



Training & Development Framework

for

SAS Doctors

Staff Grade, Associate Specialist & Specialty (SAS) and Specialist Doctors

working in

Palliative Medicine
Generic version

Revised 2014, 2018, 2020, 2021 and 2023

Endorsed by the Association of Palliative Medicine SAS Committee, the Executive Board and the Specialty Advisory Committee for Palliative Medicine in June 2021

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First written in 2012 and all subsequent revisions undertaken by Dr Helen Bonwick

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2. BACKGROUND

Specialty doctors, staff grade and associate specialist medical staff (SAS Doctors) are an important part of the workforce within specialist palliative care.

The proportion of SAS and Locally Employed (LE) doctors working in all specialties is 20 - 25% from the GMC survey published in January 2020. ¹ Within Specialist Palliative Care SAS doctors are mainly working within the hospice sector. It is difficult to know exact numbers who work within the speciality. For the purposes of this development process, the SAS doctors will be defined as working for more than two sessions in Specialist Palliative Care who have a speciality doctor, staff grade or associate specialist doctor contract.

The educational development of this group of doctors is essential to maintain competence to facilitate for the delivery of care to the highest standard. There is also a need to ensure that the workforce is valued to improve retention within the speciality.

There is evidence from around the country that education plays an important part in the recruiting and retention of SAS doctors.² There are innovative initiatives which allow this group of doctors to develop the skills, knowledge and competencies to enhance their patient care, role in the education of others and have a leadership role.²

One of the challenges is that the SAS doctors have different job plans and experience, so creating a development framework needs to account for this. The rationale for being employed as an SAS doctor varies widely which may then influence their career progression. The specialist doctor role was developed in 2021 to allow for recognition of experience and this development framework will support the SAS doctor to consider this as career progression

There have been national initiatives to try and improve the support and development of SAS doctors across the country in all specialities. These include the SAS Charter³, Maximising the Potential⁴, SAS Charter Toolkit⁵ for implementation and the SAS Charter monitoring tool.⁶

The Development Framework process was commenced in 2003 and was part of a specialist palliative care leadership initiative within in the Merseyside and Cheshire region and an action learning set which followed this. The Development Framework has been presented to the Greater Manchester and Eastern Cheshire Strategic Clinical Network and was endorsed in May 2019.⁷

This document is a generic version of the original development guide which was developed in Cheshire and Merseyside. This will give you the option to use as a resource and localise to your local area or region. The Cheshire and Merseyside version of the guide is available on the APM website.

3. DEVELOPMENT PROGRAMME (Years 1-4 in employment)

This suggested educational and development framework has utilised some elements of the specialty registrars training programme from Merseyside and Cheshire. The modifications made have taken into account the varied SAS roles. The development framework should be undertaken on a pro rata basis for each doctor. It is a suggested framework and development may be supported in a different order, if this is more appropriate to the individual doctor.

It is appreciated that the role of each SAS doctor is different, and their job description and plans will vary as will their level of clinical experience. This document should be used as guidance by the SAS doctor and their educational supervisor and adapted according to their aspirations, previous experiences and employing organisational objectives. It is expected that all SAS doctors will have an appropriately trained educational supervisor allocated to them as soon as possible after commencing their employment. Some SAS doctors may choose to concentrate on certain elements of the programme rather than others.

A list of appropriate courses is listed in Appendix 1. The list is not exhaustive and contains suggestions only. There is a North West Training and Development Framework which has more examples of courses and has been in use to support SAS doctors for the last 10 years within that region. These courses will be reviewed and updated on a yearly.

This development framework should assist a SAS doctor who may wish to work towards making a Certificate of Eligibility for Specialist Registration (CESR) application. It is not the only part of the process and anyone in this grade who is considering making an application are strongly advised to access advice from their regional Training Programme Director, a senior doctor who has experience of supporting a doctor making a submission or a SAS doctor who has had a successful application.

If the SAS doctor is planning to make a CESR application they may wish to use the e portfolio to log information, this may be accessed by paying a yearly fee to the JRCPTB.⁸

This development framework may be used as part of the formal appraisal and revalidation process. As such this development process should be used alongside the Appraisal Metrics for Consultants and SAS doctors in Specialist Palliative Care.⁹

It would be ideal if the SAS doctor also has the opportunity to work in other clinical settings, either by working in different sectors or settings as part of a rotation. This would allow them to experience care in other units or health sectors. This should not be exclusive to those who wished to submit a CESR application but should be accessible to all SAS doctors who feel this would aid their development. Providing this could be accommodated within the local organisations.

