTA has provided top-up funding to LEPs to facilitate one hour for postgraduate education / supervision activity per trainee per week. Where a trainee has both a clinical and an Educational Supervisor, the programmed activity (PA) allocation is split evenly between the 2 roles.

NIMDTA recommends that a Trainer's commitment to education should normally not exceed 2 PAs per week in order that:

1. opportunities for trainees to receive supervision from a greater range of senior doctors would be provided
2. opportunities would be provided for more senior doctors to be actively involved in postgraduate training as this would increase the pool of individuals who could develop medical education as a significant component of their career
3. the risk of under delivery of educational responsibility due to over commitment would be minimised
4. the risk of over dependence of a unit on one trainer for clinical and educational supervision would be reduced as over dependence would put educational delivery in that unit at significant risk if the Trainer was absent for a prolonged period, resigned or retired.

Recognised Trainers already delivering 2 PAs in a postgraduate setting and wishing to take on additional sessions for undergraduate teaching are required to discuss this further with the LEP Director of Medical Education and QUB Sub-Dean. Similarly, if a Recognised Trainer for QUB undergraduate teaching wishes to undertake a role as a Recognised Trainer for postgraduate training, this would also require specific discussion with the QUB sub-Dean and the LEP Director of Medical Education.

For Recognised Trainers whose status has lapsed, there will be opportunities for re-training and re-certification. Maintaining recognition requirements, as indicated under 4.2, will apply to those wishing those whose status has lapsed by less than one year. If the time elapsed since recognition expired is greater than one year, the individual will be required to complete achieving recognition requirements.

### Less Than Full Time (LTFT) Trainees

Remuneration for supervision of trainees working Less Than Full Time equates to remuneration for the supervision of full time trainees.

### **3.0 Locum Consultants**

LEP appointed locum Consultants may take on the role of Clinical Supervisor provided:

1. they are a Recognised Trainer
2. they have the CCT or CESR for the relevant specialty
3. they will be in the clinical post for longer than the duration of the placement of the trainee
4. they are committed to the role and this is reflected in their job plan

It is not appropriate for a locum Consultant to take on the role of Educational Supervisor.

## **4.0 Maintaining Recognition as a Trainer in Northern Ireland**

### **4.1 Duration of Trainer Role**

All Recognised Trainers will be appointed for a 5 year period with the option to continue in this role subject to annual educational review / appraisal and maintaining recognition. Consideration should be given to ensuring all eligible doctors within the unit are provided with the opportunity to apply for the role of being a Recognised Trainer.

If a Trainer wishes to step down from their role as Clinical Supervisor or Educational Supervisor or change Trust, they should discuss this six months in advance with their employing LEP and NIMDTA ([recognised.trainers@hscni.net](mailto:recognised.trainers@hscni.net)). Arrangements should be made for the re-allocation of affected trainee(s) to another Clinical Supervisor or Educational Supervisor within the LEP after agreement and within a specified timescale.

### **4.2 Training Requirements to Maintain Recognition**

All Recognised Trainers are appointed initially for a 5 year term with the option to continue in this role subject to satisfactory annual educational review as part of their appraisal.

This review will enable Trainers to demonstrate that they are remaining up to date for the role to maintain their recognition.

To maintain recognition, it is expected that Recognised Trainers complete 20 hours of education-related learning and development over the five year period. Ten hours of this education should be gained from NIMDTA events or LEP / Trust delivered NIMDTA-endorsed events.

The remaining balance of the 20 hours may include medical educational events run by other organisations or delivered by on line learning. Examples of other organisations which deliver relevant medical educational events would include College / Faculty / GMC / NHS Resolution.

Examples of educational learning and development activities:

### **NIMDTA Maintaining Recognition courses**

- NIMDTA delivered courses such as Advanced Trainee Support, Advanced PowerPoint Skills, Conflict Resolution in Healthcare, Emotional Intelligence, Implementing Change, Preventing Bias and Undermining, Supervision of Trainees' Quality Improvement Projects, Supporting Excelling Trainees and Coaching for Careers, Supporting International Medical Graduates, and Supporting Trainees through Mentoring.
- Equality and Diversity training (this can be completed as an online module, within Trusts or through NIMDTA's half day R&S / E&D training). This training needs to be repeated every three years for anyone involved in recruitment processes or ARCPs.
- Programme Specific training – unique to programme (Foundation, GP or Specialty); can include areas such as curriculum, WPBAs, supervisors' reports, ARCP decision aids etc. (e.g. BEST Course).

