PROFESSIONAL SUPPORT UNIT (PSU)
FRAMEWORK FOR DOCTORS IN TRAINING IN THE SCOTLAND DEANERY

January 2020
(review date December 2021)

INDEX

		Page Number
1.	Introduction	3
2.	Purpose	3
3.	Professional Support Service	4
4.	Who should be referred to PSU?	5 - 6
5.	Record keeping	6
6.	Resource and Support Services	7
7.	Governance of PSU	8
8.	Local Performance Review Group	8-10
9.	What the PSU is NOT	10
10.	Administrative Support	10
11.	Evaluation of the Impact of PSU	10
12.	Annex 1 – Referral Pathway	11
13.	Annex 2 – Roles in Professional Support Unit (PSU)	12
14.	Annex 3 –Professional Support Operational Group Terms of Reference	14
15.	Annex 4 – Professional Review Group Standard Operating Procedure	16
16.	Diagram 1 – Governance Structure	17
17.	Diagram 2 - Role and Communication Channels for Deanery and Local Performance Support	18
18.	Polices, Forms and Guidance Documents	19 -

1. Introduction

1.1 In April 2014 NHS Education for Scotland became a single Deanery with four regions and five regional offices. The purpose of this re-organisation was to ensure consistency of processes and experience in the trainee journey irrespective of specialty and location.

1.2 As a result a Deanery Professional Support Unit (PSU) to provide support and guidance for trainees and for those involved in managing and supporting the trainees who require professional support was developed.

1.3 Since then further changes have taken place with the introduction of the Lead Employer model with an Employing and a Placement Board. In addition, on 1 November 2019 the Medical Directorate launched the training Management Vision where the Lead Deans and Directors take responsibility for specialties on a Scotland wide basis as opposed to regionally.

1.4 The Terms of reference and the Standard Operating procedures have been reviewed in light of these structural changes.

1.5 The strategic vision of the PSU is :

- To promote early identification of trainees who require professional support.
- To provide clinical and educational supervisors and Training programme directors (TPDs) with a clear structure for identifying and addressing any difficulties.
- To ensure clear lines of responsibility for other educators involved in managing trainees requiring professional support.
- To provide a network of support for all educators throughout Scotland.
- To establish a group of experts who can deal with specific areas of difficulty and where necessary refer to additional resources and identify opportunities for targeted training.
- To ensure equal access to educational support
- To ensure good and timely communication between NHS education as the training organisation and the Employing and Placement Boards.
- To ensure the Lead Dean/Director is aware of trainees who may need extra support in the specialty for which they are responsible irrespective of trainee's Placement Board in Scotland.

2. Purpose

2.1 The purpose of the PSU guidance is to ensure that doctors who may be experiencing difficulties are identified and supported as early as possible. The work of the PSU is based on the following underlying principles:

- To support trainees in their training with a view to providing them with the tools to progress in their training programme.
- To support trainees during the process of leaving a training programme if support and remediation have been unsuccessful.
- To provide guidance and support to all educators managing trainees in difficulties in their training programmes
- To provide a culture of support and development
- Processes and decisions will be transparent and understood by all.
- Decisions will be based on best evidence.

- To provide clear criteria for assessment and decision making.
- To ensure consistent application of guidelines across the Scotland Deanery.
- To ensure a responsible use of funding and resources.

3. Professional Support Service

3.1 The PSU can advise on a range of services – examples include

- Case management
- Careers advice
- Language and communication skills
- Examination support
- Signposting to Occupational Health assessment
- Advice re specific training to meet identified educational needs
- Assessments
- Mentoring support
- Conflict resolution
- Management of GMC referrals in relation to key areas of performance (competence), health or conduct (personal/professional).

3.2 Referrals to the PSU will be made by TPDs, Foundation Programme Directors (FPDs),Associate Postgraduate Deans (APGDs) specialty, GP Training Leads and Directors of Medical Education (DMEs).
A standard referral form **must** be used. This can be found on the Scotland Deanery website at:http://www.scotlanddeanery.nhs.scot/trainer-information/performance-support-unit/psu-documentation/ The standard referral pathway is seen at Annex 1

Self referrals from trainees will also be accepted. This would normally occur when a trainee feels they cannot discuss their issues for whatever reason with those involved in their supervision and education. They would contact the PSU administrator directly and the Lead Associate Dean (PSU) would then make contact with trainee and agree the next steps.

