

NHS Lothian Clinical Educator Role Descriptor & Expectations



| Role Descriptor & Expectations | Tariff |
|--|---|
| PG Clinical Educator [all clinicians] | |
| Provides graded clinical supervision in the workplace | N |
| Role model for professional behaviours and clinical expertise | No specific time |
| Identifies learning opportunities day-to-day | Part of clinical activity [DCC] |
| Provides feedback on performance and undertakes workplace assessment if requested | |
| PG Clinical Educator & Named Clinical Supervisor (nCS) [nominated and appointed] | |
| • Responsible for overseeing and supporting a specified trainee's clinical work throughout a <u>placement</u> in a clinical or medical | • 0.25 PAs within SPA per number |
| environment | of trainees supervised up to a |
| A clinical unit will have a cohort of NCS who will be allocated to Foundation, Core and Specialty Trainees on a placement basis | maximum of 4 trainees and |
| • The NCS will provide constructive and developmental feedback during the placement on a regular basis in trainee focused time | therefore 1PA [1hr/trainee/wk] |
| • Will lead on providing a review of the trainee's clinical or medical practice throughout the placement that will contribute to | All clinical units will be able to |
| the educational supervisor's report | demonstrate 0.25PA * total |
| Appraised in role annually and demonstrates competence in line with the GMC Recognition of trainers framework | trainee cohort in summated job |
| • Is appointed by local Clinical Director and approved by the Assoc Director of Medical Education (site) | plans |
| For Foundation Trainees in Scotland the nCS and nES roles are combined, the FPD undertakes the ARCP reviews | |
| PG Clinical Educator & Named Educational Supervisor (nES) [nominated and appointed] | |
| Every PG trainee in a specialty programme must have a named ES | |
| • The ES is responsible for the overall supervision and management of a trainee's trajectory of learning and educational progress | 8 hrs/trainee/year |
| during a placement or series of placements i.e. a <u>programme</u> | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| Helps the trainee to plan their training and achieve agreed learning outcomes over a period of time | [Equivalent to 2 hours of |
| • Responsible for the educational agreement and for bringing together all relevant evidence to form a summative judgement at | Educational supervision (inc |
| the end of the placement or series of placements. | preparation) every 4 months and |
| Writes the ESSR [Educational supervisors structured report] for the trainee's annual review | 2 hours for ESSR completion pre- |
| Appraised in role annually and demonstrates competence in line with the GMC Recognition of trainers framework | ARCP] |
| • Is nominated by the TPD, appointed by the local Clinical Director and approved by the Assoc Director of Medical Education | |
| (site) | |
| For Foundation Trainees in Scotland the nES roles are combined, the FPD undertakes the ARCP reviews | |
| General Principles: | |

General Principles

- Every trainee [FY, CT, ST] in NHS Lothian will have 1 (one) hour of developmental (trainee focused) supervision per week [on average]
- Arrangements for [named] Clinical and Educational supervision will vary in structure dependent on the clinical specialty, number of trainees in programme and the physical setting of the activity. For example, a specialty may merge the roles of NES and NCS in this circumstance, the combined tariff for nCS and nES will apply. Agreement and clarity should be sought from the unit CD, specialty TPD or FPD and local ADME as to best fit of these models to your circumstance.
- No individual clinician educator will accrue more than 1 SPA (4hrs /week) for total educational activity unless in a named education management/delivery role trainers who combine roles should have the combined tariff time, FY supervisors have the CS time allocation only.

Clinical Educator Programme http://sefce.net/cep

GMC Trainer Pages http://www.gmc-uk.org/education/10264.asp

Feb 2018, version 6 [Dawson]; v.1 June '13, v.2 June '14, v.3 Jan '15, v.4 June '16, v. 5.1 Nov 2016 [Edgar].



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| Works within a clinical team to support the UG experience Provides graded supervision of a student or groups of students in the clinical workplace Focuses on components of Teaching, Learning, Assessment and Feedback to support student(s) development Identifies learning opportunities day-to-day aligned to or informed by a module syllabus Provides feedback on performance and undertakes workplace assessment if requested Provides student focused education as part of a clinical attachment [yr 4,5,6] med student focused activity (Category A), and/or | Supported through a SPA allocation to deliver the necessary UG experience. Based on a proportion of the aggregated unit level tariff of 1hr/student/week = Category A |
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| Identifies learning opportunities day-to-day aligned to or informed by a module syllabus Provides feedback on performance and undertakes workplace assessment if requested Provides <u>student focused</u> education as part of a clinical attachment [yr 4,5,6] med student focused activity (<u>Category A</u>), and/or • | aggregated <u>unit level tariff</u> of 1hr/student/week = Category A |
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| (| |
| | Tariff varies based on activity |
| Provides <u>student focused</u> education: teaching [SSC, lectures, bedside], mentoring [personal tutor], assessment [end of year] separate (<u>Category B</u>) from the clinical attachments or modules | Allocation of specific time for Category B activity |
| Clinical Educator & Undergraduate Education Lead for undergraduate education & training at each local education provider ospital (UELs) | Out with the Education delivery tariffs model |
| Coordination of Medical undergraduate activity in the base hospital in relation to teaching, learning, assessment and feedback in conjunction with module leads, theme heads and local module clinicians | Supported by the Medical Education Directorate |
| GMC standards for trainers | • 1PA per site in NHSL |
| Communication and coordination with relevant Module organisers, theme and year heads, Clinical directors, Chief Nurses and related professional groups to ensure the translation of UoE MBChB curricular goals are being met in the base hospital. | |
| Responding to and developing the quality of the UG experience and sharing intelligence with the Associate Director of Medical Education and clinical teams. | |
| Clinical Educator & Local Module Lead for undergraduate education & training at each local clinical unit or specialty unit (Ls) | Dependent on size and duration of module |
| Responsible for the coordination of a clinical unit's input to the Undergraduate specialty module | Not all modules will require a |
| Maps curricular needs to clinical opportunities in the service | LML at every site |
| Communication with Local UG clinical educators to ensure delivery of appropriate teaching & learning opportunities | Indicative 0.5PAs |
| Induction of students to the clinical unit and coordination of assessment & feedback on performance Liaison with Hospital UEL and Module Organiser regarding local faculty and quality issues | Contributes to combined tariff for Category A |

- Clinical teams will ensure UG students receive induction, supervision, access to relevant learning opportunities, on-going assessment and developmental feedback.
- UG Clinical Educators (Tutors) will be supported with time and training to undertake as per tariffs and Clinical Educator Prog modules.
- Each group of students (max 5) will be supported with at least 1hr of student focused education /day of clinical attachment module variation is expected

Abbreviations:

MOT: measurement of teaching project **FPD**: Foundation Programme Director **RoT**: Recognition of Trainers **MBChB**: Medical Degree Course **TPD**: Training prog Director **SSC**: Student selected component **CEP**: Clinical Educator Programme

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