

# SOUTH WEST POPULATION AND PUBLIC HEALTH ACADEMY

# **Toolkit for Supervisors**



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## Introduction

This toolkit is to provide additional information for Educational, Academic, Health Protection and Activity Supervisors in the South West.

This document should be read alongside the Public Health Specialty Training Curriculum.

We have structured this document based in sections. Section one covers Public Health Training and Supervisor accreditation, section two explores getting started in a placement and establishing the working relationship. Section three provides information on training aspects and section four looks at assessments and preparing for a Consultant post.

We hope it is helpful to new and experienced Supervisors. It should support and guide Supervisors across the South West to achieve excellence in training and education from both the Supervisor and Registrar perspective. We also intend that this toolkit should help facilitate a consistent experience for both Registrars and Supervisors and reduce unhelpful variation in standards across the South West.

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## Section 1: Public Health Training

## 1.1 Public Health Training

Public Health Specialty training normally lasts five years. The delivery of training is overseen by the Head of School. The training covers ten key areas of public health practice in the three domains of public health and aspects of professionalism. The curriculum builds on learning from both the undergraduate public health curriculum and generic competencies from the Foundation Programme curriculum, or from other experience in the case of Registrars from backgrounds other than medicine.

|       | PHASE 1            |         | PHASE 2  |      |  |
|-------|--------------------|---------|----------|------|--|
| ST1   | ST2                | ST3     | ST4      | ST5  |  |
| KNOWS | KNOWS<br>HOW/SHOWS | SHOWS H | OW/ DOES | DOES |  |
|       | ARCP               | ARCP    | ARCP     | ARCP |  |
|       | DFPH MFPH          |         |          |      |  |

The two phases of learning are not primarily defined by time but by successful acquisition of the learning outcomes defined for each phase.

<u>Phase 1</u> combines early induction to training and introduction to basic core public health skills with acquisition of knowledge. Registrars usually complete a Master's in Public Health during their first year of training. Academic courses combine face to face teaching with self-directed learning and this is complemented by workplace-based experiential learning, putting early knowledge into practical settings. This phase is assessed through examination (DFPH exam), a two-part examination testing knowledge and skills through short answer questions and knows how through critical appraisal and a practical written exercise of a real public health problem.

The DFPH exam is usually held twice yearly, in March and October. Registrars would be expected to sit this examination at the earliest opportunity (October).

After sitting the DFPH exam, StRs will then complete the mandatory 4-month Health Protection placement, organised by the Programme team. It has been agreed by the Head of School that Registrars can start the Health Protection placement before a DFPH pass is obtained. Following completion of the Health Protection placement, the StR will be expected to sit the MFPH exam; typically, 9-12 months after the DFPH.

<u>Phase 2</u> allows the Registrar to consolidate core skills in the practice of public health and to develop specific interests which will enhance career opportunity. This phase is covered mainly by experiential learning with new advanced theoretical knowledge covered by formal courses and conferences. Registrars are encouraged to use their study leave allowances to support their educational and career objectives. StRs can only move into phase 2 of training upon completion of the MSc, DFPH, Health Protection placement and MFPH.

Acting up as a Consultant Acting up provides Registrars coming towards the end of their phase two of training with the experience of navigating the transition to

consultant while maintaining an element of supervision. Please refer to the <u>acting</u> up policy.

## **1.2 The Training Programme**

## The South West Population and Public Health Delivery Group

The delivery group (previously named the Academy Board) is responsible for overseeing the establishment, implementation and monitoring of a comprehensive high quality approach to multidisciplinary public health training and development in the South West. Specifically, it is responsible for the running and oversight of a regional training programme for public health specialists and Public Health Workforce Development Programmes in the South West region. The board meets 3 times a year.

Membership of the board includes:

- Head of School (Chair)
- Population and Public Health Academy Team
- Academic leads
- Zone leads
- Regional NHSE and OHID Training Lead
- Lead Health Protection representative
- Lead Field Services representative
- CPD Advisor
- Dental Public Health Lead
- Public Health Registrar representatives
- Faculty Advisor
- DPH Workforce Lead

## **Head of School/Training Programme Director**

The Head of School/Training Programme Director is appointed by NHS England to organise, develop and oversee the running of the public health training programme in the South West. They will work in close collaboration with the Delivery Group and will oversee the work programme of the Training Programme team.

#### **Programme Team**

The Training Programme team is based within NHS England South West. The team consists of a Population and Public Health Specialist Workforce Programme Lead, Population and Public Health Workforce Development Programme Lead, Population and Public Health Training Manager and a Population and Public Health Training Co-ordinator.

The team can be contacted by emailing; england.publichealth.sw@nhs.net

#### **Specialty Tutors**

Each training location has a nominated Specialty Tutor who is identified as an enthusiast to support quality of training in each location to ensure the systematic implementation of the NHSE Quality Framework. Specialty Tutors are Educational or Academic Supervisors who have achieved all five core competencies required to

be an accredited Educational Supervisor by background. University leads provide the Specialty Tutor role at each of the three University locations in the South West.

The role of Specialty Tutors is to help:

- Maintain an environment within the departmental multi-professional team that supports training and delivers the curriculum and relevant assessments at Foundation, and Specialty levels
- Support Registrars and Supervisors
- Ensure systems are in place for induction, developing the quality of training, delivery of formal education and study leave management
- Act as point of contact for the Training Programme for promotion of training events and other communications where local support is particularly needed.
- Specialty Tutors support rather than line manage their Supervisor colleagues.

A Specialty Tutor pack is available for those new to the role, please contact the Programme team for an electronic copy of this. <a href="mailto:england.publichealth.sw@nhs.net">england.publichealth.sw@nhs.net</a> Click <a href="mailto:here">here</a> to see a full list of Specialty Tutors in the South West.

All Registrars have an Educational Supervisor, an Academic Supervisor and will be supported for individual projects by an Activity Supervisor.

#### **Educational Supervisors**

Educational Supervisors are based within service locations. Specialty Registrars are allocated a Supervisor based upon availability at their first training location.

Supervisors are expected to normally work at least 0.5 wte within a training location. Registrars must have access to another Supervisor if a Supervisor job share arrangement is in place.

When a StR moves training location, a new Educational Supervisor will be allocated. The nominated Educational Supervisor is responsible for overseeing the Specialty Registrar's training programme. Regular meetings between the Supervisor and StR should be maintained throughout the StR's training placement.

Educational Supervisors have a longitudinal overview of the training of each StR appointed. They are responsible for supervising the service experience, for ensuring that adequate resources are available to the StR for that purpose, and for monitoring the adequacy and standard of the programme.

Educational Supervisors are responsible for providing a structured report of evidence of progress in training prior to the annual review process (ARCP). This report will be read by the ARCP panel and must have been discussed with the StR.

#### **Educational Supervisors will:**

- Assess the learning needs of StRs attached to them on an individual basis and draw up a realistic and achievable learning plan and agreement with them.
- > Be readily accessible to the StRs for whom they have been appointed Supervisor.
- ➤ Use a written framework for training with regular review and constructive feedback. Be able and willing to identify and ensure delegation of appropriate tasks and responsibilities to the StR.
- Ensure that all ARCP competences are met and signed off
- Provide support for StRs taking the DFPH examination and preparing for the MFPH.

- Facilitate learning opportunities not available locally to ensure exposure to the full range of required competencies.
- ➤ Encourage, support and offer the StR constructive feedback.

## **Academic Supervisors**

Academic Supervisors are linked to the three academic institutions, University of Bristol, University of Exeter and the University of the West of England

All Registrars will be allocated an Academic Supervisor who will meet with them a minimum of three times a year. As well as providing advice and guidance on research and academic practice the Supervisor will highlight additional development opportunities within the University including appropriate lectures, workshops and seminars. Academic Supervisors will need to write a report for a Registrar's ARCP.

#### All Registrars will:

- ➢ Be assigned an Academic Supervisor and take responsibility for setting up the first meeting
- > Set up and attend at least one three-way meeting between the Registrar, Educational Supervisor and Academic Supervisor each year
- > Receive advice and guidance to attain relevant research and academic skills
- Have appropriate access to University facilities and resources
- Be given support in relation to examinations
- Be given support during MSc (dissertation and publications)
- ➤ Have access to a range of courses provided by the University and funded by the training programme

In the South West, a guide to three way meetings has been produced, you can find this guide <a href="here">here</a>

#### **Activity Supervisors**

StRs may undertake a variety of work under an Activity Supervisor other than their Educational Supervisor. This will be agreed in discussion with their Educational Supervisor as part of their work programme. Task contracts may be helpful in setting aims, objectives, scope and duration of pieces of work.

#### Activity Supervisors should:

- Have a broad understanding of public health, though not necessarily a public health qualification
- Understand the relevance of the project in meeting the StRs' required learning outcomes
- Be committed to providing high quality training and be able to demonstrate it by attending Supervisor training or other equivalent courses
- ➤ Be willing and able to set aside protected time for supervision with the StR and Educational Supervisor as appropriate.

As a Supervisor in the South West, you may be asked to help support training events from time to time. Below are some of the interesting things you can get involved with as a Supervisor;

✓ Contributing to the planning of the Annual Training Conference

- ✓ Contributing to the planning of the South West Public Health Development School
- ✓ Contributing to the planning of the South West Public Health Scientific Conference
- ✓ Volunteering as an actor or examiner at Mock MFPH exams
- ✓ Observing ARCPs or even sitting as a panel member
- ✓ Presenting at Registrar Tutorials
- Presenting at Public Health as a Career Events and Open Evenings

#### **Registrar Committee**

The South West has an active StR Committee that works to improve the quality of the training experience. It provides a chance for Registrars to network with each other, supervisors and other public health partners. The induction programme, regular tutorials and the annual events are just some examples of the work of the StR Committee will support. This work is only possible through the hard work and commitment of many StRs and it is important Supervisors encourage and support participation in StR activities. Taking on responsibilities for specific roles should be done through discussion between the StR and Educational Supervisor, considering other commitments such as exams and required learning outcomes. However, it is important that all StRs are given time and support for these activities since they are integral to improving the training experience. It is also helpful to include such pieces of work within the Educational Supervisor's report, so that StRs can document their network activities within their ARCP.

The initial training period is often pressurised because of the work required from the MSc and the exams. Nevertheless, identifying the best opportunities for StRs to participate in the StR community is an important aspect of preparing them for working as a consultant.

## 1.3 Variation of Supervision and Training

In 2018, a paper (Appendix K) was written to present the work that Registrars and Supervisors in the South West have been working on to address issues of variation in Supervision and training. The issue of variation in Public Health Supervision and Training has been discussed by both Specialty Tutors and Registrars with both groups very keen to address the issue. The Training Programme led a task and finish group to address the issues and outlined in the document are some of the areas that have been discussed and suggested actions aimed at reducing variation in Public Health Supervision and Training. This work will be revisited in 2025.