### **Attendance at other NIMDTA Faculty Development events**

- Achieving Recognition Day
- ARCP Training
- Clinical Education Day
- Educational Excellence Day
- Lead Educator Forum
- Maintaining Recognition Day
- NI Simulation and Human Factors Conference
- Professional Support Day
- Research for Clinicians Day
- Trainer Forum

### **Equivalent College courses**

Acquisition of university level qualifications in clinical education can also contribute to recognition such as a Postgraduate Certificate, Diploma, or Masters level qualifications.

### **Re-attendance at courses required to become a Recognised Trainer, which are provided by NIMDTA or employing LEP:**

- Supervisory Skills
- Teaching the Teacher
- Trainee Support
- Equality and Diversity training
- Programme Specific training – unique to programme (Foundation, GP or Specialty)

As this does not fully meet the 20 hours required, recognition status will last 3 rather than 5 years. Trainers have the option to complete the remaining hours within the next 2 years of the 5 year cycle.

If a GMC recognised trainer has moved from another United Kingdom deanery their CPD contribution will be acknowledged. This will be reviewed for appropriateness and may count in lieu of completing the 10 hours of NIMDTA endorsed events. They will be required to complete a NIMDTA trainee support course to ensure they are aware of the local resources.

As indicated under section 2.3, Recognised Trainers are required to have an annual review of their educational role, either separately or as part of their annual whole practice appraisal.

Recognised Trainers are also expected to contribute to formal teaching within their LEP or as part of the training programme and participate in activities which support medical education and training such as recruitment and selection and ARCP panels.

All Recognised Trainers who are partaking in ARCP Panels and ARCP appeals can be accredited with three hours educational related learning and development. Attendance at training committees accredited with three hours educational related learning and development over a five year cycle.

## **5.0 Trainees towards the End of Training**

Trainees who have completed the following will be issued with a NIMDTA Recognition of Trainers Certificate following achievement of CCT:

- iQuest training modules in Teaching the Teacher, Trainee Support and Supervisory Skills, **or**
- a recognised University level Certificate, Diploma or Masters qualification in Clinical or Healthcare Education,

**and**

- appropriate E&D training within 3 years of CCT

It is not expected that newly appointed Consultants would undertake a role as Clinical Supervisor or Educational Supervisor until they have had the opportunity to complete a period of shadowing, unless there are exceptional circumstances.

## **6.0 NIMDTA Recognised Trainer Database Management**

The Faculty Development Education Management Team is responsible for the management of the NIMDTA Recognised Trainer Database, which includes the following:

- Identifying and recognising new Trainers and maintaining a database that supports notification to the GMC, identifying Trainers within individual LEP, identifying Trainers within individual Schools and Programmes
- Identifying and recognising Trainers who have maintained their recognition
- Updating records
- Removing Recognised Trainers who have resigned from the role, retired, display persistent underperformance or have restrictions on their practice which are incompatible with the role.
- Sharing information with QUB on Recognised Trainers who also have a role in undergraduate education

This information will be collated and shared with Trusts through Microsoft SharePoint to allow real time updating of Trainer data.

The Faculty Development Education Management Team require updates from each LEP on a 6 monthly basis at the end of March and end of September to ensure an up to date database of Recognised Trainers is maintained. This information is also maintained via GMC Connect and published on the GMC's List of Registered Medical Practitioners (LRMP).

Recertification dates will be monitored and Trainers notified 12 months in advance of expiry of certification with a further reminder at six months.

## **6.1 Monitoring of Database Reporting**

NIMDTA's Quality Management processes require LEPs to provide updates on a six monthly basis.

If the requested information is not received, a reminder will be issued to the DME. A further reminder will be issued if a response has not been received within five working days from the initial reminder.

If the required information is not provided following these stages, the second stage of escalation will be that the Postgraduate Dean or Associate Dean will contact the Medical Director for a formal response. This will be documented in the QMG log and if appropriate the Education Risk Registrar.

Communication between NIMDTA and the LEP is included for discussion at each LEP-NIMDTA annual review meeting.

## **7.0 Recognised Trainer-Trainee Matching**

The LEP is responsible for ensuring that there are sufficient Recognised Trainers within each training unit. Trainee allocations are provided to each LEP via the DME who is then responsible for ensuring that each trainee is allocated a supervisor who is a Recognised Trainer. This information will be shared with NIMDTA as part of the data transfer process.

