

## The Clinical Supervisor

In each placement, the FD will have a clinical supervisor (CS) who will usually be a specialist in the area in which they are training for that period. The CS should meet the FD at the start of the placement to ensure they are familiar with their work environment, responsibilities, the other staff with whom they will be working, and to advise them on how to obtain the most from the placement. A further meeting should take place in the middle of the placement to provide feedback, highlight areas of good practice and address any areas of weakness. At the end of the placement, the CS should meet the FD to complete the CS end of placement report (CSR), which forms a vital part of the FD's assessment. Evidence of all meetings and the end of placement report should be recorded in the FD's e-portfolio. At least once in each training year, the end of placement report must include formally recorded comments from other healthcare professionals alongside whom they have worked. These professionals make up the placement supervision group' (PSG).

The CS should be familiar with the programme of learning, the educational approach and the assessment used in the FP in the context of the four domains laid down by the Academy of Medical Educators and adopted by the GMC in the recognition of trainers as they relate to FDs.

1. Ensuring safe and effective patient care through training
2. Establishing and maintaining an environment for learning
3. Teaching and facilitating learning
4. Enhancing learning through assessment

They should also demonstrate ongoing CPD related to the supervision of FDs.

During placements, the CS should ensure the FD is fully integrated into the work of the team and given the opportunity to demonstrate their abilities and receive feedback on their performance, some of which should be recorded in the e-portfolio as supervised learning events (SLEs). Where possible and appropriate, the FD should attend and ideally play an active part in team meetings, mortality reviews, departmental training sessions etc., particularly where they support the achievement of curriculum outcomes. The FD can record this in their personal learning log as personal development.

It is the responsibility of the CS to provide clear feedback to the FD on their performance in the placement, to highlight good practice and to guide developments. Where there are concerns about the FD's progress, these must be recorded and addressed and, where they are significant, should be brought to the attention of the FD's educational supervisor (ES).

The curriculum contains more information on giving feedback.

It is also the responsibility of the CS to listen to feedback from doctors in training for whom they are responsible and, where necessary, respond to this.

At the end of the placement, it is the responsibility of the CS to complete a clinical supervisor report (CSR).

## **Clinical Supervisor end of placement report (CSR)**

The CSR is probably the most important assessment used in the FP. Its purpose is to provide information on the performance of the FD in the workplace against the FPCs (and thus GPCs), and it sits at the highest point on Miller's Pyramid. It is informed by multiple pieces of evidence and multi-rater assessments. Over the course of the FP, the CSRs in the e-portfolio thus provide robust evidence of capability in a broad range of clinical settings.

**The CSR is a judgement by the CS of whether the FD will achieve the Higher Level Outcomes (HLOs) for that training year.**

- The judgement will be based on a review of several sources of evidence, including:
- direct observation of practice in the workplace by the clinical supervisor (CS);
- feedback from the placement supervision group (PSG) (this is mandatory at least once for each level of training), which should be used formatively during the training year, however it is expected that by the ARCP the trainee should have a satisfactory PSG that has been used summatively to inform the CSR;
- evidence of achievement of curriculum outcomes recorded in the e-portfolio, including pro-rata completion of SLEs to demonstrate learning;
- evidence of engagement with the learning process recorded in the e-portfolio;
- the FD's attendance record;
- any incidents or investigations in which the FD has been involved.

The CSR will use the following ratings: no concern, some concern, major concern.

These ratings are defined as:

- No concern: the FD is on track to satisfy the requirements of the programme at the next critical progression point.
- Some concern: there are some indicators that suggest the FD may not have achieved all the curriculum outcomes by the next critical progression point. This is likely to include FDs who have few entries in their portfolio or have demonstrated behaviours in the workplace that have required more formal discussion.
- Major concerns: there are multiple indicators that suggest the FD will not have achieved all the curriculum outcomes by the next critical progression point or evidence that the FD's practice presents a significant risk to patients or colleagues or, in some cases, where the FD has been found guilty of misconduct.

Explanatory comments must be entered to justify the rating.

The clinical supervisor's report should comment specifically on:

- evidence of the FD's personal and professional development as a result of feedback and reflection,
- any demonstration of excellence in the FD's practice,
- any concerns regarding this FD's practice (these must be supported by specific examples),
- targets for future development including a plan to address any concerns.

If there is any concern that the FD's performance will not meet the expected minimum requirements for sign-off for any of the FPCs, this must be discussed, support offered, and a remedial action plan with specific outcomes recorded in the e-portfolio. The CS should also inform the ES.