



# **The Supported Return to Training (SuppoRTT) Supervisor Factsheet**

**A guide to help you to support your returning trainees.**

# The SuppoRTT Supervisor Factsheet

## Pre-absence

### The Meeting

Approximately three months before absence is due to commence.

Held by TPD, or College Tutor in Paediatrics and O&G.

30 minutes to 1 hour, in a relaxed but confidential space.

Explore trainees intentions for leave, being open and taking the time to listen.

Motivate trainee to seek out opportunities for development and support as they feel appropriate whilst they are away.

Signpost to available resources (see 'Signpost' factsheet).

### The SuppoRTT Plan

Download the form from the KSS Deanery SuppoRTT website.

Complete electronically - modifies as different options selected.

Complete AFTER the discussion rather than making it the focus of the meeting.

The form may identify other topics for discussion.

Summarise important discussion points being mindful of the documentation of sensitive issues.

Trainee submits completed form

Trainee uploads form to ePortfolio.

SuppoRTT team updates info & sends out relevant information when appropriate

### Discussion Points

Circumstances around leave

Ways to keep in touch

Study leave arrangements – KIT days/ SuppoRTT bespoke leave

Mentoring (informal or formal) for ongoing support & development

PSW for emotional support

OH/GP for health related issues

Intentions to return LTFT & reminder to complete forms 3 months before return date

Speciality specific issues

ARCP date before leave & assessments up to date

### Need more help?

Contact KSS SuppoRTT team:  
[england.ksspsws.se@nhs.net](mailto:england.ksspsws.se@nhs.net) or your  
local SuppoRTT Champion

Visit the KSS Deanery SuppoRTT website  
[Click Here](#)

See Signposts fact sheet for further information  
& links to useful resources

# The SuppoRTT Supervisor Factsheet

## Pre Return

### The Meeting

Approximately three months before agreed return date.

Held by TPD, or College Tutor in Paediatrics and O&G.

Set aside 1 hour, in a relaxed but confidential space.

Review experiences of time out including positives & transferable skills

Explore concerns about returning, starting with the most important.

Signpost to available resources (see 'Signpost' factsheet).

Visit the KSS Deanery SuppoRTT website [Click Here](#)

### Discussion Points

Clinical responsibilities

ID, parking, IT etc.

Childcare emergency plan

Ongoing commitments

Clinical skills, confidence & support anticipated.

Activities for enhanced shadowing. Trainees MUST contact HR at least 3 months before return date

If opting out of Enhanced shadowing, discuss alternative ways to support their return.

Speciality updates e.g. guidelines, equipment

Funding for Return to Training activities

Intention to train LTFT & remind trainee to submit forms at least 3 months before return date.

Discuss with rota lead any difficulties with rota adjustments. You may need to advocate on the trainees behalf and liaise with the department

If returning mid rotation ensure tailored induction is arranged prior to their start date, incl. mandatory

Encourages trainee to seek a mentor to offer ongoing support during the transition to promote a trainee led approach to problem solving

Additional support for example PSW or Occupational Health.

### The SuppoRTT Plan

Download the form from the KSS Deanery website.

Complete AFTER the discussion rather than making it the focus of the meeting.

Record specific plans discussed including opting in or out of enhanced shadowing and who is responsible for each action step

Trainee submits completed form

Trainee uploads form to ePortfolio.

SuppoRTT team updates info, sends information and releases funding to the Trust for any agreed Enhanced Shadowing.

### Need more help?

Contact KSS SuppoRTT team:

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# The SuppoRTT Supervisor Factsheet

## Support in the workplace

### Rota Planning

Rota leads should be informed of any doctors returning & any specific plans requiring adjustment to duties.

Returners should NOT be rostered to work weekends or night shifts in their first two weeks back, even after any enhanced shadowing if used.

Evening shifts should have peer or consultant supervision unless agreed with the trainee in their SuppoRTT plan. The use of enhanced shadowing can help units achieve this.

Visit the KSS Deanery SuppoRTT website [Click Here](#)

### HR & Paperwork

Ensure trainee has HR contact details & has received new starter paperwork including pay, OH, parking, ID & IT

Trainee informs HR of Enhanced Shadowing

Ensure LTFT forms have been completed & sent off for approval, if applicable

### SuppoRTT Plan Review

Completed 2-4 weeks after return to work following review meeting.

Download the form from the KSS Deanery website

Documents progress, use of assessments, additional support & any issues with training unit.

The trainee submits the completed form

Trainee uploads a copy to ePortfolio

SuppoRTT updates information and records

### Induction

All trainees should have an appropriate induction planned

If starting mid-rotation, a tailored induction should be arranged prior to starting clinical shifts including mandatory & IT training

This is NOT the trainees responsibility to arrange but they should be flexible in their availability to attend the sessions

Keeping in Touch (KIT) or Shared Parental Leave in Touch (SPLIT) days & SuppoRTT funded bespoke study leave can be used

### Need more help?

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# The SuppoRTT Supervisor Factsheet

## Support in the workplace

### Enhanced Shadowing

In order to rapidly regain clinical knowledge and confidence, doctors returning to training following a sustained period of absence will be strongly encouraged to participate in a period of enhanced shadowing.

