NOTES FOR FACILITATORS

INTRODUCTION TO THE NOTES FOR FACILITATORS

This course has been designed to introduce key concepts relating to identifying trainees in difficulty and the initial steps that can be taken to address related issues. It should be used in conjunction with the London Deanery ‘Managing a Trainee in Difficulty Framework, available to download on the Deanery website:

http://www.londondeanery.ac.uk/var/supporting-professional-performance/trainees-in-difficulty/?searchterm=managing%20trainees%20in%20difficulty

ABOUT THIS GUIDE

The purpose of this brief guide is to help you facilitate an introductory half-day workshop exploring issues related to ‘Managing Trainees in Difficulty’. Contained within it should be all the information that you need to run the workshop on the day. The notes contain copies of the slides that are provided with the course and suggestions for how to use them. The slides and notes are suggested approaches to sessions. However, you may decide not to use some of the slides and develop your own slides or activities instead.

PREPARATION

Prior to running their own course it is recommended that facilitators attend a workshop as an observer, and during that day annotate a copy of this guide. Ideally, this course is delivered by two facilitators working together throughout the course, although it is possible for the course to be delivered by one facilitator.

This guide should also be seen as a ‘starter for 10’ – a way of getting going. But it is not intended to be narrowly prescriptive. Workshop facilitators will probably have their own examples from practice that will be useful to the groups they work with.

The NHS Institute for Innovation and Improvement has developed two guides that can be used in conjunction with the facilitators’ notes to help you think about how you would like to deliver this course and how you may adapt your delivery after you have run the course several times. ‘A Handy Guide to Facilitation’ provides guidance on facilitating groups and workshop. ‘The Facilitators’ Tool Kit’ contains ‘tools, techniques and tips’ for those who are new to facilitation. (NHS Institute for Innovation and Improvement 2009a,b).

Both guides can be accessed via the following link:

www.institute.nhs.uk/fundamentals

THE ROLE OF THE FACILITATOR

It is essential that this role is one of facilitation and not that of a lecturer. It is not essential to have expert knowledge of the topic. Such as that relating to models of adult learning, or of the research literature on educational supervision.

What is essential in facilitation of this workshop are the following.

- An understanding of issues associated with trainees in difficulty the responsibilities of educational supervisors with respect to the trainee in difficulty.
- Practical experience of supporting trainees in difficulty.
- The ability to draw effectively on the experience within the group in order to make full use of the knowledge, experience and understanding that different participants bring to the workshop.
- The ability to present clearly the different activities contained within the workshop and manage the time effectively so that the necessary material is covered.
- The confidence, if necessary, to challenge participants, if they are unduly cynical about the topic or about wider changes in medical education.

ATTENDANCE

For a half-day workshop, prompt arrival is essential and facilitators should not accept latecomers beyond 30 minutes after the start of the session.
NOTES FOR FACILITATORS

THE COURSE

Purpose
This half day course looks at identifying trainees in difficulty, support for raising concerns and developing understanding of issues central to the effective management of trainees in difficulty. If a participant has direct responsibility for managing a trainee in difficulty and requires further guidance, highlight the London Deanery’s ‘Managing Trainees in Difficulty: remediation and revalidation’ one-day workshop (see Deanery website for dates of forthcoming workshops).

Format
The course uses a variety of learning modes. Participants will take part in plenary and discussion groups, and there will be short lectures.

COURSE OBJECTIVES
By the end of this course participants will have:
- identified common signs that indicate a trainee may be in difficulty
- identified common causes of trainees experiencing difficulty
- discussed principles central to the early identification and management of trainees in difficulty using the Deanery framework.
- discussed recent developments related to revalidation.

PRACTICALITIES
Preparation
To facilitate this workshop it is important to be familiar with the London Deanery Framework for the Management of Trainees in Difficulty (London Deanery 2010) and the GMC Good Medical Practice framework for appraisal and revalidation (GMC 2011). In particular, it is useful to have read the reference material cited on the slides, specifically; Firth-Cozens, J (2003) Doctors, their well-being and their stress BMJ 326: 670.

What to do on the day
If the workshop is being run locally (at a trust) as opposed to centrally (at the Deanery), it is a good idea to have researched local information about who the educational supervisors can contact if they have particular problems with trainees. For example, you might want to know the names of the Directors of Medical Education; Foundation Programme Training Director, etc.

