

Workshop

Educational Supervisors Report

HEE Symposium

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Developing people
for health and
healthcare

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Questions for today?

Are there any particular areas that you would like covered by the end of this session?

Please add to chat in zoom.....



Introduction

- Clinical & educational supervisor – definitions
- Aims of educational supervision
- Some (not much) educational theory
- The educational supervisor's report – principles & pitfalls
- ARCP
- Quiz & scenario
- Take home messages

Clinical Supervision / supervisor

- **Clinical supervision** describes the framework for regular, structured encounters reflecting on casework in the context of the post or specialty in which the healthcare professional is working and aims to identify areas of best practice and developmental needs
- **Named clinical supervisor** is a trainer who is selected and appropriately trained to be responsible for overseeing a trainee's clinical work and provides constructive feedback during a training placement

Educational Supervisor

- **An Educational supervisor is a named trainer** who is selected and appropriately trained to be responsible for the overall supervision and management of a trainee's educational progress during a training placement
- Responsible for collating evidence of the performance of a trainee, providing feedback and agreeing action plans to address concerns and issues

Gold Guide 8th edition

- 2.59 All trainees must have an educational and named clinical supervisor for each placement in their training programme. It is normal practice for these roles to be undertaken by different people but (in some elements of a rotation) the same individual may provide both educational and clinical supervision. In such a circumstance, the respective roles and responsibilities should be clearly defined. In integrated academic training, a trainee will also have a named academic supervisor.

Aims for Educational Supervision

- Encourage trainees to reflect in order to help them.....
- Identify their educational needs and thus.....
- Facilitate their personal and professional development and
- Formulate an educational plan to help keep them on track in their training
- Intermittent reports capturing the trainee's progress via WPBA

Talk in breakout rooms

Your personal experience of writing an Educational Supervisor report

- What helped you?
- What was easy, what was difficult?
- What are the qualities of a good report?
- What should you avoid?



Educational Supervisor's Report

- Provides a summary of the assessment evidence for the ARCP process (4.23, GG 8th edn.)
- Still formative.....
- Monitors the progress of any remedial requirements
- Enables learning needs to be identified and an action plan identified
- Considers issues around fitness to practice and revalidation
- Trainee should be able to raise concerns safely

School of Medicine Feedback Form on Educational Supervisor's Report

Name of Educational Supervisor: Educational Supervisor's Trust:	Specialty:
Name of Trainee :	Grade of Trainee:
Date of ARCP Panel:	Trainee ARCP Outcome :

Is there an Educational Supervisor's Report?	Y/N	
Educational Supervisor Report criteria	Y/N	Comments
Judgments are referenced to evidence available in the portfolio (e.g. linked to specific WBA, MSF, Clinical Supervisor Reports, and or Curriculum competencies)	Y/N	
All relevant competency areas on eportfolio have been signed off appropriately by the ES	Y/N	
Suggestions for the trainees development are made;	Y/N	
Areas of good practice are identified	Y/N	
Areas for trainees' development or that are unsatisfactory have been identified	Y/N	
The ES report provides a thorough and comprehensive summary of the training period being reviewed	Y/N	

Overall Quality and Usefulness of the Report:

In the opinion of the ARCP panel, it was felt that the report was:
 Comment:



