

General Practice Training in Out of Hours Care: Clinical and Educational Governance

This document sets out the governance arrangements relating to the training of General Practice Specialty Registrars (GP StRs) in Out of Hours (OOH) care. This guidance should be read in conjunction with the Committee of General Practice Education Directors (COGPED) Position Paper on the out of Hours Training of GP Registrars,

The guidance covers the following issues:

- Clinical standards
- Educational standards
- Clinical and clinical supervision
- Ensuring appropriate clinical experience
- Indemnity and liability

All standards listed are 'essential' unless otherwise specified. It is expected that, over time, criteria currently labelled 'desirable' will become 'essential'. Providers should therefore aspire to meet all criteria.

1. Clinical standards

The Out of Hours Provider and / or Primary Care Trust will provide the following:

- 1.1 A workload that will enable GP StRs to acquire adequate clinical experience across the full range of age and disease.
- 1.2 Written protocols on record keeping.
- 1.3 A system of induction for all new staff.
- 1.4 A system of audit of workload and practice that enables quality of care to be monitored and practice reviewed, as part of clinical governance.
- 1.5 A system of critical incident reporting, analysis and feedback.
- 1.6 A system of information that enables the members of the OOH team to keep up to date with clinical and administrative matters relevant to OOH work. This may be provided in the form of books, newsletters, journals and access to electronic information. Standard reference information must be available either in book or electronic form as appropriate. There must be easily available static facilities to access electronic information services including access to the internet.
- 1.7 An appropriate range of diagnostic and therapeutic equipment for static and mobile use.
- 1.8 An appropriate range and quantity of drugs for emergency and OOH use.
- 1.9 Adequate secretarial and support staff to run the OOH system and encompass training.

- 1.10 Effective and efficient management and administration systems.
- 1.11 Evidence of good team working.
- 1.12 An appropriate method of responding to patient comments and complaints and evidence that patients are involved in the organisation and development of the service (*desirable*).
- 1.13 Methods of monitoring prescribing as an important part of the audit process and a formulary or prescribing policy including a statement on how the formulary is reviewed and implemented (*desirable*).
- 1.14 Registers and indices that can be used for teaching, research and audit (*desirable*).
- 1.15 Continuing performance review as an established practice (e.g. appraisal system). (*desirable*).

2. Educational standards

The Out of Hours Provider and/or Primary Care Trust will provide the following:

- 2.1 Sufficient consulting rooms so that the GP StR and clinical supervisor can consult during the same session.
- 2.2 An appropriate clinical supervisor for the whole of the GP StR's shift.
- 2.3 Sufficient time within the session for teaching, feedback and completion of paperwork.
- 2.4 Appropriate transport so that the GP StR and clinical supervisor can travel together as required on home visits.
- 2.5 A reliable method of transferring records of education to the GP StR's GP trainer. Normally this will entail completion of the "Record of Out of Hours Session" sheet which is available in the GP StR portfolio
- 2.6 Opportunities for GP StRs to learn from and about management and administration systems.
- 2.7 Opportunities for GP StRs to appreciate how computerisation can contribute to clinical and organisational work in OOH (*desirable*).
- 2.8 An environment that encourages multi-professional learning.

3. Clinical and Clinical Supervisors

- 3.1 The clinical supervisor is responsible to the Deanery via the trainer for:
- Supporting the GP StR so that she/he can provide the appropriate standard of care.
 - Helping the GP StR to gain appropriate educational benefit from each encounter.
 - Providing feedback on the GP StR's performance and learning needs to the trainer.
- 3.2 Clinical supervisors must help GP StRs to take on all the responsibilities of GPs, to make diagnostic and management decisions like GPs and to undertake all the medical and medico-legal roles of GPs. This can only be done if the clinical supervisor is a GP. This should normally be the case.
- 3.3 All clinical supervisors must be able to teach although they will not necessarily require the educational expertise required of GP trainers: The following will be considered fit:
- GP trainers, GP associate directors and GP course organisers.
 - Holders of postgraduate certificates, diplomas or degrees in education.
 - Previous participants in the Deanery's clinical supervisor training.
 - Doctors with significant teaching experience (postgraduate or undergraduate) within the last five years, subject to the approval of the patch Associate GP Director.
 - For non-GP clinical supervisors:
 - Those recognised by their own profession as qualified to teach students of the level to which they will be teaching GP StRs.
 - Those who have completed a clinical supervisor course within the Deanery.
- 3.4 Where non-GPs are involved as clinical supervisors, they will only supervise 'red' sessions i.e. where the GP StR takes no clinical responsibility.
- 3.5 The non-GP clinical supervisor has the same responsibilities for clinical and educational governance within the bounds set by their profession. The GP clinical supervisor must have the time and opportunity to discuss aspects of the case pertaining to general practice after the event.
- 3.6 The OOH Provider should also have a system of review, the purpose of which is to help clinical supervisors to reflect upon and develop their educational skills (*desirable*).

4. Ensuring appropriate clinical experience

- 4.1 The OOH Provider will have an administrative system that ensures that GP StRs are allotted clinical responsibility commensurate with their experience and competence.

- 4.2 The trainer will retain ultimate responsibility for deciding on the appropriate level of supervised clinical responsibility to be undertaken by the GP StR and for communicating this information to the OOH Provider.
- 4.3 In order to ensure that appropriate clinical sessions are allocated, a three tiered system of allocation is recommended corresponding to the traffic light colours; red, amber and green. GP StRs attending red or amber sessions should be considered supernumerary; for green sessions, the OOH Provider may formerly include the GP StR in the OOH rota.

Red sessions (direct supervision)

The GP StR is supervised directly by the clinical supervisor and takes no clinical responsibility. Examples of such sessions might include induction into the workings of a GP co-operative, observation of NHS Direct, a training course in telephone triage or participating in a shift with a team of para-medics.

Amber sessions (close supervision)

The GP StR consults independently but with the supervisor close at hand e.g. in the same building.

Green sessions (remote supervision)

The GP StR may consult independently and remotely from the clinical supervisor, who is available by telephone. An example of such a session would include a session 'in the car' supervised by another GP 'at base'.

- 4.4 In order to be considered competent in Out of Hours care, GP StRs will normally be undertaking green sessions by the end of their training period.
- 4.5 It is expected that 'green' sessions will play an integral part of the rota of the OOH Provider and should aim to provide the GP StR with a safe but authentic experience of working independently Out of Hours.

5. Indemnity and liability

- 5.1 GP StRs in general practice will be subject to the normal processes of clinical governance, GMC regulations and civil law.
- 5.2 Each doctor will carry their own professional insurance and medical indemnity organizations have indicated that a GP registrar's standard membership will provide indemnity for work undertaken during OOH training.

Acknowledgement: This document was amended from London Deanery documentation and draws extensively on a "System of Educational Governance for Educating GP Registrars Out of Hours" authored by Ian Cromarty for the Department of Postgraduate General Practice Education of Eastern Deanery