KSS Deanery process for ES training and revalidation in role (recognition & re-recognition)

Process document updated February 2024

This document sets out the process for educational supervisors in secondary care: the process for educational supervisors in primary care can be found at https://kss.hee.nhs.uk/primary-care/gp-educator-accreditation/

1. Recognition of new ESs

National requirements are set out clearly for this by GMC and AoME (Appendix 1).

Aspiring ESs in KSS should

- Undertake a generic approved course which may be
  - outsourced to an established private company such as MIAD or Doctorsintraining
  - locally run by the Trust
  - royal college provided
  - BSMS provided

and which should include training in educational appraisal, feedback, assessment methods including workplace-based assessment tools, use of eportfolios and the role and responsibilities of ESs

- Have up to date E+D training
- Complete relevant educator training modules on e-lfH (Appendix 2)

Proof of previous ES status is acceptable as an alternative (email confirmation from DME of previous trust or evidence of current GMC registration as a trainer) for consultants who have been doing this role in previous Trusts but must be accompanied by evidence of up to date E+D training.

Proof of completion of all these requirements should be sent to the PGME team who will then

- Add the new ES's name to the Trust list of recognised ESs that they maintain for sending to KSS quality team annually
- Inform the appraisal leads of the new supervisor's role and request that their Trust appraisal includes a mandatory requirement to evidence activity and development in this role (Appendix 3)

All currently recognised supervisors who are involved in educational supervision should remain on the Trust list of recognised ESs regardless of whether they supervise a rotational trainee or a locally employed doctor.

2. Re-recognition of supervisors

There are national requirements for this set out by the GMC, AoME and the recent English Deans SOP document. In KSS the process of re-recognition of supervisors will be explicitly linked to general appraisal and revalidation.

2.1 Supervisor requirements (these are mandatory)

- CPD: Collate supporting information to support appraisal, which ensures compliance with GMC requirements in the seven AoME professional standards for medical educators (suggested types of evidence are presented in Appendix 4: ESs should present one piece of evidence including reflection and learning, in each of the seven areas of practice in each revalidation cycle). As a minimum, ESs should complete 15h of educationally relevant CPD per revalidation cycle (3h per year on average)
- Attend LFGs (at least 2 out of 3 per year)
- Contribute to local teaching programmes
- Participate in ARCPs and national recruitment programmes
- Identify time to carry out role effectively and ensure this is reflected in agreed job plans
- Discuss the role in their annual appraisal

2.2 Trust requirements

Trusts have to be able to demonstrate to the GMC their processes of maintaining their up to date list of approved and recognised trainers in their organisation: since every ES is required to revalidate every 5 years, the locally agreed process which ensures that all supervisors present evidence for, and discuss, their ES role at annual appraisal is critical to ensuring that trainer status is maintained.

Trusts must ensure that every ES has a form in their appraisal documentation where it is mandatory to present evidence of ongoing engagement with CPD and educational processes as already described. An example of an educational appraisal form is presented in Appendix 5.

Trainers will be removed from the Trust list if

- They move away from the Trust
- They step down from their trainer role in which case they will need to complete the process of initial recognition if they wish to restart this role in the future
- They fail to revalidate

The process of linking ES re-recognition to general appraisal

- provides a robust solution to the requirement placed on DMEs to be sure that ESs are updating and maintaining their educational practice
- fulfils the requirement for Trusts to be sure when trainer status elapses since this date will be the same as when the next appraisal is due
- reduces the administrative demands on busy clinicians by providing robust assurance without extra paperwork

2.3 KSS requirements

KSS sends back the list of currently recognised ESs to the GMC every year and with this linked to appraisal this means no supervisor's trainer status should elapse unexpectedly as long as they have an up to date satisfactory appraisal.

The KSS Educator Development website has guidance on CPD opportunities for supervisors to use, including but not limited to e-lfH modules.

PGME departments should work with appraisal leads to ensure that educational appraisal requirements are discussed at appraiser updates and hence improve awareness of this important part of general appraisal.