Qualities for an ESR

Accurate

Shared with trainee

Constructive

Candid

Timely

Systematic

Advisory

Factual

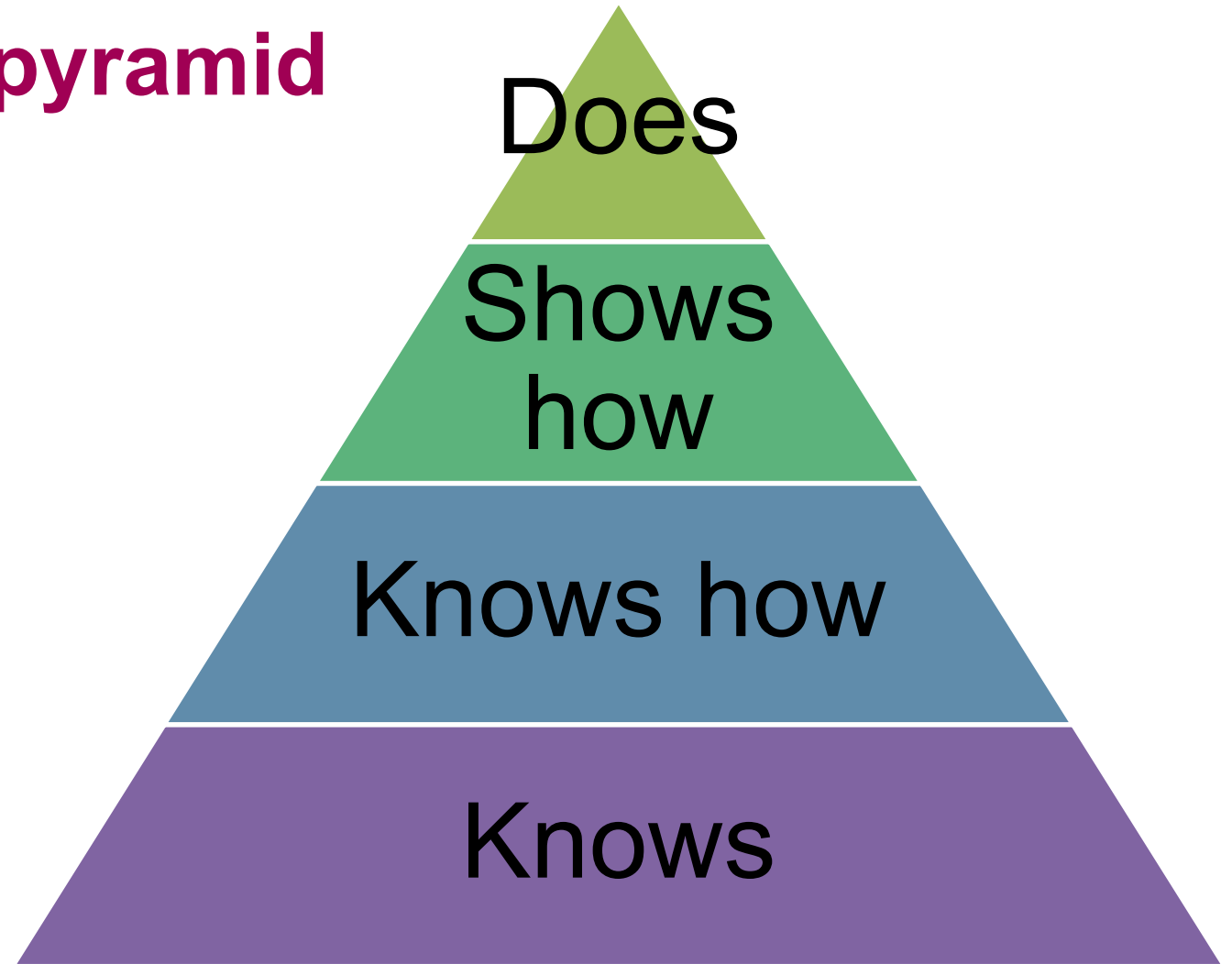
Justified

Not defamatory

Congruent with the ARCP outcome

Some theory

Miller's pyramid



Professional competences / domains of learning





Types of assessment

FORMATIVE

- Intended to assess progress or help develop the learner
- Cannot pass or fail (but can still be mandatory)

SUMMATIVE

- Testing against an explicit benchmark
- Pass/fail
- Determines progression to next stage

Workplace Based Assessment

“The evaluation of a doctor’s progress over time, in their performance in those areas of professional practice best tested in the workplace”

This is a **formative** process

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Entrustable professional activities

