

# The Training Plan: Best Practice

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Developing people  
for health and  
healthcare

[www.hee.nhs.uk](http://www.hee.nhs.uk)



# Overview

- To provide a philosophy of approach and some practical guidance on developing a training/ work plan to deliver the programme.
- Brief outline:
  - Overview of consultant role
  - The current NHS context
  - Practical guidance and methodology

# What characterises the Consultant Clinical Scientist (CCS)

- The CCS has ultimate responsibility for the **integrity of the scientific and technical knowledge** base applicable to their specialty and its integration into practice.
- The CCS takes a **system wide view** of healthcare to ensure effective patient outcomes and that safe and effective care is designed, delivered and improved.
- The CCS plays a pivotal role in bringing to life the vision and values articulated in the NHS Constitution, which requires organisations to continually learn, adopt best practice and ensure healthcare is delivered **at the limits of science**.



- CCSs must commit to working and engaging with patients, carers and the public.
- CCSs should constantly be trying improve the quality of patient care within the context of a challenging economic environment
- CCSs need to reflect on the increased public expectations and the maxim “no decision about me without me”



**The NHS belongs to the people.**

It is there to improve our health and wellbeing, supporting us to keep mentally and physically well, to get better when we are ill and, when we cannot fully recover, to stay as well as we can to the end of our lives. It works at the limits of science – bringing the highest levels of human knowledge and skill to save lives and improve health. It touches our lives at times of basic human need, when care and compassion are what matter most

# Training Plan – Work Plan – Road Map





# Training Plan

Across 5 years you will need to:

- Acquire a substantial body of scientific and clinical knowledge at the forefront of science, technology and innovation.
- Undertake original research at doctoral level
- Become a Clinical Leader

Your training plan is key to achieving this!

## Training Plan

**Your** HSST Programme is entirely bespoke to you

- Based on your previous experiences
- The role planned for you at the end of HSST

**You and your** workplace supervisor should develop a training plan

- Balance between academic and workplace training

There should be:

Personalised and self directed learning

Regular review, negotiation and planning

# Training Plan

You need to consider

- The development needs of your department
- your personal development needs

Informed by:

- AHCS HSS Standards of Proficiency (SOPs)
- HSST curriculum

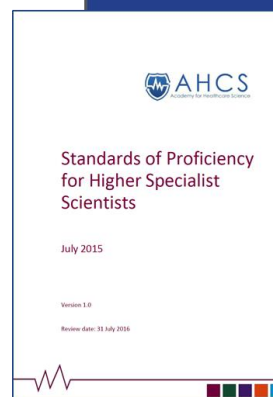
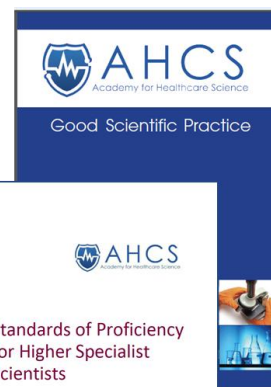
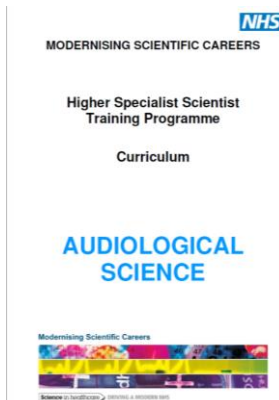
Resources

HSST handbook



# Training Plan

- Establish the training goals
  - Curriculum content
  - Current role and responsibilities
  - What can be achieved within current role?
  - What are the required outcomes?
- Develop the content
  - Plan progression
  - Design the outputs
  - Outline the structure over 5 years
- Define specific items
  - For assessment
  - Tools for recording evidence
  - Working with colleagues
  - Look for possible gaps