The workshop can be run with between 8 and 24 participants, depending on the size of the room. There needs to be space for small group discussion, and this needs to be kept in mind when working out how many people can be accommodated in a particular venue.

To ensure that there are at least 8 participants book in between 10 and 26 as typically some doctors ‘DNA’ on the day.

Facilitators should get there at least 15 minutes before the first session is due to begin. You need to check that the room has been arranged appropriately (i.e. in a way that allows for small group discussion) and that the audiovisual aids are working. Make sure there is plenty of paper on the flipchart and marker pens that work.

Also draw out on a piece of plain paper the arrangement of tables/chairs so that you can quickly do a seating plan to help you recall the names of participants.

Put up your slides, with the first slide showing the title of the day:
SLIDE 1: Managing trainees in difficulty.
NOTES FOR FACILITATORS

SESSION 1:
9.30–10.15 EXPLORING AND DEFINING THE CHALLENGES

SLIDE 2: Introductions.

INTRODUCTIONS

- Your name
- Your role
- What you want to get out of the session?

Start by welcoming everybody.

If people have seated themselves far from the front in tiny clusters, politely ask them to move, because you will be having small group discussions during the day. Try to arrange equal-sized groups, in even numbers, so that pairs can be formed easily later on.

Introduce yourself, giving your name, your role and any other immediately relevant background information. Provide a brief overview of the day (see page five for a suggested programme).

Ask the group to briefly introduce themselves, giving names, specialties and experiences of educational supervision. Also ask participants to share one thing they would like to get out of the session and note these on the flipchart for reference during the session.

Latecomers

It is rare for a medical education course to start on time, with all participants present.

It is generally recommended that one doesn’t re-cap what has been covered when a late comer arrives. It is preferable to just smile and direct them to a suitable seat. If they choose to sit on their own, and this will make small group activity difficult, ask them to join a table where people are already seated. If they arrive at the point where you are still going through names, then when you have finished working your way round the tables go back and ask them to cover the same points (i.e. name, role, what they want to get from the session). If they arrive after that, simply ask their name.

If necessary, when you get to a suitable break (when the group is doing small group discussion), go over, introduce yourself and briefly review the points that were covered before they arrived.

SLIDE 3: Learning outcomes.

Show the learning objectives. Explain that this half-day session aims to look at practical approaches to identifying trainees in difficulty, understanding common causes of poor performance and raising awareness of where educational supervisors can go for help if they have concerns. Direct participants to the London Deanery Framework for the Management of Trainees in Difficulty as a key resource document. Link the participants expectations to the learning objectives for the course.

Note that this course complements the other courses that should be available across the Lead Provider Local Education provider network on educational supervision, workplace based assessments and clinical teaching skills. Also point out that there are online resources available on the London Deanery website for further information and support.
MANAGING TRAINEES IN DIFFICULTY: A GUIDE FOR FACILITATORS

HALF-DAY COURSE
SUGGESTED PROGRAMME

09.00–09.30 Refreshments and registration
09.30–10.15 Session 1: Exploring and defining the challenges
10.15–11.00 Session 2: Exploring possible causes
11.00–11.15 Refreshments
11.15–11.30 Session 3: The role of the educational supervisor
11.30–12.15 Session 4: Case studies
12.15–12.30 Session 5: Developing educational supervision skills to improve performance
12.30–12.45 Session 6: A brief update on revalidation
12.45–13.00 Session 7: Summary and evaluation of the workshop
Start the workshop by putting the issue of trainees in difficulty in perspective using slide 4.

**SLIDE 4: Exploring and defining the challenges.**

**EXPLORING AND DEFINING THE CHALLENGES**

**Identifying poor performance:**
- A good supervisor will support the majority of trainees well and clearly identify the struggling minority.
- But what do we do with this struggling minority?

Key issues to draw out in discussion include those below.

- A good supervisor will support the majority of trainees well and will be able to identify the trainee who is in difficulty, so we start off by looking at how we identify those trainees, then move on to how to manage them.
- Trainees can go through ‘difficulties’ for various reasons.
- Many difficulties will be a temporary or short term in nature.
- Effective educational supervision can help to improve performance, but this requires time and commitment from both parties.
- Some trainees have difficulties throughout the training programme and progress through training might be delayed. Again, sensitive yet robust educational supervision is required to ensure training is completed satisfactorily or the right steps are taken to suspend, divert or indeed remove the individual from training.
- Trainees with severe or persistent problems are rare, but they take up a lot of time and emotional energy.