3.3 The PSU works directly with trainees assessed at level three. When a referral form is received by the PSU the Lead Associate Dean (PSU) will review the referral and allocate a Trainee Support Coach (Consultants and GPs working in medical and educational environments) to the case.

3.4 The Trainee Support Coach should declare any conflict of interest such as a trainee in their specialty programme of whom they have personal knowledge or a relation. A new Trainee Support Coach will be allocated.

3.5 The Trainee Support Coach (TSC) will offer to meet with the doctor to make an assessment and identify appropriate actions or relevant support services as required..
This will be implemented and managed in partnership with the Educational Supervisor/TPD/Assistant Director (AD)/APGD specialty /Employer and Placement Board who may already be involved in providing support to the trainee. The Lead Associate Postgraduate Dean (PSU) and the Trainee Support Coach will meet regularly to discuss these cases.

3.6 If a trainee fails to attend a meeting with the Trainee Support Coach the PSU administrator will contact the trainee and offer a further appointment. If the trainee fails to engage then the PSU administrator will inform the TPD and the referrer if different.

3.7 The PSU Trainee Support Coach will be supported by the PSU administrator who will co-ordinate appointments, support the Trainee Support Coach with collation of reports, letters and updating of TURAS. All reports and communication with the trainee should be sent to the PSU administrator who will store appropriately.

3.8 Details of the role of the Lead Associate Postgraduate Dean (PSU), Local Associate Postgraduate Deans (PSU)Trainee Support Coach and PSU administrator are outlined in Annex 2.

3.9 PSU will liaise with the Faculty Development Alliance on appropriate training for educators

4. Who should be referred to the PSU?

4.1 For most doctors in training there are no concerns about their clinical or professional performance during their training. Clinical and educational supervisors will have access to evidence of the performance of trainees via their e-portfolio. This is reviewed routinely as trainees move from post to post.

4.2 For doctors in training where there are concerns they will usually fall into three main areas

(a) Performance (competence)
(b) Conduct (personal/professional)
(c) Health

Each of these concerns can be categorised into three levels.

Level One Support

4.3 Minor concerns which can be managed locally by the training team. Concerns which are of low risk to patients, colleagues and self.

- ARCP outcome 5, 7.4
- Concerns raised by educational or clinical supervisor requiring discussion with TPD/FPD but locally remediable.
- Health issues with 10-20 days sickness leave
- Single failed examination

Level Two Support

4.4 Concern which if left unmanaged could pose a significant risk to patients, colleagues or for the trainee of failing to progress or requiring additional training time.

- Unsatisfactory educational supervisor end of placement report.
- More than one examination failure or failure of examinations which will trigger additional time in training.
- ARCP outcomes 2, 3, 7.2, 7.3.
- Any trainee likely to require an extension of training time due to lack of satisfactory progress or ill health for any reason.
- Trainees requiring additional support to allow them to continue to cover on call and perform usual work of grade.
- Health problems with sickness leave of more than 20 days.

- Any trainee requiring triggered occupational health referral by Placement Board .
- Any incident of clinical concerns triggering formal disciplinary investigation.

Level Three Support

4.5 Concern or repeated performance problems that present a high level of risk to patients, colleagues or to progression of trainees in their programme.

- Unsatisfactory educational supervisor end of placement report from more than one placement in that training programme.
- Repeated failure of examinations which will trigger additional time in training
- ARCP outcome 3,4, 7.3, 7.4
- Any trainee who despite an extension of training time due to lack of satisfactory progress or ill health is still not meeting training targets.
- Any clinical concern requiring removal from on call duties or usual work of grade
- Any incident of clinical concerns triggering formal disciplinary investigation which triggers suspension from duty.
- Any GMC referral by Placement Board or trainers
- Combinations of any of above

4.6 All Level 3 concerns should be formally referred to the PSU where a Trainee Support Coach will be appointed.

4.7 The PSU will work with the Local Performance Review Groups (Local PRG) to ensure good sharing of information. The Local PRG/TPD/Employing and Placement Board will have continuing responsibility for working with the trainee and Trainee Support Coach to implement any action plan.

4.8 The different stages of the process are outlined in Diagram 2. It is recognised that GMC referral can occur outwith this process.

5. Record Keeping

5.1 Doctors in training are undertaking training programmes under the auspices of the Lead Dean/Director and are employees in healthcare organisations. The transfer of educational information is applicable to every doctor in training in accordance with Gold Guide and Data Protection Act (DPA).

