Background
As clinicians in Lothian we have the opportunity to develop the Doctors of tomorrow. We should and do strive to ensure that our junior colleagues, both UG and PG, experience teaching, learning, assessment and feedback opportunities of high quality in a supportive and developmental healthcare system.

The GMC as the regulator of UG and PG education & training expects a transition over the next 2 years from the current to a future state where all clinical trainers have both training for and explicit time to fulfil these roles. This should be seen as a positive step as it will ensure that those responsible are recognised and supported and developed in their role; however I do understand the concerns of those who “have been doing it for years”

In this first phase, the **PG roles** we are focusing on are:

**a. Named Clinical Supervisor [NCS]** - responsible for overseeing a named trainee’s clinical work throughout a **placement** in a clinical or medical environment. Will provide constructive feedback during that placement on a regular basis and will lead on providing a review of the trainee’s clinical or medical practice throughout the placement that will contribute to the annual Educational Supervisor’s report.

**b. Named Educational Supervisor [NES]** - responsible for the overall supervision and management of a trainee's trajectory of learning and educational progress during a placement or series of placements i.e. a **programme**. Helps the trainee to plan their training and achieve agreed learning outcomes over a longer period of time. Responsible for the educational agreement and for bringing together all relevant evidence to form a **summative** judgement at the end of the placement or series of placements.

**Time commitment**
NHS Lothian is committed to providing at minimum **1 hour of developmental trainee focused supervision** each week for every trainee [FY – ST]. This will be undertaken by the Named Clinical Supervisor in the clinical unit to which the trainee is attached. This time will not normally be in a patient-facing context unless appropriate to the specific training or development needs of the trainee. In the PG Programmes where the trainee is co-located with their Named Educational Supervisor for a year or more, it may be that the role of Named ES and Named CS are merged. [Tariffs combine – see Job planning]

**Training for Role & Appraisal evidence**
The faculty development requirements expected by the GMC are being addressed strategically in Lothian through the Clinical Educator programme - see here for information [http://sefce.net/cep](http://sefce.net/cep)
The matrices outline both the minimum requirements in relation to training for role and also the evidence expected for the appraisal conversation. In short, of the 7 GMC domains, a NCS will be expected to evidence 5 while the NES will engage with and evidence all 7.

Clinical Educator Programme [http://sefce.net/cep](http://sefce.net/cep)
GMC Trainer Pages [http://www.gmc-uk.org/education/10264.asp](http://www.gmc-uk.org/education/10264.asp)
November 2013 version 1 [Edgar]
Trainer Recognition and Job Planning

We understand that there are many routes to trainer accreditation [College, BMA etc] and we have a recognition of prior learning process in development.

Job Planning [see appendix for role descriptor and tariffs]

Clinicians who identify with the role of Named Educational supervisor should:

- Identify themselves as such in their e-job plan
- Indicate the number and name(s) of the trainees to whom they are the NES. This data is cross-referenced with the PG Deanery.
- Consider if their role is as combined NES and NCS for the SAME trainee
- Attract an SPA tariff of 8 hours/trainee/year [2hrs/3 months]

Clinicians who identify with the role of Named Clinical supervisor should:

- Identify themselves as such in their e-job plan
- Indicate the number and grade of trainees to whom they are the NCS in their clinical unit on a rolling and regular basis. This data is cross-referenced with the known number of trainees in each clinical unit.
- Understand there will be a maximum number of Named Clinical Supervisor roles allocated in a clinical team, linked to the number of PG trainees
- Attract an SPA tariff of 1 hour/trainee/week i.e. 0.25 SPA/trainee

When the NES and NCS roles are focused on the same trainee then the tariffs are combined.

Important to note

- These are the only PG roles recognized by the GMC. If your programme calls these roles something else then you need to consider the closest fit.
- If your specialty college or faculty outlines other roles e.g. Tutor, again you will need to confirm with either the Associate Medical Director or Associate Director of Medical Education for your specialty or hospital as to how we can accommodate these within the GMC framework and job plans.
- Only those clinical educators who:
  - are identified by Training Programme Directors as a NES or by Foundation Programme Directors or Clinical Directors as a NCS and,
  - have undertaken OR are in the process of undertaking OR are able to demonstrate through recognition of prior learning (RPL) training specific for the role and,
  - provide on an annual basis, supporting evidence for ongoing quality of educational activity
    will be supported with SPA time for this role
- There will be a maximum of 1.0 SPA for educational activity allocated unless the clinician holds another named educational role.

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