## 1.4 Supervisor Accreditation and CPD

#### Requirements to be a Supervisor in the South West

This section contains information for Consultants and Public Health Professionals in the South West for:

- New Educational Supervisors
- Educational Supervisors with previous experience in a different region
- New Activity Supervisors

## **Accreditation for New Educational Supervisors**

In order to supervise a Specialty Registrar based in a South West training location you must be fully accredited to standards set by NHS England South West. To become accredited, you must attend core competency training in 5 training activities:

- 1. Training and Registrar supervision
- 2. Successful learning environments for Supervisors
- 3. Workplace-based assessments, appraisal and feedback
- 4. How to support Registrars
- 5. ARCP

This revised training has been developed by NHS England South West and was implemented in April 2020.

Supervisors must also meet the requirements as set out by Faculty of Public Health and be in a substantive Consultant Post unless agreed by the Training Programme.

#### **Maintaining Accreditation**

Having achieved full accreditation, you must maintain your skills with an annual update. The annual update can be completed by attending the Public Health Training Conference, if a Supervisor cannot attend, video clips will be available online. Details of this will be communicated to you by the Programme Team.

# Accreditation for Supervisors who have Moved to the South West and Trained as a Supervisor Elsewhere

For experienced Supervisors who have attended Supervisor training in another region it is still necessary to attend training in the South West.

## **Accreditation for New Activity Supervisors**

In order to project/activity supervise a Specialty Registrar based in a South West training location you must meet standards set by NHS England South West by attending a training relevant workshop covering:

- 1. Training and Registrar supervision
- 2. Successful learning environments for Supervisors
- 3. Workplace-based assessments, appraisal and feedback
- 4. How to support Registrars
- 5. ARCP

These training requirements 1-5 can be achieved by attending Public Health specific training communicated by the Programme team. You are not required to repeat this training.

(Please note Project/Activity Supervisor is a term used in Public Health only. The FPH refers to Project Supervisors as Activity Supervisors and there is reference to both throughout the Public Health website. In NHS England South West, the role of Project/Activity Supervisor equates to Clinical Supervisor in other medical specialties.)

You should also complete equality and diversity training in your own organisation - evidence of this may be required by the Training Programme.

If you are interested in extending your training related skills, you are welcome to attend any <u>other South West courses</u>

For any queries relating to accreditation or Supervisor training please contact: <a href="mailto:england.publichealth.sw@nhs.net">england.publichealth.sw@nhs.net</a>

More information can also be found in the South West Public Health Training Policy.

## **Supervisor Accreditation and Competences**

| Requirement                          | How can this be achieved?  | How often do<br>I need to<br>repeat this<br>training? | Educational<br>Supervisor | Academic<br>Supervisor | Health<br>Protection<br>Supervisor | Activity<br>Supervisor |
|--------------------------------------|--|---|---------------------------|------------------------|------------------------------------|------------------------|
| ES 1<br>ES 2<br>ES 3<br>ES 4<br>ES 5 | By attending Public Health specific training for all Supervisors ran by the Training Programme (one day).  | Never   | Yes                       | Yes                    | Yes                                | Yes                    |
| Equality and<br>Diversity            | This training is part of mandatory training within each training location. Supervisors may be required to provide evidence of completion.  Responsibility for ensuring training is complete sits with the Specialty Tutor. | As per<br>location<br>requirements                    | Yes                       | Yes                    | Yes                                | Yes                    |
| Annual<br>update                     | Update specifically for Public Health by attending Annual Training Conferences. Online video clips are available for those who cannot attend.  | Annually  | Yes                       | Yes                    | Yes                                | No<br>(but<br>advised) |
| CPD<br>Educational<br>Skills course  | By attending CPD courses open to Educational and Academic Supervisors.   | Not required -<br>optional                            |                           |                        |                                    |                        |

## **Section 2: Getting Started**

#### 2.1 Induction

In appendix A there is a list of links to key documents that provide important background information to the training programme and the Supervisor's role.

In appendix B you will find the Training Programme's local induction checklist. It covers;

- Housekeeping and general location information
- Organisation and department
- Personal expectations, opportunities and support

This checklist provides a number of suggested topics to discuss at your first meeting with a Registrar (see also Appendix C). Every Registrar is different and discussion topics will differ depending on phase of training, previous public health experience and type of placement. Therefore, this checklist should be used as a guide only.

## 2.2 Initial meetings

In this section we suggest issues you may wish to consider in preparing and carrying out your first meetings with the Registrar. We also explore the nature of the relationship and learning styles.

#### The Nature of Relationship

The Educational Supervisor undertakes a range of roles in relation to the StR. Supervisors are in effect required to undertake a range of different roles from direct line management and supervision, to teaching, coaching and careers guidance.

NHS England lists the competencies and duties of an Educational Supervisor as follows:

- Teaching
- Supporting preparation for exams
- Writing reports
- Assessing competence
- Facilitating reflection
- Setting objectives
- Assessing competence
- Reviewing performance
- Giving feedback
- Performing appraisal
- Giving careers advice
- Managing absence

## Managing poor performance

Appendix D provides a learning styles survey you may wish to use to help each of you to reflect on your own learning styles. This can be a useful way for Supervisor and Registrar to get to know each other and consciously think about where they have similarities and differences in their preferred styles.

## 2.3 Sample Agenda for First Meeting

- Induction checklist
- > Frequency of 1:1s
- Duration
- Working arrangements
  - i. Ground rules and expectations
  - ii. Preferred mode of contact
  - iii. Managing leave including sick leave
  - iv. Role in team
  - v. Link to senior management team
- Learning agreement (appendix E)

The Registrar and Supervisor should familiarise themselves with the ePortfolio and curriculum and consider areas of challenge and topics already experienced in. Appendix C lists some suggested questions for the initial meeting with a Registrar.

## 2.4 Peer Support for Registrars

All new ST1s are allocated a buddy StR from other year cohorts in the region. It may be particularly helpful to consider this particularly in those areas where StRs may be on their own in a training location. New StRs could 'buddy up' with a more senior StR. StRs could arrange their own peer support groups e.g. for exam preparation. Other means of gaining peer support are through participation and attendance at the tutorials organised by the StRs. In addition to attending the tutorials, StRs can ask for support and advice through the Training Programme's communication and file sharing tool.

## 2.5 Peer Support for Supervisors

As a Supervisor you may wish to think about your own needs in terms of peer support and whether you wish to link up with a more experienced Supervisor or Specialty Tutor. There may also be benefit in trainers sharing their generic experiences and taking an action learning approach to this role. The NHS England Faculty Development team can also offer support, please see the website for more information.

## **Section 3: Training**

The section includes tools and techniques that may be helpful during training.

#### 3.1 The ePortfolio

In Autumn 2024, a new ePortfolio system was implemented by the Faculty of Public Health.

The ePortfolio system is a central platform for the management of information and documentation on progression of learning against the public health curriculum during training. The ePortfolio allows StRs to relate documentation and evidence to the curriculum and incorporates the ability to record various sign offs. The ePortfolio is managed by the StRs; they must reflect on and record achievements on an ongoing basis.

Both Supervisor and Registrar need to ensure they have access to the system, are linked to each other and have agreed how they will manage keeping the record up to date. It is important to do this well ahead of an ARCP.

## The E-portfolio Manual

The FPH E-portfolio manual for Supervisors is available at <a href="https://www.fph.org.uk/media/js3eiqye/eportfolio-guidance-supervisors-final.pdf">https://www.fph.org.uk/media/js3eiqye/eportfolio-guidance-supervisors-final.pdf</a> Video tutorials are also available <a href="here.">here.</a>

#### **Access and Login**

The E-portfolio can be accessed at <a href="https://www.nhseportfolios.org/Anon/Login">https://www.nhseportfolios.org/Anon/Login</a>

#### **Account Set Up (first time Supervisors)**

Usernames and passwords for login can be obtained through the training programme who need to authorise this with the Faculty.

If you need access to the system, please contact <a href="mailto:england.publichealth.sw@nhs.net">england.publichealth.sw@nhs.net</a> in the first instance. Access will only be given if trainers are fully accredited.

For any issues with the ePortfolio, please contact <a href="mailto:educ@fph.org.uk">educ@fph.org.uk</a>. Please contact the Programme team if you have any questions about the system.

There are some useful e-portfolio support documents here:

https://www.fph.org.uk/training-careers/specialty-training/training-eportfolio/

## 3.2 What Makes a Good Project?

Specialty Registrars (StRs) in Public Health are sometimes requested to present examples of their work each year at the Training Conference or as case studies as a way of showcasing their work. The presentations provide an excellent overview of the projects and how the work supported StRs to achieve their learning outcomes. Registrar case studies can be found <a href="https://example.com/here.">here.</a> This page also showcases case studies from other programmes such as GP Scholarships and Population Health Fellowships.

## 3.3 Keeping a Record of Meetings

Supervisors need to consider how they wish to keep a record of 1:1s and agree this with the Registrar. This becomes a useful tool for keeping track of actions. It can also be used as supporting evidence as part of a consultant's appraisal.

## 3.4 Giving and Receiving Feedback

Giving feedback is an integral part of learning and training. Ideas are formed and modified through experiences and these ideas underpin the idea of the 'reflective practitioner'.

The learning cycle requires four kinds of abilities or learning contexts:

- concrete experience learners are enabled and encouraged to become involved in new experiences
- reflective observation gives learners time to reflect on their learning
- abstract conceptualisation learners must be able to form and process ideas and integrate them into logical theories
- > active experimentation learners need to be able to use theories to solve problems and test theories in new situations.

There are a number of approaches and tools that can be used when giving and receiving feedback. These include:

- Incorporate the Myers Briggs Type Indicator preferences into the feedback process. – see Appendix G
- BOOST model see Appendix H

Directly observed feedback can be undertaken by both Supervisor and Registrar. It should be used for those learning outcomes requiring assessment by direct observation. It can also be a helpful way for Registrars to give feedback to their Supervisors. All Supervisors should explore opportunities for these more formal assessments (direct observations and case-based discussions).

A template to structure these methods of feedback and assessment can be found here; https://www.fph.org.uk/media/1173/blank-doph.pdf

## **Registrar Multi-Source Feedback**

All Registrars in the South West have access to an online MSF hosted by the Public Health Training Programme. The online survey is set up by the Programme team upon request; Registrars are encouraged to compete an MSF following each placement move. An MSF must also be completed during ST4 ahead of the KA10 process.

MSF respondents must be discussed and agreed between the Supervisor and Registrar.