Appendix 1: National requirements for recognition of ESs as per GMC/AoME

KSS should:

- Define minimum requirements for training for ESs for addition of trainer status to GMC register
- Provide initial training for supervisors which may be outsourced to private providers such as Drs in training – this is organised by all Trusts in the deanery.

Specific requirements for undertaking the ES role include

- Specific training for the role
- ESs should demonstrate competence in
    - Educational appraisal
    - Feedback
    - Assessment methods including in-work assessment tools for the specialty
    - An understanding of human rights and equality legislation

Appendix 2: e-lfH modules required for new ES recognition

- Found at http://educatorhub.e-lfh.org.uk/Catalogue/Index
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- Educator training resources (ETR)
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- These are suggested e-lfH modules for hospital based ESs and those more useful for primary care supervisors can be used instead if applicable
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03 – Teaching and Facilitating Learning

    a) Video: Hospital - Foundation Supervisor

04 – Enhancing Learning Through Assessment

Supervised Learning Events (SLEs)

    a) Video: Hospital - Introduction to Hospital Training

    b) Video: Hospital – DOPs

    c) Video: Hospital - Mini-CEX

    d) Video: Hospital – CBD

    e) Video: Hospital – MSF

05 – Supporting and Monitoring Educational Progress

    a) Video: ARCP Introduction

    b) Video: Hospital – Feedback

06 – Guiding Personal and Professional Development

    a)Trainees with difficulties

Appendix 3: Ensuring appraisal of ESs includes a discussion of ES role

This will differ according to current Trust processes but should involve PGME informing the appraisal department of the need to ensure each ES discusses this role at their regular appraisal: Trusts should not rely on individual ESs to ensure the appraisal department knows about their ES status.

For those using a web-based appraisal system like Allocate then completion of ES training should trigger the relevant ES role form being added to the new ES's appraisal homepage so that it is clear that this needs to be

completed for appraisal to be complete. PGME departments will need to ensure that there is a robust system for this step in Trusts.

For those using a paper-based appraisal system, the process of ensuring the new ES's appraisal includes evidence of activity and a discussion of this role should be robust. It should be initiated by contact from PGME to the appraisal department on receipt of completed documentation confirming ES status.

Appendix 4: Suggested CPD in ES role

Identification of professional development needs in the ES role should be discussed at appraisal, and supervisors should show active engagement in effective and appropriate CPD as educators. There is wide scope for what CPD can be undertaken and activities in the role should be presented within the 7 domains of practice, with reflection on evidence presented as appropriate. It is helpful to ESs if the Trust embeds these suggestions in the ES form under a 'help' button in each section.

- Ensuring safe and effective patient care through training
  - Mandatory training requirements
    - Balancing the needs of service delivery with education
    - Allowing trainees, when suitably competent, to take responsibility for care, appropriate to the needs of the patient
    - Developing appropriate induction
  - Examples of evidence:
    - Courses attended or programmes undertaken including, face-to-face and online learning
    - GMC trainee survey results or equivalent
    - Feedback from patients about care received
    - Details of measures put in place to ensure supervision appropriate to trainee's competence and confidence
    - Trainee audits, examples of topics critically appraised by trainees
    - Examples of near miss/critical incident analysis

- Establishing and maintaining an environment for learning

  - Mandatory training requirements
    - Creating a learning environment
    - Identifying and planning learning opportunities
    - Dealing with diversity and providing equality of opportunity (update required three yearly)
  - Examples of evidence:
    - Courses attended or programmes undertaken including, face-to-face and online learning
    - GMC trainee survey results or equivalent
    - Other feedback from trainees from, for example, Shared Service's multi-source feedback tool for supervisors
    - Details of learning programmes, study schedules, timetables for trainees and clinical teachers
    - Feedback from colleagues