Foundation, GP and Specialty School Lead Educators (Head of School / TPD) are provided with a list of Recognised Trainers within each LEP.

The Faculty Development Team liaise with Foundation, GP and Specialty School Lead Educators and educational managers to review whether there are sufficient Trainers across sites and units reflective of posting allocations on a six monthly basis.

Posts where there is no Recognised Trainer or where there is a risk to sustainability of training due to a small number of Recognised Trainers, will be identified by LEPs, Trainees, Trainers and NIMDTA Schools. If a Trainee has been allocated to a senior doctor who is not a Recognised Trainer, DMEs are responsible for ensuring that steps are taken to address this as follows:

1. Facilitate the doctor to complete the training requirements to achieve the status of being a Recognised Trainer within three months
2. Re-allocate the trainee to a Recognised Trainer.

If this cannot be facilitated it may be necessary to move the trainee to a different LEP where this can be provided.

## **8.0 Trainer Engagement**

Recognised Trainers are part of a collegiate group within NIMDTA, and supported in their roles as Named Clinical or Educational Supervisors by their employing LEP and NIMDTA. They are encouraged and enabled to maintain and develop their knowledge and skills in the areas required to maintain recognition.

NIMDTA has developed a Recognised Trainer Forum with representation from each LEP to provide the opportunity for sharing of good practice and collaborative working.

NIMDTA engages with Recognised Trainers on a regular basis and this contact includes:

- Recognised Trainer Newsletters 4 times per year
- Responding to any enquiries regarding requirements for recognition
- Reminder of the need for annual educational review / appraisal
- Timely reminders of next recertification date
- Notification of courses and other educational activities via NIMDTA website, DME office and Recognised Trainer Newsletter
- Signposting to the Recognised Trainer section on NIMDTA website
- Sharing good practice across programmes via the Trainer Newsletter and Trainer Forum
- Highlighting excellence in training.

Recognised Trainers also have the opportunity to attend NIMDTA educational events and meetings such as Clinical Education Day and Professional Support Day.

## **9.0 Potential Concerns Involving a Recognised Trainer**

If potential Fitness to Practise concerns are raised in a LEP in relation to a Recognised Trainer, the Medical Director will notify the Postgraduate Dean and discuss further to establish if the concern would impact their ability to continue in their role as a Recognised Trainer.

If a serious concern about the Recognised Trainer has been raised, it may be appropriate for the Recognised Trainer to temporarily stand aside without prejudice from their role while an investigation is conducted by the LEP. Trainees assigned to that Recognised Trainer should be re-assigned.

If a Recognised Trainer is the subject of a GMC investigation, the Postgraduate Dean will be contacted by the GMC as part of the investigation process. If a serious concern about a Recognised Trainer is being investigated by the GMC, the Postgraduate Dean will discuss with the Medical Director of the LEP whether it would be appropriate for the Recognised Trainer to temporarily step aside from their role without

prejudice while the investigation is being carried out by the GMC and for trainees assigned to that Recognised Trainer to be re-assigned.

Concerns about Trainers whose fitness to practise may be impaired due to health, performance or conduct are also reviewed at NIMDTA's Doctor and Dentist Review Group.

Recognised Trainers are required to inform their LEP Director of Medical Education / Medical Director's Office if there are any investigations, allegations or potential concerns raised about them.



## Appendices

### Appendix 1 Capability Based Application Form



Application for post of: **Named Clinical or Educational Supervisor**

Personal Details	
Title:	
Forename(s):	
Surname:	
Email Address:	
GMC Number / GDC Number	
Specialty:	
Current Role	

<b>Eligibility Criteria:</b>
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#### Trainer Recognition

<b>Date of Recognition</b>	
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Please provide dates of the relevant training below if you have not been recognised as a Trainer:

Course	Date
Teaching the Teacher	
Supervisory Skills	
Trainee Support	
Equality & Diversity	
Equivalent Courses e.g. PGCE / College Courses	

