[Audio transcription of module 7b]

NHS Education for Scotland

New Appraiser Training
Medical Appraisal Scotland
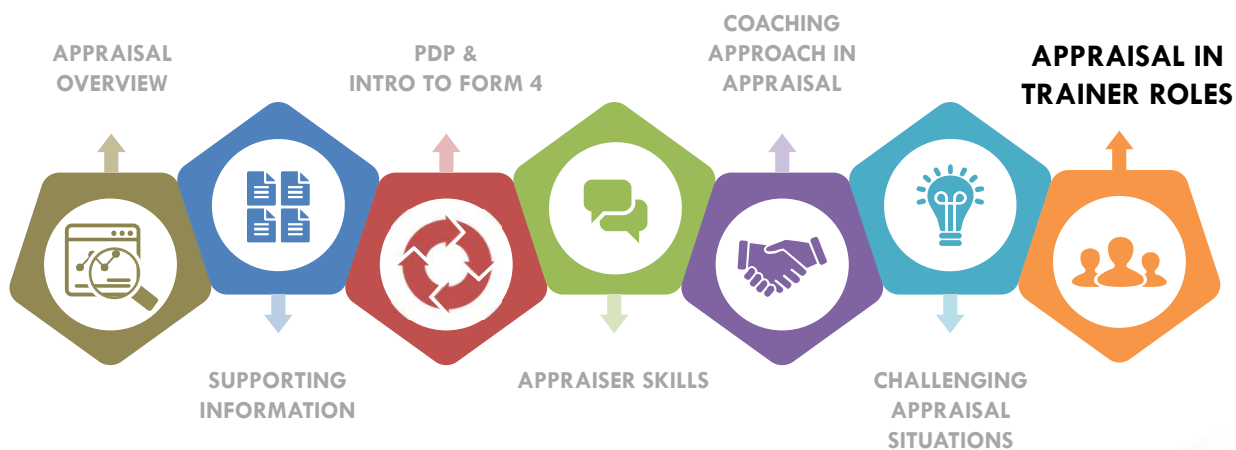
Appraisal in the Trainer Role (Primary Care)
Module 07b

Welcome to the New Appraiser Training module "Appraisal in the Trainer Role" aimed at primary care roles.

APPRAISAL OVERVIEW

PDP & INTRO TO FORM 4

COACHING APPROACH IN APPRAISAL

APPRAISAL IN TRAINER ROLES

SUPPORTING INFORMATION

APPRAISER SKILLS

CHALLENGING APPRAISAL SITUATIONS

As a prerequisite for attending the NES New Appraiser training, potential participants are asked to complete a series of online modules in preparation for the large and small group discussions.

This module is also recommended for experienced appraisers as part of the Refresher Appraiser events.
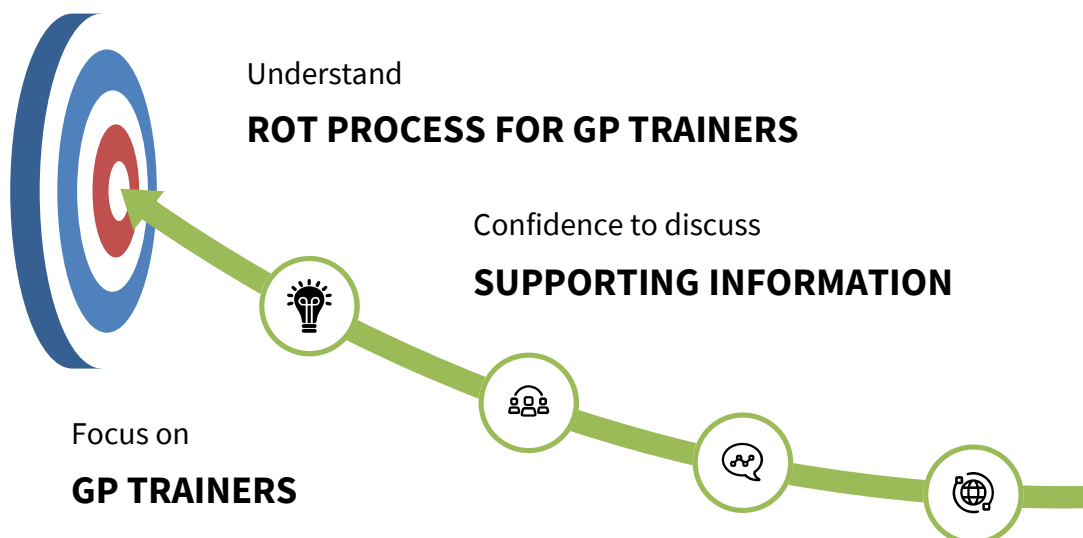
About this module

