

# FRAMEWORK FOR ASSESSING SPECIALTY AND ASSOCIATE SPECIALIST (SAS) DOCTORS TO ACT AS RESPONSIBLE CLINICIANS AND/OR MEDICAL DIRECTORS IN SPECIALIST PALLIATIVE CARE

Framework to support the process for agreeing the senior Responsible Clinician and/or Medical Director for the specialist palliative care service when they are not a Palliative Medicine Consultant

North West Coast Cheshire & Merseyside Palliative & End of Life Care Clinical Network

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The framework and process for assessing Specialty and Associate Specialist (SAS) doctors to act as Responsible Clinicians and/or Medical Directors when they are not a Consultant in Palliative Medicine is voluntary; however, it has been developed in collaboration with SAS Drs, Hospice Medical Directors and Consultants in Palliative Medicine across Cheshire & Merseyside with the intention to support both employing organisations and individual doctors follow best practice.

The framework should be read alongside the C&M Service Descriptor for specialist palliative care (SPC) services. The purpose of this framework is to support the process for agreeing the senior Responsible Clinician and/or Medical Director for the specialist palliative care service when they are not a Consultant; this is in line with national guidance and the C&M SPC service descriptor.

### **Background**

In 2020 the Cheshire and Merseyside Palliative and End of Life Care Network updated the Cheshire & Merseyside Service Descriptor for Specialist Palliative Care Services to support the commissioning and provision of Specialist Palliative Care. The Service Descriptor was ratified through the Palliative & End of Life Care Delivery & Oversight Group for Cheshire & Merseyside on 30/10/2020.

The Service Descriptor advises, in line with national guidance, that SPC services should be led by Consultants in Palliative Medicine and, where that currently isn't the case, when vacancies occur, a Consultant in Palliative Medicine should be appointed.

The Service Descriptor acknowledges that some services are currently led by doctors who are Specialty or Associate Specialist (SAS) grade. This is considered acceptable where the doctor acting as *Responsible Clinician or Medical Director* in these circumstances has the 'skills, knowledge and attributes to operate at this level'. The Service Descriptor recommends that the employing organisation seek agreement and support from Consultants and Senior Clinicians in specialist palliative care working within the locality to the proposal for the SAS grade doctor to fulfill this role and the proposal be endorsed by two Consultants in Palliative Medicine or Associate Specialist external to the organisation. The process for endorsement is limited to a review of evidence as submitted for scrutiny. Responsibility with regard to the suitability of a clinician for a particular role remains with the employing organisation.

### Framework for assessment

This framework aims to support and guide:

- Doctors who are or wish to become the Responsible Clinician or Medical Director for their organisation (Form HRC1)
- Employing Organisations (Form HRC2)
- Consultant/Associate Specialist in Palliative Medicine conducting an external review of evidence (Form HRC3)

There are a number of publications that offer guidance in appointing and supporting SAS doctors. It is suggested that clinicians and employing organisations are familiar with this guidance; these are listed in Appendix 1.

The principles which underpin this framework are those of <u>The General Medical Council Good Medical Practice quide</u>.

Any doctor must evidence through the appraisal and revalidation process that they are fit to practice in their role. They must provide evidence against the 4 Domains of good medical practice:

- Domain 1: Knowledge, skills and performance
- Domain 2: Safety and quality
- Domain 3: Communication, partnership and teamwork
- Domain 4: Maintaining Trust



### **Definitions and best practice guidance**

Guidance for taking responsibility: Accountable Clinicians and Informed Patients Academy of Medical Royal Colleges

Guidance for doctors acting as Responsible consultants or clinicians GMC

**Responsible Clinician** is an individual named consultant/clinician who has responsibility for the overall management, continuity and delivery of all care to a patient throughout their stay.

'Employers must ensure that the role of Responsible consultant/clinician is recognised and legitimized within the organisation. If the Responsible consultant/clinician is expected to have overall responsibility for a patient's care, including ensuring that any patient/family/carer concerns about care are addressed, they have the recognised authority within the organisation to ensure that those issues are resolved promptly and appropriately.

