

# **Supporting Trainees in difficulty (or What I wish I had known 9 years ago)**

**Francesca**

# What is the challenge?

‘reaching those doctors who experience difficulty is certainly challenging, such is the depth of **stigma** and **embarrassment** felt by those who struggle in their careers’  
(Lake, 2009)





What is the difference  
between a trainee in  
difficulty and a difficult  
trainee?

The basics

# Case 1: Dr A, F1



LETTER OF COMPLAINT  
ABOUT BEHAVIOR RECEIVED  
FROM PATIENT



LETTERS OF COMPLAINT  
ABOUT ATTITUDE AND BEING  
UNAVAILABLE FROM  
MULTIPLE MEMBERS OF  
WARD AND NURSING STAFF



YOU ARE HER EDUCATIONAL  
SUPERVISOR. WHAT WILL  
YOU DO?



GROUPS 5 MINS

## Case one

- What are the symptoms and signs of 'Trainee in Difficulty' & of a 'Difficult Trainee?'
- Which is this?
- 2 minutes

# Case 1: Dr A, F1



What support could your trainee require?



What support could you require?

# Dr A (what happened next)

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Meeting with ES to discuss letters – referred to TPD (explanations available for each episode)

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Further complaints about attitude and communication with patients and staff and medical students, asked to reflect in e-portfolio

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Dr A reports being stressed, working towards run through training in high competition specialty.

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Referred to PSU

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Refuses to accept OH advice, refuses psychology review, grudgingly accepts communications skills sessions

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Some minor clinical incidents reported, asked to reflect in e-portfolio

# Summary: Dr A, F1



SIGNED OFF BASED ON E-  
PORTFOLIO PROGRESSION AND  
ES/CS END OF PLACEMENT  
REPORTS



REFUSED TO COMPLETE  
TRANSFER OF INFORMATION  
SHEET



FTPD PHONED RECEIVING FTPD  
TO HIGHLIGHT CONCERNS  
(TRAINEE INFORMED)



ULTIMATELY OBTAINED LOCUM  
POST IN DESIRED SPECIALTY BUT  
DECIDED TO TRANSFER OUT OF  
REGION



Dr A  
(who to  
involve, how  
to document)

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Document your meetings on  
eportfolio

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Discuss within your trust- the clinical  
consultant team, the DME, HR

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Discuss with the TPD

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Copy the trainee into appropriate  
emails. (remember FOI act)

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Escalate to the MD if behaviour is  
dangerous- to patients/ team/ trainee

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Ensure you are supported- this can be  
a lonely business



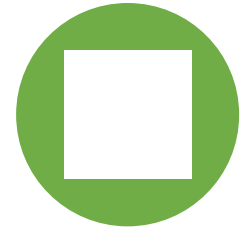
E-PORTFOLIO ON TRACK,  
GOOD ES/CS REPORTS



DIP IN PERFORMANCE  
JANUARY CMT WITH  
MULTIPLE MINOR ERRORS  
REPORTED VIA NUMEROUS  
CHANNELS



DATIX COMPLETED BY  
PHARMACIST ABOUT  
PRESCRIBING ERROR



YOU ARE THE EDUCATIONAL  
SUPERVISOR. WHAT ACTION  
WILL YOU TAKE?

Dr B, CMT 1

## Case 2

- What are the symptoms and signs of 'Trainee in Difficulty' & of a 'Difficult Trainee?'
- What could be going on?
- 5 minutes



What support could your trainee require?



What support could you require?

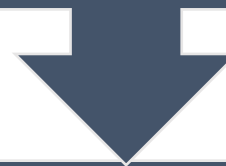
Case 2: Dr B, CMT1

## Dr B (What Happened Next)

CS reports multiple minor drug errors, often late to work, becoming withdrawn and upset



Meeting with trainee



Single mother of 12 year old son stressed about move to 2<sup>nd</sup> trust for next rotation

Dr B -What  
are the  
options?



## Summary: Dr B, CMT2

- Change of rotation allowing trainee to remain in single trust for 2 year programme
  - Requires HEE approval for extraordinary circumstances
  - Options are swap, fill existing or anticipated gap, supernumerary training
  - Receiving trust need to agree as they will be left with an unfilled post.
- This takes time – the earlier you can identify the problem the better for planning at both trusts

# Establishing Risk

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- What is the risk to:
  - Patients?
  - Self?
  - Team?
  - Organisation?