5.2 All educational contacts relating to potential poor performance whether it is specific or generic should be contemporaneously recorded and copies given to the doctor. Documentation should commence as soon as performance concerns come to light. Only a small minority of performance difficulties may escalate into a PSU referral, records should nevertheless be kept from the earliest stage to help ensure continuity and avoid duplication of effort. Good documentation is an essential part of educational governance.

5.3 Recording forms are found on the Scotland Deanery website at: http://www.scotlanddeanery.nhs.scot/trainer-information/performance-support-unit/psu-documentation/

5.4 There is a TURAS performance support tab that will show if the trainee has been referred to PSU, when referral occurred, by whom, The Trainee Support Coach and reason for referral (health, performance etc.,) This will be completed by the PSU administrator at the time of referral. There will be a link to the record of the meeting and the outcome agreed with trainee which will be held in sharepoint**.** There will be restricted access to sharepoint for these files.

5.5 Access to the sharepoint folder that holds the meeting reports will be available to

- Lead Dean /Director
- PSU Trainee Support Coach
- Lead ad Local APGDs (PSU)
- PSU administrator
- Senior Training manager
- Deputy Training Manager
- Four Training Managers
- PAs of the LDDs

5.6 The PSU Folder in Sharepoint sits in **Med Training PMS** and is named **Performance Support.** There are currently a number of folders that will be rationalised and going forward there will be

- **Trainees_Active** – This will hold all activity between trainee and PSU (emails, reports, referral)
- **Trainees _Inactive** – This is an archive file and all trainees will be moved there when they CCT or leave training for another reason and the file will be removed after 5 years. The PSU administrator will be responsible for maintaining this.
- **PSU Trainee Support Coach Development Meetings** – Notes of these meetings will be held here
- **Local Performance Review Group Meetings** – Output from these meetings across Scotland will be held here

5.7 All information held in PSU will undergo a Data Protection impact Assessment in collaboration with NES GDPR officer.

6. Resource and Support Services

6.1 The PSU will have a range of services at their disposal. This can be seen on the website at http://www.scotlanddeanery.nhs.scot/trainer-information/performance-support-unit/psu-resources/ Regions will still have access to occupational health and HR support. Referral to Ward simulation and acute care scenarios at Dundee and Larbert respectively will go through the PSU. Requests for the **full** Dyslexia assessment will be accessed through the PSU.

6.2 Guidance for Educational supervisors, Training Programme Directors, Assistant Directors and Associate Postgraduate Deans Specialty will be added to the website as they are developed. Current guidance includes (Documents as Appendices)
Dyslexia
Exam Failure
Return to Work
Guidance on meeting with trainees with concern
Guidance on Managing Trainees who may not be Foundation Competent
Transfer of Information

7. Governance of PSU

7.1 The Performance Support Unit will be accountable to MDET via the Lead Dean/Director. The structures underpinning this will consist of an operational group which will have responsibility for the development and implementation of the NES PSU Framework document as well as overseeing the activity of the Trainee Support Coach led by the Lead APGD (PSU) (Diagram 1).

7.2 The remit and membership of the PSU Operational Group is seen in Annex 3.

7.3 The PSU Trainee Support Coach Development Group will discuss anonymised cases for learning and calibration and be responsible for the ongoing development of Trainee Support Coach.

8. Local Performance Review Group (Local PRG)

8.1 The Local PRG is the formal mechanism for oversight of management of trainees who are experiencing difficulties. Discussions will include details of support needed for performance issues, reports on sickness absence and an update on progress and outcomes of disciplinary processes. Trainees identified during these discussions who are not currently receiving support / guidance from the PSU will be contacted and offered an appointment if appropriate.

8.2 Trainees in Scotland are employed by one of four Lead Employers (NHS Grampian, NHS Lothian, NHS Greater Glasgow and Clyde and NHS Education). All trainees irrespective of their Employer or Placement board have their education and training overseen by NHS Education. The parallel roles and responsibilities of these Boards means that the Local PRG processes are required to be robust and consistent and will be the link between the PSU, Specialty leads, Lead employer and placement boards.

8.3 In addition the Lead Dean /Directors have national responsibility for specialties and need to be sighted on trainee issues across Scotland. The structure and function of the Local PRG needs to take both the local and national requirements into account.

