Trainees in Difficulty

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(with thanks to Claire Giles and Janet Rutherford)

TiD definition

A trainee in difficulty is one whose progress is causing concern or who is not meeting curricular requirements. This may be due to

- ill health,
- life events,
- difficulties with learning or
- through less than satisfactory professional conduct.

Trainees in Difficulty

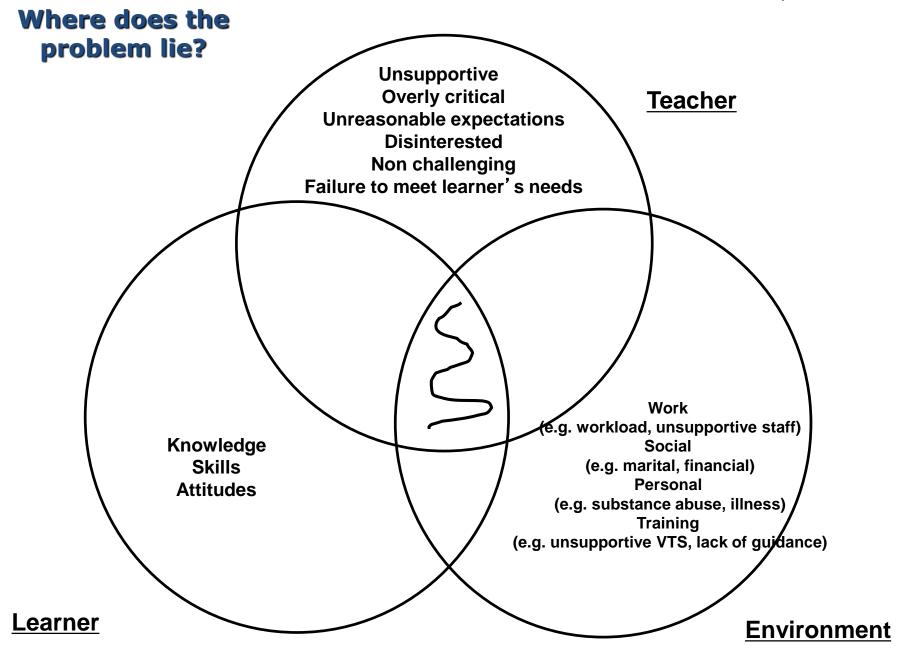
 Don't assume that a trainee who performs badly is a bad trainee......

 The trainer needs to be humble enough to explore their own potential role in this

Identifying the struggling trainee

- RDMp helps identify problems with ...PERFORMANCE
- SKIPE is a framework that can be used to help identify.....

CAUSAL/INFLUENTIAL FACTORS



RDM-p

Relationship

- With patients
- With staff and with other colleagues (withiin and outside the practice)

Diagnostics

- Assessing patients (and their needs)
- Assessing oneself
- Assessing staff and colleagues
- Decision-making in practice-related activities

Management

- Managing patients
- Managing oneself: performance, health and well-being
- Managing staff and colleagues
- Managing practice related activities

Professionalism

- Respect for people
- Respect for protocol
- Respecting the importance of R, D & M
- Awareness and carrying out of contractual responsibilities

relate to someone, diagnose their needs, manage the process, and at all times ensure you act professionally.

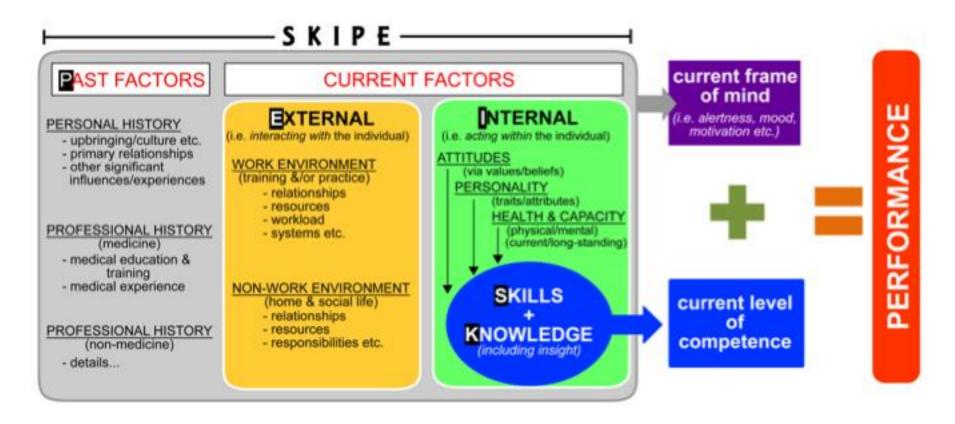
Tim Norfolk

Evidencing

May start as "gut feeling" but try to evidence with clear statement of areas of concern