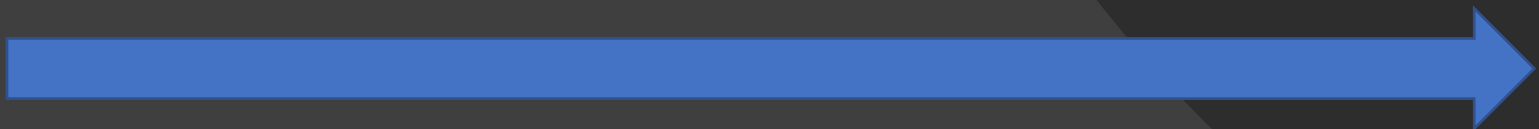
Distracting

Disturbing

Disruptive

Destructive

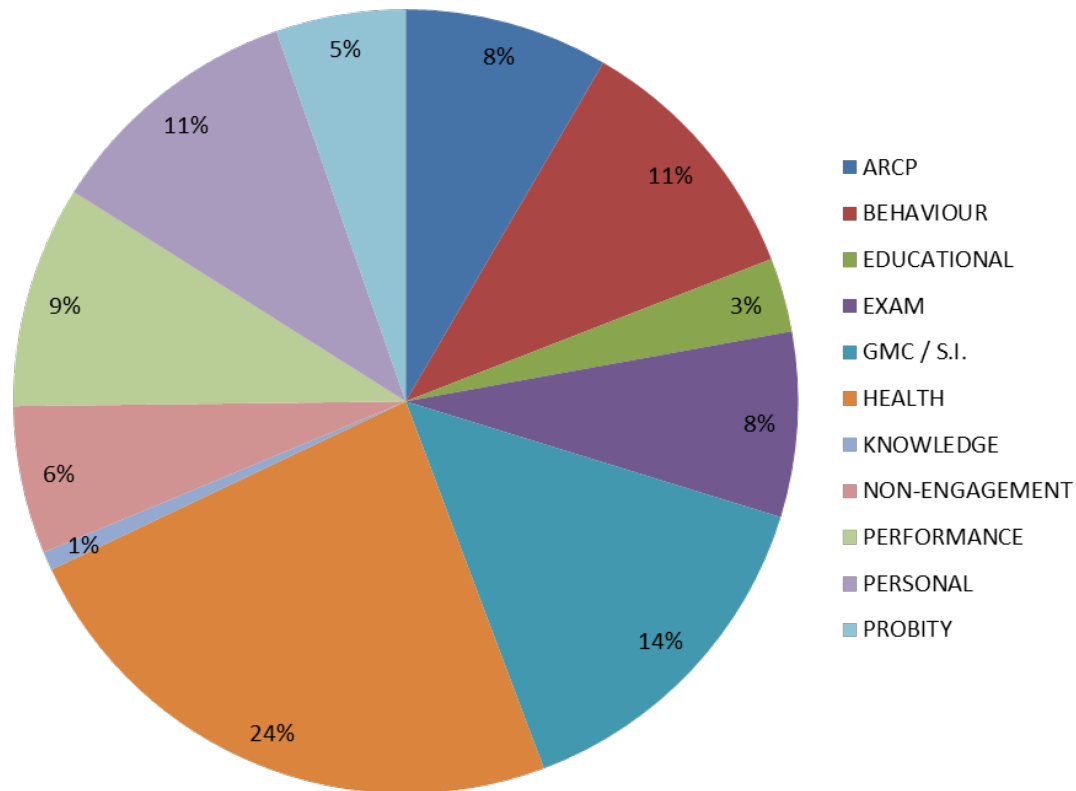
Dangerous





# Areas of Concern (Data obtained from PSU, EOE, June 2013 to date)

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# Areas of Concern

- Clinical performance, knowledge and skills
- Professional Behaviour and attitudes
- Health and Social issues
- Engagement with education and training
- Training environment support issues



# A Trainee you have supervised...



How were you alerted to the possible difficulties the trainee had?



Was it an isolated instance or were you aware of a repeating pattern of concerns?



What information did you need to help the trainee (e.g. observations, workplace-based assessments, reported concerns from others in the team)?



Discuss- 10 mins

**Step 1: Being  
aware there is a  
problem.**

- Difficult relationships with colleagues
- Social and communication skills
- Ineffective management of stress and emotions
- Poor organisation
- Lack of clinical leadership / complex clinical decision making

•

... and of course

## 7 Early Warning Signs

The 'Disappearing Act'

Low work rate

'Ward Rage'

Rigidity

'Bypass Syndrome'

Career problems

Insight failure



Step 2: Preparing to 'tackle' the issue.  
What are the barriers?

# Barriers

- Fear of confrontation
- Fear of retaliation
- Denial
- Lack of confidence in skills
- Lack of “evidence”
- Desire to rescue or protect
- Avoidance
- Frustration
- Helplessness

# Remember...

Difficult Trainees become Difficult Consultants.





# Case Study

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Overcoming the Barriers

# Case Study

- You have observed some concerning behaviour from a trainee you have been supervising. You have received complaints from colleagues about an abrupt manner with patients and midwives.
  - As the ES, what conversation might you have with the trainee?
  - How do you challenge the trainee's behaviour?
  - Who would you look to for further information?
- However... before you have had a chance to speak to the trainee, there is an SI, involving a forceps delivery undertaken by the trainee where both the mother and baby required complex surgery.
- The trainee was signed off on sick leave for 2 weeks
  - How might you follow up with the trainee?
  - Can you continue to address the concerns that had been raised regarding communication?
  - What options might there be to support the trainee?