Are you under investigation or have you been subject to any investigation with the GMC or within current or any previous Trust, which could impact on your suitability for the role as a Clinical or Educational Supervisor?	YES / NO
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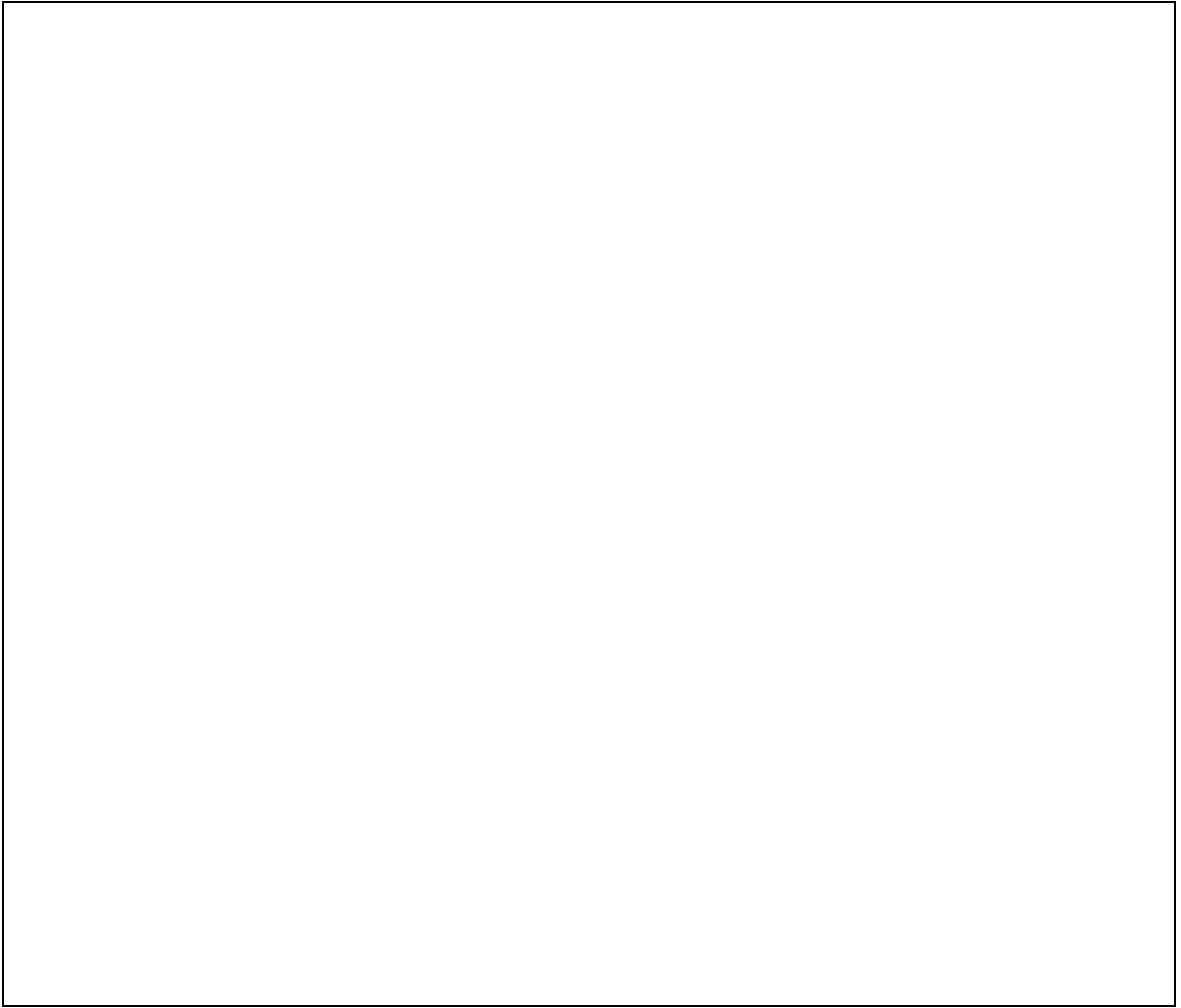
Relevant Qualifications:		
Year Obtained	Name of Qualification	Awarding Body



**Further Information:**

**Is there any other relevant information you would like to provide to support your application? Please provide details:**

- **Teaching experience**
- **Feedback from teaching**
- **Trainees in the workplace**



Referee	
Name	
Organisation	
Address	
Postcode	
Tel No	
Email	

**Declaration**

I understand and declare that the information given are complete and correct to the best of my knowledge. Any candidate found to be providing false information or to have wilfully suppressed any information will be liable to disqualification and if appointed, dismissed.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

**Return by email to:**

## Appendix 2

### Clinical Supervisor Job Description

For every placement, the doctor in training must have a named clinical supervisor. In some instances, this will be the same person as the Educational Supervisor.

A **Clinical Supervisor** is a trainer who is responsible for overseeing a specified trainee's clinical work throughout their placement in a clinical environment and who is appropriately trained to do so. Their role is to lead on providing day-to-day supervision of trainees, reviewing a trainee's progress and providing constructive feedback.