- Teaching and facilitating learning
  - Mandatory training requirements
    - Assessing learning needs
    - Using a variety of methods to deliver the curriculum
    - Skills teaching
    - Developmental conversational skills, e.g. supervision, mentoring, coaching
  - Examples of evidence
    - Courses attended or programmes undertaken including, face-to-face and online learning
    - GMC trainee survey results or equivalent
    - Other feedback from trainees from, for example, the Shared Service's multi-source feedback tool for supervisors
    - Details of learning programmes, study schedules and timetables for trainees
    - Feedback from colleagues
    - Evidence of recent initiatives to enhance the provision of learning opportunities

- Enhancing learning through assessment
  - Mandatory training requirements
    - Principles of workplace-based assessment
    - Use of commonly used tools, e.g. mini-CEX, MSF
    - Giving effective feedback
  - Examples of evidence
    - Courses attended or programmes undertaken including, face-to-face and online learning
    - GMC trainee survey results or equivalent
    - Other feedback from trainees from, for example, the Shared Service's multi-source feedback tool for supervisors
    - Details of programmes, study schedules and timetables for trainees indicating assessment modes, patterns and relevance to learning
    - Feedback from peers, e.g. relating to external examining or professional assessment

- Supporting and monitoring educational progress
  - Mandatory training requirements
    - Setting and reviewing learning objectives
    - Purpose and processes of portfolios
    - Annual review of competence progression
    - Identification, diagnosis and management of the trainee in difficulty
  - Examples of evidence
    - Courses attended or programmes undertaken including, face-to-face and online learning
    - GMC trainee survey results or equivalent
    - Other feedback from trainees from, for example, the Shared Service's multi-source feedback tool for supervisors
    - Examples of meetings, records of trainee progress and learning plans (anonymised)
    - Case studies of the management of a trainee in difficulty (anonymised)
    - Feedback from peers, e.g. relating to involvement in organisational/professional activities

- Guiding personal and professional development
  - Mandatory training requirements
    - Personal development planning
    - Career guidance and advice
  - Examples of evidence
    - Courses attended or programmes undertaken including, face-to-face and online learning
    - GMC trainee survey results or equivalent
    - Other feedback from trainees from, for example, the Shared Service's multi-source feedback tool for supervisors
    - Examples of meetings, records, case studies (suitably anonymised)
    - Examples of support, challenge and careers guidance provided to trainees (anonymised)
    - Feedback from peers

- CPD as an educator
  - Mandatory training requirements
    - Personal development planning
    - Career guidance and advice
  - Examples of evidence
    - Courses or programmes recently undertaken, including face-to-face and online learning
    - Personal reflection on educational activities to identify areas for development
    - Results of 360° appraisal, such as the Shared Service's multi-source feedback tool for supervisors
    - Certificates or qualifications obtained
    - Critical comments on relevant books or articles read recently
    - Results of peer review or professional observation of teaching
    - Keeps up to date on specific specialty and/or Foundation training requirements

Appendix 5: example of information to present on the ES appraisal form

Link to national guidance documents on which this form is based
- Promoting Excellence: standards for medical education and training (GMC)
- Professional Development Framework for Educators (legacy HEE now NHSWT+E)
- Professional standards for medical, dental and veterinary educators (AoME)
- Job description of ES (Medical Education Leaders UK)

How many trainees are you currently an ES for?

How many other locally employed doctors (trust doctors) are you currently an ES for?

Do you have agreed job plan time for your ES roles? If not please explain the reason for this including if there are plans to change this.

ES training and CPD
- Date of completion of ES training
- Date of completion of E+D training
- What educational CPD have you undertaken since your last appraisal (3 hours per year/15 hours over 5 years advised) and how has that benefitted your practice as an ES

Practice Domains – please list the evidence of good practice that you are submitting and give a short commentary on how each piece of evidence maps to some or all of the domains of the AoME professional development framework

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

Educational PDP

- If you have had a previous ES appraisal then have you achieved your ES PDP objectives? If not please give the reasons why.
- Please suggest at least one educational PDP goal or aspiration for the coming year.

- What support/resources will you need to achieve this?

How will you demonstrate you have achieved your goal?