- The trainee appeared very angry throughout the Trust investigation and was suspended for attacking a Consultant in the corridor
- Following a police and Trust investigation the Trainee returned to work
  - What conversation might you have with the trainee on their return?
  - How do you challenge the trainee's behaviour?
  - Who would you look to for further support?
- The trainee was due for an ARCP three weeks after returning.
  - How might you include information relating to the last three months on e-portfolio?
  - What happens if you cant get agreement from the TPD
  - The trainee changed Trusts 6 weeks after returning to clinical practice.
  - How might you share information with the new ES/Trust

### Step 3 – Overcoming the barriers What Support is there?

- Gathering evidence
- PSU
- Who else do we need to involve



# Gathering information

Involve some or all of:

Clinical supervisor

Educational supervisor

DME (will support you:  
this is difficult!)

HR

Medical Director

OH

Deanery

Medical School

TAB/ 360 feedback can be  
very useful

SPEAK to the TRAINEE,  
document everything

# What is the problem?

- Clinical knowledge and skills?

- Health or social issues?

- Professional attitudes or behaviours?

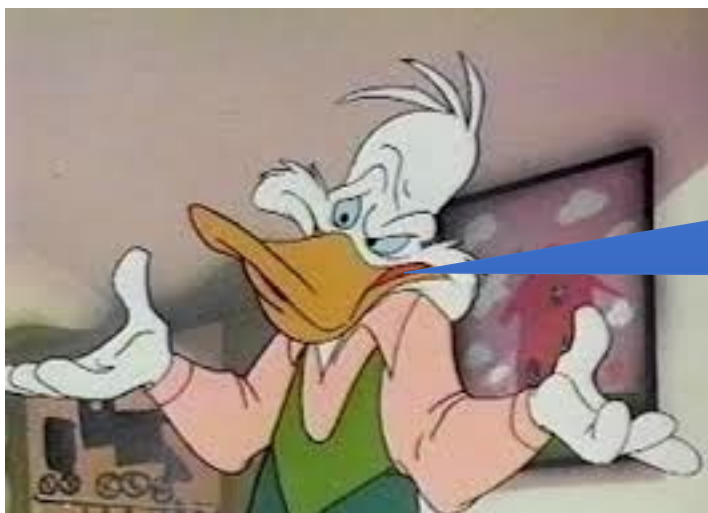
- Engagement with Education and Training?

- Training Environment?



# What next?

- Having mapped the issues, what next?



Suggestions  
anyone??

- Remember - the trainee has (should have) a GP
- They are your trainee, not your patient

# Professional Support Unit

The PSU provides access to a range of additional supportive services which include;

Screening for neurodiverse conditions	1:1 Career advice
1:1 Exam Support	Exam Workshops
Specialised Occupational Health	1:1 Communication Skills
Emotional Intelligence Testing	Psychological Support

[https://youtu.be/j8\\_4lrt6GYg](https://youtu.be/j8_4lrt6GYg)

[https://heeoee.hee.nhs.uk/PSU\\_Home](https://heeoee.hee.nhs.uk/PSU_Home)



# Thank you!

Any Questions..?



# Group Work



WHAT ARE THE DIFFERENT  
TYPES OF PROBLEMS  
TRAINEES FACE?

