



Monitoring Trainer and Training Practice Performance

1. SCOPE

1.1 Application

This operational policy applies to all NTGPE trainers¹ and training posts.

1.2 Limitations

Nil

1.3 Related documents and, or procedures

RACGP Standards on Trainers and Training Posts 2005

ACRRM Standards for Teaching Posts and Teachers in Rural and Remote Medicine

Policy for GP Trainer Selection

Policy for GP Trainer Induction and Support

Supervision Quality Parameters Policy

Policy on Complaints and Compliments

Policy on Fostering Wellbeing and Responding to Distress

1.4 Effective from

2nd June 2005

2. PURPOSE

NTGPE will have a consistent and transparent process to monitor and act when necessary on GP trainer and training practice performance.

3. PRINCIPLES

- 3.1 NTGPE has a duty of care to monitor performance of all GP trainers and training posts including compliance with College Standards, and take action if training is not appropriate.
- 3.2 All GP trainers and posts are selected by NTGPE and accredited by RACGP and/or ACRRM
- 3.3 NTGPE needs to maintain records of the qualifications, capability and experience of the trainers if it is to monitor performance appropriately, and continuously improve training.
- 3.4 NTGPE's duty of care extends to ensuring that GP trainers maintain interest, availability, and commitment to training, and willingness to continue professional development in this area.
- 3.5 NTGPE has a duty of care to respond to the needs of a GPT or GPR or community, and in particular to provide support for the provision of supported, high quality training posts.

¹ Northern Territory General Practice Education Limited, NTGPE. Trainers, previously referred to as supervisors

4. POLICY

- 4.1 NTGPE will support and monitor trainers and training posts. See Policy on GPT induction and support
- 4.2 Monitoring a post consists of regular inquiry of the GPR, GPT and training location staff regarding progress of learning and teaching within the post. This will occur through practice visits, training advisor contact with each GPR, and registrar or trainer initiated contact. NTGPE will also gather information through questionnaire at regular intervals during a GPR's training.
- 4.3 NTGPE will keep confidential records of the trainer's experience and qualifications and ongoing engagement in learning and teaching for the purpose of monitoring and continuously improving training.
- 4.4 NTGPE will provide feedback at the request of the GPR and GPT, and at regular planned intervals such as practice visits and GPT workshops. This feedback will normally be confidential, as will records on NTGPE's files
- 4.5 NTGPE will respond to difficulties experienced by GPR or GPT by ascertaining as much information as possible about the issues and context and set up dialogue to manage the issues.
- 4.6 NTGPE will remove a practice from active training, or remove a Trainer from being selected by NTGPE to participate in training, if issues related to quality of training remain unresolved
- 4.7 NTGPE may remove a GPR from the practice if the issues are unresolved and a GPR and/or a GPT's wellbeing is at risk.
- 4.8 NTGPE's Policy on Complaints and Compliments may be used in the case of a GPR or GPT wishing to take a grievance or complaint to that process

5. PROCEDURES

- 5.1 **NTGPE (PC) collects evidence on the progress of training in the following ways/processes, and any issue of concern is communicated to PC, MEC, RLO, TLO and/or ED² as shown, with suggestion of possible action.**
 - 5.1.1 The training issues checklist used by the Training Advisor (TA) and GPR at their meetings includes an inquiry about progress of the placement and associated teaching and supervision.
 - 5.1.2 The practice visits checklist includes inquiry about progress of placement and teaching and support, to be advised by GP registrar and GP trainer. Recommended practice visit procedures are available to guide when and through whom this occurs.
 - 5.1.3 End of placement feedback will be sought by the TA and coordinated to files by the PC from each GPR. Where possible, this will be via exit interviews with GPRs as well as via the interactive feedback sessions between the GPR and GPT during a term (as in 5.1.1 and 5.1.2)
 - 5.1.4 GPRLO-initiated survey is normally administered annually for anonymous feedback from GPRs on the teaching and support, and experience of the placement.
 - 5.1.5 Through GPR or GPT initiated feedback, collected during regular scheduled feedback sessions according to the in-term schedule.
 - 5.1.6 Any participant in these processes should raise any issue of concern that cannot be resolved through processes where it occurs, with personnel in 5.1, initially through the PC for advice in appropriate directions.
- 5.2 **NTGPE, through the TA or MEC, assesses information provided and gives feedback to the GPT and others relevant in the training practice.**

² Program Coordinator, PC; Medical Educator Coordinator, MEC; Executive Director, ED; Registrar Liaison Officer, RLO; Training Liaison Officer TLO

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5.3 If the Supervision Quality Parameters are not met, or information from GPR or GPT from feedback processes during training is of concern, then further information is gathered and action taken accordingly by appropriate people in 5.1, as below.

5.3.1 Information sought according to relevant College Standards, NTGPE policies—Fostering Wellbeing and Responding to Distress; Complaints and Compliments; GPT Induction and Support - and NTGPE expectations

5.3.2 GPTLO and appointed ME and/or ED determine what further information is required according to situation and possible action required.

5.3 GPTLO, nominated ME and ED and others as required, meet to discuss.

5.3.1 Issue discussed and action and responsible persons are decided with:

- Consideration of process of communication of the issues to the GPT
- Suggestion of possible solutions to the issues
- Potential (and advised) involvement of the GPR(s), GPRLO and/or GPT in meeting

to reach agreement about the issues and solutions.

5.4 Communication of the outcome of discussions to GPT and GPR as appropriate

5.4.1 Responsible ME or ED communicates outcome. This may be a face to face discussion if possible, aimed at providing feedback and establishing solution to the issues. This includes possible support that can be provided to the GPT and practice to assist in managing the issues. See also Fostering Wellbeing and Responding to Distress policy; GPT Induction and Support policy

5.4.2 In the event of inability to resolve an issue regarding training in a training practice, NTGPE may decide to cease the training relationship temporarily or indefinitely. This may involve GPR ceasing training in this training practice.

5.4.3 The Policy for Complaints and Compliments is available for any additional consideration if required.

5.5 Review of the decision can be held at any time at the discretion of the ED on the advice of the MEC.

6. AUTHORITY AND APPROVAL, VERSION

The Executive Director has authority for this operational policy, to be enacted from 2nd June 2005.
Version 1.1

D Lloyd
Executive Director
2nd June 2005