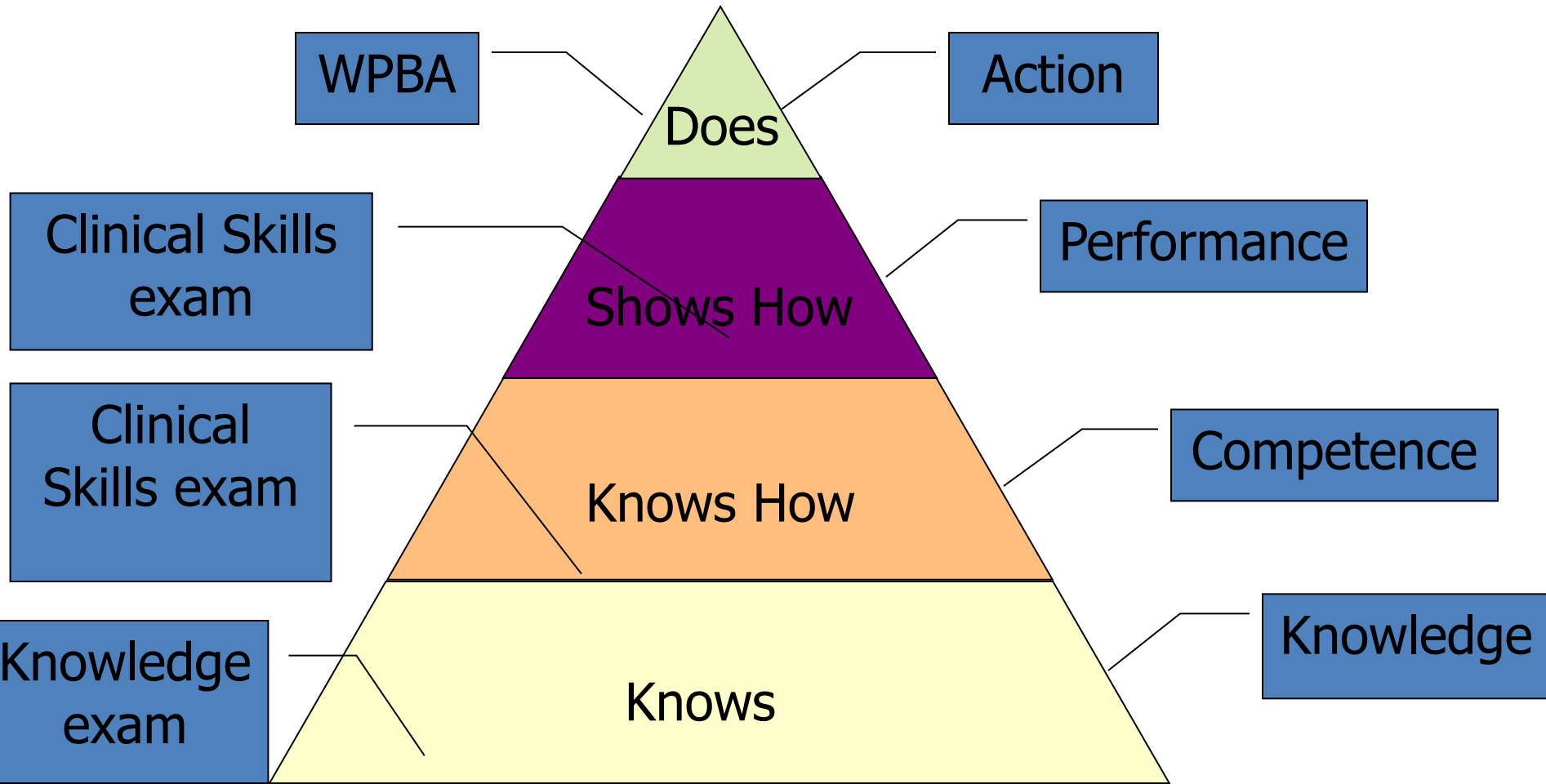
- carefully chosen “units of work” that together constitute the mass of critical elements that operationally define a profession [specialty]

- Examples?



What do assessments help you determine as an educational supervisor?





Task in breakout room

- List types of assessment that you use
- Are they formative or summative?
- What domain do they test?
- At what level of Miller's pyramid are they?