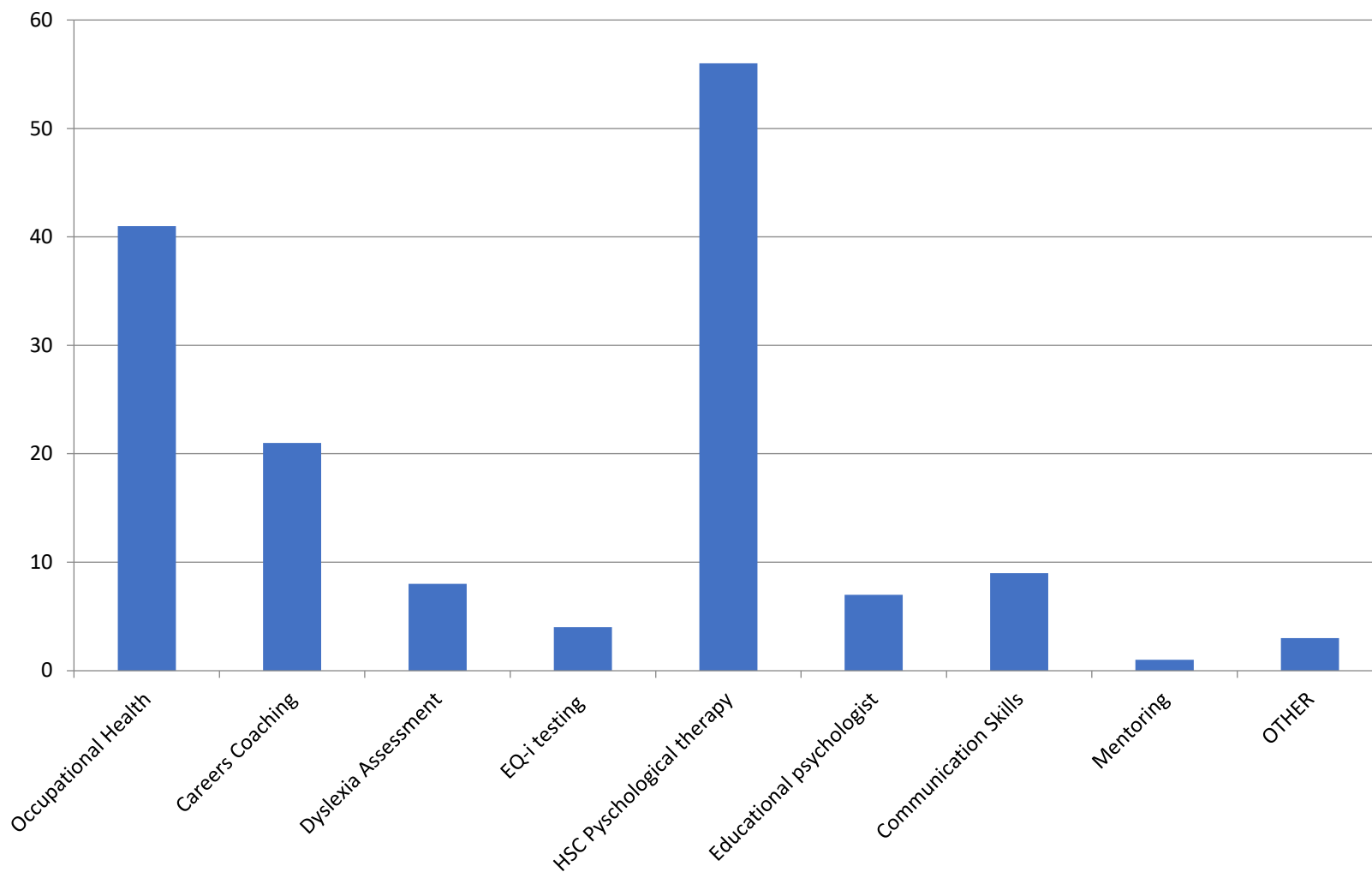


WHAT ARE THE BARRIERS TO  
REPORTING AND TACKLING  
UNDERPERFORMANCE?

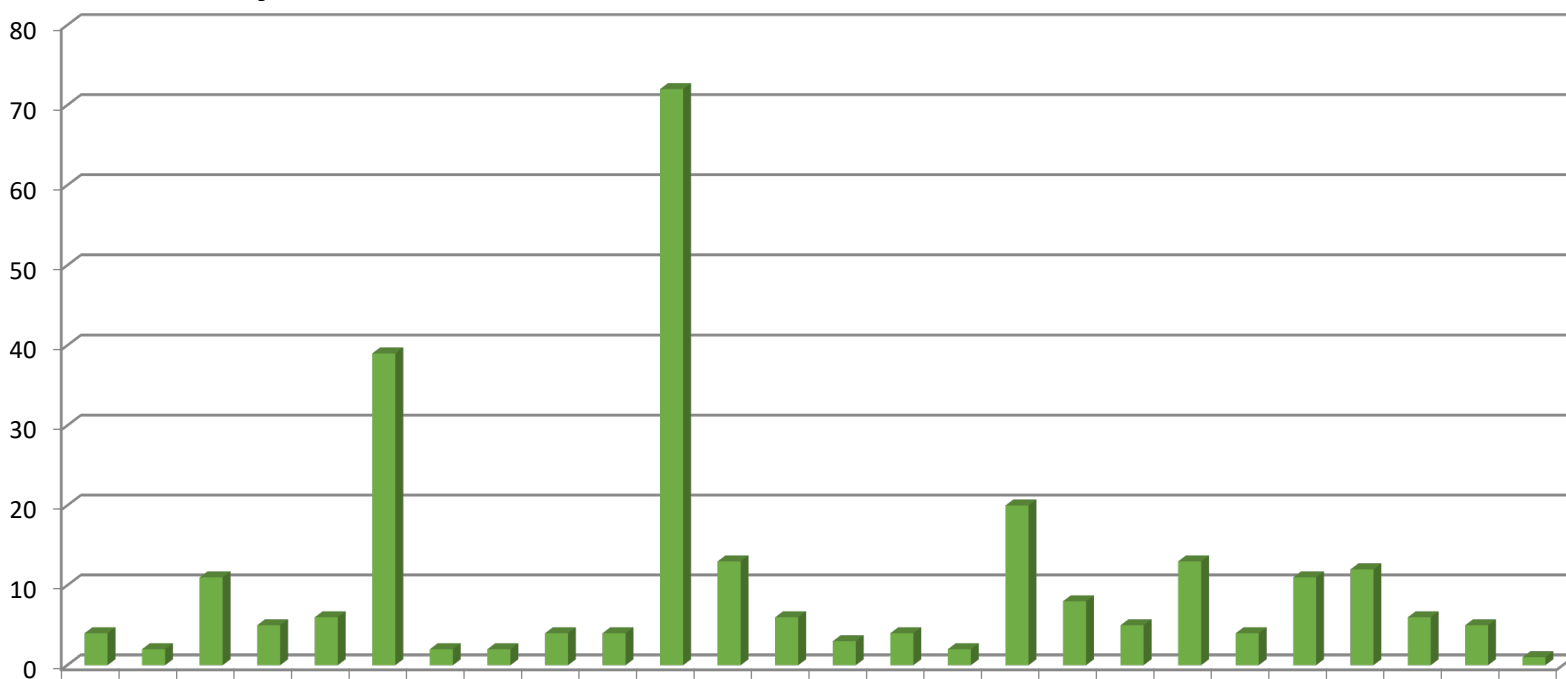


WHAT ARE THE RISKS AND  
TO WHOM ?

