Health Education England working across Yorkshire and the Humber

Educational Supervisor Report (ESR) Guide

2020

Contents

Introduction

The Gold Guide (GG8) states the purpose of an Annual Review of Competence Progression (ARCP) is, to review the evidence presented by the Trainee and their Educational Supervisor (ES), to assess whether the Trainee is gaining capabilities at an appropriate rate and to decide whether the Trainee is able to progress in their training or complete their training.

The role of the ES is:
- provide longitudinal guidance
- feedback to the trainee on development
- objective assessment of overall evidence and feedback
- support the Trainee and the development of their learning portfolio
- pastoral support
- career advice
- support the Trainee with difficulties

The Educational Supervisor Report (ESR) (GG8:4.52 – 4.58) should be completed by the ES, with the Trainee, before the ARCP. It should provide a summary of the Trainees learning portfolio since their last ARCP. It enables the Trainee, the Postgraduate Dean and Employers to document that the competences required are being gained at an appropriate rate and through appropriate experience.

This guidance will discuss the: pre-ARCP ES review meeting, writing the ESR, the impact of COVID-19 on ARCP and the post-ARCP feedback meeting.

Pre-ARCP ES Review Meeting

An educational review is a developmental and formative process whereby the ES meets with the Trainee to consolidate, reflect and feedback on performance. It is Trainee-focused and should take place as a minimum at the beginning, middle and end of each year of training (GG8:4.22). The purpose of the educational review and how to conduct a meeting is detailed in the Gold Guide (GG8:4.26i-ix).

Not all meetings have to be face-to-face and the use of technology to facilitate contact should be encouraged. ES, TPDs and others involved with the training of doctors should be familiar with the principles and TPDs should retain oversight of the quality of educational review and manage accordingly.

The Trainee should attend a pre-ARCP ES Review meeting with their ES, as part of the routine process of preparation for the ESR and ARCP. This meeting should include discussion about, and indicate the likely ARCP outcome and, where applicable, the objectives and training plan to meet these objectives. By the end of the pre-ARCP ES Review, the ARCP outcome should not be a surprise to the Trainee. The ES should indicate, in writing, to both the Trainee and the TPD, if they think that the Trainee is not likely to receive an Outcome 1 (GG8: 4.70).

During the pre-ARCP review meeting, the ES and Trainee should review, discuss and document on the ePortfolio (or via an uploaded form):

- Workplace-based assessments during the training year.

- Areas of achievement.

- Development needs and/or performance concerns.

- Mitigating circumstances or issues which have impacted performance and an action plan to address these. ES's should escalate concerns as necessary to the TPD, employer, DME or HEE YH (GG8:4.35).

- Document any concerns raised by the Trainee (including patient safety). Where appropriate these may need to be raised with local clinical governance/risk management systems and the DME/RO where appropriate (GG8: 4.31).

- Complete the Structured Report Form (available through the School/College).

- Discuss potential outcomes from the ARCP assessment, based on the Trainees performance.

- Clarify revalidation requirements.

- Where objectives and/or curriculum requirements are missing, the training plan to meet these.

Writing the ESR

The content of the ESR varies slightly amongst specialties, however, there are also many similarities. One of the most important points is that all comments must be based on the evidence provided. Even if the Trainee is known to be exceptional clinically, if their portfolio does not evidence this competence then it should not be commented upon.

The discussions in the pre-ARCP ES review meeting will form the main content of the ESR, so the better the discussion, the easier the ESR will be to write. It should be completed with the Trainee, during the pre-ARCP ES review meeting, to ensure that they understand all the feedback which is being entered.

The ESR is an essential piece of evidence in documenting a Trainees progress so needs to be completed to a high level of quality. It does not need to be a lengthy document but must be enough to allow others to be able to make an accurate and fair decision regarding an outcome.

Referenced at the end of this document are some resources, links and references which we hope you will find helpful when completing the ESR:

- Health Education England, working across Yorkshire & the Humber 'ESR Prompt Sheet'.

- Health Education and Improvement Wales 'An Aid Memoire for Writing a Report'.

- North West School of Public Health 'Brief notes on good and bad Educational Supervisors' Reports' – this document contains examples of good and bad ESRs.

- Health Education England, working across Yorkshire & Humber 'ES report for IM' Powerpoint presentation.