- Focus on primary care (GP) trainers
- Check out module 7a also
- GP trainers have existing approval process
- ROT applies to:
  - *Clinical supervisors who are **not** approved GP trainers*

This is part B of module 7, focussing on appraising those with a primary care GP trainer role.

Part A of the module, focuses on secondary care and university trainers, and provides a more detailed background on the recognition of trainer processes. If you have not already done so, please make sure you review that module first, especially if you appraise secondary care colleagues who have a recognised trainer role.

Whilst GP Trainers are already approved by the GMC via a robust approvals process, there is a small subset of GPs who will need to go through the ROT process. Any GPs acting as a clinical supervisor for secondary care trainees and are not already an approved GP trainer – they will need to meet the recognition criteria for secondary care trainers.

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About this module

Understand
ROT PROCESS FOR GP TRAINERS

Confidence to discuss
SUPPORTING INFORMATION

Focus on
GP TRAINERS

Regardless whether the appraisee has an approved GP Trainer role or through the ROT process, details of their role and their reflections should be included as part of the whole-practice appraisal discussions.

The aim of this module is to develop your confidence in discussing this and the related supporting information that a GP trainer may bring.

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Becoming a GP Educational Supervisor

The process for becoming an Educational Supervisor or Trainer in General Practice is slightly different to colleagues who work in secondary care.

Becoming a GP Educational Supervisor (Trainer)
(1/2)

- Different process to secondary care ROT
- Minimum of 2 years post CCT
- Must discuss with TPD
- TPD checks that GP meets criteria
- If agreed:
    - Complete Trainers Workshop
    - Complete GP Trainer Entry Course (GPTEC)

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GP Educational Supervisors (or GP Trainers) are approved by the GMC under the Medical Act. It is a different process to the Secondary Care Recognition of Trainers. Usually GP Trainers have to be 2-years post-CCT before the Training Programme Director meets them to discuss the criteria to become an Educational Supervisor.

If agreed, the GP will need to complete the 1-day Trainers workshop; and the GP Trainer Entry Course, a blended learning course for 3 days over 5 weeks.

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Becoming a GP Educational Supervisor (Trainer)
(2/2)

- Further TPD meeting when GPTEC completed
- Final Approval at SQMG
  - If existing training practice
  - If new – formal visit by GP team
- Approval initially for 2 years, then every 3 years
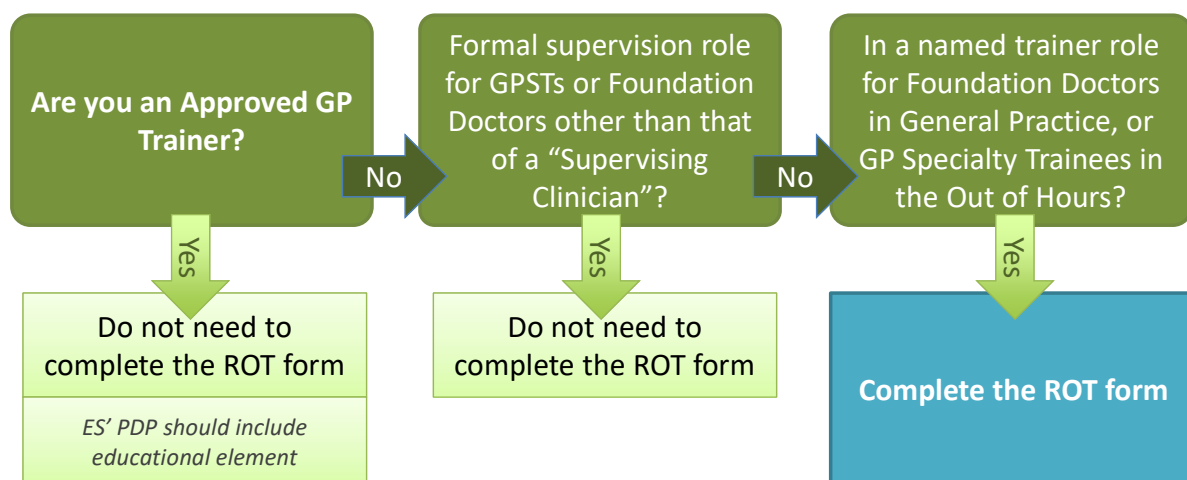- AoME criteria used