They must also recognise that, on occasions, effectively fulfilling the role of Responsible consultant/clinician will place real additional duties on clinicians which they need time to fulfill, this will need to be recognised in the planning and organisation of the individual's workload and activity. (Ref: Guidance for taking responsibility: Accountable Clinicians and Informed Patients Academy of Medical Royal Colleges)

### **Medical Director**

The Medical Director has a senior leadership role within an organisation. They would be expected to take individual or joint responsibility for clinical governance, quality improvement and audit. They lead on the supervision, support and development of medical staff.

Where the Medical Director fulfills the role in a hospice, they advocate for clinical care at Board level and are closely involved in developing the strategic direction of the hospice. The hospice Medical Director will be actively engaged with other key stakeholders locally and regionally in matters relating to palliative and end of life care.

The Medical Director role has specific responsibilities which are distinct from that of Responsible Clinician An organisation could have doctors in Medical Director and Responsible Clinician roles, but all hospices should have a suitable clinician who is the Medical Director and has this level of responsibility within the organisation.

### **Process for Assessment**

The Cheshire & Merseyside Palliative & End of Life Care Clinical Network will coordinate the process for assessment.

Forms HRC1 and HRC2 should be submitted to The Cheshire and Merseyside Palliative and End of Life Care Network Team: <a href="mailto:K.Collins5@nhs.net">K.Collins5@nhs.net</a>; <a href="mailto:Kathryn.davies16@nhs.net">Kathryn.davies16@nhs.net</a>; <a href="mailto:Lucy.Lavelle2@nhs.net">Lucy.Lavelle2@nhs.net</a>. The team will identify 2 external assessors to review the evidence and complete Form HRC3. An expected date by which the review will be completed, and notification of outcome will be agreed with the organisation when the submission is received.

### **Guidance for submission of evidence**

# <u>Clinicians providing evidence of the appropriate skills, knowledge and attributes for the role of Responsible Clinician or Medical Director</u>



### Areas of Evidence

The following are the essential requirements in order to provide assurance of the skills, knowledge and attributes for a clinician taking responsibility for patients in **specialist** palliative care units.

- It is an absolute requirement for a minimum of 4 years whole time experience (achieved over a longer period if working part time) as a Specialty doctor in palliative medicine. It is likely that a SAS doctor would require longer to achieve the experience required as outlined in The Training and Development Framework. For clinicians wishing to act as Medical Director a minimum of 6 whole time equivalent years of experience is required.
- Evidence with regard to education and training should include evaluation from learners and peer observation.
- Evidence of satisfactory appraisal and revalidation relating to all clinical practice in the UK
- Patient and colleague feedback with reflection.
- Evidence with examples of audit and quality improvement projects in palliative care.
- Evidence of qualifications to be validated by employer.
- A current job plan (developed with the support of a Consultant in Palliative Medicine/Associate Specialist and a CEO or equivalent within the organisation) setting out the duties, responsibilities, accountabilities and objectives of the SAS doctor and the support and resources provided by the employer.

### Submission Form for role of Responsible Clinician and/or Medical Director HRC1 (Appendix 2)

Evidence should be listed with date; the employer is required to confirm that this evidence has been validated. The job plan should be submitted in full.

### **Employing Organisation**

It is the responsibility of an organisation to ensure that the doctors they employ have the skills, knowledge and attributes to operate within their role. SAS doctors can be capable of working autonomously and act as Responsible Clinicians or Medical Directors in hospices. This autonomous working must be on the basis of an individual's competence.

If an organisation wishes to employ a SAS doctor in a senior position the Cheshire & Merseyside Palliative and End of Life Care Network consider it good practice for the organisation to assure itself that the clinician is competent as judged against currently available guidance.