The Impact of COVID-19 on ARCP in 2020

During the COVID-19 pandemic, it is recognised that there may not be the resources to deliver an ARCP for every Trainee. Therefore it is proposed that ARCPs, for Trainees who are at critical progression points (e.g. completion of F1; progress dependent on success at professional examination), approaching completion of their foundation, core or specialty training programme and those where development of specific capabilities or inadequate progress has already been identified, should be prioritised.

As it may not be possible for Trainees and Trainers to prepare for and provide the usual evidence for ARCPs as defined in GG8, the Statutory Education Bodies (SEBs) propose the ESR be a key document in the minimum data set required for an ARCP. So, a comprehensive ESR is required to provide the ARCP panel with sufficient information to deliver an ARCP outcome, especially when the panel is reduced to the minimum of 2 assessors. It should include any relevant experience during COVID-19 which might contribute to acquisition of the Generic Professional Capabilities (GPC) required in curricula. It should state whether any significant issues were present pre-COVID-19, occurred as a result of COVID-19 and/or whether COVID-19 has contributed to them. For Trainees due to finish core training, the ESR should highlight whether higher specialty training has been secured or not. If the ES is unavailable, an alternative medical educator with knowledge of the Trainee (e.g. Programme Director) could complete the ESR.

The SEBs have asked the Royal Colleges and Faculties to define the minimum curriculum requirements, compatible with maintaining patient safety, for each specialty for each year of training to inform when a Trainee can progress. In recognition that the outcome of an ARCP may be affected by COVID-19, through no fault of the Trainee, the SEBs have agreed that two new ARCP outcomes should be introduced for 2020:

- Outcome 10.1 - when a Trainee is at a critical progression point in their programme, where the relevant Medical Royal College or Faculty has amended the curriculum and mandated that the competences/capabilities can be acquired at the next stage of training. Any additional training time necessary will be reviewed at the next ARCP. This outcome is analogous to an outcome 2.

- Outcome 10.2 - when a Trainee is at a critical progression point in their programme, where there has been no derogation to normal curriculum progression requirements given by the relevant Medical Royal College or Faculty. Additional training time is therefore required before the Trainee can progress to the next stage in their training. This outcome is analogous to an outcome 3.

The Trainee Action Plan, Portfolio and Personal Development Plan (PDP), produced with the ES, should capture and set out the required capabilities which will be expected at the next scheduled ARCP and the time point for this review defined.

Irrespective of disruption due to COVID-19, all concerns regarding clinical capability and/or fitness to practise/revalidation should still be managed by the existing Responsible Officer/Postgraduate Dean mechanisms. **During the COVID-19 pandemic, social distancing rules should be observed - technology should be used to facilitate meetings.**

Post-ARCP Feedback Meeting

Trainees are not invited to their ARCP. There is a post-ARCP feedback meeting which will give the Trainee the opportunity to discuss their outcome and receive feedback. Depending on the outcome delivered by the panel, the meeting must take place within a certain amount of time from the delivery of the outcome. The person delivering the feedback will vary depending on the outcome received.

For outcomes 2 and 10.1 the Trainee and ES will arrange the post-ARCP feedback meeting directly. The meeting does not have to be face-to-face and the use of technology to facilitate contact should be encouraged. For more information on the post-ARCP feedback meeting please refer to local ARCP guidance.

Why is feedback important?

- Without feedback, mistakes remain uncorrected and bad habits can develop.
- Without feedback your Trainee may drop desirable behaviour if it is not appropriately supported.
- Feedback reinforces good practice, increases motivation, assists in modifying behaviour, develops confidence and encourages reflection.

How to give effective feedback:

- Feedback is most effective when it is expected or anticipated.
- Feedback should be specific and based on observations.
- Feedback should always be constructive, clear and unambiguous.

Everyone will find the way with which they are most comfortable giving feedback. The 'Guide to Supervisor Skills' has some helpful suggestions on how to deliver feedback.