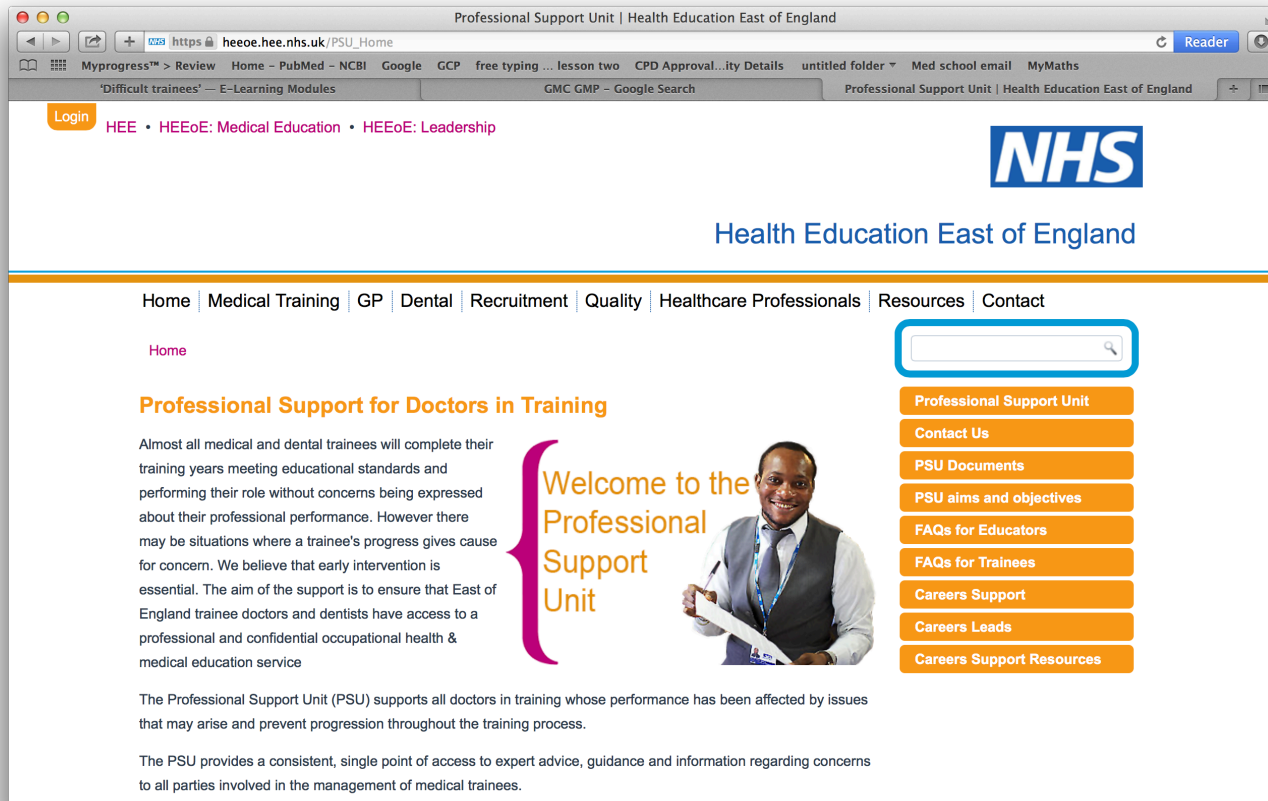
## External services accessed



## Trainees referred to the PSU by Speciality between June 2012 and January 2018



# Useful resource one: HEE EoE PSU



Professional Support Unit | Health Education East of England

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'Difficult trainees' - E-Learning Modules GMC GMP - Google Search Professional Support Unit | Health Education East of England

Login HEE • HEEoE: Medical Education • HEEoE: Leadership

**NHS**

Health Education East of England

Home | Medical Training | GP | Dental | Recruitment | Quality | Healthcare Professionals | Resources | Contact

Home

**Professional Support for Doctors in Training**

Almost all medical and dental trainees will complete their training years meeting educational standards and performing their role without concerns being expressed about their professional performance. However there may be situations where a trainee's progress gives cause for concern. We believe that early intervention is essential. The aim of the support is to ensure that East of England trainee doctors and dentists have access to a professional and confidential occupational health & medical education service

