



Health Education East of England

# Health Education East of England (HEEoE)

Managing Foundation Trainees with differing needs

Supporting Professional Performance

Guidance for trainers and trainees

April 2015

## Managing Foundation Trainees with differing needs

Supporting Professional Performance

#### 1. <u>Overview</u>

This guidance supplements the HEEoE *Guidance for Managing the Trainee in Difficulty* (*"the Guidance"*), and should be read in conjunction with this document, as well as local employer policies and procedures.

It applies to all Foundation trainees within HEEoE and covers a range of circumstances that may contribute to a Foundation trainee developing differing needs, or commencing FP Training with an existing disability which may impact on the doctor's training.

HEEoE has responsibility for the delivery of foundation training in Cambridgeshire, Suffolk, Norfolk, Essex, Bedfordshire and Hertfordshire. The delivery of these programmes is managed through four foundation schools, the East Anglian Foundation School, North East Thames Foundation School, North Central Thames Foundation School and North West Thames Foundation School, and also with close links to the London HEEoE.

We are fortunate in having close educational networks in the Trusts throughout HEEoE and will seek to utilise these networks in providing support for trainees in both years of the Foundation Programme. It is important to have a pastoral care system in place for trainees with differing needs, to allow early identification and direct appropriate action to remedy the situation, whether patients are perceived as at risk or not.

It is essential that there are effective and fair procedures for identifying and supporting any Foundation Programme trainee with differing needs and who may be failing to achieve the required outcomes. The process should be seen as the responsibility of the whole team with which the trainee is working.

It is also essential that communication with trainees about their progress, or lack of it, is clear. Any problems should be explained to them at the earliest opportunity and a record kept of those conversations. Good communication and record keeping is the cornerstone of all these processes.

It is important that the relevant employing Trust notifies the Foundation School Director of HEEoE at the earliest opportunity of any FP trainee with differing needs, and provides regular updates on a trainee's progress thereafter. This will enable HEEoE to be aware of each individual case and to establish and maintain a confidential file for each doctor required for our auditing and Quality Management processes.

## 2. Foundation Year One

- The outcomes for trainees in this first year are clearly specified by the GMC in The New Doctor (2009). It is anticipated that a doctor working full time in F1 will meet the required outcomes in one year. However, additional support may be required. The GMC would not expect the trainee to continue in practice at the end of two years if they have failed to achieve these outcomes.
- Trainees who are at risk of poor performance or with differing needs should in the first instance be highlighted by the national Transfer of Information (TOI) process from the

medical schools. Information considered relevant to the likely performance of that trainee would be forwarded to the Foundation Training Programme Director (FTPD) or Clinical Tutor at commencement of the post. For these individuals, appropriate support would be established at the start of their training programme and this would be agreed between the FTPD and the relevant trainee, with support from the employing Trust.

- If the trainee is encountering difficulties the initial assessments and remediation will take place within the Trust concerned through the Educational Supervisor and FTPD. It is anticipated that most of these issues will be resolved at Trust level. If there are significant difficulties or the problem(s) remain unresolved advice and guidance should be sought from the Foundation School Director (FSD) of the school to which the post is linked (see below for contact details of FSDs).
- The FTPDs are key individuals in the established HEEoE network and will usually initiate the involvement of the FSD when it is needed.
- If significant difficulties remain (for example, if a period of additional training may be required) this should be discussed with the HEEoE. This advice may come from either FTPDs directly, or via the FSD in a North Thames linked Foundation School. It is extremely important that good communication is maintained between all relevant parties to ensure effective resolution of the issue. HEEoE advice relating to HEEoE trainees can be obtained from Dr Alys Burns, Deputy Postgraduate Dean. If required, HEEoE will also consider whether additional funding should be made available for remedial training.
- For F1 trainees in East of England posts that are within the North Thames Foundation Schools, there will be close communication between the relevant North Thames Foundation School and the EoE HEEoE as to how additional support may be best provided. Appropriate remediation may be best placed within London in another LEP within the NTFS, and this will be managed by the NTFS in conjunction with the London Deanery. If the F1 trainee remains within an EoE post, the EoE HEEoE and relevant NTFS will work together to provide support and resource.
- For F1 trainees, where there have been serious concerns there should be communication with the graduating medical school for that trainee. This will be undertaken by the individual foundation schools or HEEoE, as appropriate.