YEAR ONE

CLINICAL

- Manage inpatients within the hospice setting with senior supervision (depending upon clinical experience)
- 2. Review of day therapy patients with senior supervision (depending upon clinical experience)
- 3. Attend and participate in inpatient MDT meetings

EDUCATION

- 1. Undertake a 2-day Advanced Communication Skills (formerly CONNECTED course)
- 2. Attend regional Specialist Palliative Care monthly teaching as often as possible (this also serves to gain the evidence for parts of the curriculum) within your region. Request attendance if SAS doctors do not already attend. Use the Northwest as an example.
- 3. Attend a Masters module in specialist palliative care
- 4. Undertake a spiritual care course such as Opening the Spiritual Gate; either a face to face or e-learning course¹⁰

QUALITY IMPROVEMENT AND CLINICAL AUDIT

- 1. Take part in internal audit within working environment
- 2. To attend a course covering audit and service improvement

SUPERVISION

- 1. Have regular meetings with an educational supervisor (suggested at least 4 times a year)
- 2. Continue to use an e-portfolio (using the curriculum as a guide) if appropriate
- 3. Gain appropriately supervised clinical skills and knowledge, may include case-based discussions and reflection on learning

YEAR TWO

CLINICAL

- 1. Continue to gain clinical experience in managing patients (for example day therapy, outpatients, domiciliary visits) alongside inpatient care
- 2. Commence supervised outpatient clinics
- 3. Support other trainees as appropriate

EDUCATION

- 1. Attend an Advanced Symptom Control or equivalent course^{11,12}
- 2. Attend a Training the Teachers course or equivalent in year two four. Such as a PGCert or and RCP educators course, dependent upon the amount of teaching undertaken
- 3. Attend Advance Care Planning Study day
- 4. Attend a relevant research course¹³
- 5. Complete an equality and diversity course
- 6. Consider commencing Diploma or Masters in Palliative Medicine

QUALITY IMPROVEMENT AND AUDIT

- 1. Undertake an audit or quality improvement project in own working environment
- 2. Participate in quality improvement and audit processes.

TEACHING

- 1. Participate in teaching of medical students if appropriate to your locality
- 2. Participate in teaching of other health care professionals

YEAR THREE

CLINICAL

- 1. As previous years
- To work at a level with decreasing amounts of supervision depending upon level of experience
- 3. Support, supervise and mentor trainees or less experienced SAS doctors
- 4. Work in all health care settings if possible, community, hospice and hospital sector

EDUCATION

1. Attend Teaching course if not already attended one

QUALITY IMPROVEMENT AND AUDIT

- 1. Continue to participate in quality improvement projects and audit processes to be an active member in writing publications and posters
- 2. Participate in internal audits within the working environment

TEACHING

- 1. Provide teaching and mentorship to medical students as appropriate
- 2. Participate in appropriate teaching within the hospice unit or other sectors

MANAGEMENT

- 1. Be involved in service innovation projects within the workplace
- 2. Be involved in interviewing other SAS doctors if appropriate

YEAR FOUR

CLINICAL

- 1. As previous years
- 2. Work more autonomously and lead some clinical meetings (for example MDT meetings)

EDUCATION

- Attend a clinical and/or educational supervision course Royal college of Physicians (RCP)
 or local equivalent
- 2. Attend leadership/management course¹⁴
- 3. Attend a national/international conference¹⁵

QUALITY IMPROVEMENT AND AUDIT

- 1. As previous years
- 2. Write a poster for a conference on an audit conducted or service improvement project undertaken

TEACHING

- 1. Continue to participate in teaching medical students
- 2. Continue to participate in teaching other health care professionals as appropriate

MANAGEMENT

- 1. To continue to attend appropriate management meetings
- 2. To participate or lead innovation or service improvement projects

RESEARCH

1. Participate in research if possible

4. OTHER CONSIDERATIONS

Sources of advice and support

The SAS doctor should be supported by their educational supervisor but also may wish to seek advice from other SAS doctors. The Training Programme Director for Palliative Medicine locally is also available for advice and support.

The SAS doctor should also be supported by the SAS lead within their hospital Trust or if they work predominately within the hospice or community it would be worth contacting the regional Associate Dean for SAS doctors within your region to ascertain what support and courses are available.