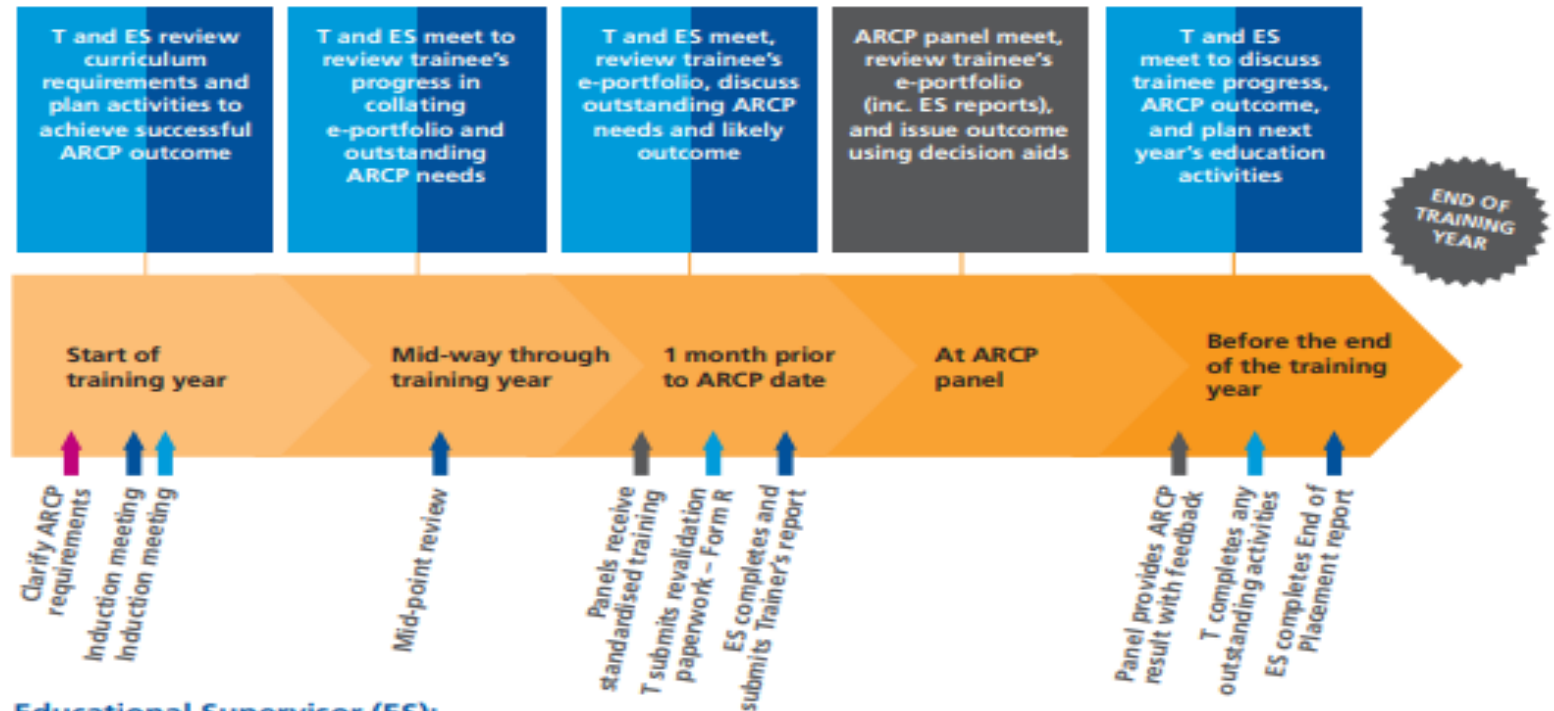
The ARCP

- Annual Review of Competence Progression
- An ARCP is required for a trainee to progress on to the next year of their training.