## 3.5 Supporting Revision and Exam Preparation

#### The Faculty of Public Health Diplomate Exam (DFPH)

The DFPH examination is intended to test candidates' knowledge and understanding of the scientific basis of public health, and their ability to apply their knowledge and skills to the practice of public health. It consists of two sections (section I and section II). Both sections I and II are split into two parts/components A and B (section IA, section IB, section IIA and section IIB) and taken over two days. More information on the exam can be found on the FPH website.

Registrars are expected to sit the exam in the October following commencing training (if typically completing MSc). Please note this may differ for some StRs.

In the South West all StRs are offered a place on a DFPH revision course organised by the University of Bristol. This usually lasts a week and takes place ahead of an exam sitting. StRs should refer to the South West Public Health <u>study leave policy</u> for information on private study.

## The Final Membership Exam (MFPH)

The MFPH exam is a 'show how' assessment of a candidate's ability to apply relevant knowledge, skills and attitudes to the practice of public health. Candidates must demonstrate that they can integrate the theoretical and practical aspects of public health practice. More information on the MFPH Exam can be found on the FPH website.

Registrars are expected to apply for the MFPH exam as soon as possible and should sit it approx. 9-12 months after passing the DFPH exam. StRs must have completed their Health Protection placement prior to the MFPH exam.

Registrars are offered a mock MFPH ahead of taking the final exam organised by the Training Programme.

## 3.6 Study Leave for Registrars

Study leave aims to:

- ✓ Enhance education, training and learning.
- ✓ Be incorporated as an integral part of the education and training process.
- ✓ Provide education and training not easily acquired in the clinical setting e.g. the acquisition of a theoretical knowledge base.
- ✓ Support the delivery of curriculum targets.
- ✓ Be considered as part of the appraisal process between the Registrar and their Educational Supervisor.

Registrars will be entitled to a study leave allowance and a study leave budget that they can access. Supervisors should encourage Registrars to use their study leave allowance and budget. There is wealth of information on study leave and the policy on the school study leave webpage.

## 3.7 The Coaching Approach

Focuses on structuring conversations so that you can help the StR (referred to as coachee in this section) to explore a topic or situation and discover answers for

themselves. Whilst formal coaching is typically carried out by qualified people, the principles of this non-directive approach can be transferred to everyday conversations in the workplace by adopting some simple techniques for structuring conversations and phrasing questions. Therefore, the Educational Supervisor may take the role of coach, or this role may be undertaken by a trained coach if such a person is accessible. The <a href="Professional Support and Wellbeing Unit">Professional Support and Wellbeing Unit</a> may be able to advise how to access trained coaches. StRs can be referred to the unit by the Training Programme.

The fundamental premise of this approach is that the answers lie within the coachee or can be discovered by the coachee for themselves. It is the coach's job to ask the right questions to help coachees arrive at their own conclusions. Coaches can provide helpful input or suggestions, but the process of discovering answers for themselves is a very powerful way of supporting change and learning.

A useful introduction to coaching, and some simple techniques can be found at <a href="http://www.mindtools.com/pages/article/newTMM\_15.htm">http://www.mindtools.com/pages/article/newTMM\_15.htm</a>

TGROW structure for a coaching conversation:

- Topic decide on the subject for discussion
- Goal agree measurable output/outcome
- Reality describe the current situation, and explore this to uncover the real issues
- > Options draw out all possible solutions, select the preferred solutions
- Wrap up discuss possible implications/obstacles, commit to action, identify support and check when/
- how they will know the goal is achieved.

## 3.8 Registrars in Need of Extra Support

There are some signs that may offer an early warning that a StR is experiencing difficulties.

- The 'disappearing act' lateness; not answering emails, missing meetings
- Low work rate slowness in completing pieces of work; arriving early, leaving late and still not achieving normally
- Conflict, or lack of engagement with colleagues
- Avoidance of tasks, referring pieces of work to someone else
- Rigidity poor tolerance of ambiguity; inability to compromise; difficulty prioritising
- 'Bypass syndrome' team members avoid seeking this StRs advice/opinion/involvement
- Career problems difficulty with exams; uncertainty re career choice
- Insight failure rejection of constructive criticism and defensiveness

#### Difficulties may arise from a range of circumstances including:

- Educational challenges, exams, revision
- Anxiety concerning career decisions
- Pressure of work, lack of team support
- Unfamiliarity, inexperience
- Changes in team dynamics
- Personal health problems
- Sickness within the family
- Personal relationship difficulties

- Cultural isolation
- Domestic responsibilities or pressures

## Examples of possible scenarios include:

- Sharing an unsatisfactory ARCP outcome
- Overconfident StR
- Apparently unmotivated StR
- StR not asking for help appropriately
- > StR a cause for concern
- Unprofessional behaviour (e.g. late, rude)
- StR smelling of alcohol
- Insight failure

## **Human Resource Support**

South West Public Health Registrars are employed by Gloucestershire Hospitals NHS Foundation Trust. The Population and Public Health Specialist Workforce Programme Lead acts on behalf of the Trust as HR Manager for all StRs.

The lead employers' policies around conduct and managing performance should be used. The FPH Public Health Specialty Training Curriculum, p.15 describes how remediation should be addressed. Structures for different kinds of conversations such as returning to work after sickness are given in appendix I. Where there is an interaction of health and performance, referral to the Lead Employers Occupational Health referral service can be made, either by the training programme, e.g. as part of the sickness absence/performance management process, or the StR may self-refer. The Lead Employer has a self-referral system which is available to all Trust employees providing confidential support. The range of problems that may present is very wide ranging from minor, one-off incidents, to recurring patterns of sickness. Serious performance issues are rare but are often complex and Educational Supervisors will need to seek advice, support and guidance from the Training Programme team.

Where the StR is not making expected progress, Supervisors should discuss with the Head of School. The Educational Supervisor should record performance issues via the Educational Supervisors report. These can then be addressed at ARCP. The ARCP has discretion to put in place a variety of remedial measures including extra time of up to one year of training if needed. The Professional Support and Wellbeing Unit is available through NHS England. The most successful intervention occurs when the Registrar makes contact early either through self-referral or referral through the Training Programme via the Educational Supervisor.

Supervisors may find it helpful to refer to the Professional Support and Wellbeing Unit guidance which can be found <u>here</u>.

#### **Registrar Sickness**

Any sickness absence must be notified by Registrars to Educational Supervisors and the Training Programme team on the first day of sickness absence in line with local reporting procedures. Specialty Registrars will be required to complete a return-to-work sickness form with their Educational Supervisor for all episodes of sickness. More information can be found on the website.

## **Raising Concerns Policy for Registrars**

The South West Public Health Training Programme have developed a Raising Concerns policy for Registrars which can be accessed <a href="here">here</a>. The intention of this policy is to empower Public Health Registrars to raise concerns as early as possible and to promote a supportive and positive environment where Registrars who have legitimate concerns, are able to raise these without fear of discrimination or reprisal.

#### 3.9 Placements and Exit Interviews

Specialty Registrars can undertake short term placements towards the end of their training. All organisations who wish to offer such an opportunity to Public Health StRs should ensure that their placements are formally advertised using the Placement template form (see Appendix L) amongst the StR group. The placement form once complete should be sent to the Training Programme team for circulation. <a href="mailto:england.publichealth.sw@nhs.net">england.publichealth.sw@nhs.net</a>

Initially, Specialty Registrars should discuss possible placements with their Educational Supervisor and the Head of School to ensure its relevance to their training needs. A clear outline of the expected work programme and the way in which it will address the Specialty Registrar's training needs and enhance their experience should then be submitted to the Head of School for formal approval before applying for the placement. Clarity must be made on the Supervision to ensure that only accredited Supervisors supervise the placement/StR. StR's will retain their Educational Supervisor in their training location throughout all placements.

Following approval, the Specialty Registrar can commence discussions and agree the specific details of the placement and the start date with the Placement Supervisor; this must be detailed in the StR's learning agreement. The Specialty Registrar must inform the Training Programme team once final details are agreed.

#### **End of Placements**

Specialty Registrars should complete an end of placement form on completion of all placements whether that be short-term, split placements or their longer-term placement with their first or second training location. The form to be completed can be found in Appendix N.

#### **Exit Interviews**

All Specialty Registrars at the end of their first and at the end of their second training location and on completion of the programme will be offered an exit interview. The end of placement form detailed above should be submitted to the training programme team ahead of the interview to form the basis of the discussion. At this interview the Registrar will be asked to describe the strengths of their placement/training location and what areas for improvement might be suggested. We always take feedback from these interviews seriously and they are fed into our quality panel process and fed back to the individual training locations. Exit interviews will be set up by the training programme team.

## **Section 4: Assessments**

The assessment of satisfactory progress in the training programme is undertaken at an annual review; this is called an ARCP: 'Annual Review of Competence Progression'

The ARCP is a formal review of a Specialty Registrar's progress throughout the preceding year. The ARCP panel has two objectives:

- To consider and approve the adequacy of the evidence and documentation provided by the Registrar,
- To make a judgment about the Registrar's suitability to progress to the next stage of training or confirm training has been satisfactorily been completed, provided that adequate documentation has been presented.

Progress is judged as passing the FPH examinations and completing competencies in the ePortfolio at an appropriate rate.

The ARCP is a requirement for all public health Registrars, both full time and those in less than full time training and normally happens annually. Exemptions may occur if a Specialty Registrar has had significant leave from the training programme (for example out-of-programme leave, sickness or maternity). These are agreed on a case-by-case basis.

Most ARCPs in NHSE South West are held in June or July although we do have smaller sittings at other times in the year. In the Southwest, we expect all StRs to attend the ARCPs which take place virtually. Supervisors are encouraged to observe.

The ARCP also provides a formal process whereby more specific and targeted help can be provided for Registrars who are experiencing difficulty. In these cases, the panel can recommend, for example, additional training time, a period of focused training or that training be repeated in a particular area of work. Occasionally, after other forms of support have not proved successful, it may be concluded that public health is not the Specialty in which an individual is most suited, and training should be discontinued.

The ARCP panel also determines whether a Registrar has completed training satisfactorily and makes a recommendation to FPH for the issue of a Certificate of Completion of Training (CCT). This is then referred onwards to the General Medical Council (GMC) or the UK Public Health Register (UKPHR) that make the ultimate decisions.

More information on the ARCP and how the process works can be found on School website <a href="https://publichealth.severndeanery.nhs.uk/about-us/specialty-training/arcp/">https://publichealth.severndeanery.nhs.uk/about-us/specialty-training/arcp/</a>

## 4.1 Preparing for ARCP

All Specialty Registrars will be using the online ePortfolio to record their work. As a Supervisor you will need to ensure that all their learning outcomes, activity sheets and competencies are signed off electronically in time for their ARCP. This can be extremely time consuming if your Registrar has completed a large number at the same time. Some Supervisors find it helpful to arrange a meeting with their Registrar in order to go through the learning outcomes submitted. You will need to sign off activity summary sheets and competencies. You will also need to make sure you have signed off a learning agreement (with the Head of School) which you have probably completed earlier in the year. Educational and Academic Supervisors will be required to write a report for the ARCP.