## 3. Foundation Year Two

- To support F2 trainees, a TOI process for trainees moving from F1 to F2 years has been implemented to ensure that issues relevant to trainee needs, which are not explicit within their portfolio, are brought to the attention of their associated F2 FTPD. This will allow appropriate support to be implemented at the start of F2 and may avert difficulties.
- The Reference Guide for Foundation Training (2010) lists a number of potential reasons for trainees not completing their F2 year satisfactorily. The educational aspects will be identified through educational supervision and assessments. Failure to provide evidence of acquiring F2 competences may occur for a number of reasons. These will need to be identified and addressed as set out in the Reference Guide. The Educational Supervisor and FTPD will put the initial measures in place locally. It is anticipated that most of these issues will be resolved at Trust level. If there are significant difficulties or the problem(s) continue advice and guidance should be sought from the FSD of the school to which the post is linked (see below for contact details of FSDs).
- If significant difficulties remain (for example, if a period of additional training may be required) this should be discussed with HEEoE. This advice may come from either FTPDs directly, or via the FSD in a North Thames linked Foundation School. Problems

may be overcome within the F2 year but extended training may occasionally be required. This will be for six months in the first instance but may extend to twelve months. HEEOE and relevant NTFS will work together to provide support and resource.

• If the trainee has failed to achieve the competences at the end of this time the F2 Achievement of Competency document cannot be issued and the trainee should be referred to the GMC

#### 4. Roles and Responsibilities

In addition to those mentioned in *the Guidance, a* range of professionals are involved in the management of FP doctors with differing needs and need to understand and implement their role and responsibilities.

#### **Foundation Doctors**

- As registered medical practitioner, the trainee has an individual responsibility to practice and abide by the principles enshrined in "Good Medical Practice" and all other GMC Guidance for doctors
- The General Medical Council (GMC) highlights the duty all doctors have to protect patients. This duty includes where it is believed that a doctors' own health, conduct or performance is a threat to patients. Excerpt from the GMC's 'Good Medical Practice' 2006 'paragraph 77:

"If you know that you have, or think that you might have, a serious condition that you could pass on to patients, or if your judgement or performance could be affected by a condition or its treatment, you must consult a suitably qualified colleague. You must ask for and follow their advice about investigations, treatment and changes to your practice that they consider necessary. You must not rely on your own assessment of the risk you pose to patients".

- Prospective trainees with a pre-existing need/disability as a medical student should engage with the national Transfer of Information process prior to commencing their Foundation training, which supports sharing information confidentially with the Foundation School and the employing Trust.
- Trainees experiencing difficulties during Foundation taining should engage with transfer of information between placements through e-portfolio and also the TOI process between F1 and F2.
- As an employee of a Trust, the trainee has a contractual relationship with their employer and is subject to local and national terms and conditions of employment. This will include compliance with clinical accountability and governance frameworks in addition to Trust disciplinary procedures.
- As a member of a foundation training programme, trainees have a responsibility to fully engage with the educational process at all stages of their training, including taking the initiative to seek help and guidance from their local education provider (LEP) and/or HEEoE if they become aware they are experiencing difficulty. The trainee is also required to complete and provide the necessary evidence to demonstrate their progress through the training programme and the acquisition of the required skills and competencies including Work Based Assessments, and to maintain their training portfolio. The Educational Supervisor should encourage this to happen in a timely fashion.

• It is also recognised that sometimes failure of the trainee may be the result of inadequacies in the training environment. If this cannot be resolved locally advice should be sought from the FSD.