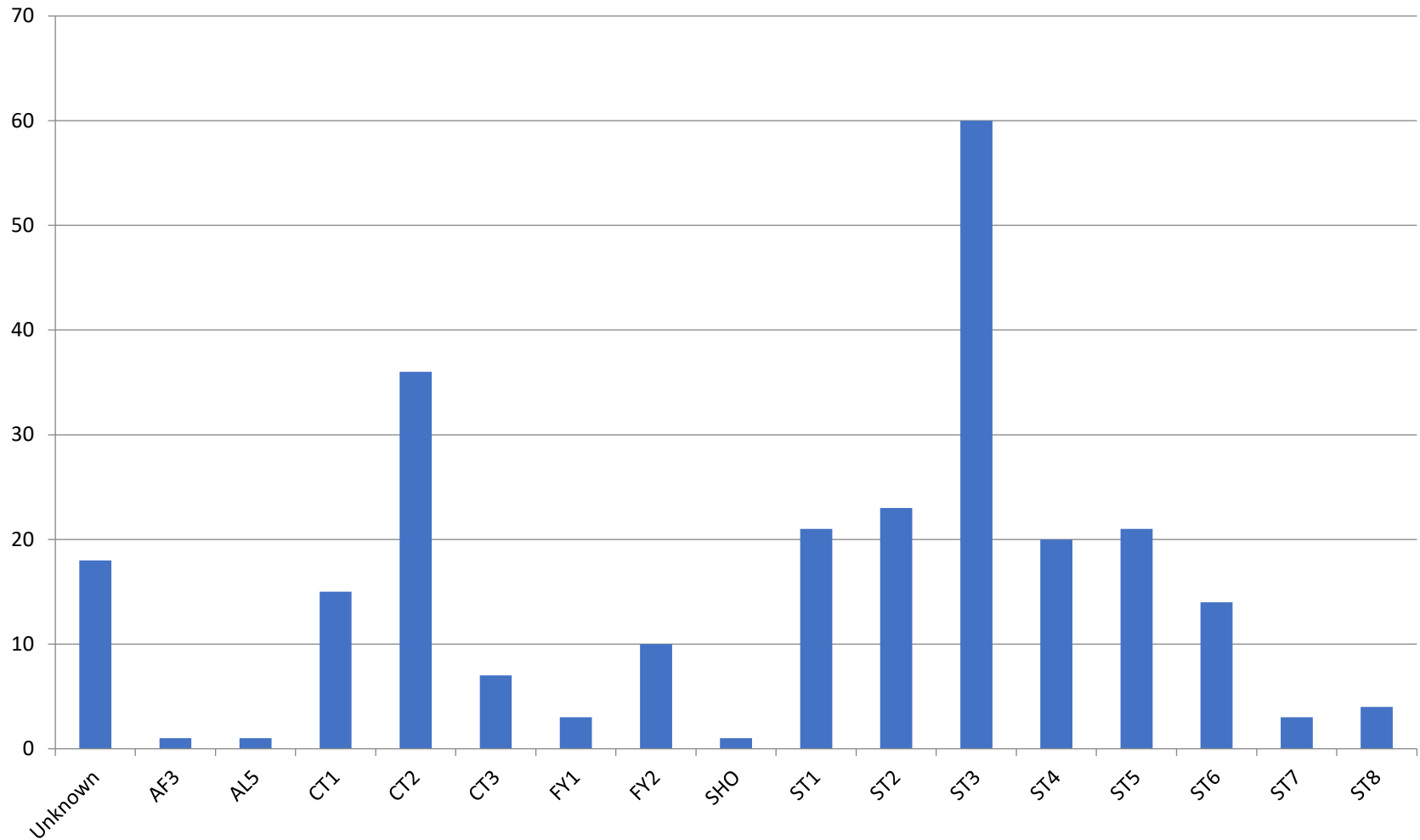
Welcome to the Professional Support Unit

The Professional Support Unit (PSU) supports all doctors in training whose performance has been affected by issues that may arise and prevent progression throughout the training process.

The PSU provides a consistent, single point of access to expert advice, guidance and information regarding concerns to all parties involved in the management of medical trainees.

Professional Support Unit  
Contact Us  
PSU Documents  
PSU aims and objectives  
FAQs for Educators  
FAQs for Trainees  
Careers Support  
Careers Leads  
Careers Support Resources

## Trainees referred to the PSU by Grade between June 2012 and January 2018



# Hints and Tips

- It is important that clear structures, carefully defined roles and responsibilities, and effective, contemporaneous documentation is in place to support all trainees.
- Who is involved in training and what are their roles and responsibilities?



# Useful resource two: the London Deanery website

The screenshot shows a web browser window displaying the 'Difficult trainees' — E-Learning Modules page on the London Deanery website. The browser's address bar shows the URL: [www.faculty.londondeanery.ac.uk/e-learning/managing-poor-performance/difficult-trainees](http://www.faculty.londondeanery.ac.uk/e-learning/managing-poor-performance/difficult-trainees). The page features a green header with the text 'Multiprofessional Faculty Development' and the NHS logo. Below the header is a navigation bar with links: HOME, CLINICAL SUPERVISION, ASSESSMENT, EDUCATIONAL SUPERVISION, WORKING WITH GROUPS, and EDUCATIONAL LEADERSHIP. The main content area is titled 'Home / Managing the Trainee in Difficulty / 'Difficult trainees'' and contains a section titled 'DIFFICULT TRAINEES'. This section discusses the challenges of managing trainees with personal conduct and performance issues, emphasizing the importance of professional behavior and the GMC's guidance. A sidebar on the left lists various e-learning modules, including 'About eLearning / Frequently Asked Questions', 'Appraisal', 'Assessing Educational Needs', 'Assuring & Maintaining Quality in Health Professions Education', 'Becoming An Effective Interviewer', 'Careers Support', 'Diversity, Equal Opportunities and Human Rights', 'Effective Feedback', 'eLearning in Clinical Teaching', 'Facilitating Learning in the Workplace', 'Improve Your Lecturing', 'Interprofessional Education', 'Introduction to Educational Research', 'Involving Patients in Health Professions Education', and 'Managing the Trainee in Difficulty'. A search bar and 'REGISTER' and 'LOG IN' buttons are also visible on the right side of the page.