The ARCP Process through the training year (including roles and responsibilities)

Continual process of compiling their e-portfolio of evidence including: Professional examinations, courses and educational activities linked to attainment of the curriculum, work-place based assessments, self-reflective learning logs, skills logs, QI projects/audits, publications and research

Trainees (T):



Educational Supervisor (ES):

Supervision activity includes collation of evidence on trainee performance from the clinical supervisor and others informally involved with supervising the trainee; the ES should also provide regular formative appraisal and career guidance through the course of the training year, sign-posting educational needs for the future

- Where a trainee's placement is < 1 year, an induction, mid-point and end of placement review should be conducted for each placement

Blue = Trainee

Dark Blue = Educational Supervisor

Purple = Royal College

Grey = ARCP panel

ARCP OUTCOME	Outcome Explanation
OUTCOME 1	Satisfactory progress – Achieving progress and the development of competences at the expected rate
OUTCOME 2	Development of specific competences required – Additional training time not required
OUTCOME 3	Inadequate progress – Additional training time required
OUTCOME 4	Released from training programme – With or without specified competences
OUTCOME 5	Incomplete evidence presented – Additional training time may be required
OUTCOME 6	6a. Gained all required competencies for the programme (clinical) 6b. Gained all required competencies for the programme (academic) 6c. Gained all required competencies for the programme (non-clinical)

Covid & ARCP outcomes

- Cancellation mandatory courses, professional exams & assessments
- Rotations delayed, reduced / different clinical experience, re-deployment, illness
- Trainers unavailable to complete assessments / ESRs

ARCPs 2020

- Joint approach Statutory Education Bodies (SEBs) & Royal Colleges
- Remote ARCP panels - changes to members
- Prioritising ARCPs at key transition points and for TIDs
- New ARCP outcomes – trainee progress affected by covid-19
 - 10.1 – trainee not at critical progression point
 - 10.2 – trainee is at critical transition point eg approaching CCT – more training time required

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The ES report provides a thorough and comprehensive summary of the training period being reviewed	Y/N	
Overall Quality and Usefulness of the Report:		
In the opinion of the ARCP panel, it was felt that the report was: Comment:		

An ESR is easier if.....

- Supportive and facilitative relationship
- An environment that fosters trust and mutual respect so that the learner opens up and accepts feedback
- Able to gently challenge
- And assess learning needs
- Coaching style
- So get to know each other.....

Questions???

The word 'QUIZ!' rendered in a 3D, blocky font. The letters are white with a red outline and a slight shadow underneath, giving them a three-dimensional appearance.

QUIZ!

- 1) How often do ESRs usually happen?
And who determines that?
- 2) At what time of year do ESRs tend to happen? And why?



3) Who can do ESRs?

4) Is every ESR followed by an ARCP?
What is the allowable time gap between
the two?



5) What evidence can I use on which to base an ESR?

6) Can an educator be the CS and ES?



7) What are the potential ESR outcomes?

8) What sort of feedback can I expect after I do an ESR?



9) What should I look out for to highlight a potential problem?

10) What should I expect from MSFs (colleague feedback) and PSQs (patient feedback)?

QUIZ!

11) If an e-portfolio is complete, apart from an ESR, what ARCP outcome is given?

Can the trainee appeal this outcome?

12) If you have completed the ESR in draft can the ARCP panel see it?

Can the trainee can see it?

Scenario

You are just about to do the first ESR for this trainee. The clinical supervisor approaches you to say that they have some concerns about the trainee's progress and asks you to address that during the ESR. You look on the eportfolio and can't see anything to back this up. What would you do?

Preparation for your ESR is key

- Know your way around the e-portfolio
- Understand the mandatory requirements eg decision aide
- Be familiar with the trainee's evidence on their e-portfolio
- Potentially do the 'writing' first so that you can concentrate on the dialogue
- Explore their feelings and Ideas, concerns and expectations
- *The ARCP outcome should NOT be a surprise to the trainee*

Risks – the bottom line

The GMC’s document “Good Medical Practice” states:

“You must be honest and objective when appraising or assessing the performance of colleagues, including locums and students. Patients will be put at risk if you describe as competent someone who has not reached or maintained a satisfactory standard of practice”

