

# Department of Medical Education

# **Supporting Doctors – Guidance**

Version 1 March 2015

**Updated October 2018** 

#### **Forward**

This guidance has been written to support the work of the Professional Support Group, a support team within the Medical Education Faculty. It outlines advice for recognising doctors who may need additional support and also the steps that may need to be taken to facilitate this. It will provide clarity to the process of how doctors requiring additional educational input and support are expected to be managed at the Countess of Chester Hospital.

### **Professional Support Group**

This group is a subgroup of the Medical Education Committee and its membership includes:

Director of Medical Education: Dr Ian Benton (ibenton@nhs.net)
Medical Education Manager: Mrs Janet Ellis (janetellis@nhs.net)

• **FP Director**: Dr Jamie Fanning (fpdirector.coch@nhs.net)

• HR representative: Sue Hughes (<u>sue.hughes14@nhs.net</u>)

• SASG Tutor Dr Saurabh Shandilya

• Specialty College Tutors

It was established in 2012, to provide a discussion forum and support network for those involved in the management of junior doctors who need professional support. We are keen to avoid the term 'doctors in difficulty' as this sets the wrong impression. It allows the Medical Education Faculty to actively support both the individual and also the Clinical/Educational Supervisor. It will also identify if any additional resources are required. The remit of the group also includes the support and advice for Local Employed Doctors (LED) and Physician Associates.

The group meets on a quarterly basis, however urgent meetings can be arranged if required.

# **Educational / Clinical Supervisor's Responsibilities**

The role of the group is not to relieve the educational supervisor from their responsibility for supervision, but to provide support and guidance. It is everyone's responsibility to ensure all health practitioners work in a safe and supported environment.

Once concerns have been raised regarding a doctor it will be the Educational Supervisor's responsibility to investigate, document, agree and communicate the action that is required.

It is a mandatory requirement that all incidents and complaints involving medical staff are investigated and the outcome recorded. Please use the following guidance to record this. If the incident is clinical in nature, the usual clinical incident reporting system should also be completed.

The revalidation and appraisal requirements for both Trust and Deanery posts require this information to allow satisfactory progression via the ARCP / appraisal process.

# **General Principles**

## 1. Early identification of problems and intervention is essential

It is the responsibility of the Clinical Supervisor and their team to intervene and highlight any concerns to the doctor's Educational Supervisor

Signs:

Poor time keeping Failure to answer bleeps

Disappearing / avoiding behaviour Poor organisation

Unable to prioritise Poor record-keeping

Change of physical appearance Anger / volatile behaviour / 'ward rage'

Lack of insight Defensive reactions to feedback

Attitude problems Team working issues

Exam failure Reluctance to engage with portfolio / learning events

## 2. Establish and clarify the circumstances and facts as quickly as possible

Effective discussions between supervisor and doctor are usually sufficient. If further learning, reflection or monitoring be required the part of the form Educational Action Plan should be completed. This should be monitored and outcomes / progress should be recorded.

## 3. Explore the underlying cause(s)

a. Clinical performance

b. Personal, personality and behavioural

c. Sickness / ill health

d. Environmental issues

#### Causes:

Clinical performance Lacking leadership skills

Issues with technical or nontechnical skills Personal / family issues

Dysfunctional team Personality clash

Workload Lack of resources

Stress due to exams Sickness and ill health

Drug / alcohol abuse Communication skills

Career / specialty choice Bullying

Health problems (Mental or physical) Financial worries

#### 4. Clear documentation

Misgivings must be communicated Records must be kept Remedies must be sought Feedback must be given