#### Responsibilities of the Clinical Supervisor

In supporting the delivery of high quality educational supervision, the clinical supervisor has a responsibility to:

1. Be involved with teaching and training the trainee in the workplace
2. Help with both professional and personal development
3. Offer a level of supervision of clinical activity appropriate to the competence and experience of the individual trainee.
4. Support the trainee through direct supervision, close supervision and regular discussions, review of cases and feedback
5. Organise induction to the clinical department (covering duties of the post, particular responsibilities, departmental meetings, senior cover, cross-specialty induction when cross-cover is required, handover arrangements, bleep policies)
6. Agree specific and realistic programme-specific learning objectives appropriate to the level of the individual trainee
7. Meet the trainee within a week of starting the placement and establish a supportive relationship
8. Provide regular review during the placement both formally and informally to ensure that the trainee is obtaining the necessary experience, included supervised experience in practical procedures and give constructive feedback on performance
9. Perform and oversee the work-based assessments detailed in the portfolio
10. Encourage trainee attendance at formal education sessions
11. Ensure a suitable timetable to allow completion of the requirements of the specific curriculum
12. Ensure that relevant information about progress and performance is made available to the Educational Supervisor to inform the end of placement appraisal and the Educational Supervisor's report
13. Inform the Educational Supervisor should the performance of any individual trainee give rise to concern

## Educational Supervisor Job Description

For every placement, the doctor in training must have a named Educational Supervisor. In some instances, this will be the same person as the clinical supervisor.

An Educational Supervisor is defined as:

A trainer who is selected and appropriately trained to be responsible for the overall supervision and management of a trainee's trajectory of learning and educational progress during a placement or series of placements. Every trainee must have a named Educational Supervisor. The Educational Supervisor helps the trainee to plan their training and achieve agreed learning outcomes. He or she is responsible for the educational agreement and for bringing together all the relevant evidence to form a summative judgement at the end of the placement or series of placements.

All Educational Supervisors should be doctors who have a clear expressed interest in the training, assessment and development of postgraduate medical trainees.

### Role of the Educational Supervisor

All trainees must have a named Educational Supervisor. An Educational Supervisor may be based in a different department and occasionally in a different organisation to the trainee.

Typically no more than 4 trainees may be supervised concurrently by an Educational Supervisor, subject to the provision of appropriate time in a job plan for the provision of educational supervision function as defined in this Agreement.

### Responsibilities of the Educational Supervisor to the Trainee

- 1) Ensure the trainee receives appropriate training and experience
  - a. Support the trainee in developing their learning portfolio and evidence of competency
  - b. Ensure trainee understanding of and engagement with the assessment process
  - c. Ensure trainee completion of workplace-based assessments
  - d. Review trainee progress against the curriculum and decide whether placements have been completed successfully
  - e. Agree the best use of Study Leave to achieve required competencies and experience
  - f. Ensure that the trainee received appropriate career guidance and planning
- 2) Meet the trainee in private at agreed, protected times in a placement in accordance with curricula requirements to ensure he or she make the expected clinical and educational progress
  - a. To conduct an induction interview within the first two weeks of a placement and develop a mutually agreed Learning Agreement and educational objectives and establish a supportive relationship
  - b. At mid-point to carry out an appraisal based on the Learning Agreement
  - c. At the end to carry out appraisal to inform the trainee's ARCP
  - d. Give regular, honest and constructive feedback according to the stage and level of training, experience and competence of the trainee
  - e. Be approachable and available to a trainee to give advice and guidance on clinical, administrative, organisational and governance issues and to provide opportunity for the

trainee to raise issues relating to training and support and manage in accordance with LEP and NIMDTA policies

- f. Keep appropriate records of assessments
  - g. Document all meetings and associated outcomes / actions agreed in the portfolio and review development of the portfolio by the trainee
  - h. Liaise with others to share information over trainee progression
- 3) Attend meetings relevant to the education supervision role and disseminate information to a trainee's Clinical Supervisor and the trainee as appropriate
  - 4) Arrange for an appropriate colleague to fulfil the educational supervision role during any period of absences and inform the TPD if a period of absences will extend beyond 4 weeks
  - 5) Undertake a formal handover with the new Educational Supervisor.