The Population and Public Health Training Manager will formally notify the StRs well in advance of their ARCP and inform them of the documents that are required.

Registrars are expected to submit the following documents to the Programme team by the deadline specified;

- Educational Supervisor Report
- Academic Supervisor Report
- Learning Agreement
- Form R
- Wider scope of practice form
- Revalidation Educational Supervisor Questions
- Form 4 to be completed following an appraisal (including those attending their first ARCP)

#### **Activity Summary Sheets**

These are for the Registrar to reflect on what they learned from what went well and what could be improved, how it will influence their approach in future. It is not for describing the activity.

One activity should not be linked to too many learning outcomes. Conversely a learning outcome only needs a few robust pieces of evidence, rather than a lot of weaker demonstrations of work.

Educational Supervisor's comments should relate to how the StR handled each activity and any implications from this.

#### Competencies

The ARCP review will only sample some of the signed-off competencies. As a consequence, the responsibility lies almost entirely with the Educational Supervisor to confirm that the Specialty Registrar has achieved the appropriate level. This is particularly relevant for StRs nearing the end of their training; you are signing them off as 'ready for a consultant post'.

## **Learning Agreements**

All Registrars must have an agreed and approved learning agreement that covers each period of their training (Appendix E). The agreement should be drafted with the Educational Supervisor and then sent to the Head of School for review and approval. Agreements should be treated as live documents and can be amended/updated and submitted for review at any point. Learning agreements are reviewed as part of the ARCP process.

#### **Supervisor Reports**

The Supervisor's report describes the progress the Registrar is making with comments on activity summary sheets.

Your report should comment on specific achievements, not just on what areas the StR has worked on and review progress through the training curriculum. Identify their strengths and weaknesses and set out recommendations for the next year StRs who are *not making expected progress* need to have particularly good training records. The Educational Supervisor's report is the formal record for assessment. Appendix J contains specimen Educational Supervisor reports.

## 4.2 What needs to be done after ARCP

Review the ARCP with your Specialty Registrar: how did it go? Besides your reports for the ARCP, you should review the recommendations set out by the panel and draft a new learning agreement for the year ahead.

If they are leaving or moving to a new location, how will you mark their leaving? What advice and feedback can they give you and your location? All Registrars will be requested to complete an exit interview with the training programme team.

If they are not leaving, prepare a new learning agreement and discuss how the next year will be used to best effect.

If they are going on a short attachment, such as in health protection, ensure the hand over to their HP Supervisor is coordinated and be clear of the expectation on all sides. Are they coming back to you? If so when and have a plan for them to pick up pieces of work to make progress on outstanding learning outcomes. Educational Supervisors should remain connected with their StR during the HP placement.

#### 4.3 KA10 Process

Key Area 10: Integration and Application of Competences for Consultant Practice. This area focuses on the ability to integrate and apply public health competences for Consultant practice. A KA10 panel is convened 12 months (wte) prior to completion of training to assess progress against KA10 and outline any recommendations. Full guidance on the process can be found on the FPH website.

## 4.4 Preparing for a Consultant Post

The South West Public Health Training Programme support Registrars to prepare for a Consultant post. The programme will arrange interview skills training and a mock interview if required. Periods of <u>acting up</u> are also encouraged.

## 4.5 First Year as a Consultant Support

The South West Population and Public Health Academy have looked at how they could provide additional support to those people who are in their first year as a consultant in Public Health.

It was agreed to provide the below in terms of support:

- Provide structured support in the form of a two-year programme consisting of 2 workshops per year. The workshops are supported by senior consultants in public health and specialist guest speakers e.g. human resources.
- To provide informal mentoring support to new consultants for a limited period of time, from senior consultants in public health through an arrangement facilitated by specialty tutors.
- To evaluate both formal and informal support to new consultants using signposting to other resources.

Further information can be found here.

## **Section 5: Quality**

## 5.1 Quality Panels

A Quality Panel is an annual meeting of selected stakeholders involved in a training programme to review the quality of all posts.anuary

An assessment aid has been developed to gather intelligence from Registrars to inform the panel. Specialty Tutors are also invited to submit evidence. In addition, the following data will also be used by the panel to make an overall decision: -

- The most recent National Training Survey (NTS) data
- The most recent National Education and Training Survey (NETS) data
- Reports from previous year's Quality Panel
- Summary of ARCP data
- Supervisor accreditation data
- Recruitment data
- Exit interview feedback
- o Plus, any information that the panel deems pertinent.

The overall grade (Excellent, Good, Requirements Improvement, Inadequate) is determined by the panel taking into consideration all of this data. When the panel agrees on the overall grade for a training location, they will also need to suggest ways in which the location can be improved.

A report will be written on each training location detailing the overall grade and any actions that the training location can alter to improve the score.

#### **Supervisor Audit Tool**

Supervisors will be asked to complete an annual online survey audit tool, the results of which will be submitted to the Training Location Specialty Tutor for review. This audit tool will be used to provide an update to the Quality Panel as part of the Training Location's evidence submission.

More information on the Quality Panel process can be found <a href="here">here</a>.

## Appendix A: A list of key documents and their electronic links

(as at January 2025)

| Document(s)   | Link   |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
| Faculty of Public Health  |  |  |  |  |  |  |  |
| Information for Educational Supervisors                                       | https://www.fph.org.uk/training-careers/specialty-training/regulation-of-training/   |  |  |  |  |  |  |
| Public Health Specialty Training Curriculum                                   | https://www.fph.org.uk/media/4ojeo5bk/public-health-curriculum-2022-v13 final.pdf  |  |  |  |  |  |  |
| Training Supervisor/e-portfolio guidance                                      | https://www.fph.org.uk/training-careers/specialty-training/training-eportfolio/  |  |  |  |  |  |  |
| Membership Grades and Benefits  | https://www.fph.org.uk/membership/categories/  |  |  |  |  |  |  |
| DFPH documents (including regulations and syllabus)                           | https://www.fph.org.uk/training-careers/the-diplomate-dfph-and-final-membership-examination-mfph/the-diplomate-examination-dfph/                                     |  |  |  |  |  |  |
| MFPH documents  | https://www.fph.org.uk/training-careers/the-diplomate-dfph-and-final-membership-examination-mfph/the-faculty-of-public-health-final-membership-examination/practice/ |  |  |  |  |  |  |
| List and links to UK Training Programmes                                      | https://www.fph.org.uk/training-careers/specialty-training/training-placements/training-programmes/  |  |  |  |  |  |  |
| NHS England   | http://www.publish.colth.co.vom.do.co.m.coho.ulc/  |  |  |  |  |  |  |
| South West School of Public Health  | http://www.publichealth.severndeanery.nhs.uk/  |  |  |  |  |  |  |
| The Gold Guide  | https://www.copmed.org.uk/publications/gold-guide/gold-guide-10th-edition  |  |  |  |  |  |  |
| Lead Employer   |  |  |  |  |  |  |  |
| Gloucestershire Hospitals NHS Foundation (main website)                       | http://www.gloshospitals.nhs.uk/   |  |  |  |  |  |  |
| Local Government Association  |  |  |  |  |  |  |  |
| Training of Public Health Specialty Registrars: A guide for local authorities | http://www.ukphr.org/wp-<br>content/uploads/2016/08/Training-of-PH-SPRs-<br>guidance-for-local-councils-2016.pdf   |  |  |  |  |  |  |

## **Appendix B: Induction check list**

This is particularly important to new Speciality Registrars (StRs) and StRs who are returning to the scheme after being out of training for any period of time.

| Specialty Registrar Local Induction   |   |
|---|---|
| Timings and induction training overview   |   |
| IT equipment and access   |   |
| Housekeeping and general location information   |   |
| Health and Safety, and hazard reporting   |   |
| Emergency procedures, fire drill, first aid   |   |
| Accident reporting  |   |
| Delivery of mandatory training – this will only be their training location mandatory training now as we have received confirmation from Gloucestershire Hospital NHS Foundation Trust that they will accept the mandatory training done in their placement location. Registrars will need to submit a screen shot evidence that they have completed this to the training programme. | Programme to<br>be sent screen<br>evidence of<br>mandatory tra<br>completed |
| Other housekeeping issues   |   |
| General administration  |   |
| Restricted areas, access, passes  |   |
| IT training   |   |
| Access to personal data/ information governance/ IT security  |   |
| Time and attendance system - usual hours worked, home   |   |
| working/office working agreement  |   |
| equipment required Security Transport and partition   |   |
| Transport and parking   | Drogramme to  |
| Absenteeism and lateness  | Programme to<br>be notified of<br>absence as w<br>training location         |
| Food and drink, catering  |   |
| Your Organisation and Department  |   |
| History and background overview   |   |
| Ethics and philosophy   |   |
| Editios dila prinosopriy  |   |
|   |   |
| Mission statement(s)  |   |
| Mission statement(s) Organisation overview and structure  |   |
| Mission statement(s) Organisation overview and structure Departmental structure and interfaces  |   |
| Mission statement(s) Organisation overview and structure Departmental structure and interfaces Who's who (names, roles, responsibilities)   |   |
| Mission statement(s) Organisation overview and structure Departmental structure and interfaces Who's who (names, roles, responsibilities) Site layout   |   |
| Mission statement(s) Organisation overview and structure Departmental structure and interfaces Who's who (names, roles, responsibilities) Site layout Other sites and locations   |   |
| Mission statement(s) Organisation overview and structure Departmental structure and interfaces Who's who (names, roles, responsibilities) Site layout Other sites and locations Dress codes   |   |
| Mission statement(s) Organisation overview and structure Departmental structure and interfaces Who's who (names, roles, responsibilities) Site layout Other sites and locations Dress codes Basic communications overview   |   |
| Mission statement(s) Organisation overview and structure Departmental structure and interfaces Who's who (names, roles, responsibilities) Site layout Other sites and locations Dress codes Basic communications overview Facilities and amenities  |   |
| Mission statement(s) Organisation overview and structure Departmental structure and interfaces Who's who (names, roles, responsibilities) Site layout Other sites and locations Dress codes Basic communications overview   |   |