Collect evidence from several sources:

- Verbal statements from others:
- Written statements from others:
- Things you have noticed: This may be K, S & A
 - Record the specifics of the event.
- Things the trainee has noticed that they have difficulty with



- Skills and Knowledge
 - Don't jump off into deeper issues until the 'SK' issues have been properly tested."
 - BUT we tend to concentrate on 'SK' as we are more familiar with that and ignore other factors.

Discussions with the trainee

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- Keep open and non-judgemental
- Establish an equal relationship based on honesty and respect
- Avoid assumptions
- Consider learning styles
- Include the trainee's perspective, not just the evidence you have gathered
- Explore their goals
- Use motivational interviewing

Ways to achieve an adult-adult relationship

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- Establish a safe environment comfortable, open and honest
- Start low and go slow
- Build an accurate picture together
- Validate feelings and explore specifics before suggesting a trainee's perceptions needs 'adjusting'
- Encourage reflection and self-evaluation
- Develop a joint management plan

Preventing Conflict

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- Ensure good feedback skills
- Establish the supportive purpose of the session
- Build rapport initially by stressing the positives
- When moving onto a trickier area, explore the trainee's perspective initially, avoid judgemental words, use Socratic questioning
- Watch verbals and non-verbals
- Tread carefully, be sensitive and validate feelings

SID Framework

- S = Share your concerns
 - Colleagues, TPD, Deanery
- I = Involve the trainee
 - Always 2 sides to a story
- D = Document
 - Detailed, factual, accurate, relevant, objective and justifiable.
 - Use descriptive, specific and non-judgemental language

Coming up with a plan: Poor Knowledge

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- Identify if general or specific
- Get the trainee to evaluate their own knowledge using Curriculum Self-assessment rating scale, MCQ websites, PEP etc
- Do lots of RCA
- RCGP Essential Knowledge Challenge
- Get them to help out in nurse-led chronic disease clinics
- Look at the AKT feedback as well as their results.
- Consider an AKT course
- Consider small study groups to share the work
- Cram stats

Coming up with a plan: Poor Motivation

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- Stephen Covey's The Seven Habits of Effective People – find out what the trainee sees themselves doing in the future
- NLP core values and the wheel of life
- Motivational interviewing
- Role modelling share with them how you deal with your own difficulties

Coming up with a plan: Constantly Uncertain/ Can't Make Decisions

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- Explore complexity theory competence, capability, complexity, certainty and chaos
- Encourage them to explore ICE with the patient
- Encourage them to discuss dilemmas with pts and aim for shared decision making
- Don't give them the answers every time they ask facilitate them finding the answer themselves
- Encourage them to start learning in a non-linear way

Coming up with a plan: Lacking Confidence

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- As before, but a bit more!
- Establish where they are on the transition curve
- Make sure they have enough clinical experience with effective feedback
- Encourage reflection
- Encourage them to find answers for themselves
- Encourage them to discuss their anxieties with their peers

Coming up with a plan: The Muddly Consulter

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- Establish an agenda and encourage screening
- Signpost and summarise
- Work on systematic problem-solving skills
- Video regularly, stop a consultation every 2mins 'What was going on in your head then?'
- Joint surgeries, taking turns to lead, making your reasoning explicit
- Create some discomfort by shortening their consultation timings

Coming up with a plan: Common Themes

- Review your approach regularly
- Ensure pt safety, and be explicit about that
- Debriefs, nominated supervisor for every surgery
- Regular random case analysis, videoing, joint surgeries
- Role play as a way of reinforcing altered behaviour
- Increase number CBDs and COTs
- Give praise where due and be prepared to challenge too
- Encourage reflection and self-evaluation
- Timetable regular reviews
- Talk, talk, talk and share your concerns with others
- DOCUMENT