Terms of Reference of the Local PRG

8.4 The Local PRG will be a partnership between NHS Education and the Lead Employer. The Local PRG will normally be chaired by the Associate Postgraduate Dean for Performance Support but may also be co-chaired by a representative of the Lead Employer (eg Medical Director/ DME). The Lead Employer may agree to delegate specifically the involvement in the Local PRG to the placement Board where geography and numbers of trainees dictate this to be preferable. In these cases, it must be agreed how and in what circumstances the Lead Employer should be contacted regarding trainees.

8.5 Each Local PRG can be organised locally according to availability of local administration support and other logistical considerations. **Whatever the administrative arrangements the output of these meetings must be shared with NES PSU.**

8.6 The meetings will take place a minimum of 3 times a year to ensure prompt discussion of training issues during each potential block of training

8.7 The Local PRG will ensure

- patient safety is maintained during a trainee's placement

- agreed procedures and policies of Employing Boards and NHS Education for management of trainees in difficulty are applied in a fair, transparent and equitable manner
- that the trainee is offered timely and appropriate support in order to maintain welfare
- that there is communication of training and support plan occurring between all appropriate bodies
- all trainees that require to change training site or Placement Board who have ongoing concerns or need special adaptations have detailed transfer of information and planning for new placement
- the Lead Dean Director is aware of and updated on trainees with significant training issue in their specialty
- all trainees with level 3 concerns are known to PSU and Employing and Placement Boards are aware of who is attending PSU
- sharing of best practice with regards to trainee support

Membership of the Local PRG

8.8 Members to include

- Associate Dean for PSU (NES) normally Chair but may Co-Chair
- Lead Employer Medical Director/ DME may Co-Chair
- Director of Medical Education or Deputy
- PSU Administrator or Deputy
- Associate Postgraduate Dean for Foundation or Deputy
- Assistant Director General Practice or Deputy
- Specialty Associate Postgraduate Deans or TPDs when appropriate
- Relevant Lead Employer / Placement Board representatives – Head of HR or deputy
- Regional Training Manager
- NES Employer Liaison
- Admin Support from Board if appropriate
- Other members as appropriate

8.9 Depending on size of region, number of Health Boards and trainees the number and format can be planned appropriately and may be VC enabled.

8.10 All trainees with level 3 concerns must be discussed and the PSU admin will note any actions

8.11 Trainees with level 2 concerns can also be discussed at the discretion of the group. This would usually include all trainees with extensions to training time and ongoing disciplinary matters

8.12 The Standard operating procedure for the Local PRG is outlined in Annex 4

8.11 Good communication between all members of the regional team, health boards and PSU is essential. This is shown in diagrammatic form in Diagram 2.

8.12 All appropriate trainees of the Lead Employer and all trainees placed in the region will be discussed. Placement Boards for trainees employed outwith the region will attend on behalf of the Employing Board and feed back to the Lead Employer as appropriate. Concerns will be escalated as defined in the Standard Operating Procedures of the Local PRG outlined in Annex 4.

8.13 The Associate Postgraduate Dean for Performance in the region will ensure that the LDD for specialty is made aware of significant trainee concerns in the specialty for which they are responsible.

9. What the PSU is Not

9.1 The role of the PSU is to support trainees who find themselves in difficulty for whatever reason and educators who are looking after them. It does **NOT**

- arrange placements for trainees – this is a TPD/ Board responsibility
- advise on, recommend or interpret reasonable adjustments – this is the role of Occupational health
- make medical diagnosis
- provide counselling – it will signpost to appropriate resources
- authorise extensions to training – this is done by the ARCP process
- mandate how to achieve competencies – this is done in collaboration with the educational supervisor and the TPD or APGD. Training plans will be developed locally.

10. Administrative Support

10.1 The PSU administrator will be responsible for all activities related to the PSU itself. However, due to geography and distribution of Associate Postgraduate Deans for Performance and Trainee Support Coach some of the administrative work will be distributed.