Take home messages

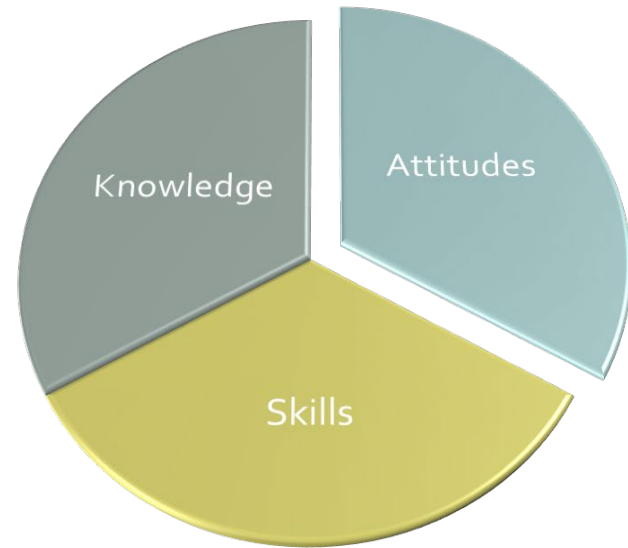
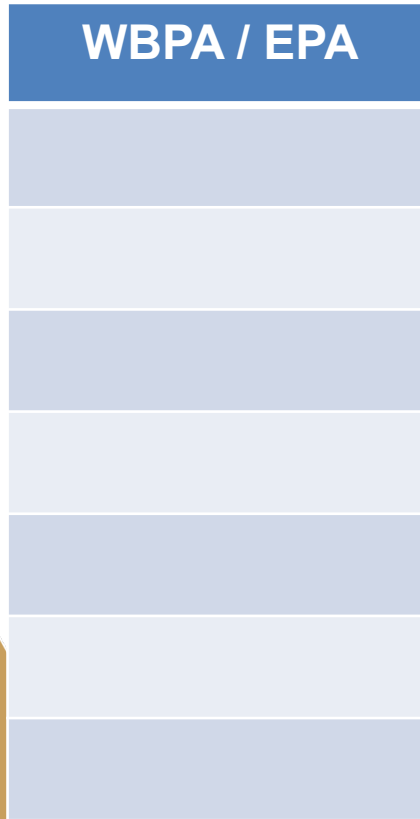
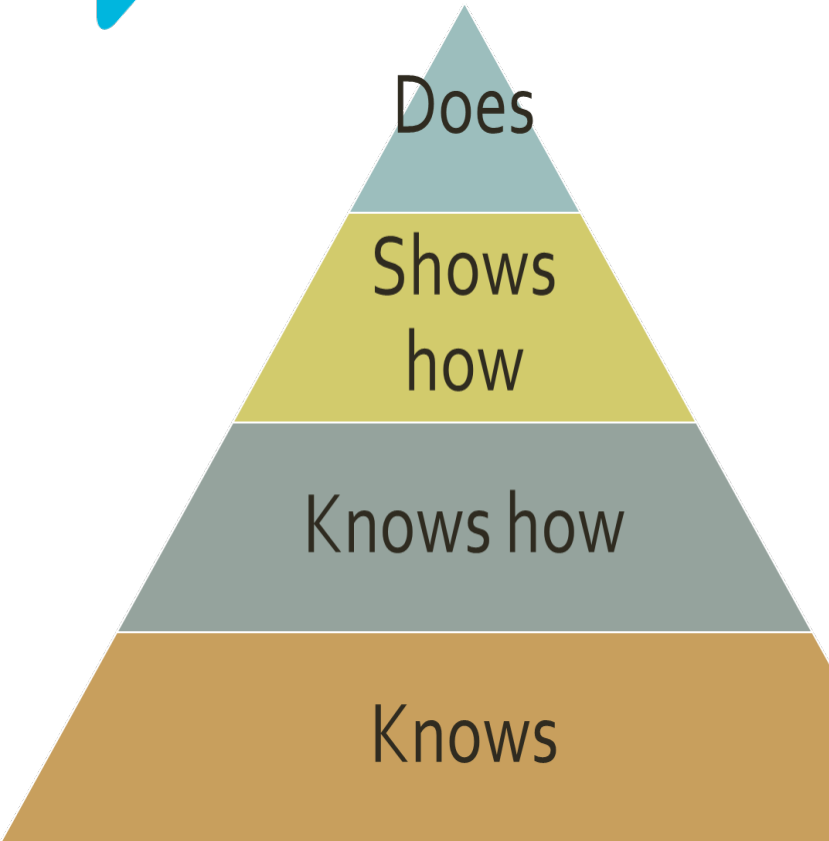
- Build good relationship with trainee
- Do ESR early; allow enough time
- Be honest – take care with feedback
- Your responsibility to assess competence based on evidence provided by trainee
- Provide enough narrative to explain
- Trainee should be aware of likely outcome before ARCP – no surprises

Questions??