| People and personalities overview                              |                 |
|--|-----------------|
| Related departments and functions                              |                 |
| agreed visits and 1:1s needed. Agreed shadowing                |                 |
| How the department actually works and relates to others        |                 |
| agree visits and 1:1s needed                                   |                 |
| Politics, protocols, unwritten rules (extremely helpful, but   |                 |
| be careful to avoid sensitive or judgemental issues)           |                 |
| The work-flow - what are we actually here to do?               |                 |
| How the StR job role fits into the department                  |                 |
| Reporting, communications, and management structures:          |                 |
| Working with your Educational Supervisor, Academic             |                 |
| Supervisor & Activity Supervisor. Your Specialty Tutor.        |                 |
| Raising Concerns policy  |                 |
| Terminology, jargon, glossary, definitions of local terms      |                 |
| Workspace or workstation                                       |                 |
| Stationery and supplies  |                 |
| Carry out an exercise about getting to know the LA data        |                 |
| Small Project work before Masters commences                    |                 |
| Communication/connection during Masters terms                  |                 |
| Communication/connection during masters terms                  |                 |
| Personal:  |                 |
| Ensure regular contact and agree virtual/face to face catc     | h               |
| ups during induction period                                    | "               |
| Developing a working partnership with your Educational         |                 |
| Supervisor. Line management arrangements                       |                 |
| Job description - duties, authority, scope,                    |                 |
| area/coverage/territory  |                 |
| Expectations, standards, current priorities                    |                 |
| Training needs analysis method and next steps                  |                 |
| Initial training plans after induction                         |                 |
| Training support, assistance, mentor support                   |                 |
| Where to go, who to call, who to ask for help and advice       | Specialty Tutor |
| Where to go, who to call, who to ask for help and advice       | PA support:     |
|  | -arranging      |
|  | meetings.       |
|  | StR colleagues  |
| Develop a learning agreement and work programme                |                 |
| Training review times and dates                                |                 |
| Development of personal objectives and goals                   |                 |
| Employer appraisal, necessary for revalidation                 |                 |
| Opportunities for self-driven development                      |                 |
| Virtual/face to face teams, groups, projects open to job       |                 |
| role   |                 |
| Social activities and clubs, etc.                              |                 |
| Initial induction de-brief and feedback                        |                 |
| Confirmation of next training actions                          |                 |
|  |                 |
| Visits and tours of other relevant locations, sites and        |                 |
| partners – key meetings – have set up before Registrar arrives |                 |
|  |                 |
| Attendance of meetings and project groups                      |                 |

## **Appendix C: Useful Questions for initial meeting with Registrar**

- What were the most and least rewarding experiences that you had in the last placement?
- Can you tell me about the most challenging situation you had to deal with in your last placement – tell me about it, how you managed it etc.
- What did you most enjoy? Least enjoy? And why?
- What was the most important learning for you in this last placement?
- At this stage of your training what do you regard as your strengths and limitations as a Public Health StR?
- How well did you achieve the curriculum requirements in your last placement?
- What are the key competencies you think you should focus on in this placement? (Why?)
- What are your strengths and limitations in relation to these?
- How do you like to learn?
- Which specific aspects should we concentrate on for you in this placement?
- Thinking about your work life and the balance with the rest of your life are there any other matters that it would be helpful to discuss?
- How do you manage your work-life balance?
- How do you keep yourself physically and mentally healthy? (e.g. we all have different triggers that make us stressed and as we know medicine is a highly stressful profession – what particularly stresses you and how do you manage it?')
- Do you have any concerns that it would be helpful for me to know about or you would like to discuss?

## **Appendix D: Learning Style Survey**

A learning style survey is designed to help you gain an understanding of learning styles so that you can incorporate the various learning styles in your daily learning activities. It is NOT meant to show you your best way of learning as the research does not promote that. Rather, it is a tool for *learning-to-learn* in order to increase self-awareness about your strengths and weaknesses as a learner so that you will try to use the correct method for learning a task or subject, rather than sticking with a preferred method.

Note that like any survey of this nature, it is not 100 percent accurate, but it should help you gain some understanding of your preferred learning styles based on two continuums:

- o Processing Continuum: Our approach to a task learn by doing or watching.
- Perception Continuum: Our emotional response learn by thinking or feeling.

For a learning style survey based on modalities (Visual, Auditory, and Kinesthetic), see VAK.

#### **Instructions**

Read each statement carefully. Answer honestly as there are no correct or incorrect answers. It is best if you do not think about each question too long, as this could lead you to the wrong conclusion.

## **SECTION 1 (Doing & Watching)**

Circle either "**Doing**" or "**Watching**" next to the statements below, depending upon the part of the statement you most closely relate to.

- 1. **Doing** I often produce off-the-cuff ideas that at first might seem silly or half-baked. **Watching** I am thorough and methodical.
- 2. **Doing** I am normally the one who initiates conversations. **Watching** I enjoy watching people.
- 3. **Doing** I am flexible and open minded. **Watching** I am careful and cautious.
- 4. **Doing** I like to try new and different things without too much preparation. **Watching** I investigate a new topic or process in depth before trying it.
- 5. **Doing** I am happy to have a go at new things. **Watching** I draw up lists up possible courses of actions when starting a new project.
- 6. **Doing** I like to get involved and to participate. **Watching** I like to read and observe.
- 7. **Doing** I am loud and outgoing. **Watching** I am quiet and somewhat shy.
- 8. **Doing** I make quick and bold decisions. **Watching** I make cautious and logical decisions.
- 9. **Doing** I speak fast, while thinking. **Watching** I speak slowly, after thinking.

## **SECTION 2 (Thinking & Feeling)**

Circle either "**Thinking**" or "**Feeling**" next to the statement below, depending upon the part of the statement you most closely relate to.

1. **Thinking** - I ask probing questions when learning a new subject. **Feeling** - I am good at picking up hints and techniques from other people.

- 2. **Thinking** I am rational and logical. **Feeling** I am practical and down to earth.
- 3. **Thinking** I plan events down to the last detail. **Feeling** I like realistic, but flexible plans.
- 4. **Thinking** I like to know the right answers before trying something new. **Feeling** I try things out by practicing to see if they work.
- 5. **Thinking** I analyze reports to find the basic assumptions and inconsistencies. **Feeling** I rely upon others to give me the basic gist of reports.
- 6. **Thinking** I prefer working alone. **Feeling** I enjoy working with others.
- 7. **Thinking** Others would describe me as serious, reserved, and formal. **Feeling** Others would describe me as verbal, expressive, and informal.
- 8. **Thinking** I use facts to make decisions. **Feeling** I use feelings to make decisions.
- 9. Thinking I am difficult to get to know. Feeling I am easy to get to know.

## **Scoring Procedures**

preferred learning style:

| Total up the two choices from Section One (Doing & Watching). The one that has the larger number is your task preference:                   |
|---|
| Total number of <b>Doing</b>  |
| Total number of <b>Watching</b>   |
| Total up the two choices from Section two (Thinking & Feeling). The one that has the larger number is your thought or emotional preference: |
| Total number of <b>Thinking</b>   |
| Total number of <b>Feeling</b>  |
| Each preference (high score) from the two above sections are used to determine your   |

If you prefer Watching and Feeling then this puts you in the **reflecting** category:

- Prefers to learn from activities that allows watching, thinking, and to review what has happened, such as brainstorming and cooperative groups.
- Lectures may be helpful but only if they provide expert explanations and analysis.
- Likes innovative and imaginative approaches to doing things.
- Prefers to view situations from many perspectives.
- o Interested in people and tends to be feeling-oriented.

If you prefer Watching and Thinking then you are in the **philosophy** category:

- Prefers to pull a number of different observations and thoughts into an integrated whole in a step-by-step manner (go from details to big-picture).
- o Prefers to reason logically and design models, theories, and projects.
- Likes lectures, analogies, systems, and case studies.
- Talking with experts is normally not helpful.

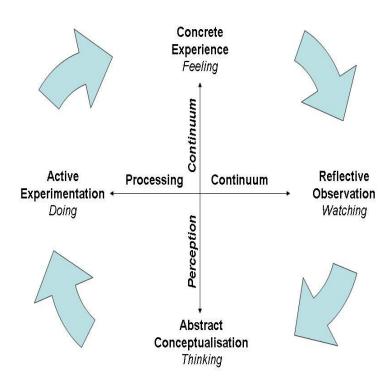
If you prefer Doing and Thinking then you are in the **analyzing** category:

- Prefers the practical application of ideas, solving problems, feedback, and decisionmaking (obvious links between the task-on-hand and a problem).
- Prefers technical problems over interpersonal issues.
- Prefers to apply new learnings to actual practice to see if they work.
- Likes laboratories, field work, observations, and coaching.

If you prefer Doing and Feeling then you are in the **organizing** category:

- Good at adapting to changing circumstances and solves problems in an intuitive, trialand-error manner, such as discovery learning.
- Tends to be at ease with people.
- Prefers the challenges of new experiences, involvement with others, assimilation, and role-playing.
- Likes anything new, problem solving, and small group discussions.

You will learn best by using **ALL** four styles, rather than your preferred learning style. That is, you should incorporate the styles so that you use the learning cycle.



#### **Reliability and Validity**

This survey was designed as a learning tool for use in training programs such as leadership development and learning-to-learn (metalearning), rather than a research tool, thus it has not been formally checked for reliability or validity. However, in order to be of any use to the learners, it has to be fairly accurate.



# **Appendix E: Learning Agreement**

## **Learning agreement for next 12 months**

| Name: | Phase: |
|-------|--------|
| NTN:  | Year:  |

| Item                                      | Detail | Plan | Learning<br>Outcomes | Anticipated<br>sign off<br>status<br>(Full/Partial) | Date for completion |
|---|--------|------|----------------------|---|---------------------|
| Educational objectives identified in ARCP |        |      |                      |   |                     |
| Exam milestones for current phase         |        |      |                      |   |                     |
| Phase-based learning outcomes to achieve  |        |      |                      |   |                     |
| Generic skills to achieve                 |        |      |                      |   |                     |
| Study leave to support learning outcomes  |        |      |                      |   |                     |
| Placement move<br>discussion              |        |      |                      |   |                     |

We agree this educational plan for the next 12 months

| Signature | Date      |                |
|-----------|-----------|----------------|
|           |           |                |
| Signature | Date      |                |
|           |           |                |
| Signature | Date      |                |
|           |           |                |
|           | Signature | Signature Date |

## Appendix F: Guidelines for giving and receiving feedback

Guidelines for giving and receiving feedback

## Giving feedback - do's

- Establish the student's agenda
- Get the student to start with what went well the positive
- Teacher starts positive
   however difficult it may seem
- Comment on specific aspects of the consultation i.e. in history taking
- Active listening (eye contact, stance etc.)
- Use of silence
- Clarifying
- Responding to cues (verbal, nonverbal, psychosocial)
- Summarising
- Empathising etc.
- Move to areas "to be improved" (avoid the term "negative"!) follow the student's agenda first
- If in a group, ask other students to comment but remind them "No criticism without recommendation"
- Teacher offers own observations & constructive criticisms
- Be specific
- Always offer alternatives
- Begin with ".....I wonder if you had tried"
- "....perhaps you could have....."
- "...sometimes I find....helpful...."
- Distinguish between the intention and the effect of a comment or behaviour
- Distinguish between the person and the performance ("what you said sounded judgmental" – rather than "You are judgmental")
- Do discuss clinical decision making
- Do be prepared to discuss ethical and attitudinal issues if they arise

#### Giving feedback - don'ts

- Don't forget the student's emotional response
- Don't criticise without recommending
- Don't comment on personal attributes (that can't be changed)
- Don't generalise
- Don't be dishonestly kind if there was room for improvement be specific and explore alternative approaches
- Don't forget that your feedback says as much about YOU as about the person it is directed to!
- Guidelines for receiving constructive feedback
- Listen to it (rather than prepare your response/defence)
- Ask for it to be repeated if you did not hear it clearly
- Assume it is constructive until proven otherwise; then consider and use those elements that are constructive
- Pause and think before responding
- Ask for clarification and examples if statements are unclear or unsupported
- Accept it positively (for consideration) rather than dismissively (for self-protection)
- Ask for suggestions of ways you might modify or change your behaviour
- Respect and thank the person giving feedback

## **Appendix G: Myers Brigg Type Indicator (MBTI)**

This section only works if you've completed the questionnaire and know your set of preference.