Image: Free for Canva users

When GPTEC is completed, the GP will meet the TPD again before final approval is granted by the Scottish GP Quality Management Group if the GP was in an existing training practice; otherwise it will require a formal visit by the GP team.

The initial approval is for two years, and then every three years after that; and it's the Academy of Medical Educators' criteria that is being used.

[Image: free for Canva users]

Who (in primary care) is ROT for?

Are you an Approved GP Trainer?	→ No →	Formal supervision role for GPSTs or Foundation Doctors other than that of a "Supervising Clinician"?	→ No →	In a named trainer role for Foundation Doctors in General Practice, or GP Specialty Trainees in the Out of Hours?
↓ Yes		↓ Yes		↓ Yes
Do not need to complete the ROT form		Do not need to complete the ROT form		**Complete the ROT form**
ES' PDP should include educational element				

You now have an insight into how a GP becomes a trainer. In terms of Recognition of Trainer, as mentioned earlier, there is a small subset of GPs who will need to go through the ROT process. This flow diagram should help the appraisee determine if they need to complete the ROT form as part of their appraisal on SOAR.
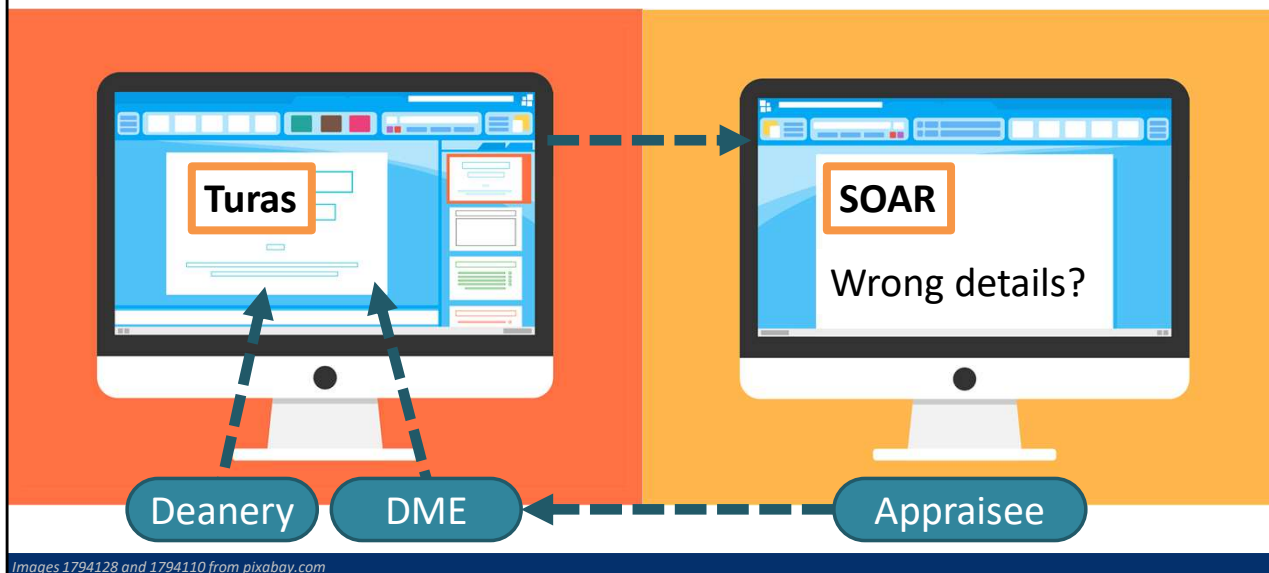
All trainer and trainee information on SOAR is imported from a system called Turas, maintained by the NES deanery teams and the health board's Director of Medical Education.