## Appendix 3



### **Competency Based Application Form to be completed for Educational Supervisor positions within Northern Ireland Foundation School NIMDTA**

NIMDTA is responsible for the Foundation Training of junior doctors in Northern Ireland through the Northern Ireland Foundation School. NIMDTA's role is to quality manage the foundation training of doctors who are located within the five HSC Trusts in Northern Ireland. The five HSC Trusts are responsible for the quality control and delivery of postgraduate medical education in line with 'Promoting Excellence' the new standards for Education and Training published by the GMC July 2015.

Foundation Programme Educational Supervisors are selected and appointed jointly and are dually accountable to the Director of Medical Education (DME) at Trust level and the NI Foundation School Director at NIMDTA. These posts are remunerated by NIMDTA.

Applications for posts of Foundation Programme Educational Supervisor (FES) are made by completing a competency based application form set against the domains in 'Promoting Excellence'.

The application form should be completed anonymously and submitted to the Director of Medical Education at Trust level who will score the form and then send it to NIMDTA to be scored independently by the Director of the NI Foundation School (or Deputy). Appointments will be made on the basis of the candidate(s) with the highest combined score.

The job description for the role of Foundation Educational Supervisor is attached.

Dr Lorraine Parks

NI Foundation School Director

## Job Description for Named Foundation Educational Supervisor (FES)

- Meet with the foundation doctor at the beginning of each placement to confirm how formative feedback and summative judgements will be made and to be clear as to what is deemed acceptable progress when considering performance.  
Meetings should also clarify specific learning objectives (outcomes and competences) for the period of training and how these will be met.
- Meet with Foundation doctor at the end of each placement and complete end of placement report.
- Support and identify foundation doctors needing additional help/support.
- Review the foundation doctor's performance at appropriate intervals including use of multi-source feedback and SLE completion. If concerns are identified, the educational supervisor should ensure that the FPD and FSD are involved.
- Share relevant information and areas for development with the clinical supervisor for the next placement.
- Ensure that the foundation doctor has the opportunity to reflect and discuss their engagement with the educational process, their performance, career opportunities, identifying issues or problems with the quality of the training and supervision.
- Communicate any concerns in a timely fashion to the Foundation Programme Director and keep them informed of Foundation doctor progress.
- The educational supervisor **must** raise concerns with the FPD and FSD (and if necessary, the Clinical Director, Head of Service or Medical Director and the Clinical Supervisor) if serious training or patient safety concerns are raised.
- Participate in end of year ARCP meetings for Foundation doctors, both at trust level and within NIMDTA.
- Attend relevant Foundation training / events / meetings as required by the Foundation School at NIMDTA.



## Person Specification

	Essential Criteria	Desirable Criteria
Attainments	<ul style="list-style-type: none"> <li>• GMC full registration and a licence to practice</li> <li>• A Senior Doctor with a minimum of 5 years post registration experience on the GMC's GP or Specialist Register OR a Senior Doctor in a substantive SAS post with a minimum of 5 years post registration experience</li> <li>• Be a recognised GMC Trainer</li> </ul>	<ul style="list-style-type: none"> <li>• PG qualification in education</li> <li>• Completion of Foundation specific eLearning (Successful appointees <b>must</b> complete e-learning appropriate for Foundation prior to taking up post as a FES. For details see: <a href="https://educatorhub.e-lfh.org.uk/">https://educatorhub.e-lfh.org.uk/</a> &amp; NIMDTA website under Foundation Trainers.)</li> </ul>
Knowledge and Interests	<ul style="list-style-type: none"> <li>• Knowledge of management and governance structures in medical education and training and awareness of recent changes in the delivery of medical education and training nationally and locally, with particular reference to Foundation Programme training.</li> <li>• Interest and enthusiasm for improving delivery of medical education and training and continuing professional development.</li> <li>• Knowledge of assessment methods.</li> </ul>	<ul style="list-style-type: none"> <li>• Evidence of relevant research and/or publications.</li> <li>• Experience of Foundation e-portfolio</li> </ul>
Special Aptitudes	<ul style="list-style-type: none"> <li>• Effective leadership and communications skills, motivating and developing others, good interpersonal skills.</li> <li>• Evidence of delivering well evaluated teaching sessions/tutorials.</li> <li>• Evidence of successful delivery of training programmes.</li> <li>• Evidence of personal development in medical education.</li> </ul>	<ul style="list-style-type: none"> <li>• Evidence of supporting trainees and trainers.</li> <li>• Understand use of IT in education.</li> <li>• Evidence of QI/research in medical education.</li> </ul>
Physical requirements	<p>Health standards            Acceptable attendance record</p>	

## **Competency Based Application Form to be completed for Educational Supervisor positions within Northern Ireland Foundation School NIMDTA**

### **Promoting Excellence**

The GMC published Promoting Excellence in July 2015. The standards in this document pertain to post graduate medical education and training. Please refer to this document in completing this application form.