People with a preference for thinking prefer to receive direct feedback, there is no need to do the good, bad, good sandwich.

People with a preference for feeling want to be appreciated and receive feedback that identifies what they did well along with what needs to improve.

#### Introduction

The Myers-Briggs Type Indicator is one of the oldest and most respected psychometric instruments in the world. It was developed by a mother and daughter team, Katharine Briggs and Isabel Myers and is based on the theories of the distinguished Swiss thinker; Carl Jung. To this extent, it represents a useful blend of American and Western European thinking. There are over 50 years of history and research behind it. It is also unusual in that its strengths is *sorting* rather than *judging*. So, for instance, there are no 'better than' or 'worse than 'types, or 'sick'/well' types. All of the 16 personality types are assumed to have equal value.

#### So it is important to remember that:

- The MBTI reflects preferences: it does not mean that you don't ever use the other half of the bi-polar scale
- It does not describe skills, ability or intelligence
- All preferences are regarded as equally important and valuable
- All preferences have potential plusses and minuses; how you use or develop them may vary over your life, a developmental process which is continuous
- Each type has its potential strengths; each type has its potential blind sports; one
  of Jung's principles is that we all have the potential to become our 'best possible
  selves'
- You should treat your feedback with a degree of scepticism until you have decided which type is the best fit for you; this may or may not be the same as the one reported through the questionnaire

#### The Four Scales

The MBTI looks at eight possible preferences organised into four bi-polar scales. When you take the Indicator; the four preferences that you identify as being most like you are combined into a personality type.

| Extraversion Introversion | Е | <br>I            |
|---------------------------|---|------------------|
| Sensing                   | S | <br>N iNtuition  |
| Thinking                  | Т | <br>F Feeling    |
| Judging                   | J | <br>P Perceiving |

| Energising                | Extraversion (E)  Drawing energy from the world of People, things, activities; dealing in breadth rather than depth         | Introversion (I) Drawing energy from the internal world of thoughts, ideas; preferring depth; pausing for thought                  |
|---------------------------|---|--|
| Unconscious preoccupation | Access to people  | Privacy  |
| Perceiving                | Sensing (S) Preferring to take in information through the five senses; liking the concrete and practical; tolerating detail | iNtuition (N)  Preferring to take in information through a sixth sense of what might be; liking the big picture; tolerating change |
| Unconscious preoccupation | Evidence  | Possibilities  |
| Decision<br>making        | Thinking (T) Structuring decisions through objective balance; emphasising logic and reason, truth and fairness              | Feeling (F) Structuring decisions through an emphasis on personal values, people-needs   |
| Unconscious preoccupation | Truth   | Harmony with others  |
| Living                    | Judging (J) Preferring to live in a planned, organised, way; liking to come to conclusions quickly                          | Perceiving (P) Preferring to live in a spontaneous, flexible way; adapting rather than controlling                                 |
| Unconscious preoccupation | Control   | Keeping options open   |

Communicating: Extraversion and Introversion

## Extraversion (E)

| Potentially helpful |   | Pot         | Potentially hindering                                    |  |
|---------------------|---|-------------|--|--|
| >                   | being outgoing and sociable being spontaneous and enthusiastic      | <b>&gt;</b> | overwhelming people wanting to get to action too quickly |  |
| >                   | enjoying talking through ideas with peers and the people you manage | >           | finding listening difficult                              |  |
|                     | demonstrating energy  | >           | appearing to have a "butterfly" approach                 |  |
|                     |   | >           | wanting to get to action too quickly                     |  |

#### Introversion (I)

#### Potentially helpful

- a reflective style which allows people space
- listening attentively
- concentrating on what is happening below the surface
- > staying calm

#### Potentially hindering

- appearing withdrawn or moody
- lacking a social confidence
- seeming over-intense
- disliking large meetings
- appearing lacking in presence

#### **Influencing Others Using the Sixteen Personality Types**

#### Clues to other people's type preferences\*:

#### **Extraversion (E)**

- Speaks quickly
- Speaks a lot long sentences
- Interrupts
- Speaks loudly

#### Sensing (s)

- Gives/asks for step by step information
- Focuses on now
- Mentions details, facts, figures
- Asks for / offers evidence
- Questions begin "what ?" "how ?"

#### Introversion (I)

- Speaks slowly
- Brief sentences
- Pauses before speaking and between sentences
- Speaks quietly

#### iNtuition (N)

- Gives/asks for overall picture
- Focuses on future
- Mentions patterns, connections
- Asks for / offers new ideas
- Questions begin "why?"

#### Thinking (T)

- Conversation follows "if this, then that " format
- Weighs objective evidence
- Appears to be testing you
- What others have done is of little interest

#### Feeling (F)

- Conversation stresses personal values
- Looks to effects on people
- Wants to like and be liked
- What others have done matters

#### Judging (J)

- Offers opinions and advice
- Wants timescales agreed
- Talks about goals
- Moves to decision quickly

#### Perceiving (P)

- Adapts to other's views
- Flexible about time
- Talks about direction
- Stays open to more information

#### Influencing STs (Sensing-Thinking types)

#### ST value

- Specifics and facts
- Dealing in the here and now
- Practicality
- Taking things step by step
- A logical framework
- Acting responsibly
- Value for money
- Stability, certainty
- · Sensible goals and hierarchy

#### Language used by STs

Look out for words like; practical, concrete, realistic, down -to-earth

STs tend to use: passive tense, impersonal words and pronouns Metaphors; engineering, building, surgery, mathematics, sport, military Examples; We knocked out the competition'; "Our troops need a bit of a boost".

## Influencing SFs ( Sensing – Feeling types ) SFs value

- Practicality, realism
- The impact on people of any policy
- Personal loyalty, trust
- An individualised approach
- Helpfulness, friendliness
- Duty
- Prudence, especially with resources
- Traditions, especially those that honour people
- Enjoyment of the here and now
- Proper systems
- Taking things one step at a time

#### Language used by SFs

Look out for words like; care, concern, common sense, man-or-woman-in-the-street, detail, realistic

SFs tend to us; personal pronouns and make considerable use of people's names Metaphors; nature, domestic, eating and drinking, nutrition, hygiene

Example: "We need better housekeeping where our IT systems are concerned"

# Influencing NFs (Intuitive – Feeling types) NFs value

Enthusiasm

- Authenticity, sincerity, striving for the highest possible standards in personal relationships
- Having a positive impact on others
- Big ideas that will have value for society/community
- Exploring the widest possible range of possibilities
- Harmony, peace
- Feeling connected to other people
- Novelty
- Personal growth
- Teamwork
- Cooperation

#### Language used by NFs

Look out for words like: ideal, connect, vision, image, possibility, feeling, dream NFs tend to use: personal pronouns, enjoy talking in generalities, mention values Metaphors: music, literature, religion, psychology, mysticism

Examples: "this organisation is *bedevilled* by ...", My *dream* for this department is ..."

## Influencing NTs (Intuitive – Thinking types) NTs value

- The big picture, general concepts
- Analysing and creating logical options
- Competence
- Having options
- Being unique; don't want to be just like others
- Projecting into the long term from an impartial point of view
- Being resourceful and ingenious
- Productivity
- Autonomy
- Testing your thinking; may make slightly barbed, abrasive jokes; may jockey for position

#### Language used by NTs

Look out for words like: on balance, fair, justice, analyse, future, long term, theory, underlying causes, implications.

NTs tend to use: slightly impersonal language, for instance with few personal pronouns

Example: "There was a feeling that the company ought to move to a more participative style of management"

Metaphors: astronomy, law, physical sciences, architecture

Example: "We need a *constellation* of new ideas here"

#### When the other person prefers:

#### **Extraversion (E)**

- Speak briskly
- Respond quickly
- Project enthusiasm
- Be animated
- Speak reasonably loudly
- Talk it through on the spot

#### Judging (J)

- Be decisive
- Establish clear goals
- Avoid loose ends
- Set time frames
- Don't 'give unnecessary information
- Let them offer advice

#### Introversion (I)

- Leave pauses
- Allow reflection time
- Don't' interrupt
- Use calm tone and body language
- Keep to lowish volume
- Send something in writing first

#### Perceiving (P)

- Keep an open mind
- Negotiate the direction
- Provide structure only if needed
- Allow for flexibility on time
- Give extra information when asked for
- Let them stay flexible

Source: Rogers, J. (1997) Influencing others using the sixteen personality types. ASK Europe plc and Management Futures Ltd. Rogers, J. (1997) Sixteen personality types at work in organisations. ASK Europe plc and Management Futures Ltd.

#### **Appendix H: BOOST**

#### **BOOST**

BOOST feedback model is a popular informal method. It is used to give constructive & continuous feedback about positive behaviour as well as rectifying shortcomings. It has been proven to identify and tackle specific performance issues before they escalate into major problems.

Balanced – what went well and things that need attention

Observed – what you have seen the person say or do

Objective – factual (not aimed at personality)- focus on actions (not your feelings about

the person)

Specific examples

Timely - as close to the event as possible

#### **Appendix I: Sample structure for HR Conversation**

#### **Return to work interview**

A good way of dealing with people in the return to work interview scenario is to use the WARM approach. This is an easy to remember phrase which encompasses all the main points you want to cover during the return to work interview. Here are the four stages you need to over using the acronym WARM:

Welcome back, be friendly and open, non-hostile, focus on the individual wellbeing

Absence discussion, (look at attendance record, count up days absence this year etc)

Responsibility for attendance at work (remind of need to attend in cases of short term repeated absence, business needs, important of work the induvial does)

**M**ove on – update on what has happened in their absence, allocate work for the day/week ahead

If you require any further guidance, contact the Training Programme team england.publichealth.sw@nhs.net

#### **Appendix J: Educational Supervisors' reports**

#### What's in a good and a bad report?

These notes complement the fictitious examples of good/bad reports on pages 41-43.