Difficult trainees' — E-Learning Modules

www.faculty.londondeanery.ac.uk/e-learning/managing-poor-performance/difficult-trainees

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'Difficult trainees' — E-Learning Modules GMC GMP - Google Search PSU Documents | Health Education East of England

Multiprofessional Faculty Development

NHS

Health Education North Central and East London  
Health Education North West London  
Health Education South London

HOME CLINICAL SUPERVISION ASSESSMENT EDUCATIONAL SUPERVISION WORKING WITH GROUPS EDUCATIONAL LEADERSHIP

About eLearning / Frequently Asked Questions

Appraisal

Assessing Educational Needs

Assuring & Maintaining Quality in Health Professions Education

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Effective Feedback

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Facilitating Learning in the Workplace

Improve Your Lecturing

Interprofessional Education

Introduction to Educational Research

Involving Patients in Health Professions Education

Managing the Trainee in Difficulty

Home / Managing the Trainee in Difficulty / 'Difficult trainees'

'DIFFICULT TRAINEES'

Trainees with personal conduct and performance issues are likely to be in the minority but often occupy a considerable amount of supervisor time and energy.

Trainees are employees and, as such, are expected to demonstrate appropriate professional behaviours with patients, carers and colleagues. Behavioural issues may be brought to your attention, and it is important to be fully aware of the GMC guidance *Good Medical Practice* (2006), which applies to all UK doctors, including those in training. Where there are potential infringements of the GMC's guidance, consider the relative seriousness of the problem, and if in any doubt consult with the appropriate colleague(s).

In practical terms, it is important to be clear about whether there is an issue of improper personal conduct, which would be subject to the local trust or practice employment regulations, or an issue of poor professional performance. A useful distinction between these two categories is that matters of personal conduct – such as absence without leave, theft of trust property, bullying or sexual harassment – will normally apply equally to any employee. If a trainee's behaviour or conduct has been questioned, then it is appropriate to agree with the director of medical education how any allegations of concern should be investigated in accordance with local human resources policy. Conduct issues with serious implications for the future professional work of the trainee should also be reported to the

REGISTER LOG IN

Other Resources

Explore around this topic

- Mentoring: theory and practice
- Facilitating professional attitudes and development



# What are the issues?

Relate concerns to the 4 domains of the GMC Framework for *Good Medical Practice*:

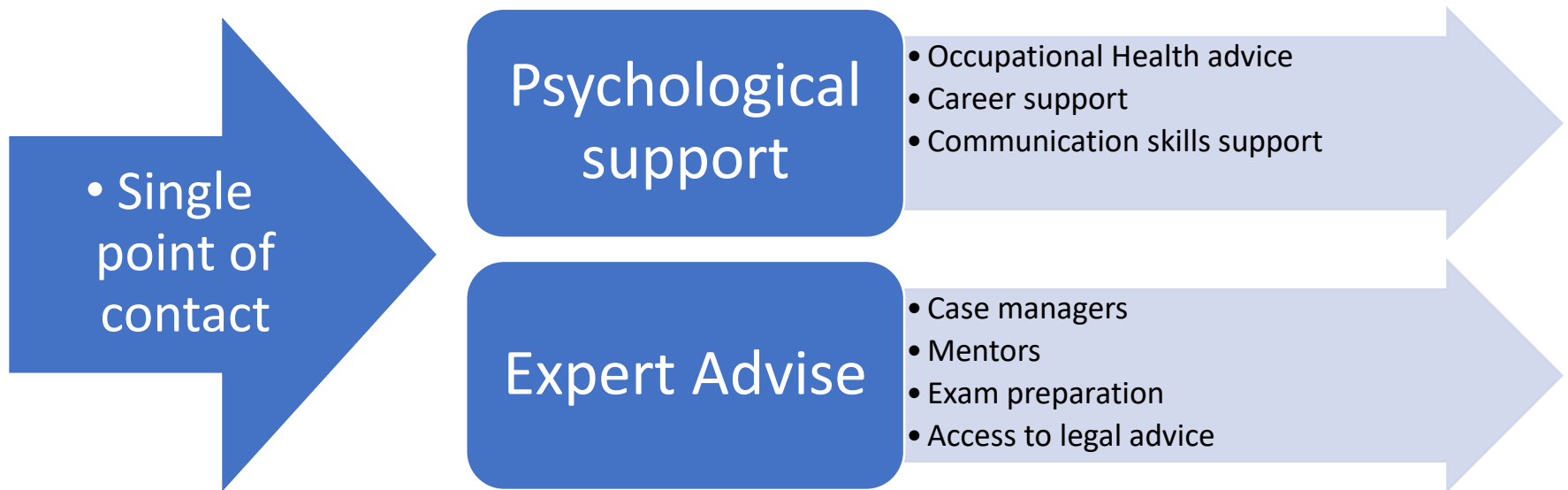
- Domain 1 Knowledge, Skills and Performance;
- Domain 2 Safety and Quality;
- Domain 3 Communication, partnership and teamwork;
- Domain 4 Maintaining trust