If the information is incorrect on SOAR, please have your appraisee reach out to the DME or the deanery teams in the first instance. When data on Turas is corrected, SOAR will be updated the next day via overnight automated processes.

Supporting Information

For appraisal discussion

For those going through the ROT process, the supporting information requirements are similar to colleagues in secondary care.

GMC domains for trainer recognition

1. Ensuring safe and effective patient care through training
2. Establishing an effective learning environment
3. Teaching and facilitating learning
4. Enhancing learning through assessment
5. Supporting and monitoring progress
6. Guiding personal and professional development
7. Continuing professional development as an educator

These are the seven domains required for GMC trainer recognition. The types of supporting information that are required of trainers in General Practice are very similar to secondary care colleagues, Let's look at some supporting information examples that can be used in each domain by GP Trainers for their appraisal.

Domain 1: Ensuring safe and effective patient care through training

- Induction timetables
- Trainee timetables with supervision arrangements
- Arrangements for supervision with the practice
- Minutes of relevant Senior Staff Meetings (e.g. SEA meetings)
- Anonymised discussions with/or about trainees/students in difficulty
- Case Based Discussions with trainee
- Supervision of a QIP/ Audit completed by a trainee/student

The theme for Domain 1 is around safe and effective patient care through training.

Just as hospital departments do, all general practices have to provide an induction to trainers and this is required evidence for quality visits undertaken, so induction timetables are a good piece of supporting information. Documentation on supervision arrangements within the practice is also good to include, for example, what if the trainer is on holiday or off ill.

Suitably anonymised minutes to certain meetings can also be useful to include, such as SEA discussions around trainees or students in difficulties. Case based discussions, just as in hospitals, can also be used.

Some trainers will also supervise quality improvement projects or audits that are completed by a trainee or student and again, that would be appropriate evidence to use here.

Domain 2: Establishing and maintaining an environment for learning

- Induction
- Meetings where trainee feedback / NTS etc is discussed
- Reflections on feedback received from trainees
- Reflections on a teaching session delivered by a trainee or a peer
- Departmental education programme taught based on curriculae
- Teaching timetables
- Examples of when trainees have spoken out / up
  - e.g. when mistake was made; felt safe to do so etc
- Quality assurance visits by deanery

Domain 2 is about establishing and maintaining an environment for learning. Just as in Domain 1, induction is good evidence to include.

Feedback is also very important. The trainer could consider what the feedback has meant for the learning environment and how they have potentially improved the situation to enable better teaching and training.

Any tutorials or other teaching that has been provided by the GP trainer is also useful to include, for example if there was an educational programme within the practice then this would be useful along with any timetables.

Trainers may also have examples where a trainee has spoken out when they felt a mistake was made or something was wrong. What did the trainer do to ensure they felt safe to raise these concerns; and what did they do in response to it?

Quality assurance visits will often result in a report, and this can also be included by the trainer for their appraisal submission.

Domain 3: Teaching and facilitating learning

- Teaching programmes for department
- Teaching plans and evaluations
- Tutorial/Teaching feedback
- A review of a teaching session by a peer
- Courses trainer is involved in delivering
- Any certificate of a course related to teaching and facilitating learning

Image 7261803 from pixabay.com

Some of the evidence that's provided may well overlap into several domains, and that is the case in Domain 3 for teaching and facilitating and learning.

Teaching plans, tutorial feedback, courses that the trainer is involved in delivering, such as the half-day release course attended by GP trainees.

All trainers are asked to calibrate their workplace-based assessments by their peers and also have one of their teaching sessions assessed by their peers, and again this takes place usually in trainers' workshops within the locality they are based.

