



Managing trainee performance: management checklist

Recognition

Reaction

Rehabilitation

Review

Referral

1. **Recognition** that a trainee is in difficulty: this stage is often done too late.
 - Issues may be raised by:
 - ◆ Your own observation
 - ◆ Complaints/concerns from team and/or patients
 - ◆ Multisource feedback
 - ◆ Failure of exams/assessments
 - ◆ Poor attendance record/absenteeism
 - Keep confidential written records of all contacts
 - Involve appropriate senior Deanery personnel such as Clinical Tutor, Programme Director, GP Course Organiser or Associate Director, Dental Dean

2. **Reaction** should be prompt and thorough. Additional time may need to be negotiated for the trainer within a hospital department, GP or dental practice.
 - **Investigation of the issues** and preparation prior to meeting the trainee
 - ◆ Complaints/multisource feedback by discussion with appropriate people with written evidence (if available) and copies of any complaints
 - ◆ Assessments/exams - obtaining specific feedback if possible
 - ◆ Review current training records and CV
 - ◇ Obtain previous written progress reports/multi-source feedback from previous jobs and current post
 - ◇ Speak to previous consultants, trainers or GP Course Organisers (if appropriate) and ask them to document any concerns
 - ◇ Overall verbal feedback from key members of the team
 - ◆ Consider what options you, your organisation or specialty might be able to offer
 - ◆ Keep the Trust Postgraduate Tutor, GP Associate Director or Dental Dean informed
 - **Meeting with the trainee** to give feedback and explore the issues (do not wait for next appraisal). This is a meeting that the trainee will be required to attend and it may be appropriate for the trainee to have someone with them for support. It may be appropriate to include the Clinical Tutor, Programme Director or GP Associate Director in the meeting and the trainee should be given an opportunity to speak without their trainer being present.
 - **The purpose of the meeting is to:**
 - ◆ give feedback and explore the issues

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- ◆ understand the reasons for problems identified
- ◆ develop a strategy to address the issues, including a targeted PDP
- ◆ plan monitoring and review arrangements
- ◆ provide clarity about implications for successful completion of training
- ◆ provide a report for trainee and others as appropriate
- ◆ consider early referral - issues of patient safety, conduct and health need immediate referral
- ◆ consider the need for an urgent or early RITA
- **Appoint a case worker** - if there are a number of people involved in the remedial process, to provide co-ordination and communication. This would normally be the Programme Director or Course Organiser.

3. **Rehabilitation** provide effective targeted training as planned. Increase opportunities for personal observation and give specific feedback, including positive feedback, as you go along.

4. **Review**

- Preparation - collect information from agreed monitoring procedures.
- If little or no progress, repeat elements of the first meeting to gain greater understanding and address other issues such as health or stress which may have developed.
- Agree assessment of progress and adjustment of PDP.
- Agree further monitoring arrangements and review.
- Write report of the meeting, check for accuracy with the trainee and share with others on a need to know basis previously negotiated with the trainee.
- If the issues remain sufficiently serious that satisfactory completion of training is unlikely, ensure that the report states this clearly and the trainee understands the implications.

5. **Referral to the:**

- Deanery if any remedial or supernumerary training is required
- Trust HR and/or Occupational Health if issues are serious and include:
 - ◆ Risk to patient safety - immediate action is necessary to reduce clinical responsibility /increase supervision
 - ◆ personal and professional conduct - disciplinary procedures may be appropriate
 - ◆ possibility of health problems
 - ◆ the trainee needs to adjust their clinical responsibilities.
- Medic Support if the doctor needs help coping with stress
- Career Development Unit, if no progress and issues:
 - ◆ Likely to lead to unsatisfactory completion of training
 - ◆ Indicate long-term complex problems or career dilemmas unlikely to be addressed through the standard educational system
 - ◆ Require analysis of educational needs or specific coaching.
- NCAS or GMC if serious and general enough to query fitness to practise (Employer and the Deanery must be involved)