Health Education England Working across

 Kent, Surrey and Sussex

Clinical Supervisor Peer Appraisal

For:

**Clinical Supervisor: Name**

With:

**Peer Appraiser: Name**

**Date of review:**

## Setting the scene for Clinical Supervisor appraisal

As part of appraisal NHS roles other than clinical roles will be reviewed. This will include the role of Clinical and Educational Supervisors for Foundation and GP Speciality Training. To help support you and provide evidence which can be taken to your NHS appraisal, a process of peer appraisal with a colleague who understands your work as a clinical supervisor, has been developed by HEEKSS Primary & Community Department.

This peer appraisal will afford you the opportunity to:

* review your work over the last year as a clinical supervisor and plan your activities for the coming year
* discuss and agree your planned learning and development
* discuss more generally your career plans and aspirations.

**Undertaking a Peer Appraisal**

Your appraisal will be conducted by an individual who is part of the educational network; this may be a peer clinical supervisor, a programme director, the lifelong learning advisor or a patch associate dean from your local area. You are responsible for seeking appraisal, but programme directors will support the process and may if needed develop pairings. Appraisal may take place as part of an organised supervisor workshop

Reflect on your work as a clinical supervisor and complete the form – the competency areas are based on the Academy of Medical Educators’ Framework which is supported by the GMC. The GMC (2013) Good Medical Framework for appraisal and revalidation relating to knowledge, skills and performance, safety and equality, communication, partnership and teamwork, and maintaining trust can also be covered in this peer appraisal as it relates to your role as a clinical supervisor

**It is not envisaged you reflect on every competency area each year – which areas you focus on may vary according to circumstance, feedback, personal reflection on performance and your PDP. You should however ensure there is reflection on ALL the competency areas within your five-year revalidation cycle (and your five-year re-accreditation cycle if you are a trainer)**

Consider evidence you may wish to bring to support your discussion, based on guidance from the GMC (2013) as for your strengthened NHS appraisal you should provide evidence to support your role as a clinical supervisor annually. Possible sources of evidence include:

* Trainee feedback (online or Exit Interviews)
* a record of educational events relating to your work as a clinical supervisor
* reflections on colleague and patient feedback
* reflections on SEA relating to yourself and a SEA relating to a learner
* a case study – in the case of a trainee in difficulty
* a calibrated assessment of a trainee
* evidence of up to date equality and diversity training.

As part of the appraisal process you will need to complete a PDP relevant to your clinical supervisor role. Ideally this should be shared with the local programme directors. Programme directors will be bound by the Data Protection Act and use any PDP records to:

* support the planning of activities for the supervisor group for the coming year
* identify any issues common across individual appraisals which may need to be addressed.

You should keep a copy of each annual peer appraisal to submit to your NHS appraiser and to submit with your clinical supervisor re-approval. You should consider submitting the types of evidence listed above to your NHS annual appraisal to support your appraisal of your educator role

**You should keep a copy of each annual peer appraisal to submit to your NHS appraiser every year and to submit with your clinical supervisor /trainer re-approval every five years.**

**References**

Academy of Medical Educators 2010. A Framework for the Professional Development of Postgraduate Medical Supervisors. London. Department of Health

General Medical Council. 2018. Supporting information for appraisal and revalidation

General Medical Council. 2013. The Good Medical Practice Framework for appraisal and revalidation

**Overview**

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| Over the past year as a clinical supervisor what has gone well? |
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| What areas have caused me difficulty and why? |
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**Reflection on last year’s educational role PDP**

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| PDP - Objective | Completed | Comments |
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**Record of learning as a Clinical Supervisor over the last year**

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| Workshop/Meeting/Activity Attended | Date | Reflection |
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**Reflection on learning / developments this year**

**Remember to ensure all competency areas are covered over each five-year cycle but it is not necessary to cover every competency every year**

The GMC (amended 2019) Good Medical Practice for appraisal and revalidation relating to knowledge, skills and performance, safety and equality, communication, partnership and teamwork, and maintaining trust can usefully be referenced in your reflections

**GMC Educator Framework Competency 1: Ensuring safe and effective patient care through training**

Protecting patients and enhancing their care through the supervision of those training in General Practice; balancing the needs of patients and the service with the educational needs of those training in general practice.

**The *Effective* Supervisor:**

* acts to ensure the health, wellbeing and safety of patients at all times
* ensures that trainees have undertaken appropriate induction
* allows trainees, when suitably competent, to take responsibility for care, appropriate to the needs of the patient.

**The *Excellent* Supervisor also:**

* uses educational interventions to enhance patient care
* involves trainees in service improvement
* involves patients as educators.

**Examples of relevant supporting evidence could include:**

* educator’s learning log (showing reflective practice and resulting changes to practice);
* trainee e-portfolio – Educators Notes
* trainee and patient feedback
* arrangements for trainee induction
* trainee timetables, learning plans and records of progress
* arrangements to ensure supervision appropriate to the trainee’s level of competence and confidence
* case studies/reflections on trainees in difficulty
* examples of engagement with the trainee’s educational supervisor in support of the trainee.