Domain 4: Enhancing learning through assessment

- Examples of completed WPBAs or Educational Supervisors reports
- Evidence of CBD / COT calibration
- Questions trainer has written for college exams
- Feedback given to candidates after an exam
- Certificates from acting as an examiner
- Feedback to a trainee as part of a learning event
- All submissions need to be **anonymised**

Image 7261803 from pixabay.com

Domain 4 is about enhancing learning through assessment. Examples of workplace-based assessments or Educational Supervisors reports can provide good evidence in this area; as are evidence of case-based discussions or consultation observational tool calibrations.

Educational Supervisors reports are regularly assessed at ARCP and feedback sometimes given by deaneries to trainers. If educators are also examiners for the relevant college, then this is additional feedback at any courses they attend because of that.

Do make sure that all submissions, just like any other piece of supporting information submitted to the appraisal, are suitably anonymised.

Domain 5: Supporting and monitoring educational progress
(Educational Supervisors)

- Induction/midpoint and end of block meeting entry for a trainee
- Anonymised example of dealing with a trainee in difficulty
- PDP plan agreed with a trainee
- Details of ARCP panels (anonymised appropriately)
- Notes from Speciality Training Committee meetings
- Evidence of attendance/training for trainee recruitment

Domain 5 is about supporting and monitoring educational progress. Let's look at examples for Educational Supervisors first.

Here the appraiser would expect the trainer to reflect, for example, on induction/midpoint or end of block meeting entries into the portfolio of a trainee; or some anonymised examples of dealing with a trainee in difficulty. It could also include examples of PDP agreed with the trainee or anonymised ARCP panel details.

Some trainers will attend Speciality Training Committee meetings on behalf of their fellow trainers and this will also provide evidence that you are being involved in the wider educational field.

Domain 5: Supporting and monitoring educational progress
(University roles)

- Anonymised completion of assessment requirements for a clinical block with feedback to student
- Attendance at EO events relating to student assessment
- Anonymised evidence of participation in exam boards
- Evidence of facilitation and assessment of e.g. student projects
- Participation on training for and undertaking student selection activities for admission

Let's look at Domain 5 for GP trainers with university roles.

Here, suitable evidence would be anonymised completion of student assessments. Also, attendance for example, at Education Organiser or university training events relating to student assessment or evidence of participation in exam boards. Trainers could also show how they facilitate and assess student projects, and how they take part in training or undertake student selection activities for admission.

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Domain 6: Guiding personal and professional development

(Educational Supervisors)

- Reflective account of when the trainer has given advice and support
- Examples of materials provided to trainees
- Feedback or letters of thanks from trainees

Image 1228627 from pixabay.com

Domain 6 is about guiding personal and professional development. For Educational Supervisors, this could be a reflective account of advice or support they have given to a trainee. It could also include examples of printed or electronic material that they offer trainees who are looking for support, or feedback letters and thank you's from trainees who have received that support previously.

Domain 6: Guiding personal and professional development

(University roles)

- Evidence of attending training (and activities) on pastoral or professional development for students
  - *e.g. student mentor, health and conduct or fitness-to-practice activities*
- Evidence of inclusivity / E&D training
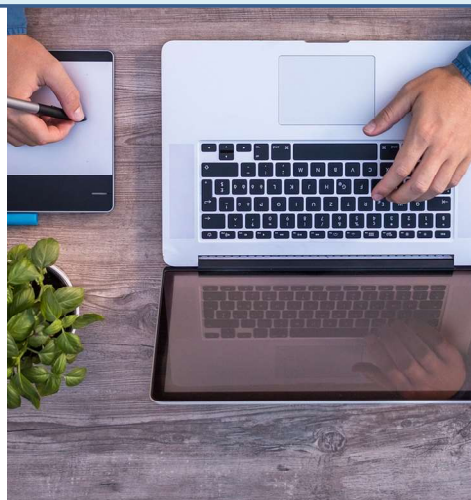- Evidence of training / participation in careers guidance for students

Image 2838921 from pixabay.com

Under Domain 6 for university roles, evidence of training where a trainer has supported students - be that in a pastoral role for their professional development, or training on equality and diversity, so for example knowing how to make reasonable adjustments for disabilities a student may have – these would be good information to include.

Evidence of taking part in careers evenings can also be part of your appraisee's PDP towards being an educator.

