# Factsheet for Educational Supervisors

## Introduction

Work scheduling and exception reporting are two new features of the Terms and Conditions of Service for NHS doctors and dentists in training (England) 2016 (TCS) that aim to improve the service and training experience for doctors.

For the purposes of this document, 'doctor' refers to 'doctor or dentist in training.'

Benefits to doctors in training:

- Work schedules inform doctors of the range and pattern of duties expected during a placement, as well as intended learning outcomes. This is later personalised to the individual doctor's needs.
- Exception reports are a formalised way for doctors to raise issues when they feel that their work schedule, either in terms of service or training, does not reflect the reality of their post.

The New Deal contract has no formal system for raising issues, so exception reporting aims to correct this by addressing issues as they arise.

## Responsibilities set out in the Terms and Conditions of Service

As part of the TCS, the educational supervisor will respond to any exception reports, conduct work schedule reviews and will also have joint responsibility with the doctor for personalising their work schedule. While accountability remains with the educational supervisor, completing certain tasks can, and often needs to be, formally reassigned. Where this is appropriate, a local policy should be agreed to reflect this.

For example, during higher specialty training, the educational supervisor would usually be the person to agree the personalised work schedule and to manage concerns raised by a doctor through an exception report (as set out in the TCS). However, during foundation training it would be more practical for this to be done by the clinical supervisor on behalf of the educational supervisor. This information must then be clearly set out in the schedule.

*Note: the TCS definition of educational supervisor includes approved clinical supervisors in GP practice placements.*

## Work schedules

Work schedules allow employers to plan and deliver clinical services while delivering appropriate training. The doctor will receive information prior to starting in post in a generic work schedule that will:

- form the basis of a personalised work schedule once they are in post
- be generic to the placement (not the individual, this comes in the personalised work schedule)
- be sent to the doctor, together with the offer of employment, as per the code of practice
- contain both service commitments and the parts of the relevant training curriculum that can be achieved

HR/medical staffing and medical education staff will be responsible for sending the work schedule to the doctor. Generic work schedules should be regularly reviewed at the end of each placement to ensure that they remain fit for purpose.
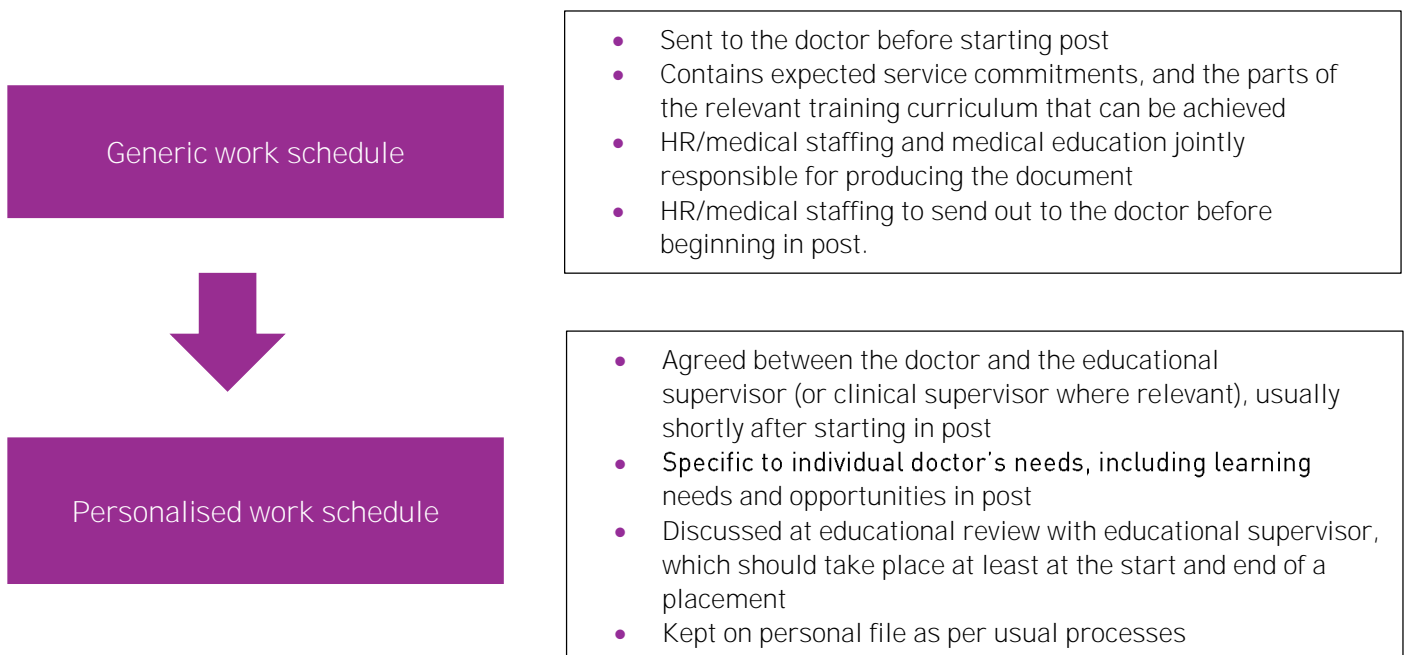
This generic work schedule will be personalised by the educational supervisor (or clinical supervisor where they have been given this responsibility) and will be:

- agreed between the doctor and the educational supervisor (or clinical supervisor where relevant), during the first educational meeting after starting in post
- specific to the individual doctor, including learning needs and opportunities available in the post (cross-referencing the e-portfolio)
- discussed at regular educational review meetings with educational supervisor, building on their needs and objectives
- kept on personal file as per usual processes

The personalised work schedule will be discussed at the already existing, regular educational review meetings, building on the current discussions in relation to learning needs and objectives. It will also include the **needs identified at the doctor's previous annual review of** competence progression and any special career interests. This will complement the learning agreement process when someone comes into post, and work in parallel with the personal learning agreement that is tailored to each doctor and training year.

## Process outline

Here is an outline of the process by which the generic work schedule will be personalised by the educational supervisor (or clinical supervisor where they have been given this responsibility).

**Generic work schedule**

- Sent to the doctor before starting post
- Contains expected service commitments, and the parts of the relevant training curriculum that can be achieved
- HR/medical staffing and medical education jointly responsible for producing the document
- HR/medical staffing to send out to the doctor before beginning in post.

**Personalised work schedule**

- Agreed between the doctor and the educational supervisor (or clinical supervisor where relevant), usually shortly after starting in post
- **Specific to individual doctor's needs, including learning** needs and opportunities in post
- Discussed at educational review with educational supervisor, which should take place at least at the start and end of a placement
- Kept on personal file as per usual processes

## Exception reporting

Exception reports are submitted by doctors when their day-to-day work varies significantly and/or regularly from their agreed work schedule. Exception reports could relate to, for example, variation in the hours of work (over or under those expected) or rest, the pattern of work, missed educational or learning opportunities, or a lack of support available to the doctor while at work.

Exception reports should be sent to the educational/clinical supervisor, copied to either the director of medical education (for training issues), the guardian of safe working hours (for safety issues), or both, so they can fulfil their respective oversight roles. The supervisor is responsible for making a

decision on the outcome for the exception report and informing the doctor as well as the director of medical education and/or guardian of safe working hours in writing (electronically).

Although the educational supervisor retains overall accountability for the exception reporting tasks set out in the TCS, it may be more practical **for the doctor's clinical supervisor to review the report** and address the concern.

This will be the case for foundation doctors and some core trainees, or for doctors whose educational supervisor is not based at the location where they are working. In these instances, formal **responsibility for the exception reporting process would be passed to the doctor's clinical supervisor.** The educational supervisor may wish to seek assurance from the clinical supervisor, for example, by receiving copies of the exception report outcome. If this arrangement is implemented for a particular placement it must be clearly communicated to the doctor undertaking the post.

## For further information view these resources:

- A template work schedule and sample generic work schedules
- Flowcharts showing the exception reporting process for hours / safety related issues and training related issues.
- Guidance for managing exception reports
- Employer implementation guidance
- The 2016 terms and conditions of service
- Rota rules factsheet