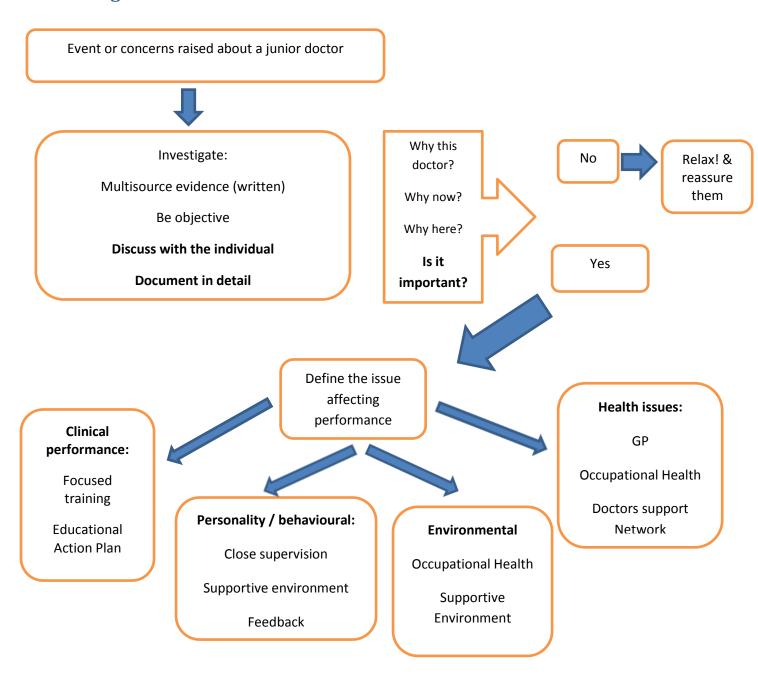
All relevant discussions, recommendations and interventions should be contemporaneously documented **and** communicated with the doctor. As a minimum the Medical Education Manager should be notified. They will notify the accountable individual(s) e.g. Specialty Tutor, Foundation Programme Director, Director of Medical Education and / or Medical Director.

#### Please use the form:

http://portal.xcoch.nhs.uk/Forms/Lists/Supporting%20Doctors%20Form/SDF.aspx

Where there are doubts as to who to report to please consult / inform **both** the Medical Director and Director of Medical Education.

## **Recognition and Action Framework**



#### To be completed by Educational Supervisor

Document outcome / agreed Educational Action Plan <a href="http://portal.xcoch.nhs.uk/Forms/Lists/Supporting%20Doctors%20Form/SDF.aspx">http://portal.xcoch.nhs.uk/Forms/Lists/Supporting%20Doctors%20Form/SDF.aspx</a>

If reflection is required this should be reviewed and commented on in the follow up review.

Copy of Record of meeting/discussion should be forwarded to Medical Education

# Sources of information / support

Lead Employer <a href="https://www.sthk.nhs.uk/pages/LeadEmployer.aspx">www.sthk.nhs.uk/pages/LeadEmployer.aspx</a>

HENW Doctors and Dentists in Difficulty <a href="https://www.nwpgmd.nhs.uk">www.nwpgmd.nhs.uk</a>

HR and Wellbeing business services. www.hrwbs.com

The Doctors' Support Network www.dsn.org.uk

British Medical Association www.bma.org.uk

BMA counselling and Doctor Advisor Service: 08459 200 169 24 hours / day

Support4Doctors www.support4doctors.org

The Sick Doctors Trust www.sick-doctors-trust.co.uk

### References

General Medical Council (2013) Good Medical Practice London: GMC

NACT UK (2008) *Managing trainees in difficulty; practical advice for educational and clinical supervisors* London: NACT

National Clinical Assessment Authority (2004) *Understanding performance difficulties in doctors* NCAA (NCAS)

Red	cord of meeting /	discussion	Date:
Doctor's Name:		Grade:	GMC No:
Educational Supervisor:		GMC No:	
Persons Present:			
Concerns:			
Discussions:			
Recommendations / Act	ion plan:		
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related to a clinical incide	nt. do vou consider the	e incident now clo	osed? Y / N

## **Educational Action Plan**

Learning need	Learning objective	How objective will be addressed?	Date to achieve goal
Date of next review:			

Signed:	Signed:
Educational Supervisor	Junior Doctor
Please indicate the involvement of others:	
Clinical Director / Medical Director / Occupational Hea	alth / GP / Programme Director /

A copy of this meeting record should be given to the junior doctor and also forwarded to the Medical Education Manager.

This form will be retained in the Medical Education Office and will be available for review by the Professional Support Group. Unless notified it will **not** be part of the individuals HR file. Information may be shared with the Lead Employer or Postgraduate Dean where required.