Resources and References

Contingency planning for ARCPs – COVID-19 outbreak		Contingency Policy for ARCPs.pdf
ES report for IM Powerpoint		ES report for IM.pdf
Gold Guide Version 8 (GG8)		Gold_Guide_8th_Edition_March_2020.pdf
		https://www.copmed.org.uk/gold-guide-8th-edition/
Guide to Supervisor Skills		Guide to Supervision Skills Spring 2020_.pc
		https://madeinheene.hee.nhs.uk/education2
Health Education and Improvement Wales - 'An Aid Memoire for writing a report' PACT sheet		HEIW PACT annogram.pdf
HEE YH Deanery website		https://www.yorksandhumberdeanery.nhs.uk/
North West school of Public Health 'Brief notes on good and bad Educational Supervisors' Reports'		NW SoPH educational_superviso
Royal College of Radiologist 'Educational Supervisor Structured Report'		Royal College of Radiologists Education
Supporting the COVID-19 Response: Enabling Progression at ARCP		Supporting the COVID-19 Response E
Supporting the COVID-19 Response: Management of Annual Review of Competency Progression (ARCP)		Supporting the COVID-19 Response I
The Royal College of Ophthalmologists 'Summary of Training Progress & Educational Supervisor Report'		ESR-RCOphth-June-2015.pdf

ESR Prompt Sheet

Yes please:

☑ Ensure all mandatory fields are completed.

☑ Specify the period covered by the report.

☑ Complete the report in conjunction with the Royal College's decision aid.

☑ Remember this is to assist the ARCP panel in their decision making, to enable them to issue the Trainee with an accurate and fair outcome.

☑ Only make factual statements supported by evidence - be specific and professional.

☑ Justify your decision regarding the Trainees progress/rating level.

☑ Write the report with the Trainee.

☑ Provide appropriate feedback for the Trainee.

☑ Set SMART objectives.

☑ Give details of any failed exams and ensure this is addressed in the Trainees development plan, with actions that will be taken before their next sit.

☑ Provide details of any mitigating circumstances that have impacted on the Trainees learning e.g. health/wellbeing issues, COVID-19.

☑ Make sure any concerns have been discussed with the Trainee.

☑ Reference and date any support offered to the Trainee.

☑ Identify strengths as well as development needs.

☑ Include compliments and feedback from colleagues and patients.

☑ Share the report with the Trainee and their Clinical Supervisor.

☑ Complete it at least 2 weeks before ARCP – if you have concerns about meeting the deadline discuss this with the TPD.

☑ Give enough information for the next ES to be able to best support the Trainee (where applicable).

No thank you:

☒ Do not leave it to the last minute to complete the ESR – it should be done with the Trainee, 8-2 weeks before the deadline for evidence (at least 2 weeks before the ARCP).

☒ No surprises - information on the ESR and the ARCP outcome should not be a surprise to the Trainee. An open and honest dialogue between ES and Trainee will support this.

☒ Do not make statements without providing supporting evidence.

☒ Do not forget to include details of any mitigating circumstances such as, health/wellbeing issues and COVID-19 (where applicable).

☒ This is NOT just a tick box exercise – it is an opportunity to provide the Trainee with constructive and meaningful feedback and to enable the ARCP panel to issue a fair and deserving outcome.

☒ Leniency bias – fear of giving negative assessment.

☒ Central tendency error – tend to average in absence of evidence.

☒ Halo effect – allowing global judgement to affect comment on specific areas.

☒ Overweighting – tendency to give undue weight to recent or more dramatic events.

☒ Contrast errors – comparing with other Trainees or self rather than objective standards.

☒ Objectives not SMART.

An Aid Memoire for Writing a Report

Credit and thanks are given to Health Education and Improvement Wales for sharing this Aid Memoire with us.

P	Precise descriptions that are sufficient to give the reader understanding of progress Positive as well as negative examples in report of strengths and weaknesses Plan describes clear educational objectives with targets and deadlines
A	Accurate and evidence-based judgements referenced to E portfolio Advice given to trainee is referenced and dated to demonstrate support offered Alternatives are stated that were considered or made to support trainee Attitude of trainee and relationship with trainers and programme
C	Comprehensive report that covers progress against all required competencies Compliments and feedback from colleagues and patients included in the report Critical incident issues are described and their resolution Concerns described with evidence regarding health, probity or absenteeism Communication skills
T	Tone – avoid demonstrating frustration or harshness – keep it professional Timely – has the E portfolio been maintained regularly or updated last minute Transparency- feedback should not be a surprise

This document was produced by:
Health Education England working across Yorkshire and the Humber