If the SAS doctor is a member of the Association of Palliative Medicine, they may also use the APM SAS and Hospice Doctors committee for advice (www.apmonline.org).

Funding

Each SAS doctor should have a study leave budget from their employer to support their continued professional development. The amount varies between employers and should be discussed with their educational supervisor and lead clinician

If additional funding is required there is access to Health Education England SAS Development Funding. The process for applications varies across the country. The Associate Dean for SAS doctors within your region will be able to assist with this. This should be available to those doctors who are employed under national terms and conditions for SAS doctors and the new specialist role, even though the doctor may not have an NHS contract. You may need to contact your regional SAS Sub Dean, to check on the process within your geographical area. Contact details should be accessible via the Health Education England website.

SAS doctors who work in a hospice may be able to apply to Hospice UK for a professional development grant (www.hospiceuk.org/what-we-offer/grants).

Courses and learning

During the four years the SAS doctor may consider studying for a Postgraduate Certificate or Masters in subjects such as Palliative and End of Life Care, teaching and Learning or ethics. See appendix 1

5. FUTURE ASPIRATIONS

The Development framework will be used as a template to empower all SAS doctors working within palliative medicine across all of the countries represented within the Association of Palliative Medicine, to work to their abilities.

Initial discussions are taking place within the Cheshire and Merseyside region regarding rotational posts to increase clinical experience in different settings. The aspiration would be that this becomes a formal process which all areas will agree to support and participate in. This would promote cross sector and collaborative working and would ultimately, improve knowledge and clinical skills leading to the delivery of higher quality care to the patients.

This may something to consider within your region.

The Development framework would be used as the basis for career progression within the SAS and newly created Specialist Doctor role.¹⁶

6. REFERENCES

- ¹Survey of specialty and associate specialist and locally employed doctors GMC (gmc-uk.org)
- ²SAS Development and Retention Programme. Toolkit for implementation 2018 www.hee.nhs.uk
- ³SAS Charter Joint Publication with NHS England, Academy of Royal Medical Colleges and the British Medical Association 2014 www.bma.org.uk
- ⁴Maximising the Potential essential measures to support SAS doctors January 2019 www.hee.nhs.uk
- ⁵SAS Charter Toolkit for implementation
- ⁶SAS Charter monitoring tool
- ⁷Greater Manchester and Eastern Cheshire Strategic Clinical Network Training and Development Framework for SAS Doctors working in Specialist Palliative Care
- ⁸JRCPTB e-portfolio <u>www.jrcptb.org.uk/eportfolio-information</u>
- ⁹Appraisal Metrics for Consultants and SSAS doctors in Specialist Palliative Care www.apmonline.org
- ¹⁰Opening the Spiritual Gate www.openingthespiritualgate.net
- ¹¹Oxford Advance Symptom Control Course sobelleducation.org.uk/courses
- ¹²Guildford Symptom Control course www.apmonline.org/documents
- ¹³https://www.nihr.ac.uk/health-and-care-professionals/learning-and-support/good-clinical-practice.htm
- ¹⁴Leadership & Management Courses <u>www.rcplondon.ac.uk / www.nwpgmd.nhs.uk / www.edgehill.ac.uk / www.keele.ac.uk / leadership course for SAS doctors run by Marie Curie Edinburgh Hospice</u>
- 15www.apmonline.org / www.appm.org.uk / www.eapcnet.eu
- ¹⁶https://www.nhsemployers.org/articles/new-specialist-grade-sas-2021

7. APPENDIX 1

The list is not exhaustive but suggests some courses which may be useful, there may be other courses which are just as applicable for development

TOPIC	COURSE
Clinical	Local Specialist Trainee teaching
	Advanced Communication Skills Training (e.g. Maguire Unit, Christie, Palliative Care Institute, Liverpool, Terence Burgess Education Centre and Cheshire End of Life Partnership). Courses will be run locally
	Opening the Spiritual Gate or other course relating to spiritual care.
	Oxford or Guildford Advanced Pain and Symptom Management Courses
	Strathcarron Hospice Annual Conference
	APM Supportive and Palliative Care Conference/ Palliative Care Congress
	Hospice UK Conference
	APM Ethics Study Day – twice a year
	APM SAS Study Days - yearly APM courses are available to non-members
	Essential Skills for conducting an audit
Leadership and Management	RCP Individual as Leader/ Organisational Leadership courses
	Keele Advanced Leadership Course for SAS Doctors
	St Christopher's Hospice Management Course for StRs and SAS Doctors in Palliative Medicine
	SAS Doctors Leadership Course Marie Curie Edinburgh (yearly)