#### Tips to write a good report:

- Comments on specific achievements, not just on what areas the StR has worked on
- Reports on progress through the training curriculum
- Identifies strengths and weaknesses
- Clearly sets out recommendations for the next year
- Provides the next Educational Supervisor with background to enable them to support StR through the next part of their training.

#### **Examples of a bad report:**

- Mentions the topics on which the StR has worked, but gives no indication of individual's achievements or learning outcomes.
- > Gives little or no indication of progress in training
- > Strengths not sufficiently clarified, e.g. what is meant by "Is confident", StR may like to chair meetings, but are they any good at it?
- ➤ No recommendations for the future: does this mean the StR has no development needs whatsoever? Everyone has development needs.
- ➤ Insufficient information for next Educational Supervisor to assess how best to support StR.

# GENERAL I have had little contact with my Registrar this year as she has been on the MSc STRENGTHS She appears to be making good progress in her training AREAS FOR IMPROVEMENT She would like more experience in data analysis RECOMMENDATIONS (state where special attention should be given in future) I suggest she goes on a short course.

#### **EDUCATIONAL SUPERVISOR'S REPORT 2**

#### **GENERAL**

Over the last year, XX has continued his training in XX. He has led the development of a Mental Health care pathway and strategy including chairing a new multi-agency group to oversee implementation.

XX has also developed a reputation as the child autism lead for the Council. Over the last year he has also continued to support the communications and campaigns work of the Public Health team including supervising the work of a media officer in the Communications team.

#### **STRENGTHS**

XX's recent multisource feedback report clearly shows that he has great scores for professional relationships attitudes and behaviours; communication skills; team working and partnership skills and appropriateness of behaviour.

The quality of XX's work is excellent and he has demonstrated this year his skills at the management of several complex projects at the same time. I have had many compliments about him. He quietly gets on with a high workload without making any fuss and works things out independently. He has fully engaged with the Public Health team and our external partners and is much liked and respected by colleagues.

#### AREAS FOR IMPROVEMENT

XX should gain more practical experience to multi-agency partnership working through Phase 2 of his training. This will provide him with opportunities to be more proactive and 'hands on' in bringing about change and delivering.

**RECOMMENDATIONS** (state where special attention should be given in future) It may help XX in his future career, which I expect to be very successful, to have some leadership development.

#### **EDUCATIONAL SUPERVISOR'S REPORT 3**

#### **GENERAL**

We have met on several occasions, as well as additional contact by email and phone, to review progress over the last year including a recent 3-way meeting. XX has had a very good year completing several major bits of service work and presenting her work to the SW Scientific conference. They have clearly matured and gained confidence over this time and are demonstrating the necessary skills to be a future consultant

#### **STRENGTHS**

Very engaging presentation style and charismatic. They are able to enthuse others and get their help in a collaborative sense whilst showing respect for the opinions of others.

#### AREAS FOR IMPROVEMENT

As they are now in phase 2 I would expect them to work more independently but also know when expert help might be required. For one of their projects they only consulted with me rather late in the day when various design decision had already been made so it was too late to change things. This balance between knowing when to be autonomous as compared to seeking additional help can be tricky bit is an important skill to acquire.

**RECOMMENDATIONS** (state where special attention should be given in future)

We have mapped out her remaining competencies that remain for phase 2. I will

We have mapped out her remaining competencies that remain for phase 2. I will arrange for her to help with our UG teaching around an outbreak to fufill remaining academic competency and will observe her so she can get some peer review evidence for her portfolio. We also feel she will benefit with attending the some short courses as this will provide her with additional skills for her service project.



#### **Appendix K**

# South West Public Health Variation in Supervision and Training

**FINAL** 

May 2018

Chair: Head of School, South West Public Health Training

**Programme** 

#### **Background and Aim**

This paper has been written to present the work that Registrars and Supervisors in the South West have been working on to address issues of variation in Supervision and training. The issue of variation in Public Health Supervision and Training has been discussed by both Specialty Tutors and Registrars with both groups very keen to address the issue. The Training Programme agreed to lead a task and finish group to address the issues and outlined on the pages that follow are some of the areas that have been discussed and suggested actions aimed at reducing variation in Public Health Supervision and Training.

#### **Timeline**

It was agreed to spend around three months working on the variation in Supervision and Training issues. Work began in December 2017 with three virtual meetings held during this time. The draft paper was reported to the RSTC in March 2018 and progress will be picked up at Training Conference later in November 2018. Many of the agreed objectives can be implemented for the new intake in August 2018.

#### **Acknowledgements**

The following people were part of the working group developing the paper or made contributions:

- Maggie Rae, Head of School, South West Public Health Training Programme
- Tracey Polak, Educational Supervisor, Devon County Council
- Paul Scott, Educational Supervisor, Bath and North East Somerset Council
- Sara Blackmore, Educational Supervisor, South Gloucestershire Council
- Ruth Milton, Educational Supervisor, Public Health England
- Kate Blackburn, Educational Supervisor, Wiltshire Council
- Helen Tapson, Public Health Specialty Registrar, Somerset County Council
- Joanna McLaughlin, Public Health Specialty Registrar, Bath and North East Somerset Council
- Gemma Brinn, Public Health Specialty Registrar, North Somerset Council
- Rebecca Maclean, Public Health Specialty Registrar, Swindon Borough Council
- Sarah Bird, Public Health Specialty Registrar, Cornwall Council
- Diane Lloyd, Programme Manager, South West Public Health Training Programme
- Gemma Cooke, School Support Manager, South West Public Health Training Programme

#### Comments and feedback from Registrars and Supervisors

An issue was raised on the uncertainty of when to speak to the Training Programme

 some Registrars are going to their Supervisors when it should be the programme
 team.

- Supervision should be individually tailored for the Registrars ensuring an appropriate level of support is given which could differ for each Registrar.
- It is important to ensure consistency within teams to include all Supervisors including Activity Supervisors.
- Difficulties were identified with new Registrars and new Supervisors unsure of aims and what success is.
- Variation in signing of learning outcomes was highlighted This is one of the bigger issues of variation. There is currently variation in what is signed off but also the timing/frequency of sign off; both are equally important.
- Explore the option of other Supervisors in the location offering support to Registrars in the absence of the main Supervisor.
- It is good practice to hold monthly team meetings possibly where the first part includes all Registrars and Supervisors and the second part is separated to work on things/offer peer support. This process is also good for managing workload and ensuring there are equal opportunities.
- Explore buddy options across locations if there is only one Registrar in a location.
- Consider shared local teaching sessions between Registrars and consultants across several local authorities.
- A Supervisor feedback form has been developed which works well and has been shared with Specialty Tutors.
- A suggestion is that an Educational Supervisor and Registrar could work on the first project together to build up a good working relationship.
- It is important for Supervisors to observe ARCPs when preparing Registrars for ARCPs- especially if it is their first.
- Explore the possibility of identifying Registrar's needs and then appropriately match to a Supervisor.
- There are issues with variation in Registrars' organisation meeting deadlines for expenses/ARCPs what is expected from Registrars?
- Awareness of the Registrar's skills/development needs thorough first hand observation and discussion e.g. DOP is more helpful than always relying on a Registrar self- reporting.
- Regular discussion about a Registrar's current work including reviewing progress, troubleshooting and advice on dealing with difficult personalities/conversations etc is valuable to Registrars.

# Comments on variation across the region and moving locations

Variation in training locations across the South West was also discussed and the differing experiences Registrars may receive. Although it was noted that variation is not always a negative.

- Some locations have very large Public Health teams whilst others are small. This can cause
  inconsistences in relation to acting up opportunities on offer and senior Registrars taking on
  more responsibilities and leading in certain areas.
- Handovers should be more structured and should be face to face.
- Early meetings prior to moving locations should take place. The South West Public Health Programme team have recently developed a policy in relation to the process when moving training locations. Please contact the Training Programme team to view the policy.
- It is important for a new training location to have history of the Registrar before moving, including any specific learning and training needs.
- More discussions should take place and be encouraged between locations.
- Specialty Tutor teleconferences run bi-monthly by the Training Programme are very helpful as these messages are filtered down.

#### Agreed main objectives

A set of main objectives were agreed by the group which are listed below;

- ✓ Programme team to work on providing a series of webinars to clarify expectations of each year of training. These can be run as digital lunchtime learning sessions run by a Specialty Tutor and Registrar.
  Please see final section in audit tool
- ✓ Improve on handover of placements/training locations by providing good practice guidance.
- ✓ Avoid new Registrars being allocated newly trained Educational Supervisors.
- ✓ Work on ensuring support from Supervisors or Specialty Tutor is offered within locations for new Registrars if their Supervisor is on any type of leave during their training.
- ✓ Specialty Tutors and experienced directors have a key role to play in ensuring the overview of standards for sign off of learning outcomes in their locations.
- ✓ Create feedback/discussion questions for Registrar and Educational Supervisor to use together (3 questions)

- ✓ Develop the South West Training Policy to be clear on 'must dos' for all training locations.
- ✓ Encourage the use of directly observed practice (DOP) to demonstrate competencies.
- ✓ Introduce exit interviews with the Training Programme at the end of each placement (Training Programme to arrange and implement).
- ✓ Further develop the Supervisor Toolkit to provide guidelines on what is expected from all Supervisors and explore its dissemination and use across the South West.
- ✓ Complete audit of good practice as part of the annual Quality process.

#### **Best practice recommendations**

- ✓ Learning agreement co-produced and signed off by TPD, with detailed reference to named learning outcomes identified.
- ✓ Learning needs documented in learning agreement; study budget utilised to meet STR learning needs.
- ✓ Formal feedback given following directly observed practice (in line with suggested techniques in toolkit document).
- ✓ Placement moves discussed and facilitated e.g. handovers completed.

#### **Webinars**

- Recommended thresholds for learning outcome signoff. To include:
  - a. Clarity over flexibility in interpretation e.g. do all elements listed in 'partial' need to be met even if all elements listed in 'full' are complete?
  - b. Provision of a robust portfolio of examples for each learning outcome
  - c. Agreed route to query sign off needs/approve evidence if the STR and ES are not in agreement or are both unsure of threshold
- How to choose an appropriate project/support Registrar's interests (and career planning)
- Guidance on specific expectations and considerations for Phase 1, Phase 2 and final year Registrar.

#### **Appendix L: Local Teaching**

#### South West Public Health Training Programme: Local Teaching

#### **Background and Aim**

The 2016 GMC Survey results identified a lower than average rating for local teaching within the South West Public Health Training Programme.