#### Duration

Two weeks (10 working days) ideally before intended return date, although this can be started on the same date as the expected return date. The period of time should be used to engage in specific planned activities targeted at the trainees individual needs. This can be done pro-rata at a LTFT capacity if necessary.  
If it is expected that the trainee will require more than 10 working days of enhanced shadowing to return to full duties please contact the SuppoRTT team to discuss further.

#### Arranging Enhanced Shadowing

HEE agrees to fund 100% basic salary for any eligible trainee to participate in enhanced shadowing for up to 10 working days. HEE does not need to provide approval of the arrangement. All that is required is a completed SuppoRTT plan.  
Trainees MUST contact HR/Medical Staffing **three months before** return date to arrange enhanced shadowing and negotiate a start date.  
HR/Medical Staffing will need to approve the trainee's SuppoRTT Plan if they wish to participate in enhanced shadowing.

#### Suitable post

Trainee **MUST** be additional to the rota and not used to fill rota gaps  
Trainees should expect close supervision as discussed in their planning meeting  
If the trainee wishes to do OOH shifts they can be included in the basic hours of enhanced shadowing but they **MUST** have agreed peer or senior support at all times.

#### Is it mandatory?

Trainees can opt out of enhanced shadowing if deemed unnecessary after discussion with supervisor. This must be indicated on the SuppoRTT Plan.

#### Review and feedback

It is good practice to meet with the trainee to review their progress two weeks following return. Part 3 of the SuppoRTT plan is designed to document this review. During this meeting, you should determine if the trainee can return to unsupervised duties (other special adjustments may remain).  
If the trainee is not able to return to full duties, please contact the SuppoRTT team for further guidance.

# The SuppoRTT Supervisor Factsheet

## Support in the workplace

### Clinical Supervision

Identify situations when peer and/or consultant supervision will be required & if this is direct or local in nature. This may vary depending on the activity.

If a peer is supervising they should be asked & made aware so they can intervene appropriately if the situation requires it (if direct supervision required or no consultant accessible)

If senior trainee supervising, use this as a learning event exploring the issues of returning trainees.

Trainees take longer to truly regain their confidence & pre absence levels of working & may benefit from mentoring or referral to PSW

Visit the [KSS Deanery SuppoRTT website](#) [Click Here](#)

### Clinical Skills & Knowledge

Facilitate access to guidelines

Access to evidence based clinical knowledge summaries e.g. uptodate

Clinical skills lab sessions

1:1 Clinical skills session with senior trainee/ consultant/ANP

Life support training, in-house or certified course ALS, APLS etc.

Simulation courses or in-house simulation as candidate or observer

Speciality specific 'Return to Clinical Practice' courses

Speciality specific courses relevant to key skills needed for safe return

E-learning prescribing courses or speciality specific pharmacy session

### Clinic Experience

Reduced lists for the first few clinics

Shadowing of consultant clinic in enhanced shadowing/first few weeks

Set specific consultant time pre/post clinic to review notes & management

Discuss clinical management skills

Assessment of clinic letters and/or review of examples of clinic letters

### Need more help?

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# The SuppoRTT Supervisor Factsheet

## Support in the workplace

### Assessments

Most trainees will have issues with **confidence rather than competence**. Both trainee & supervisor should **agree** a combination of methods to assess progress & the point each should be used.

#### WPBA

useful as a tool for personal reflection & senior feedback, helping trainees identify learning needs but be mindful as they can cause additional pressure which may instead be counterproductive, especially if feedback is handled insensitively.

#### ePortfolio

Evidence in ePortfolio of personal reflection, self appraisal of progress & identification of learning actions & their subsequent attainment can be equally good if the trainee is capable of this level of self reflection.

#### Assessment of activities

Assessments should be on pre-specified work activities eg clinic, acute take, OOH shift, management of common cases

#### Skills Log/DOPS

Skills log and/or DOPS of procedures or interpretation of tests the trainee is expected to be competent in at the start rather than end of the job, relevant for training level.

#### Feedback

Collation of consultant, peer & nursing feedback, taken into context of absence & summarised by supervisor rather than individual comments or incidences relayed back to the trainee.

**The Assessment and Revalidation team are on hand to answer any queries you might have. If you are not sure, please Contact KSS SuppoRTT team: [england.ksspsws.se@nhs.net](mailto:england.ksspsws.se@nhs.net) and they will point you in the right direction for clarification.**

# The SuppoRTT Signpost Factsheet

## The KSS Deanery SuppoRTT website

- [SuppoRTT Forms](#)
- [SuppoRTT Resources](#)
- [SuppoRTT courses and events](#)
- [KIT/SPLIT days /SuppoRTT funded Bespoke Study Leave](#)

## Parental Leave and Childcare

- [Gov.uk website on Child care & Parenting](#) for information on maternity/paternity/shared parental leave, child benefit, tax credits, 30 free hours, tax free child care, financial help for disabled children & more
- Individual Trust Parental leave policy
- [BMA Working Parents](#)
- Finding childcare - <https://www.childcare.co.uk>

## Financial help

- [NHS Employers](#) – updated information on pay & contracts
- [BMA](#) – reduction in fees
- [Royal colleges](#) may offer reduction in subscription
- [GMC](#) offers reduction in fees if on low income