**GMC Competency 2: Establishing and maintaining an environment for learning**

Providing a safe clinical environment that is conducive to effective learning

**The *Effective* Supervisor:**

* encourages participation through provision of equality of opportunity and acknowledgement of diversity
* ensures that trainees receive the necessary instruction and protection in situations that might expose them to risk
* encourages and maintains the confidence of trainees
* is open, approachable and available
* maintains good interpersonal relationships with trainees and colleagues
* provides protected time for teaching and learning
* involves the team in the delivery of teaching and supervision
* is aware of the team’s experience and skills relating to teaching and supervision
* ensures that workload requirements on trainees are both legal and that wherever possible, they do not compromise learning

**The *Excellent* Supervisor also:**

* proactively seeks the views of trainees on their experience
* takes steps to establish a learning community within their department and/or organisation
* monitors, evaluates and takes steps to address areas for improvement in teaching and learning

**Examples of relevant supporting evidence could include**:

* courses attended or programmes undertaken, including face to face and online learning
* GMC trainee survey results
* other feedback from trainees
* details of learning programmes, study schedules, timetables for trainees and clinical teachers
* feedback from colleagues Information on changes made to the working environment to improve training

**GMC Competency 3: Teaching and facilitating learning**

Working with those training in general practice to facilitate their learning

**The *Effective* Supervisor:**

* has up-to-date subject knowledge and/or skills
* provides direct guidance on clinical work where appropriate
* has effective supervisory conversational skills
* plans learning and teaching episodes
* uses a range of appropriate teaching interventions in the clinical setting
* facilitates a wide variety of learning opportunities
* helps the trainee develop an ability for self-directed learning
* allows the trainee to make contributions to clinical practice of graduated value and importance commensurate with their competence
* use technology-enhanced learning where appropriate e.g. simulation
* encourages access to formal learning opportunities e.g. study days

 **The *Excellent* Supervisor also:**

* demonstrates exemplary subject knowledge or skills
* understands and can apply theoretical frameworks to their practice
* is involved with curriculum development beyond the supervisory relationship
* works with the department and/or provider to ensure a wide range of learning opportunities is available e.g. simulation facilities, courses
1. **Examples of relevant supporting evidence could include**:
* courses attended or programmes undertaken, including face to face and online learning
* GMC trainee survey results
* other feedback from trainees
* details of learning programmes, study schedules and timetables for trainees
* feedback from colleagues
* evidence of recent initiatives to enhance the provision of learning opportunities

**GMC Competency 4: Enhancing learning through assessment**

Facilitating assessment and providing feedback

**The *Effective* Supervisor:**

* regularly observes the trainee’s performance and offers feedback
* plans and/or monitors assessment activities
* uses workplace-based assessments appropriately
* provides feedback that is clear, focussed and aimed at improving specific aspects of trainee performance
* ensures that the trainee participates in 360’ appraisal
* supports the trainee in preparation for professional external examinations.

**The *Excellent* Supervisor also:**

* ensures that workplace-based assessments are used effectively by juniors, consultant colleagues and the wider team
* understands and can apply theoretical frameworks relevant to assessment to their and others’ practice
* is involved in professional assessment activities beyond the supervisory relationship e.g. as an ARCP panel member or College examiner

**Examples of relevant supporting evidence could include**:

* courses attended or programmes undertaken, including face to face and online learning
* GMC trainee survey results
* other feedback from trainees
* details of programmes, study schedules and timetables for trainees indicating assessment modes, patterns and relevance to learning
* evidence of attendance at ARCPs
* feedback from peers, e.g. relating to external examining or professional assessment.

**GMC Competency 7: Continuing professional development as an educator**

Personal, professional development as a medical educator

**The *Effective* Supervisor:**

* evaluates own supervisory practice e.g. through trainee feedback, peer observation
* takes action to improve own practice on the basis of feedback received e.g. appraisal, informal feedback
* maintains Good Medical Practice in line with Specialty and GMC requirements

**The *Excellent* Supervisor also:**

* actively seeks the views of colleagues through e.g. 360 appraisal, peer observation
* engages in programmes of educational development e.g., Training the trainers, Postgraduate Certificate, Masters
* assists in the development of others as educators including trainees
1. **Examples of relevant supporting evidence could include**:
* courses or programmes recently undertaken, including face to face and online learning
* appraisal documentation and other CPD records
* results of 360 appraisal
* certificates or qualifications obtained
* critical comments on relevant books or articles read recently
* results of peer review or professional observation of teaching

(The GMC Educator Competency Framework has two other competencies that relate to the role of the Educational rather than Clinical Supervisor. Clinical Supervisors are not required to reflect on the two competencies below, but these are referenced to show the full scope of the work of a medical educator)

1. **(GMC Competency 5: Supporting and monitoring educational progress)**

**(GMC Competency 6: Guiding personal and professional development)**

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| GMC CompArea | Reflections on learning and activities within this competency area: |
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| List of material shared with peer appraiser during the appraisal discussion: |
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**Personal Development Plan (PDP) for CS Role**

| **WHAT**Skills or knowledge you need to develop. | **HOW**You will develop them. | **TIMESCALES**Agreed date/timescale. | **MEASURES**How you will know you have succeeded. |
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| **Date of Educational Review Meeting:** |
| **Full Name:** | **Full Name:** |
| **Signed:***(Clinical Supervisor)* | **Date:** | **Signed:***(Peer Appraiser)* | **Date:** |

You should retain a copy for use in your NHS Appraisal, and as evidence for your renewal as a Clinical Supervisor or Educational Supervisor approval if choose to develop further on the educator pathway.

**Conclusion of Appraisal**

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| Concluding comments - Clinical Supervisor |
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| Concluding comments - Peer Reviewer |
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 **Signed and agreed**

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| **GP Educator:** |  | **Date:**  |
| **Appraiser:** |  | **Date**:  |