It should also ensure that the clinician has the support in place to carry out their role and that they have the time within an agreed job plan to carry out clinical governance and management commitments.

The process of submitting evidence for an external review is intended to substantiate the organisation's own assessment and assure external stakeholders e.g., commissioners. It is not a formal assessment of competence.

As part of the external review process the employing organisation will review the clinician's submission and respond to the statements. This should be completed by the most senior person in the organisation e.g., CEO or Clinical Director and have been signed off at Board level.

### **Employing Organisation confirmation form** *HRC2* (Appendix 3)

### Consultant/Associate Specialist in Palliative Medicine conducting an external review of evidence

Guidance for Consultants/Associate Specialists and Senior Specialty grade doctors in Palliative Medicine in reviewing the submitted evidence



### Checklist HRC3 (Appendix 4)

All doctors who are named on the specialist register for the specialty of palliative medicine have been required to submit a portfolio of evidence that has been subjected to scrutiny. This process is assurance that the person has the skills, knowledge and attributes to carry out the role and work autonomously in clinical practice.

Many SAS doctors have the experience, specialist knowledge and skills to act in senior roles and practice autonomously and organisations can ask them to act in senior roles. The responsibility for ensuring competence is with the employer.

The framework for assessing SAS doctors to operate in the role of senior Responsible Clinician and or Medical Director is to support the SAS doctor in accepting and undertaking the role(s).

The assessing doctor (as above) in Palliative Medicine will receive:

- The SAS doctor candidate submission form for role of Senior Responsible Clinician and/or Medical Director (HRC1)
- Employing organisation confirmation form (HRC2)

Doctors in Palliative Medicine asked to conduct an external review in line with the Cheshire & Merseyside process for assessment are requested to consider the evidence submitted

- 1. against best practice guidelines for SAS doctors;
- 2. assess the level of support that is in place for the doctor from their organisation.

The review is not an assessment of professional competence. As an external reviewer you are asked to complete the checklist and ensure that the submission from the employer is complete. The checklist allows for any gaps in experience to be identified.



### Appendix 1

Publications that offer guidance in appointing and supporting SAS doctors. It is suggested that clinicians and employing organisations are familiar with this guidance.

- 1. Charter for SAS Doctors <a href="https://www.bma.org.uk/media/1057/bma-sas-charter-for-england-dec-2014.pdf">https://www.bma.org.uk/media/1057/bma-sas-charter-for-england-dec-2014.pdf</a>
- 2. BMA UK guide to job planning for specialty doctors and associate specialists <a href="https://www.bma.org.uk/media/1293/bma-nhs-employers-joint-job-planning-guidance-for-sas-doctors.pdf">https://www.bma.org.uk/media/1293/bma-nhs-employers-joint-job-planning-guidance-for-sas-doctors.pdf</a>
- 3. BMA Guidance template for the development of autonomous practice for SAS Doctors and Dentists <a href="https://www.bma.org.uk/media/1640/bma-guide-to-autonomous-practice-sas-updated-2015.pdf">https://www.bma.org.uk/media/1640/bma-guide-to-autonomous-practice-sas-updated-2015.pdf</a>



Appendix 2 (HRC1)

**Submission Form for role of Hospice Responsible Clinician and/or Medical Director** 

Please state which role you are submitting evidence for:			
Hospice Responsible Clinician			
Medical Director			

Important: Evidence below should be listed with dates; the employer is required to confirm that this evidence has been validated (form HRC2).