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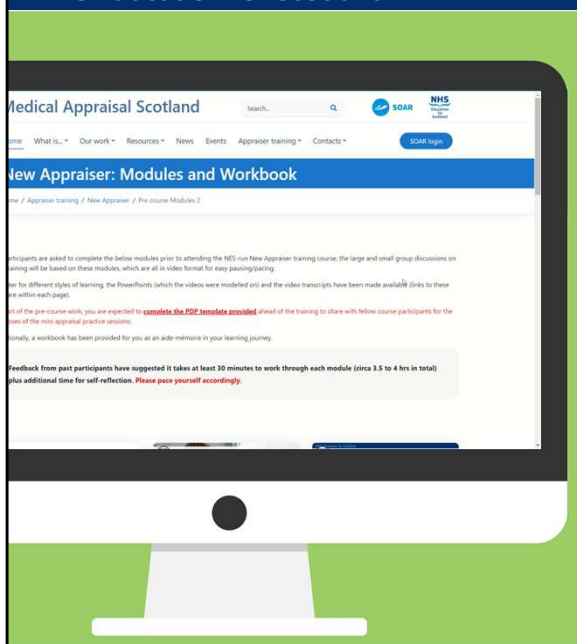## Domain 7: Continuing professional development as an educator

- **PDP in trainer role (all domains count)**
- Suitable evidence:
  - Equality & Diversity
  - Attendance at workshops, ARCP, Simulation
  - Doctors in Difficulty (DiD)
  - Feedback and reflections
  - 3-yearly approval reports

Image 2423815 from pixabay.com

Domain 7 focusses on continuing professional development as an educator, and this is to ensure that the educators are keeping themselves up-to-date with changes either in the curricula, the specialty that they are in or the examinations.

This would include equality and diversity training, attendance at ARCPs or simulation or attending doctors in difficulty meetings, but also any feedback that they have about their role as an educator. Attendance at local trainers' workshops are an important aspect for GP educators where peer review takes place.

In addition, the 3-yearly approval process also gives feedback on areas that may need to be developed and these reports can also count as evidence.

Other resources

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Medical Appraisal Scotland

New Appraiser: Modules and Workbook

- Scottish Deanery: ROT Manual
  - https://www.scotlanddeanery.nhs.scot/trainer-information/recognition-of-trainers-rot/
- Module 7a (secondary care trainers)
  - Appraisers do NOT approve trainers
  - DMEs have **no** access to appraisal forms
  - Secondary care trainers re-recognition = 5 years, aligned *after* revalidation

Image 1820320 from pixabay.com

A useful resource is the ROT section on the Scottish Deanery website. The link will also take you to the ROT manual, which is a really useful web resource.

If you have not reviewed the ROT module 7a for secondary care and university trainers, please make sure you do so, especially if you appraise cross-specialty where your appraisee might have a recognised trainer role. To summarise a few key points from that module:

- Appraisers do NOT approve trainers, that is the role of the Directors of Medical Education and Education Organisers.
- DMEs and EOs have no access to any of the appraisal forms, only Form 7 – which is created by taking the appraisee's submitted ROT form, and the appraiser's comments on ROT discussion in Form 4
- Whereas GP trainers require re-approval every 3 years, for trainers in secondary care, it is every 5 years and it's typically aligned **after** the appraisee's revalidation.

The art of medicine was to be properly learned only from its practice and its exercise.

Thomas Sydenham

We hope you found this module helpful and has helped you develop confidence in discussing the trainer role supporting information with your appraisees.

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Interested in becoming an appraiser?

- Complete other modules
- Submit application
  - *cc Appraisal Lead*
- Training place allocation

https://www.appraisal.nes.scot.nhs.uk/appraiser-training/new-appraiser/

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If you are planning to attend the New Appraiser training and this is supported by your employing health board's Appraisal Lead, please complete the other modules from the Medical Appraisal Scotland website. When you are ready, send in your training course application form and remember to copy in your Appraisal Lead. We will be in touch from there.

https://www.appraisal.nes.scot.nhs.uk/appraiser-training/new-appraiser/

[End of module 7b]

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