**Each section will be scored out of 10 and the maximum mark is 70**

**Please do NOT enter personal details**

**Theme 1: Learning environment and culture GMC 'Promoting Excellence' pages 8-15**

Outline how you have contributed to a learning environment that is safe for patients and supportive for learners (max 150 words)

**Theme 2: Educational Governance and Leadership –GMC ‘Promoting Excellence’ pages 16-22**

Demonstrate how you have improved and contributed to the quality and the outcome of education and training (max 150 words)

**Theme 3: Supporting Learners – GMC ‘Promoting Excellence’ pages 23-27**

Give an example of how you have contributed to supporting a doctor in training to achieve the learning outcomes required by their curriculum (max 150 words)

**Theme 4: Supporting educators – GMC ‘Promoting Excellence’ pages 28-30**

Training for trainers is a requirement for GMC *Recognition of Trainers*. Outline what you have done to demonstrate your eligibility for GMC recognition. (max 150 words)

**Theme 5: Developing and implementing curricula and assessments pages 31-37**

Assessing doctors in training is an essential part of the Education Supervisor role. Outline your experience in this area. (max 150 words)

**6: Why you have applied for this position – Professional (max 100 words)**

**7: Why you have applied for this position – Personal (max 100 words)**

**Each section will be scored out of 10 and the maximum mark is 70**

## Appendix 4

### Recognised Trainer Agreement

In supporting the delivery of high quality educational supervision, the Recognised **Trainer** has a responsibility to:

1. Participate in **induction** for the role (if newly selected)
2. Undertake the **essential training** courses (or equivalent) required to be a NIMDTA Recognised Trainer
3. Participate in continuing professional development in medical education and provide evidence of training attended or completed when requested.
4. Demonstrate **attitudes and behaviours** appropriate to the role of a trainer and provide evidence of this when requested
5. **Fulfil the role** as Clinical or Educational Supervisor or both as defined below
6. **Use the time allocated** to the delivery of the Clinical or Educational Supervisor role in job planning (1 hour / trainee supervised / week) to deliver the role and responsibilities as an Educational Supervisor effectively and appropriately
7. Engage in an **annual education review** of the clinical or educational supervision component of the job plan as part of HSC appraisal and comply with revalidation requirements
8. Engage with quality control (LEP) and quality management (NIMDTA) activities as required
9. Liaise with others within the LEP to ensure a consistent approach to clinical and educational supervision and the sharing of good practice across specialties.
10. Participate in activities which support the delivery of postgraduate medical education and training (recruitment and selection; participation in ARCP panels; undertaking workplace based assessments with trainees)
11. Utilise support structures and processes available to assist in the delivery of the clinical and educational supervision role (Director of Medical Education; HSC Medical Education Department; NIMDTA Professional Support; Occupational Health)
12. Inform the LEP Director of Medical Education and Medical Director's Office of any involvement in investigations, or if allegations or potential concerns are raised against you.

### Terms of Understanding

The signing of this Agreement commits the signatory to undertake to the best of their ability, the responsibilities stated in the Agreement. Together, the party enter into the ethos of this Agreement to mutually promote excellence in postgraduate medical education and training through the development, provision and support of high quality educational supervision.

This Agreement may be renewed upon mutual agreement. Any party wishing to withdraw from the Agreement must notify the other 2 parties, in writing, of their intention.

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I have read and understand the content of this Agreement and hereby agree to adhere to them

Signature

Name

Position

Date

---

## Appendix 5



### Annual Review of Educational Role

Name: \_\_\_\_\_

GMC No: \_\_\_\_\_

Speciality: \_\_\_\_\_

LEP: \_\_\_\_\_

Date of Review: \_\_\_\_\_

Time period covered: \_\_\_\_\_

Recognition Date: \_\_\_\_\_

Current PA / SPA allocation for Education & Training: \_\_\_\_\_

Educational Role	No of trainees / students	PA allocation	Comments
Clinical Supervisor			
Educational Supervisor			
Specialty Tutor / Specialty Lead			
Other			
UG specialty / site lead			
Associate sub dean			

### Education & Training activities to Maintain RT status:

NIMDTA Activities	Total Number of hours	Other Activities	Total Number of hours

**Reflection on your Recognised Trainer role.**

**Summary of Discussion.**

**This is the summary of the discussion about your Recognised Trainer role.**

**Personal Development Plan for Education Role– *please carry this forward onto your final PDP***

What training and support do you require in the next 12 months, in any aspects of your role as a recognised trainer?