HSST: Genomics

Year	Module A1: Professionalism and Professional Development in the Healthcare Environment (30 credits)	Module A2: Theoretical Foundations of Leadership (20 credits)	Module B1: Genomics (30 credits)	Shared Module (B2) Genomics (30 credits)	Shared Module (B3) Genomics (30 credits)
Year 1	Module A1: Professionalism and Professional Development in the Healthcare Environment (30 credits)	Module A2: Theoretical Foundations of Leadership (20 credits)	Module B1: Genomics (30 credits)	Shared Module (B2) Genomics (30 credits)	Shared Module (B3) Genomics (30 credits)
Year 2	Module A3: Personal and Professional Development to Enhance Performance (30 credits)	Module A4: Leadership and Quality Improvement in the Clinical and Scientific Environment (20 credits)	Module A5: Research and Innovation in Health and Social Care (20 credits)	Shared Module (B4) Genomics (30 credits)	Shared Module (B5) Genomics (30 credits)
Year 3	Module B5: Infectious and Rare Diseases (20 credits)	Module B7: Teaching Learning and Assessment (20 credits)	Module C1: Doctoral Research and Innovation in Clinical Science (70 credits)		
Year 4	Module B6: Optional modules: reflection, research, cancer genetics or rare diseases (20 credits)		Module C2: Research Project (200 credits over Years 4 and 5)		
Year 5			Module C2: Research Project (200 credits over Years 4 and 5)		

# Standards of Proficiency (SOP)

## DOMAIN

### One: Professional Practice

- 1: Practice with professionalism expected of a consultant clinical scientist
- 2: Ensure professionalism in working with peers and with service users
- 3: Ensure professionalism in areas of governance and service accreditation
- 4: Direct the education and training of others

### Two: Scientific Practice

- 5: Lead scientific services
- 6: Direct scientific validation and evaluation
- 7: Assure safety in the scientific setting

### Three: Clinical Practice

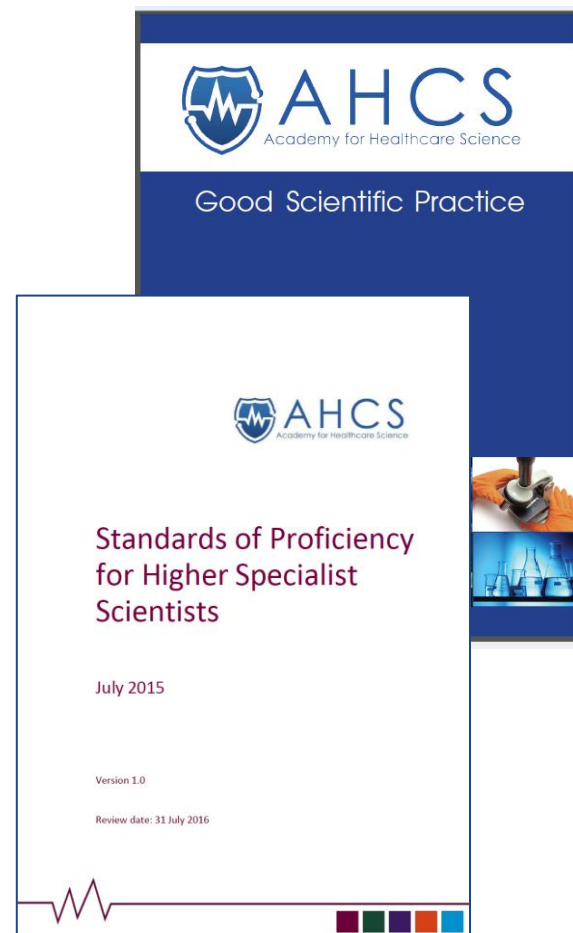
- 8: Ensure clinical relevance of scientific services provided
- 9: Deliver effective clinical services

### Four: Research, Development and Innovation

- 10: Lead research, development and innovation in clinical priority areas
- 11: Evaluate research, development and innovation outcomes to improve scientific service provision
- 12: Promote a culture of innovation
- 13: Assure research governance

### Five: Clinical Leadership

- 14: Ensure strategic leadership
- 15: Ensure clinical scientific leadership
- 16: Assure effective resource management



# Standards of Proficiency (SOP) spreadsheet

- Used in pilot Annual Review of Progression
- Good basis for mapping experience
  - Take stock
  - What have you already achieved
  - You may already be working at a high level in some domains
- Develop gap analysis
  - What can be developed further?
- Develop training plan
  - What is on your department's to do list?
  - What skills do you have that could be further developed?
  - What skills would you need to develop
  - How does this align with your previous Trust appraisal goals?