Handouts

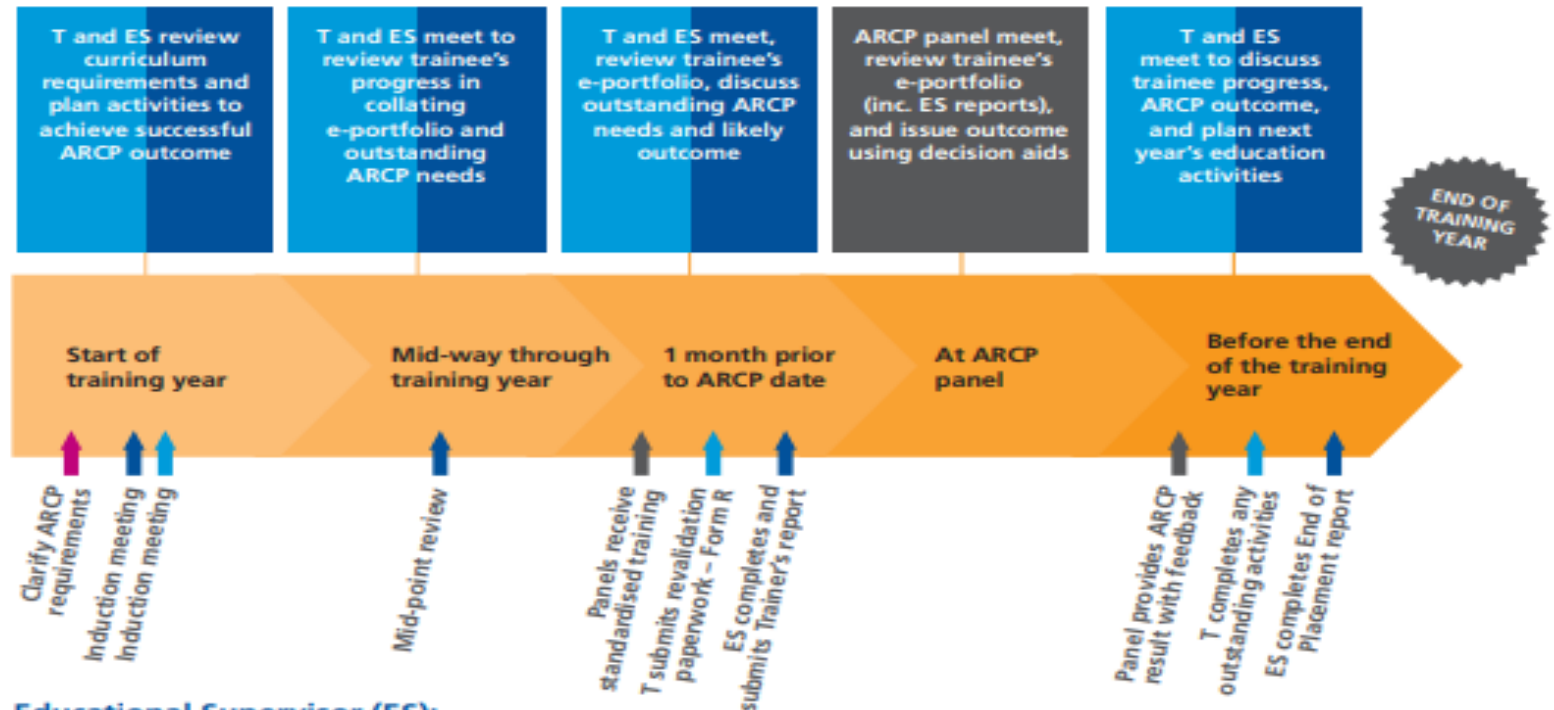
Slides 41, 42



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