10.2 In the event of the PSU administrator being absent a Deputy will attend the Local PRG meetings

10.3 The local Training Manager will be the support and point of contact for the Associate Postgraduate Dean for Performance in their region and the local Trainee Support Coach

10.4 The local Training Manager may delegate administrative support for certain tasks

11. Evaluation of the Impact of PSU

11.1 Training outcomes for trainees who require all level 3 support will be recorded

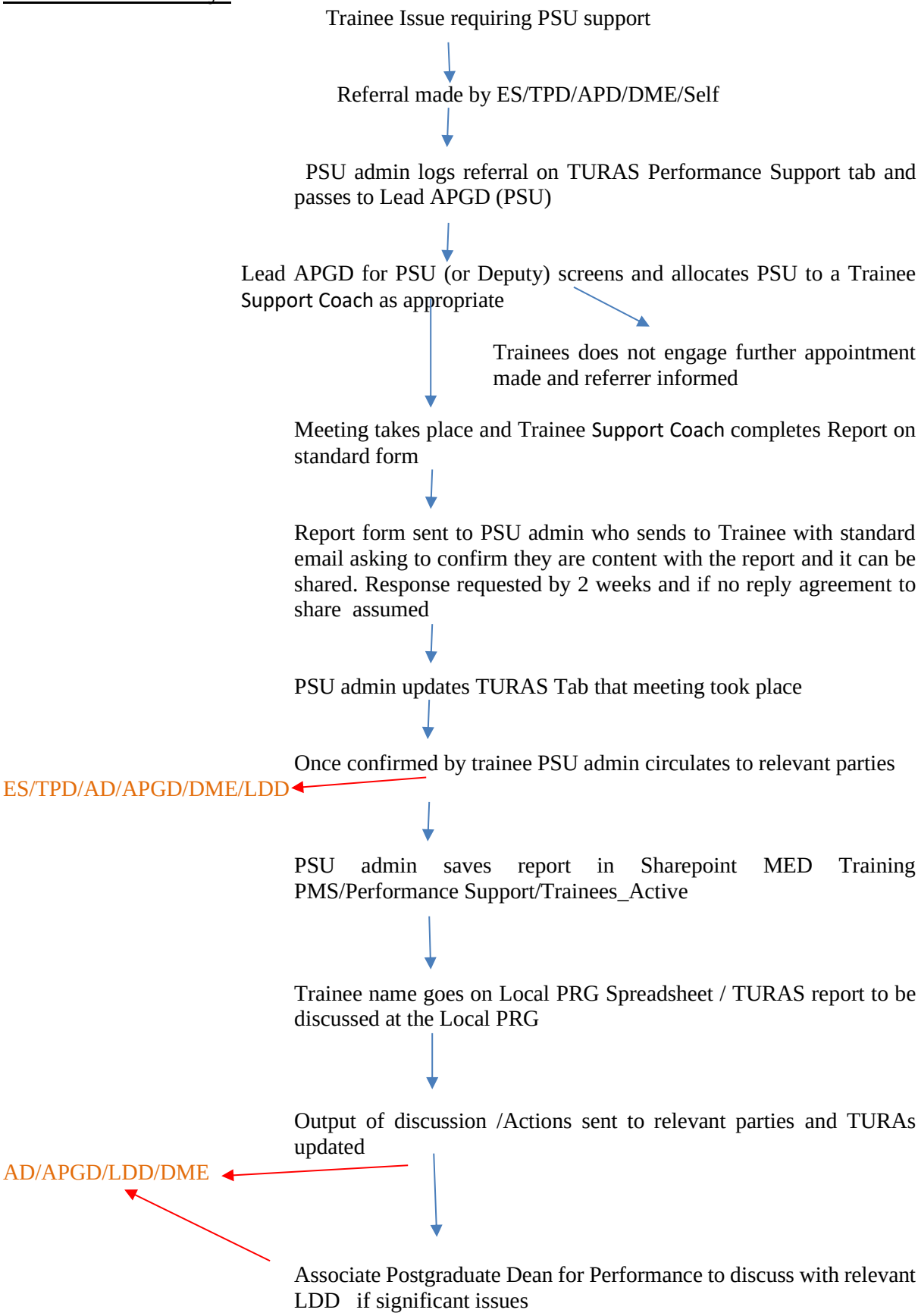
11.2 The PSU will routinely gather information on the satisfaction of doctors and referrers using the PSU

11.3 The PSU operational group will be tasked with significant event reviews both for cases that have gone well and those that have not

11.4 An annual report on PSU activity will be produced

11.5 The PSU will monitor use of external resources and ensure equity of access across Scotland

PSU Referral Pathway **ANNEX 1**



ROLES IN PERFORMANCE SUPPORT UNIT (PSU)

Annex 2

Lead Associate Postgraduate Dean for Performance Support

- Responsible to MDET via Lead Dean/Director
- Responsible for leading and delivering PSU strategy
- Reviews PSU referrals and determines appropriate disposal
- Chairs PSU Operational Group
- Supervises, appraises and ensures ongoing professional development of Trainee Support Coach
- Acts as a Trainee Support Coach
- Attends National and UK Performance Support meetings