HSST Annual Review of Progress, based on the AHCS Consultant Clinical Scientist Standards of Proficiency

Name		Stage One		Stage Two		
Specialism						
Year		Year 1	Year 2	Year 3	Year 4	Year 5
	1.1	Demonstrate an understanding of Good Scientific Practice at Consultant Clinical Scientist level				
		1.2	Comply with the codes of conduct of the Health and Care Professions Council, and the Academy for Healthcare Science			
		1.3	Ensure that conduct at all times justifies the trust of patients and colleagues and maintains the public's trust in the scientific profession			
	2.1	Lead a team to work effectively with senior colleagues in cross-professional settings and across organisational boundaries				
		2.2	Lead a team to work in partnership with colleagues and other organisations in the best interest of patients, local communities and the wider population			
		2.3	Create a culture of openness with patients, their families, carers or representatives and colleagues, including if anything goes wrong, welcoming and listening to feedback and addressing concerns promptly			
		2.4	Communicate complex clinical scientific and technical information in a wide range of settings and formats, including to patients and the public			

<http://www.nshcs.hee.nhs.uk/current-hsst/nhs-higher-specialist-scientific-training/annual-review-progression>

# Standards of Proficiency (SOP) spreadsheet

## HSST Annual Review of Progress, based on the AHCS Consultant Clinical Scientist Standards of Proficiency

Name				Stage One		Stage Two		
Specialism								
Year				Year 1	Year 2	Year 3	Year 4	Year 5
	STANDARD 1 - PRACTISE WITH THE PROFESSIONALISM OF A CCS	1.1	Demonstrate an understanding of Good Scientific Practice at Consultant Clinical Scientist level					
		1.2	Comply with the codes of conduct of the Health and Care Professions Council; and the Academy for Healthcare Science					
		1.3	Ensure that conduct at all times justifies the trust of patients and colleagues and maintains the public's trust in the scientific profession					
	PROFESSIONALISM IN WORKING WITH PEERS AND WITH SERVICE USERS	2.1	Lead a team to work effectively with senior colleagues in cross-professional settings and across organisational boundaries					
		2.2	Lead a team to work in partnership with colleagues and other organisations in the best interest of patients, local communities and the wider population					
		2.3	Create a culture of openness with patients, their families, carers or representatives and colleagues, including if anything goes wrong; welcoming and listening to feedback and addressing concerns promptly					
		2.4	Communicate complex clinical scientific and technical information in a wide range of settings and formats, including to patients and the public					

# The Training Plan – Workplace vs University

- Tug of war
- Find harmony!
- Section A - Leadership and Professional Development Modules
- Section B – Specialist Scientific and Clinical Modules
- Section C – Research, Development and Innovation
- Reflection and integration

DClSci: Physical Sciences Programme Structure

Year 1	Module A1: Professionalism and Professional Development in the Healthcare Environment (30 credits)		Module A2: Theoretical Foundations of Leadership (20 credits)		Specialist Units (30 credits) MP = B1 (10), B2 (10), B3a OR B3b (10) CBE = B1 (10), B2 (10) and B3 (10)									
Year 2	Module A3: Personal and Professional Development to Enhance Performance (30 credits)			Module A4: Leadership and Quality Improvement in the Clinical and Scientific Environment (20 credits)		Module A5: Research and Innovation in Health and Social Care (20 credits)		Module B5: Contemporary Issues in Healthcare Science (20 credits) [Physiological Sciences and Physical Sciences]		Specialist Units (30) MP = B4 (10), B6 (10), B8 (10)				
	Specialist Units (40) CBE = B4 (20) and B6 (20)													
Year 3	Specialist Units MP = B9 (20)		Module B7: Teaching Learning and Assessment (20 credits)		Section C: Research, Development and Innovation (270 credits over Years 3-5)									
	CBE = B8 (10)													
Year 4	Specialist Units (30 credits) MP = B10 (30) CBE = B9 (10) and B10 (20)				Section C: Research, Development and Innovation (270 credits over Years 3-5)									
Year 5	Section C: Research, Development and Innovation (270 credits over Years 3-5)													