	Experience	Essential Evidence: Hospice Responsible Clinician role only
1.	Specialty doctor experience: minimum 4 years (include job plan or prospective job plan; to be submitted in full)	
2.	Clinical	
3.	Audit and quality improvement	
4.	Management	
5.	Teaching, Training and supervision	
6.	Patient and colleague feedback	
7.	Appraisal and revalidation	
8.	Research	
9.	Qualifications and courses	

Complete all of the above plus:			
	Experience	Essential Evidence: Medical Director Role	
1.	Specialty doctor experience minimum 6 years full time experience in SPC (include job plan or prospective job plan; to be submitted in full)		
2.	Evidence of engagement in issues relating to SPC at regional or National level e.g. member of a Network group		
3.	Experience in SPC outside of the employing organisation		
4.	Experience of acting in a senior leadership role		
5.	Experience of clinical governance e.g. as a Chair of a clinical governance group		



### Appendix 3 (HRC2)

## **Employing Organisation Confirmation Form**

Name:	
Role:	
Email address:	
Professional address including postcode:	
Contact number:	
Date validation confirmed:	

Evidence submitted:	Yes/No	Yes/No
	Application as Hospice Responsible Clinician	*Application as Medical Director
Qualifications and courses attended have been validated as true and correct. In the case of qualifications the employer must have seen original documents.		
The doctor has 4 years whole time experience as a specialty grade doctor in palliative medicine		
*The doctor has minimum 6 years whole time experience in SPC as a Specialty doctor	n/a	
The evidence of experience has been reviewed and is true and correct		
The job plan submitted has been undertaken with a member of the senior leadership team and is supported by the Board of Trustees		
The appraisal and revalidation record are true and correct		
Patient and colleague feedback have been conducted and the organisation has reviewed this and agreed an action plan where appropriate		



There are no current issues relating to clinical practice and any		
previous issues (if they occurred) have been addressed to the satisfaction of the organisation		
Satisfaction of the organisation		
The clinician is registered with the GMC and is indemnified		
appropriate to role		
The organisation is committed to supporting SAS doctors in its		
employment and has engaged with the objectives within the BMA		
Charter for staff and associate specialist and specialty doctors		
External clinical supervision and mentoring is available to the clinician		
*Evidence of engagement in issues relating to SPC at regional or	n/a	
National level		
*The doctor has experience of SPC outside of the employing	n/a	
organisation		
*The doctor has experience of acting in a senior leadership role	n/a	
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*The doctor has experience of clinical governance (e.g. as chair of	n/a	
clinical governance group)		
Based on our assessment of the submitted evidence we consider	that the doct	or
(Insert name of Dr here)		
has the competencies, skills, knowledge and attributes to	act as	
*Responsible Clinician/*Medical Director (*delete as appropri	ate) for	
(Insert name of Hospice here)		
Signed by:		
Signature:		
Role:		
Date:		
This submission has been approved by the Board of Trustees		
Date:		



### Appendix 4 (HRC3)

# Reviewer Checklist against Submission Form for role of Responsible Clinician and/or \*Medical Director

Evidence – employer submission	Please indicate yes or no. Additional comments may be added.
Has the employing organisation completed the submission and are all requirements met?	
Has the employing organisation submission been signed off by the CEO/Director and the Chair of Trustees?	
Evidence - Clinician submission	
Has evidence been submitted in all areas of practice as expected by Year 4 of The SAS Development Framework?	
Is there evidence of?	
Advanced Communication Skills Training	
Opening the Spiritual Gate course or equivalent	
Leading clinical audit within the organisation	
Attendance at and engagement with The Pallaborative regional audit programme	
Teaching related to Specialist Palliative Care at undergraduate and postgraduate level	
An accredited Teaching Course	
Regular experience of Leading MDT	
Acting as a Clinical or Educational Supervisor	
Accredited training as Clinical or Educational Supervisor	
At least one quality improvement project	
Leadership experience supported by an accredited leadership course	
*For applications for Medical Director role (all of the	above plus):
Is there evidence of 6 years of SPC experience at Specialty Grade?	
Evidence of engagement in issues relating to SPC at regional or National level	
SPC experience outside the employing organisation	
Experience of acting in senior leadership role	
Experience of clinical governance	

Do you consider that all requirements have been successfully met? Yes/No

If not successful might be met?	ly met use this box to	make recommendatio	ns to the Clinician and	d Employing Organisati	on regarding how these