What areas for further development of your educational role have you identified?	How will you go about addressing them?	By when?	How will you know goals have been achieved?

Signed by Trainer \_\_\_\_\_

Date \_\_\_\_\_

Reviewer \_\_\_\_\_

Date \_\_\_\_\_

Role \_\_\_\_\_

GMC Number \_\_\_\_\_



## Appendix 6

### Examples of activities that can inform annual review of your educational role

#### Teaching practice

- Lesson plans and evaluations showing that cater for diverse learning needs of trainees
- Examples of trainee learning needs assessments (questionnaire or other assessment tools)
- Multisource (360°) feedback on personal teaching and training
- Records of departmental meetings where teaching or training is discussed
- Records of reflection on personal teaching effectiveness
- Personal review of teaching content and materials (slides and hand-outs)
- Peer feedback from observations of teaching practice
- Personal development or use of Technology enhanced learning methods
- Maintaining instructor status on an accredited national training course.
- Taking part in other simulation or clinical skills teaching and training
- Undertaking a certificate, diploma or Masters level qualification in Clinical or Healthcare Education
- Attendance at face-to-face Teaching the Teacher workshop run by NIMDTA or LEP
- Completion of e-learning / distance learning activities: eg, both “Small Group Teaching” and “Teaching Clinical Skills” modules on the London Deanery Multi-professional Faculty Development e-learning site.
- Attending a teaching course run by a Royal College or similar body (eg, ALSG)
- Attendance at a Medical Education conference or workshop related to teaching with reflection
- Critical analysis of relevant Medical Education literature
- Involvement in Medical Education Research

#### Effective Supervision

- Rotas / timetables indicating supervision responsibility
- Anonymised examples of education plans or educational objectives agreed with trainees
- Anonymised examples of educational appraisals conducted, including ARCPs
- Analysis or reflection on any critical incidents in clinical practice which involved students or trainees
- Multisource (360°) feedback that is related to supervision
- Anonymised records of meetings with students / trainees to discuss their development
- Anonymised examples of written feedback provided to trainees
- Personal reflection on student or trainee feedback to the trainer
- Anonymised examples of workplace based assessments conducted, with trainer reflection on feedback given to trainee
- Involvement in Royal College Assessments, with Feedback
- Undertaking a certificate, diploma or Masters level qualification in Clinical or Healthcare Education that includes elements of supervision or assessment
- Attendance at face-to-face Supervisory Skills workshop run by NIMDTA or LEP
- Completion of e-learning or distance Learning activities, e.g., as a minimum the “Supervision”, “Effective Feedback” and “Workplace based assessment” modules on the London Deanery Multiprofessional Faculty Development e-learning site.
- Attending a recognised Educational Supervision course run by a Royal College
- Attendance at a Medical Education conference or workshop related to supervision, with reflection
- Critical analysis of relevant literature on Educational Supervision

### **Supporting Trainees**

- Anonymised examples of records relating to a trainee or student in difficulty where advice or support was provided
- Examples of any printed or electronic materials you provide to students / trainees seeking guidance
- Undertaking a certificate, diploma or Masters level qualification in Clinical or Healthcare Education that includes elements of supervision or assessment
- Attendance at face-to-face Trainee Support workshop run by NIMDTA or LEP
- Completion of e-learning / distance learning activities eg, “Managing the trainee in difficulty” and “Careers support” modules on the London Deanery Multi-professional Faculty Development e-learning site.
- Attending a recognised Trainee Support course run by a Royal College
- Attendance at a Medical Education conference or workshop related to Trainee Support or Careers Guidance, with reflection
- Review and reflection on the current NIMDTA Policies on Managing Trainees Requiring Support and Reporting Concerns of Undermining, Bullying or Harassment
- Critical analysis of relevant literature on Trainee Support or Careers guidance read.

### **Equality & Diversity**

- Evidence of completion of recognised E&D activity, e.g. HSCNI Discovering Diversity or QUB on-line E&D training.
- Other E&D training events attended (with content), for example, recruitment and selection training, training given by GMC, NICE, etc.
- Critical analysis of relevant literature on Equality and Diversity.

## Appendix 7

### Allocation of Educational and Clinical Supervisors