# The Training Plan – looking across the spectrum

- Look at past appraisals and development targets
- How do the goals fit with your annual appraisal targets?
- Have you had a 360 appraisal?
- Is this available in your department?
- Other experience?
  - Professional Bodies
  - Standards work
  - Implementation projects
  - Working groups – local, regional, national, international
- Education and training

Name		Stage One		Stage Two		
Specialism						
Year		Year 1	Year 2	Year 3	Year 4	Year 5
1. Demonstrate an understanding of Good Scientific Practice at Consultant Clinical Scientist level 1.2 Comply with the codes of conduct of the Health and Care Professions Council, and the Academy for Healthcare Science 1.3 Ensure that conduct at all times justifies the trust of patients and colleagues and maintains the public's trust in the scientific profession 2.1 Lead a team to work effectively with senior colleagues in cross-professional settings and across organisational boundaries 2.2 Lead a team to work in partnership with colleagues and other organisations in the best interest of patients, local communities and the wider population 2.3 Create a culture of openness with patients, their families, carers or representatives and colleagues, including if anything goes wrong, welcoming and listening to feedback and addressing concerns promptly 2.4 Communicate complex clinical scientific and technical information in a wide range of settings and formats, including to patients and the public	1.1					
	1.2					
	1.3					
	2.1					
	2.2					
	2.3					
	2.4					



# The Training Plan – identifying the evidence

## HSST Annual Review of Progress, based on the AHCS Standards of Proficiency for Higher Specialist Scientists

means evidence  
needs to be  
identified and  
uploaded

red text = my  
suggestions, not get  
agreed with

	Name		XXXXX						
3	Specialism		Radiotherapy Physics		Stage One		Stage Two		
4	Year		(cohort 2) year 1		Year 1	Year 2	Year 3	Year 4	Year 5
5					2015-2016	2016-2017	2017-2018	2018-2019	2019-2020
6		STANDARD 1 – PRACTISE WITH THE PROFESSIONALISM OF A CCS	1.1	Demonstrate an understanding of Good Scientific Practice at Consultant Clinical Scientist level			Supervision of implementation of free-breathing-less DBH technique? Evidenced with memo but also add commissioning report.		
7			1.2	Comply with the codes of conduct of the Health and Care Professions Council; and the Academy for Healthcare Science	Passed HCPC CPD audit in 2015.				
8			1.3	Ensure that conduct at all times justifies the trust of patients and colleagues and maintains the public's trust in the scientific profession	Participated in work up needed for 2015 CQC visit. MSF comments all indicate good working relationship with colleagues	chaired disciplinary hearing for memebri of admin staff			
9		INSURE PROFESSIONALISM IN WORKING WITH PEERS AND WITH SERVICE USERS	2.1	Lead a team to work effectively with senior colleagues in cross-professional settings and across organisational boundaries	Treatment Planning lead for paperless and paperlite working in radiotherapy. - moderated CBD June 2016.		once region known - ?audit across a group		
10			2.2	Lead a team to work in partnership with colleagues and other organisations in the best interest of patients, local communities and the wider population	Development in my role as Head of External Beam Treatment Planning. Instigating multidisciplinary lower GI QIT meetings to encourage conversation and technique development between clinicians, radiotherapy and physics - see minutes from 1st QIT meeting.		as above		
11			2.3	Create a culture of openness with patients, their families, carers or representatives and colleagues, including if anything goes wrong; welcoming and listening to feedback and addressing concerns promptly	I always try to be open to questions, queries, comments, suggestions etc from clinical, physics and radiotherapy colleagues and believe I am generally seen as a sensible but non-judgemental person who will deal queries and escalate when necessary. Hold regular planning group discussions. Treatment error calc as MPE as evidence	introduction of work allocation to try to create culture of getting work out of planning on time	Ask sups to call me if planning hasn't got a plan ready and patient has arrived - agreed with ss. Amended 'meaning of signatures' document to clarify what 'treatment approval' means if the person who checked the plan is unavailable to complete the task after the Dr has signed the plan, this was in response to concerns from staff regarding what they are signing for in these situations.		
12			2.4	Communicate complex clinical scientific and technical information in a wide range of settings and formats, including to patients and the public	Advise clinicians, radiotherapy and physics colleagues on treatment approaches and possibilities as appropriate. - Job description and complex plan as evidence .	my job - job description again	Poster for 2018 AGM on something like adaptive treatment, or explanation of invivo dosimetry for charitable funds bid, or rapid plan/autocontouring software bid. (normally July)		
13					Liaised with superintendent radiographers	virtual whiteboard (took a very long time	CI project		