Show the second point and then explain that the workshop will start by drawing on participants’ experiences as a useful starting point from which to explore what can often feel like a very difficult topic.

**SLIDE 5: Poor performance.**

**POOR PERFORMANCE**

From your own experience with trainees:
- What are the characteristics of poor performers?
- What are the early warning signs (even if you didn’t recognise them at the time) of a trainee in difficulty?

Ask the participants to list, from their experience, the ‘signs and symptoms’ of poorly performing trainees.

Draw the main points from the discussion together by noting them on the flipchart.

**SLIDE 6: Early warning signs.**

**EARLY WARNING SIGNS**

- The disappearing act
- Rigidity in thinking
- Very slow
- Inappropriate emotional outbursts
- Failing to gain the trust of others
- Colleagues don’t want to call on them
- Lack of insight
- Problems with probity

Discuss the study by Paice and Orton (2004), which identified ‘early warning signs’ of trainees in difficulty. See resources section of the pack for a copy of this paper. Also read page 6 of the London Deanery Framework for more details on behavioural markers that can be indicative of difficulties.
NOTES FOR FACILITATORS

SLIDE 7: Summary slide with key learning points.

MANAGING TRAINEES IN DIFFICULTY

• Poor performance is a symptom not a diagnosis
• Exploration of underlying causes is essential

Use this slide to summarise the discussion by highlighting the key learning points.
• Poor performance is a symptom not a diagnosis.
• Exploration of underlying causes is essential.

SESSION 2:
10.15 – 11.00 EXPLORING POSSIBLE CAUSES

SLIDE 8: Assessment domains.

Use the four domains to explore possible causes of poor performance. Ask the group to consider each domain and possible causes of poor performance. Draw out the main points from the discussion by noting them on the flipchart. Note that causes of performance problems can multifaceted and interrelated.

Use slides 9 to 13 to summarise possible causes, highlighting points not already mentioned or considered in depth.

SLIDE 9: Health and home.

HEALTH AND HOME

• High workloads and time pressures in clinical practice may lead to depression and anxiety
• Firth-Cozens (2003) found significant levels of stress among junior doctors – 28% above threshold levels of stress, compared with 18% of the general population
• Like anyone else, doctors experience ‘life events’ – family, relationships, finance, etc.

Discuss the nature of clinical practice, its relationship to stress and compounding factors such as relationship issues that can influence performance.

SLIDE 10 Personality and behaviour.

PERSONALITY AND BEHAVIOUR

• Personality types and learning styles are associated with different responses to working conditions (McManus et al 2004)
• Hogan and Hogan (1997) personality strengths under pressure may become problematic e.g. enthusiastic – volatile
Discuss the influence of personality on learning and response to challenging situations. Draw attention to ways in which personality can influence performance in different situations. It is also useful to highlight challenges that individuals can face developing insight into their own performance.

**SLIDE 11: Organisational issues.**

**ORGANISATIONAL ISSUES**

- Poor educational infrastructure e.g. poor induction, rotation, staffing/workload issues, training and support of supervisors?
- Bullying, harassment?
- Service re-configuration?

Discuss the impact that organisational issues can have on performance.

**SLIDE 12: Clinical competence.**

**CLINICAL COMPETENCE**

- Lack of specific practical skills or knowledge, attitudes?
- Capability?
- Limited experience in a specific clinical area?

Remind participants that performance can be affected by level of competence. Training issues may therefore contribute to performance problems, including the capability of the individual.

**SLIDE 13: Key questions.**

**KEY QUESTIONS**

- Can the trainee normally perform procedures and work well?
- If not, why can’t they do so now?
- Is there a health issue?
- Personality and behaviour issues?
- Organisational issues?
- A combination of issues?

To conclude the session highlight key questions it is useful for educational supervisors to explore if they are concerned about a trainee. First, can the trainee normally perform well? If not, it is important to explore issues relating to capability and training. If they can normally perform well other possible factors that may influence performance and have been highlighted in the session need to be explored.

**11.00–11.15 REFRESHMENTS**
SESSION 3:  
11.15–11.30 THE ROLE OF THE EDUCATIONAL SUPERVISOR  
SLIDE 14: Responsibilities of the educational supervisor.  