A task and finish group of Supervisors and Registrars was established in August 2017 to complete work in two phases, the first phase would look at local teaching; to agree on the definition of local teaching and to compile a list of examples that Training Locations could deliver. The second phase would work on the variation of training and Supervision across the Programme.

The first phase of work was presented and discussed at the Training Conference held on the 14<sup>th</sup> November 2017 and subsequently the below definition and list of examples were agreed;

#### **Definition of Local Teaching**

Local teaching is defined as sessions run by or with the local authority with a focus on imparting knowledge, demonstrating skills or supporting the learning and development of Registrars. In particular, in local teaching, there should be a focus on how theoretical concepts are applied at a local level in order to achieve results.

Teaching may be formal (e.g. a taught session by 'experts' on a particular subject), informal (e.g a debrief or shared analysis after a difficult meeting) or apprentice style (e.g. shadowing a senior role with discussion).

Local teaching should help Registrars to increase their topic knowledge, develop their skills and experience using different PH techniques and tools, and gain insight and experience of some of the challenges encountered in consultant/DPH roles (and key roles outside of public health such as councillors and CCG's).

#### **Examples of Local Teaching Formats**

- ✓ Monthly tutorials
- ✓ Preparation for Part A and B through 1-2-1s or group work
- √ 1:1 with ES (CBDs, DOPs and 1:1s), and Activity Supervisors

#### √ Journal clubs

- ✓ Local/organisational learning and development opportunities e.g. employee learning and development courses, internal/external webinar programmes
- √ 1-2-1 experiential learning such as shadowing consultants or visiting services/programmes, covering duty consultant shifts with appropriate supervision, 1-2-1 discussions or confidential reflective learning sessions with key leaders e.g. members, consultants, to gain insight into their work
- ✓ Team based e.g. Grand Rounds (showcasing team work and lessons learned), lunch and learn, creative spaces

#### Standards to be delivered within South West Training Locations

- Teaching should be appropriate for the Registrars level of training and skills
- Teaching should be delivered by those with knowledge and experience of the subject being taught (and preferably, some knowledge of the registrars needs from the teaching)
- Registrars should be involved in developing the teaching offer in their own local authorities
- The local teaching offer should cover a variety of styles and topics
- It is acceptable for smaller local authorities to pool resources in order to deliver a varied teaching portfolio

The South West Public Health Training Programme's annual Quality Panel process will be the forum in which local teaching within training locations is reviewed and monitored.

#### **Appendix M: Placement Template**

#### SPECIALTY REGISTRAR PROJECT/PLACEMENT OPPORTUNITY

Please complete this template and submit to the South West Public Health Training Programme team for Head of School approval <a href="mailto:england.publichealth.sw@nhs.net">england.publichealth.sw@nhs.net</a>

| Programme team for Head of School approval england.publichealth.sw@nhs.net           |
|--|
| POST TITLE   |
| Specialty Registrar in Public Health (StR)   |
|  |
| ORGANISATION PROVIDING PLACEMENT   |
| NHS England  |
|  |
| PLACEMENT LOCATION   |
| StR's current location with access to NHS England Bristol office when required. Also |
| attend meeting in various SW Locations on request.                                   |
|  |
| PLACEMENT DURATION   |
| 6 months (2 days a week).  |
|  |
| START DATE   |
| From September 2023.   |
| Placement for 2 StRs.  |
| HAS THIS POST/PLACEMENT RECEIVED GMC APPROVAL?                                       |
| Yes – Fully Approved   |
|  |
| SUPERVISORS  |
| Educational Supervisor can continue to be provided by StR's current Educational      |
| Supervisor. Activity Supervision will be provided by                                 |
| Training Caparitoloff fill bo profited by  |
| <u>L</u>   |
| BACKGROUND   |
| Enter detail on the project/placement in brief.                                      |
|  |
|  |

#### **PROGRAMME COMPONENTS**

The placement provides a fantastic opportunity to:

- Work in a fast-paced national role, focusing on whole system approaches.
- Contribute to delivery of NHSEs public health priorities.
- · Work across domains of public health
- Apply a wide range of public health skills such as negotiating and influencing, strategic leadership and collaborative working, and appropriate use of public health evidence

The placement will enable the Registrar to gain an improved understanding of:

- The key institutions relevant to System Leadership across Health and Local Government including relevant Voluntary and Community Sectors
- Relevant strategies/policies/plans and how they can be developed, delivered, monitored, and evaluated.
- Developing a prevention-based Community Based Delivery Models, approach, working with a wide range of stakeholders and agencies, the NHS/social care, the voluntary sector and relevant private sector

#### **LEARNING OUTCOMES**

Objectives will be tailor made to both the needs of NHSE and the Training needs of the StR. There is an expectation that StRs will take on a strong person leadership of their objectives.

The possible learning outcomes which could be met or partially met with this placement are too numerous to list individually and cover all areas of the 2022 curriculum. There are however likely to be specific opportunities to fulfil competencies in the 2022 curriculum under:

- Key area 2: Assessing the evidence of effectiveness of interventions, programmes and services intended to improve the health or wellbeing of individuals or populations.
- Key area 3: Policy and strategy development and implementation
- Key area 4: Strategic leadership and collaborative working for health.
- Key Area 5: Health improvement, determinants of health, and health communication
- Key Area 6: Health Protection
- Key area 10: Integration and application of competences for consultant practice

There will also be opportunities to focus on **Health Economics**, **Finance** and **Resource Management**.

Which specific competencies can be addressed during the placement will vary according to the projects agreed.

#### **ESSENTIAL**

Applicants must:

• Be on a formally accredited specialist training programme.

- Have completed DFPH and MFPH examinations.
- Must have satisfactory progression through annual ARCP assessments.
- Have agreement from their Training Programme Director that this is a suitable training opportunity.

#### Desirable:

- Demonstrable interest in Strategic Planning
- Strong skills in communication of complex issues to a variety of audiences.
- Aptitude for collaborative leadership across organisational boundaries.

#### **APPLICATION PROCEDURE**

StRs should discuss their expression of interest with their Educational Supervisor, and the TPD/HoS on the first instance.

Interested StRs must ensure they seek approval from the Training Programme.

StRs should also discuss with the placement leads (contact details below).

#### **SELECTION PROCEDURE**

This placement opportunity is being advertised via the SW Public Health Training Programme and placements are offered following successful application and subsequent interview. Start date negotiable.

#### **EQUAL ACCESS ARRANGEMENT**

Placements are available on a project basis (2/3 days per week), but consideration will be given to requests for full time.

# PLACEMENT/PROJECT CONTACT DETAILS



#### **Appendix N: End of Placement form**

# South West Public Health Training Programme END OF PLACEMENT QUESTIONNAIRE

As you are now leaving your current placement, we would like to give you this opportunity to tell us about your experience of the training location and training by completing this form.

| REGISTRAR DETAILS  |                        |
|--|------------------------|
| Name:  | Training Location:     |
| Start Date:  | Date of Leaving:       |
| Contract Type:   |                        |
| ☐ FULL TIME ☐ LESS THAN FULL TIM   | 1EWTE:                 |
| (If LTFT please state WTE):  |                        |
|  |                        |
| REASONS FOR LEAVING THIS PLACEMEN  | NT                     |
| Progression/rotation to new placement Interdeanery Transfer Completed Training   | ent                    |
| TRAINING LOCATION:   |                        |
| Why were you in this particular training located Posted the location by training programmed Requested this placement Mandatory part of training (eg Health Programmed) | ne                     |
| If answered b) above please say why you re   | equested this location |
| <ul><li>☐ Geographical suitability</li><li>☐ Suitable for particular interest/specialism</li><li>☐ Other- (please state)</li></ul>                                     |                        |

#### **OVERALL EXPERIENCE**

| A. What have been the 3 greatest over all strengths of this Training Location for you and why?   |
|--|
| 1.   |
| 2.   |
| 3.   |
| B. What have been the 3 greatest overall weaknesses of the Training Location for you and why?  1.  |
| 2.   |
| 3.   |
| C. What have been the three greatest strengths of your supervisor and why?   |
| 1.   |
| 2.   |
| 3.   |
| D. What are three things that you might have wished your supervisor could have done differently with regard to your training?  1.  |
| 2.   |
| 3.   |
| E. With the benefit of hindsight what three things do you wish you had done differently either in terms of your training location or in relation to your Supervisor (i.e. what might you suggest to a new registrar to ensure they get the best out of the placement?) |
| 1.   |
| 2.   |
| 3.   |
| F. Have you identified other team members who you think would make good activity supervisors? If so, who are they and what sort of projects might they be best suited to supervise?  |
| G. For what type of training experience would this location be best suited?  Registrar requirements  Yes- comments  No- comments   |

| Registrar requiring close                    |                                   |                                  |      |
|--|-----------------------------------|----------------------------------|------|
| supervision and guidance                     |                                   |                                  |      |
|  |                                   |                                  |      |
| Registrar who likes to be                    |                                   |                                  |      |
| thrown in the deep end                       |                                   |                                  |      |
| Registrar wanting                            |                                   |                                  |      |
| community engagement                         |                                   |                                  |      |
| experience                                   |                                   |                                  |      |
| De aletara con atta a                        |                                   |                                  |      |
| Registrar wanting                            |                                   |                                  |      |
| commissioning experience                     |                                   |                                  |      |
| Registrar wanting to                         |                                   |                                  |      |
| develop information skills                   |                                   |                                  |      |
| De aletan colth interest in                  |                                   |                                  |      |
| Registrar with interest in                   |                                   |                                  |      |
| drugs/alcohol/BBV agenda                     |                                   |                                  |      |
| Registrar with interest in                   |                                   |                                  |      |
| planning/environmental                       |                                   |                                  |      |
| issues                                       |                                   |                                  |      |
| D : ( '')                                    |                                   |                                  |      |
| Registrar with academic                      |                                   |                                  |      |
| interest                                     |                                   |                                  |      |
| Registrar with interest in                   |                                   |                                  |      |
| criminal justice system                      |                                   |                                  |      |
| (prisons)                                    |                                   |                                  |      |
|  |                                   |                                  |      |
| Registrar with interest LA                   |                                   |                                  |      |
| secondment                                   |                                   |                                  |      |
| H. How well has this training                | l<br>g location helped you meet y | vour learning outcomes?          |      |
|  | .g .coanon no.pou you moor        | , can loan mig cate of most      |      |
|  |                                   |                                  |      |
|  | would be the ideal length of      | time in this training location ( | (and |
| <b>why?)</b><br>Please provide any supportin | a comments                        |                                  |      |
| ricase provide any supporting                | g comments                        |                                  |      |
|  |                                   |                                  |      |
|  |                                   |                                  |      |
|  |                                   |                                  |      |
|  |                                   |                                  |      |
|  |                                   |                                  |      |

Many thanks for completing this form

Please Return to: england.publichealth.sw@nhs.net