Specialty Certificate Examination Course	St Gemma's Hospice SCE Revision Course (annually September)
Research Methods courses	NIHR run free courses which are accredited by them which are either online or face to face
Teaching	RCP Educational Supervisor workshops RCP Physicians as Educators courses Edge Hill Postgraduate Certificate in Workplace-Based Medical Education Liverpool Palliative Care Institute Training for Teachers in Palliative Care Foundation and Masterclass Course (yearly October)
Other Diplomas and Masters degrees	Diploma and MSc in Palliative Medicine, Cardiff University Diploma and MSc in Palliative Care, Newcastle University Diploma and MSc in Palliative Care, St Christopher's Hospice/ Kings College, London
E Learning e-ELCA (end of life care for all)	160 sessions grouped into nine modules which are Advance Care Planning, Assessment, Communication Skills, Symptom Management, Social Care, Spirituality, Integrating learning, Bereavement and Specialist content BMJ Learning and doctors
Local SAS courses	List of various courses available via Health Education England in your locality
CESR courses and information	General Medical Council Royal College of Physicians

Other organisations which offer training and teaching locally in the Northwest

Queenscourt Hospice <u>www.queenscourt.org.uk</u> End of Life Partnership <u>info@eolp.org.uk</u>

Palliative Care Institute www.pcil.org.uk

St Catherine's Hospice https://www.stcatherines.co.uk/resources-training/

8. FURTHER RESOURCES

1. SAS development and retention programme: Toolkit for implementation. Health Education England (March 2018).

https://www.hee.nhs.uk/sites/default/files/documents/SAS%20retention%20toolkit%20WEB.pdf

2. The Consensus Statement on the Role of the Doctor. Chief Medical Officers of England, Scotland, Wales and Northern Ireland, Academy of Medical Royal Colleges, Association of UK University Hospitals, British Medical Association, Conference of Postgraduate Medical Deans, General Medical Council, King's Fund, Medical Schools Council, NHS Employers and NHS Health Education England (2014).

https://www.medschools.ac.uk/media/1922/role-of-the-doctor-consensus-statement.pdf

- 3. Guidance on safe medical staffing. Royal College of Physicians (July 2018). https://www.rcplondon.ac.uk/projects/outputs/safe-medical-staffing
- 4. Appraisal metrics for Consultants and SSAS doctors in Specialist Palliative Care. Association for Palliative Medicine (March 2017). https://apmonline.org/wp-content/uploads/2017/08/Appraisal-Metrics-for-Consultants-and-SSAS-Doctors-in-Specialist-Palliative-Care-March-2017.pdf
- 5. Guidance template for the development of autonomous practice for SAS doctors and dentists. British Medical Association (2015).
- **6.** https://www.bma.org.uk/advice/employment/contracts/sas-contracts/autonomy-for-sas-grade-doctors/introduction
- 7. Maximising the Potential: Essential Measures to support SAS Doctors. Health Education England and NHS Improvement (February 2019). https://www.hee.nhs.uk/sites/default/files/documents/SAS_Report_Web.pdf
- 8. A charter for staff and associate specialist and specialty doctors. British Medical Association (2014).

https://www.bma.org.uk/advice/employment/contracts/sas-contracts/sas-charters

9. SAS Doctor Development: Summary of Resources and Further Work. British Medical Association (February 2017)

https://www.bma.org.uk/advice/career/progress-your-career/sas-doctor-development

- 10. SAS Charter Evaluation and Monitoring resources. NHS Employers (November 2018) https://www.nhsemployers.org/news/2018/11/sas-charter-evaluation-and-monitoring
- 11. http://www.nihr.ac.uk

9. USEFUL CONTACT DETAILS

- * Association for Palliative Medicine SAS Committee www.apmonline.org
- * Health Education England https://www.hee.nhs.uk
- * Health Education England North West SAS Team sasdoctors. NW@hee.nhs.uk
- * Pallaborative North West (formerly Cheshire and Merseyside Palliative and End of Life Care Network Audit Group) https://pallaborative.org.uk/
- * Training Programme Director for Palliative Medicine
 https://www.nwpgmd.nhs.uk/Specialty_Schools/Medicine/Palliative_Medicine/Mersey

Weblinks correct as of December 2022