RESPONSIBILITIES OF THE EDUCATIONAL SUPERVISOR  
What are our responsibilities:  
• to the trainee?  
• to the rest of the clinical team?  
• to patients and society in general?  
• to the Deanery?  

Use this slide to explore the responsibilities of an educational supervisor. Ask the questions on the slide to the group as a whole and draw out the following points.  
• Patient safety – now and in the future.  
• Educational support and guidance for the trainee.  
• Importance of pastoral care and confidential support for personal or health issues.  
• Legal responsibilities of clinicians and as citizens.  


FRAMEWORK FOR THE MANAGEMENT OF TRAINEES IN DIFFICULTY  

Use this slide to introduce the London Deanery Framework for the Management of Trainees in Difficulty and remind participants that it can be freely downloaded from the Deanery website.  

SLIDE 16: Deanery MTID Framework  

DEANERY MTID FRAMEWORK  
Key sections:  
• Identifying that there is a problem  
• Further considerations  
• Educational interventions  
• Record keeping  
• Formal investigation of clinical performance  
• Deanery internal processes  
• Self help and additional resources
NOTES FOR FACILITATORS

Distribute copies of the London Deanery Framework for Managing the Trainee in Difficulty. Note that the first step for an educational supervisor who is concerned about a trainee who may be in difficulty is to seek guidance. Discuss options for this, including discussion with senior colleagues, training programme directors and Deanery staff.

Use this slide to highlight the main sections in the framework as participants look through their copies.

SESSION 4:  
11.30–12.15 CASE STUDIES

Divide participants into small groups (4 to 6 per group). In groups participants are asked to discuss case studies to help them think about how they would approach a trainee in difficulty using the London Deanery Framework for Managing the Trainee in Difficulty as a guide.

Two options for the case studies are provided. The first, Option A, is to ask participants to share their own experiences. Facilitators who are confident leading and managing discussion of sensitive issues may choose this option. Use slide 17 if you decide on Option A.

SLIDE 17: Case studies.

For the second, Option B, six case studies are provided that can be given to groups to discuss, one case study per group (see facilitator’s pack for copies of the case studies).

For both options it is important to ask groups to maintain confidentiality and to respect each other’s opinions.

Allow 20 minutes for discussion in groups and 10 minutes for feedback from each group. As each group feeds back ensure that key principles are highlighted, including:

- acknowledging difficulty early
- seeking advice from colleagues
- involving the trainee so that they are aware of concerns
- exploring causes
- focusing on objective facts not opinions
- referring for support as needed, documenting events and meetings clearly.

SLIDE: 18: Resources and support.

RESOURCES AND SUPPORT

London Deanery website:
- Mednet (confidential, self referral)
- The London Deanery Coaching and Mentoring service
- Careers unit
- Language and Communication Resource Unit
- Be aware of local resources including occupational health, trainee’s GP
- See London Deanery “Framework for Managing a Trainee in Difficulty” for a comprehensive list of resources

Highlight key sources of support for a trainee in difficulty. The Medical Professional Support Unit for London will soon be operational. Contact the Deanery for further details.
NOTES FOR FACILITATORS

SLIDE 19: Recommended approach.

RECOMMENDED APPROACH

- Act early
- No surprises – involve learner
- If it isn’t written down it hasn’t happened
- Objective – fact not opinion

Use slide 19 to summarise the key points to consider after feedback from the groups.

SLIDE 20: Effective educational supervision can help to prevent poor performance.

EFFECTIVE EDUCATIONAL SUPERVISION CAN HELP TO PREVENT POOR PERFORMANCE

- Clarity of purpose/role with clear objectives
- Clear induction programme
- Mentoring
- Regular review of progress with effective feedback
- Encourage reflective practice
- 360 degree appraisal
- Early identification of difficulty

Briefly discuss key skills educational supervisors can use to improve performance.

SLIDE 21: Importance of effective feedback.

IMPORTANCE OF EFFECTIVE FEEDBACK:

- Ask trainees’ point of view and encourage reflection
- Phrase feedback in descriptive, non-evaluative language
- Be specific not general
- Address decisions and actions rather than assumed intentions and interpretations.
- Be constructive - acknowledge appropriate behaviour as well as areas for improvement

Remind participants of the principles of effective feedback.
SLIDE 22: Performance in Practice.