# **Clinical Supervisors**

Clinical supervisors may be well placed to identify concerns and should:

- Ensure potential problems are identified early
- Support and listen to the trainee's concerns
- Collaborate with the trainee if required to facilitate reasonable adjustments to the working environment/arrangements
- Obtain feedback from colleagues on the trainee's performance
- Record all discussions and give a copy to the trainee
- Communicate effectively with the Educational Supervisor
- Provide additional support to the trainee
- Modify the duties if any aspects compromise patient safety
- Share the information with the next placement with the knowledge of the trainee

## **Educational Supervisors**

Educational supervisors provide continuity of support and are normally a key individual in supporting the trainee with differing needs. They should:

- Ask all trainees at their first meeting if they have any health problems or disabilities
- Meet the trainee as soon as possible after concerns are identified
- Liaise with the Clinical Supervisor
- Ensure the learning plan is modified appropriately
- Meet the trainee more frequently to monitor progress against any agreed objectives
- Notify the FTPD/Clinical Tutor of any trainee with differing needs and involve the Tutor if concerns are not being resolved

## The Foundation Training Programme Director (FTPD)

It is the FTPD's role to ensure that educational supervisors are aware of the need to identify problems early. They should provide help and advice to the trainee, the educational supervisor and the clinical supervisor. Where possible they should put in place local measures to remedy the situation, involving the Clinical Tutor or other educational faculty within the Trust, as well as the FSD, if necessary. HR and occupational health should also be involved early, and advice sought as to process. If these measures do not result in significant improvement in a timely fashion, the FSD should be contacted. When there are concerns about a trainee's performance it is appropriate to:

- Document concerns and issues clearly
- Seek opinions from all those concerned in supervising and assessing the trainee
- Ensure concerns are discussed with the trainee at an early stage
- Agree an action plan to include support and additional training with a time frame for review
- Record progress against that action plan

- Ensure patient safety/notify clinical teams of any adjustments to the work placement
- Ensure that robust careers guidance is provided for all trainees but especially those with a differing need

It is very important that problems are identified and addressed well before the end of the year in question in order to avoid last minute issues relating to the end of year documentation.

When there are serious concerns about a trainee's fitness to practice whether due to personal (health) reasons, capability or misconduct, appropriate Trust policies should be followed and the appropriate FSD informed as a matter of urgency. The Trust Medical Director and Human Resources department should also be informed, with involvement by occupational health as appropriate at an early stage.

The FTPD is also required to inform HEEoE immediately of any instance involving a trainee that leads to the Trust undertaking any investigation into the conduct of a trainee and any disciplinary actions taken, including referrals to the GMC.

# Trust/LEP HR for medical staffing

HR managers, normally working in close collaboration with Education Centre staff, play an important role in supporting the trainee with differing needs. They should:

- Ensure that, as far as possible, the need for reasonable adjustments for disabled FP doctors has been anticipated in advance
- Ensure Foundation trainees are aware of Trust policies and how they may access them
- Ensure a supportive environment in which trainees feel safe and supported to disclose concerns and that is conducive to resolution of issues
- Ensure trainees are being supported in the placement
- Obtain clear guidance on any restrictions of practice to protect patient safety
- Ensure Occupational Health is consulted if there are any potential health concerns
- Ensure good records of meetings are retained and shared with the trainee
- Work to develop an environment to promote equality and eliminate discrimination

# 5. <u>Taking time out of Foundation Training</u>

Foundation doctors may need to take a period of time out of their programme for a variety of reasons. The Certificate of Experience for full GMC registration requires the F1 trainee to have completed a full 12 months of training at F1. GMC requirements state that in either the F1 or F2 year, a trainee can take up to a maximum of 4 weeks off for statutory reasons eg sick leave, maternity leave. If this is exceeded, additional time may be required to successfully complete Foundation training, which is both time and competency based.

The individual circumstance of each case will be taken into account and national agreement has been reached that the Foundation School Director can, at their discretion, approve individual cases who have taken more than 4 weeks off where appropriate.

## 6. <u>The Foundation Doctor who is underperforming</u>

Whatever the circumstances, it is essential that an underperforming Foundation doctor is identified and action is quickly taken to address the underlying issues. The process as detailed above should be followed, in conjunction with *the Guidance*.

