

SpR 3/4/5 Workplace Assessments Update

These guidance notes have been written in response to queries from tutors and other trainers, following implementation of the new assessment paperwork by the NW School. They do not replace guidance already issued on the CD. They are the result of further discussions between Drs Brocklehurst, Chadwick, Emmott and McCluskey on behalf of the STC.

The main area of uncertainty is year three, in particular whether **any** sub-specialties can be completely signed off at this stage. There is understandable reluctance from some to sign off anything at this early stage, but this approach could lead to an end-of-year-five SpR arriving at the General Duties Module stage with 5 or 6 sub-specialties to complete, which would in practice be unrealistic, and could potentially render the assessments meaningless.

The more 'specialist' sub-specialties tend to occur on a modular basis during year four or the first part of year five, and do not present a problem. It is the more general sub-specialties (orthopaedics or day case for example) where questions arise. Most SpRs spend the bulk of year three training in these areas.

The CCST in Anaesthesia states: -

"...trainers will become confident, through their personal knowledge of the trainees, that the individual trainee has acquired sufficient competence in an area of practice to be signed off." (Sufficient in this context should be that expected of a senior SpR.)

Also: -

"It is recognised that whilst achieving competence for independent professional practice, it does not mean the doctor will be expert."

It is down to the trainee to provide evidence to enable a trainer to sign off. This will come primarily from working together in the clinical setting, but may also include discussion and logbook review. Most components of the various sub-specialty units of training are clinical and practical skills, and it is quite reasonable for these to be signed off when sufficient competence has been acquired (see above). This **can** be in year three, notwithstanding the fact that the SpR may further improve with more training. If at the end of a hospital placement a unit of training is incomplete, an interim assessment outlining areas still to be covered should be done. Current versions of the CD do not include this paperwork, so it will be placed on the school website for downloading.

It is accepted that SpRs should continue to develop as doctors throughout higher training, and this is reflected in the Professional Behaviour and Attitude Assessment.