# Existing PSU support

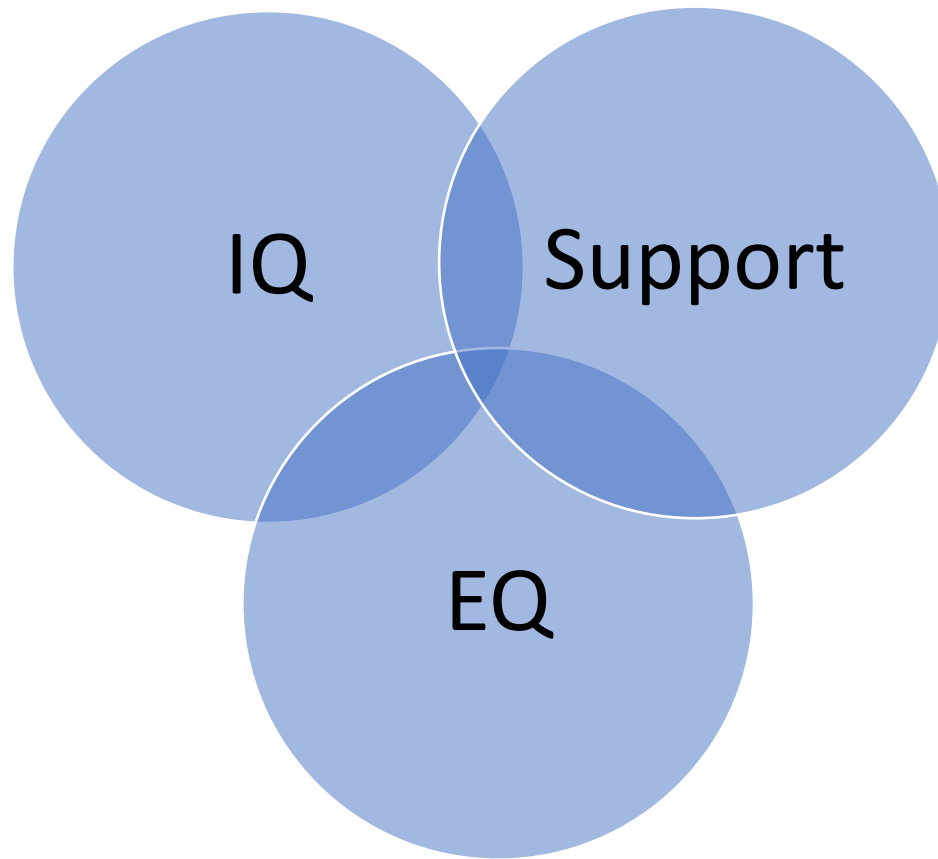
- Development of expertise within the PSU:
  - ✓ Helps recognise early warning signs
  - ✓ Provides expertise in analysing complex cases
  - ✓ Ensures equality of resources
  - ✓ Supports the management of performance support processes

# What do we offer?





# Capacity for Change



# Emotional Quotient

Do they have the right skills?

Do they have sufficient insight?

- Emotional stability - Are they **stable** enough?
- Conscientiousness - Can they **persevere**?
- Determination - Are they **motivated**?
- Perseverance - **Resolve / Intention**?

# Behaviour Change

- **Are they bright enough?**

- Intelligence

- **Are they stable enough?**

- Emotional stability

- **Can they persevere?**

- Conscientiousness

- **Do they have insight?**

Are they psychologically minded?

Do they want to act on the insight?

Do they have the necessary skills?

- Do they **want/intend** to change?

- Have they a **history** of successful change attempts?

- What will **motivate** them to change?

- What kind of **environment** will they be working in?

- What **support** is available?

# Useful resource: HR

- They have probably seen it before
- They can offer both you and the trainee support
- They can minute difficult meetings
- They can often provide an immediate solution (wrt locums, meeting rooms, rotations...)



# Role of HR

- Trainees are employees of the Trust
- Therefore all legal employment risks and responsibilities lie with the Trust, not the Training Committee / Deanery
- Decisions about the placement of trainees in difficulty should not be taken in isolation by Training Committees / the Deanery
- The Deanery must consult with individual Trusts at an early stage
- Trusts can refuse to accept a trainee on rotation

## Role of HR cont

- Additional funding on a supernumerary basis does not mitigate against the employment risks / responsibilities
- In order for Trusts to provide appropriate support, they must understand;
  - the issues in detail
  - what assistance is required / impact on the service
  - set objectives, an agreed timescale and a mechanism for documented feedback