Local Associate Postgraduate Dean for Performance Support

- Attends the PSU Operational Group and shapes strategy
- Chairs the Local PRG
- Acts as local resource for Educational Supervisors /TPDs and APGDs and ADs
- Acts as a Trainee Support Coach

Trainee Support Coach

- These will be Consultants and GPs who have experience in managing trainees requiring Level 1 and Level 2 support
- Supports individual cases referred as Level Three
- Responsible to Lead Associate Postgraduate Dean (PSU)
- Participate in case conferences
- Attends PSU Operational Group Meetings
- Liaise with other support services
- Write reports on meetings to be shared with trainees and educators and sends these to PSU administrator

PSU Administrator

- Offer first point of contact for anyone seeking information on PSU
- Responsible for the day to day running of PSU and management of incoming cases
- Maintains website
- Provides advice and support to those making referrals, doctors being referred and Trainee Support Coaches
- Facilitates the triage of cases with the Lead Associate Postgraduate Dean (PSU) or deputy.
- Updates TURAS
- Makes appointments for trainees to meet with Trainee Support Coach
- Follows up of non attenders to PSU and informs TPD and local APGD(PSU) if trainee has not engaged
- Uploads all meeting reports to Sharepoint and distributes these as indicated on the form
- Arranges or delegates operational group meetings, Local PRG meetings and case conferences
- Gathers data for and prepares the Annual report
- Attends the Local PRGs
- Collates names of trainees to be discussed at the Local PRG

- Uploads output from Local PRG meetings into Sharepoint and distributes information to relevant LDD, AD/APGD, DME to ensures dissemination of action point

Annex 3
Performance Support Unit Operational Group
Terms of Reference

Aims

This Group will be responsible for overseeing the function of the PSU and the oversight of educational support to trainees whose performance is identified as giving concern for whatever reason.

Remit

- To agree a standardised process of recording and monitoring the progress of trainee doctors requiring support
- To develop SLAs with providers for additional resources as required
- To monitor the quality, the use and effectiveness of national resources
- To monitor the budget for performance support
- To provide an annual report for Medical Directorate Executive team (MDET)
- To maintain a consistent referral process
- To maintain a consistent management process within PSU
- To facilitate access, when appropriate, to national resources for remediation
- To identify where additional resources are required
- To provide informal guidance for regional staff on process when required
- To liaise with the Faculty Development Alliance in the process of training Clinical supervisors, educational supervisors, training programme directors, associate deans and assistant directors who deal with performance issues
- To provide input into the learning resources and courses available to those dealing with performance issues
- To ensure output of discussions from the local performance review meetings are appropriately captured and distributed
- To quality manage a consistent referral processes for trainees and equity of access to support services
- To quality manage the consistency of management of trainees requiring extra support
- To provide national policy and guidance documents which are fit for purpose, easily accessible and remain updated
- Oversee the process of appointment of Trainee Support Coach
- To ensure NES website is up to date with relevant information regarding PSU
- To ensure appropriate linkages between the operational group and the regional teams and LDDs
- To establish formal links with the General Medical Council (GMC) and any other relevant bodies

Membership of the Group

- Chair –Lead Associate Postgraduate Dean (PSU)
- Associate Postgraduate Deans for Performance Support
- Associate Postgraduate Dean for Foundation
- Senior Manager, Faculty Development Alliance
- Trainee Support Coach x 4/5 – These may be associate deans, assistant directors or TPDs with particular expertise from across Scotland
- PSU Administrator

- Deputy Training Manager
- Service representative eg DME
- GMC liaison officer
- NES HR
- Lay Representative
- Trainee representative
- Other members may be co opted as required

Frequency of Meetings

The operational group will meet 4 times per year.

Reporting
The operational group will report to the Lead Dean Director.