## 7. <u>The Foundation Doctor with a Disability</u>

The HEEoEis committed to equality of opportunity, as detailed in the HEEoE *Equal Opportunities Policy.* 

A Foundation Doctor may commence Foundation Training with a known disability or may develop impairment at any time during the programme, and can expect full support to ensure the training outcomes are achieved. He/she are specifically encouraged to make a disclosure of their disability to ensure relevant organisations are complying with disability discrimination legislation and recent GMC guidance which provides for their protection and includes:

- no unlawful discrimination because of real/perceived challenges due to the nature of the disability
- anticipation of needs and reasonable adjustment to the workplace
- demonstration of equality and diversity
- robust career guidance
- a support network to allow the trainee to progress through training

 confidentiality; though trainees are encouraged to be open with colleagues (this has been shown to generate an enhanced workplace overall and an culture of support)

The GMC has issued guidance '<u>Gateways To The professions: Advising Medical</u> <u>Schools; encouraging disabled students</u>' <u>http://www.gmc-</u> <u>uk.org/education/undergraduate/the\_gateways\_disability\_project.asp</u> to medical schools on encouraging disabled students to apply for places. This document includes advice that applies to all doctors in training and is recommended to be used as a point of reference.

# 8. Less than Full Time Training (LTFT)

HEEoE is strongly committed to helping all doctors reach their full potential and to helping those with child-caring or other responsibilities or health problems, to continue training. Individuals with ill-health or family responsibilities may benefit from working arrangements that are not full-time. Advice can be sought from the FTPD and the Foundation School/HEEoE.

Full details of LTFT policy and process can be found on the HEEoE website (https://heeoe.hee.nhs.uk/). The first step is for a trainee to ascertain their eligibility for LTFT. Once this has been confirmed, the trainee can then discuss their options with the Foundation School and the employing Trust and construct a programme that delivers the requirements for completion of FP Training. Possibilities include:

A slot share arrangement Working less than full time in a full time post Working in a supernumerary capacity via funding provided by the EoEMPD

## 9. Inter Foundation School Transfers

There is a national process for trainees wishing to transfer to another Foundation School. Full details can be found on the HEEoE website (https://heeoe.hee.nhs.uk/).

There is no formal process for Intra Foundation School transfers (i.e. moving to different Trust within the Foundation School). Such requests are dealt with on an ad hoc basis by the individual Foundation Schools within HEEoE.

## 10. <u>Maternity, Paternity and Adoption Leave</u>

Maternity, Paternity and Adoption leave requests may be received from Foundation doctors, all of which fall under the umbrella of employment law and are the responsibility of the employing Trust.

For Maternity leave most trainees require adjustment of their programme as they are likely to be taking leave for a period considerably longer than 4 weeks. Their leave requirements must be discussed with the local FTPD and Trust HR/Medical Staffing who will discuss the implications for their progress and will agree appropriate dates for commencement of leave and return to work. The Foundation School must be informed and will facilitate programme adjustment and placement. Some trainees may request return to work after maternity leave on a LTFT basis, as detailed above. Paternity and Adoption leave should be made available to trainees eligible to take it, in accordance with Employment Law and the Trust's policies in this area. Trainees

should again discuss their requirements with their Foundation Tutor and Trust HR/Medical Staffing.

#### 11. Foundation Doctors with Restrictive Practice

Should an FP Doctor have restrictions of their practice (e.g. because they have been identified as carrying a blood borne virus (BBV), their individual circumstances should be discussed at an early stage with the Trust education team to ensure appropriate measures are put into place to enable the doctor to maximise the opportunities within their training programme whilst ensuring patient safety. National guidance is shortly due to be issued for BBV.

## 12. <u>HEEoE and associated Foundation School contacts</u>

#### **HEEoE Contact**

If there are difficulties with an HEEoE trainee that cannot be resolved at Foundation School level, Dr Alys Burns, Deputy Postgraduate Dean should be contacted: alys.burns@nhs.net

#### **Foundation School Directors**

East Anglian Foundation School:Dr Alys Burnsalys.burns@eoe.nhs.uk

North East Thames Foundation School:Dr Michael GlynnMichael.Glynn@bartsandthelondon.nhs.uk

North Central Thames Foundation School: Dr James Dooley j.dooley@medsch.ucl.ac.uk

#### North West Thames Foundation School:

Dr Andrew Frankel a.frankel@imperial.ac.uk