## The Training Plan – mapping to SOPS and Curriculum

[illegible]

# Identifying your partners and developing networks

*“Your ticket to get involved” “need to get out more..”*

- Workplace Supervisor
- Mentor
- Head of Department
- MAHSE staff
- Academic supervisor for C1 and C2 research
- Trust Lead Healthcare Scientist
- Trust management teams
- Research Leads
- Other professional leads within your trust
- National School of Healthcare Science
- Fellow trainees and trainers

# Training Plan and OneFile

- You can record and receive feedback on your training plan with OneFile
  - Submit your training plan
  - Supervisor can access, review, comment and sign off
  - OneFile allows multiple updates and reviews of the training plan as you progress through HSSR
  - OneFile allows these to be documented

# Training Plan and OneFile

OneFile Eportfolio (Practice)

Fraser Robertson  
Trainee

[Planning] Training Planning

	Assessment Criteria	Supporting Evidence	Progress
1	Create your training plan Produce the first version of your training plan and submit it to your supervisor for agreement		■
2	Review and revise your training plan		■
3	Review and revise your training plan		■
4	Review and revise your training plan		■
5	Review and revise your training plan		■
6	Review and revise your training plan		■
7	Review and revise your training plan		■
8	Review and revise your training plan		■
9	Review and revise your training plan		■
10	Review and revise your training plan		■
11	Review and revise your training plan		■
12	Review and revise your training plan		■
13	Review and revise your training plan		■
14	Review and revise your training plan		■
15	Review and revise your training plan		■

## Top Tips from an experienced Supervisor

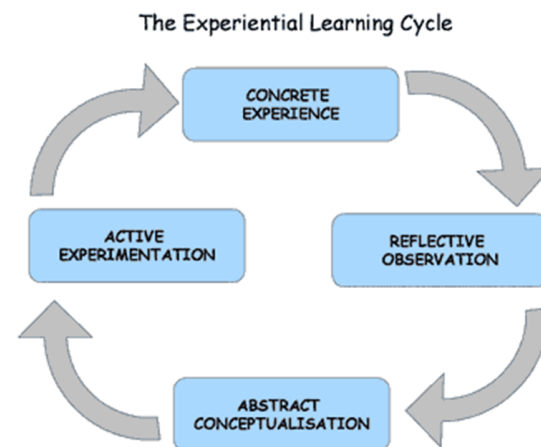
- Regular *documented* reflective review meetings
  - Set up electronic diary invites
  - Set date for next meeting
- Be innovative
- Look for reflective learning in current role
- Look for development opportunities in current role
- Look for opportunities outside current role
- Multisource Feedback (MSF)
  - Reflection on outcomes and objectives set



# Training Plan – Work Plan – Road Map



- Collaborative
- Reflective
- Integrated
- Dynamic
- Flexible
- Regularly reviewed



# Never forgetting.....