Local Performance Review Group Standard Operating Procedure **Annex 4**

Time	Action	Responsible
3 week before meeting	• Contact Training Managers, APGDs Specialty and Foundation, and AD GP with list of known level 2-3 trainees in their programs. • Ask for any level 2-3 trainee not known to the PSU, especially where recent information suggests need for extension to training.	PSU Admin or Board
	• Contact Employing and Placement Board HR with list of known level 2-3 trainees in their employ. • Ask for any level 2-3 trainee especially to check anyone with sick leave >2 weeks or where new clinical concern causing change in duties.	PSU Admin or Board
1 week before meeting	• Update Local PRG Report against returns. • Check report against GMC list. • Send urgent reminder to any group not returning Dataset=name, GMC, post, TPD, case manager, previous note from Local PRG.	PSU Admin or Board
At Meeting	• PSU admin to compile note on each trainee discussed	PSU Admin
Post meeting	• Add note to Local PRG Report • Local PRG Report to Chair for review • Update TURAS tab where appropriate • Send notes to HR/DME/ AD for PSU, ensure LDD and AD/APD for relevant specialties have update on their trainees • Action agreed points from notes	PSU admin or deputy Local PRG Chair PSU admin or deputy PSU Admin or deputy PSU Leads regionally PSU admin or deputy

