**Yorkshire & Humber Trainee Wider Forum**

**Minutes of Meeting**

traineeforum.yh@hee.nhs.uk

**Date: 24th May 2023**

**Venue: Online – MS Teams**

**Time: 9-12pm**

**Attendees invited (attended** [x] **):**

[x]  Emma Howe (EH)(Chair) [x]  Charlotte Chuter (CC) (Wider Forum Lead)

[x]  Raykal Sim (RS) (Vice Chair) [x] Chioma Maduka (CM) (East Locality Lead)

[ ]  Susan Stokes (Secretary) [x]  Ugochukwu Uzondu (South Locality Lead)

[x]  William Sapwell (Employers Lead) [x]  Eman Hassanin (EmH) (West Locality Lead)

[ ]  Waqas Din (Quality Lead) [ ]  Sara Khalid (Wellbeing & Support Lead)

[x]  Donnar Ejiofor (DE)(EDI Lead) [ ]  Jessie Tebbutt (Comms & Engagement Lead)

[ ]  Laura Naish (EDI Lead) [x]  Michelle Horridge (LTFT Lead)

**Wider forum members present:**

[ ]  Anaesthetics [x] Dentistry [ ]  Emergency Medicine [x]  Foundation

[x]  GP [x]  Medicine [x]  O&G [ ]  Ophthalmology

[x]  Paediatrics [ ]  Pathology [x]  Psychiatry [x]  Public health

[ ]  Radiology [ ]  Surgery

**HEE present:** Melanie Holloway (Regional diversity, inclusion and participation manager NEY), Gabrielle Finn (Professor of medical education), Megan Brown (Senior lecturer in medical education)

**Apologies:** Susie Stokes, Waqas Din, Katherine Harris, Sara Khalid, Sobhana Tani,

**Acronyms**:

HoS – Head of School OOH- Out of hours

SDT – Self development time ILR – Indefinite leave to remain

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| **Welcome****Introductions, apologies****Trainee representatives forum**Closed forum for Executive and Wider forum members. Topics discussed:1. IMGS visa extensions in GP training

Trainee(s) looking for clarity on word-of-mouth information about the GP school extending the VISAs for IMGs who do not yet have a job lined up for after they CCT. RS and DE - it hasn’t yet been confirmed with the GP School. But DE will link with GP HoS and can send out the updated information via the trainee forum mailbox mailing list. 1. Single lead employer

Update from EH - At the recent DMT meeting, there are now plans to seek a provider for a single lead employer that covers Y&H. This will reduce the paperwork burden for rotating trainees and can also allow the opportunity for salary sacrifice schemes such as car leasing to be available for more trainees across the region.1. Floor level cover vs speciality level cover

EmH raised question put forward by West YH JDF - Leeds Trust currently operating OOH as a floor level cover, but trainees are wishing to return to specialty level cover. Rota coordinators looking for examples of how this transition has worked effectively before. 1. IMT covering cardiothoracics OOH

IMT trainees at NE trust are having to cover cardiothoracic ward OOH – including clerking patients, despite not being on surgical placements. It is not directly relevant to the IMT training and is taking away training opportunities. Trainee asked to contact trainee forum mailbox to provide details of rotation and TEF will feed raise this with PGD team.1. SDT time

[RCPCH](https://www.rcpch.ac.uk/resources/trainee-charter) and JRCPTB suggest SDT for trainees, but this is not happening on the ground. FY2 representative shares good practice of SDT at their site – which took 2 years to establish. SDT time for foundation however is supported by HEEYH see information here. Other schools do not have protected SDT time. EH and SP highlighted study leave and professional leave as protected time for personal and professional development. SP recommended; trainees to look at their rota and identify suitable time for leave, if denied by rota team, ask when the rota team can accommodate, if rota team cannot accommodate at any point, then recommend exception reporting for missed educational opportunities. Important to balance supporting NHS service with trainees education and training.**Action points**: DE to find out if VISA extensions will be supported by GP School, answer will be distributed to wider forum members via trainee forum mailbox (EH). EH to await email from WF trainee and then forward concerns regarding IMT trainees and OOH cardiothoracic cover. WS to continue with exception reporting campaign development. **Wider forum focus**CC highlighted that 20 minutes of each Wider Forum meeting is specifically ‘educational’. CC polled WF for preferences on the focus of future educational sessions. Priorities of educational element (1st to 4th):1. Leadership and management ‘workshops’
2. Clinical leadership stories
3. Non-traditional routes e.g. OOP, LTFT
4. Local success stories

**Action point**: CC will plan educational sessions which reflect the preferences of WF members.**Evaluate the changes made to medical education during the COVID-19 pandemic** Megan Brown and Gabrielle Finn introduced the GMC-funded research work being undertaken by medical education researchers and confirmed the consent of WF members to be involved in. Transcription commenced to support documenting feedback.The focus has been narrowed down to gather feedback on:1. Curriculum derogations impact
2. Issues pertaining to exams
3. Quality and experience of remote ARCPs

Wider Forum members shared their experiences of trying to achieve curriculum requirements and receive education and training during the COVID-19 pandemic. Some highlighted points included: trainees being left financially out of pocket to pay for courses (ALS and revision courses) after these were cancelled locally. COVID ward cover impacted the breadth of training received and challenges in updating portfolio with the required cases. Some ARCPs moved to virtual after previously being face to face, many ARCPs have always been remote from trainees and trainees only invited for face toface meeting if outcome other than outcome 1.**Action point**: MB and GF will be collating all information gathered and a report will be published, they shall feed back results. **EDUCATIONAL FOCUS: Calling in, not calling out**Melanie Holloway facilitated the educational component of the WF meeting. Explored microaggression and [video](https://youtu.be/hDd3bzA7450) used to demonstrate what microaggressions can look like and the impact it can have. Discussed ‘assuming goodwill’ and shared this [video](https://youtu.be/OL1VSno6C_U) to support this. Explored that calling in is ‘calling out’ but is approached in a way that can avoid defensive reaction from those making unacceptable comments and promote self-awareness and learning. The 4 Ds of intervening safely (bystander principles): Direct, distract, delegate and delay. Questions from WF answered and complexities of this topic acknowledged. 20 minutes cannot allow a thorough exploration but offers an introduction for those who are unfamiliar with this topic and concept. EDI workshops free for trainees to attend, study leave can be taken to attend the catalogue of courses here. **Meeting Closure** EH will be stepping down as Chair of YH Trainee Forum in Aug 2023, so today was last WF meeting – incoming Chair Sium Ghebru. EH thanks all who have attended and show support to Trainee forum via WF membership.Poll shared for preferred method of trainee communications from Deanery. 16/17 answered email preferred way to receive training related information from the Deanery.East, South, West drop-in sessions now open 12:00-12:15. Hosted by Executive forum members. Opportunity to network with trainees in your locality, ask questions, raise concerns, share ideas and express interest in Forum project work. **ACTIONS SUMMARY**DE to find out if VISA extensions will be supported by GP School, answer will be distributed to wider forum members via trainee forum mailbox (EH). EH to await email from WF trainee and then forward concerns regarding IMT trainees and OOH cardiothoracic cover. WS to continue with exception reporting campaign development. CC will plan educational sessions which reflect the preferences of WF membersMB and GF will be collating all information gathered and a report will be published, they shall feed back results. |