This slide can be used to tell participants about the online learning programme, Performance in Practice, available via Synapse. The programme covers key issues relating to identifying a trainee in difficulty and improving performance. It includes useful sections on developing skills for effective feedback.

SLIDE 23: Accessing Performance in Practice.

SESSION 6: 12.30–12.45 A BRIEF UPDATE ON REVALIDATION

This session aims to briefly update participants on developments related to revalidation. In order to prepare for this session it may be useful to review the Good Medical Practice framework for appraisal and revalidation. This can be accessed on the GMC website along with supporting information.

SLIDE 24: Revalidation for trainees.

Explain to participants that doctors in postgraduate training will hold licences Therefore they will need to revalidate every five years and on completion of training. Also note that the Postgraduate Dean is the Responsible Officer for trainees.

If participants want to know how to access the DVD use this slide to highlight where it can be found on Synapse.

See also the handout section of the facilitator's pack for information on additional resources that are available.
A GMC consultation was launched in March 2010 (GMC 2010). The GMC consulted widely with the profession, other health professionals and patient groups. They concluded that revalidation should not take time or money away from clinical care, but is needed to reassure and demonstrate that doctors are up to date and fit to hold licences to practise.

SLIDE 26: What is revalidation?

Explain that the focus of revalidation is to move away from purely personal development to strengthened appraisal representing the interests of the doctor’s developmental needs and their organisation’s needs.

Explain that the new framework has four domains supported by three attributes that are more heavily weighted on the generic professionalism values associated with being a doctor than with clinical/academia.
Trainees will be revalidated through an enhanced form of Annual Review of Competence Progression (ARCP) being piloted now in the Deaneries across England. ARCP will therefore not just be about an assessment for educational attainment and suitability for progression through training, but also about conduct and other matters relating to fitness to practise that would have been the employers, primary responsibility until now. These will need to be fed into the ARCP process through employers, reports. Any matters of concern arising involving a trainee will need to be fed in at the time they happen so the Deanery and the Deanery Responsible Officer can ensure that appropriate investigation, reporting and remediation are undertaken. The Deanery Responsible Officer is responsible for reporting to the GMC about all matters relating to any trainees fitness to hold a licence to practise. The role of educational supervisors with regard to ARCPs will be dependent on the output of current GMC pilots. For updates see the GMC website.

**SLIDE 30: Key learning points.**

- Causes of poor performance are usually multi-fac tors.
- Poor performance often has early warning signs.
- An education supervisor needs to be able to make informed judgements about the next steps once poor performance has been identified.
- Thoughtful support will help most individuals to improve performance.

Use this slide to summarise the main points covered in the workshop. Ask the participants if there are any remaining questions and if there are, obviously answer them.

**Close proceedings.**
NOTES FOR FACILITATORS

REFERENCES


CONTINUING PROFESSIONAL DEVELOPMENT

Having completed the half-day course on Managing Trainees in Difficulty, participants may wish to explore opportunities to further develop their skills in this area. The London Deanery offers several short courses that may be useful to further develop skills including:

- Managing trainees in difficulty: remediation and revalidation
- Supervision skills for clinical teaching

These courses can be booked via the faculty development website:

http://www.faculty.londondeanery.ac.uk/courses-and-events

In addition, the following e-learning modules are particularly relevant and can be accessed via the following link:

http://www.faculty.londondeanery.ac.uk/e-learning

- Managing the trainees in difficulty
- How to give feedback
- Careers support
- Diversity equal opportunities and human rights

Another useful resource is the DVD ‘Performance in Practice’. This can be accessed in Synapse under the Faculty Development ‘Synapse only resources’ section.

The Multi-source feedback (MSF) tool for educational supervisors in London is a useful additional resource for those developing and reviewing their role as educational supervisors.

The MSF is an online resource specifically designed to give educational supervisors the opportunity to get individual feedback from their trainees on the quality of their supervision.

London-based educational supervisors activate an account on the MSF website (details below). They then nominate trainees who they have educationally supervised within the past year, and the trainees can complete an online questionnaire about the educational supervisor. Once a minimum number of questionnaires have been completed, the educational supervisor will receive a structured report containing mean scores and anonymised written comments.

Further details about the MSF tool, how to login or sign up for an account, and FAQs can be found on the Faculty Development website at:

http://faculty.londondeanery.ac.uk/supervisor-MSF