DIAGRAM 1
MDET

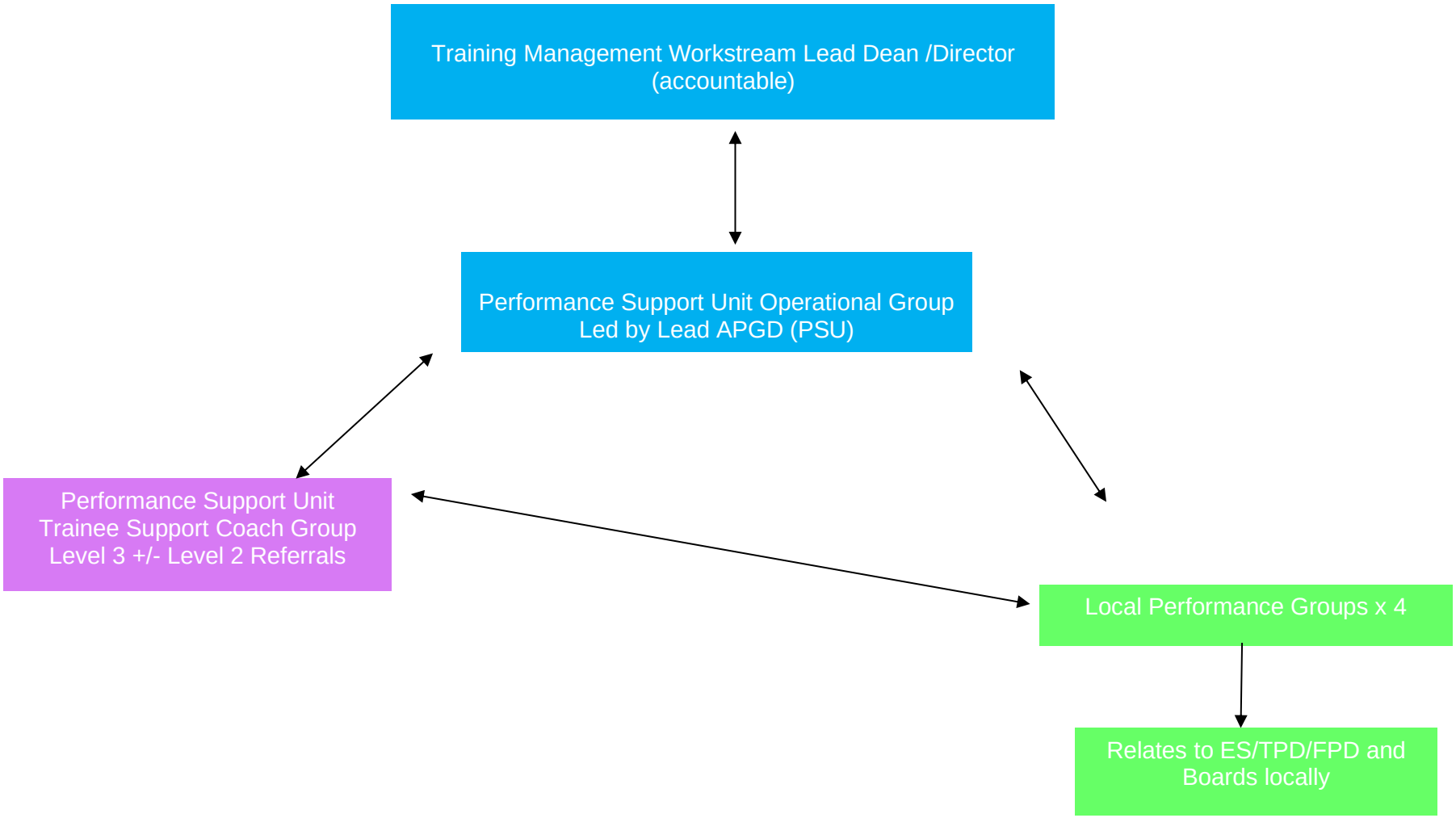
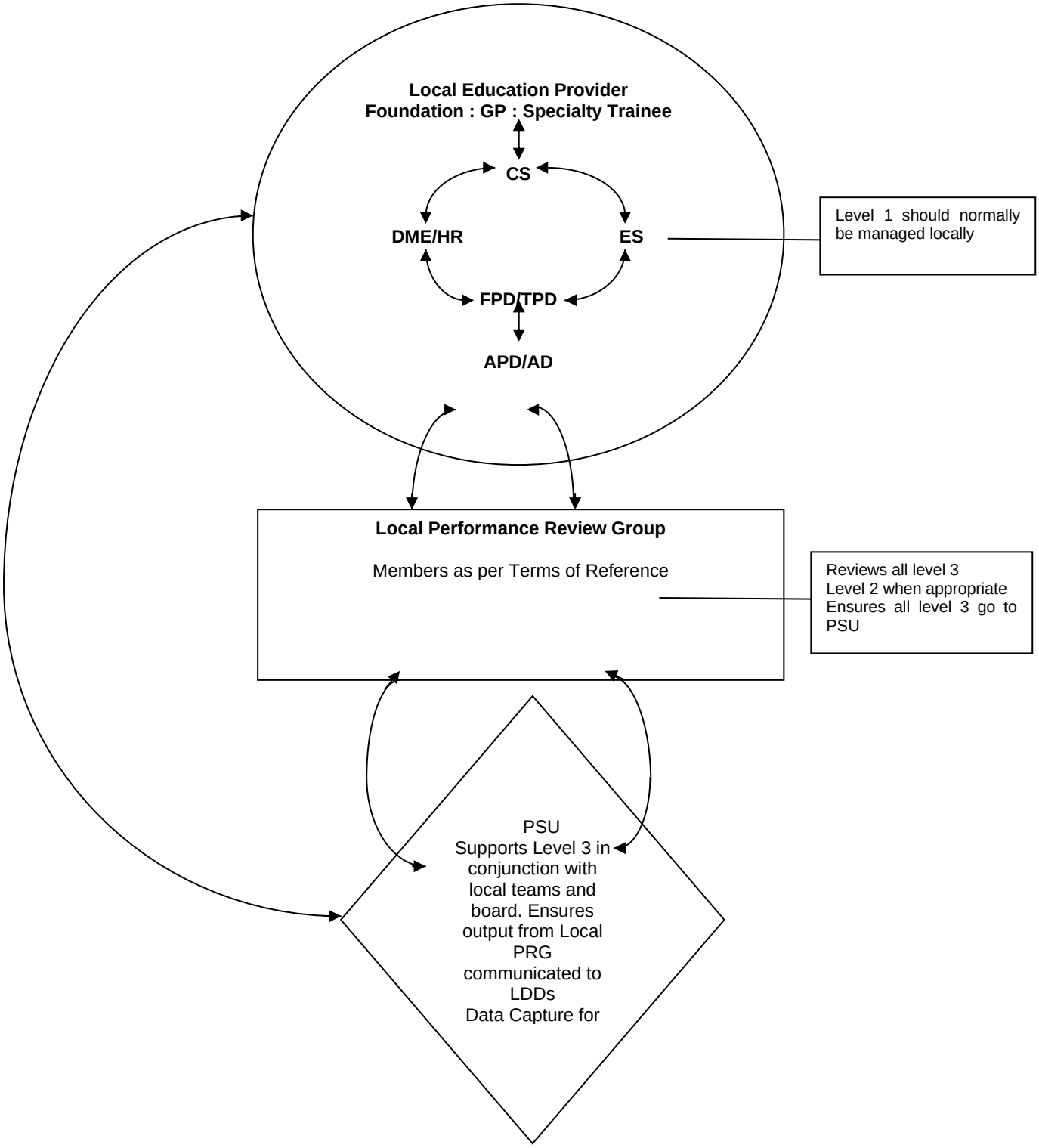


Diagram 2

ROLE AND COMMUNICATION CHANNELS
FOR DEANERY and LOCAL PERFORMANCE SUPPORT