**Mid Term Assessment- Guide**

**Aims:**

The Mid Term Assesment, or External Training Review as it was previously known is a system of structured review, mainly of the process of training, with external input from within the VTS. The overall aims of the process are as below:

1. A chance for structured review by Trainer/ee

* To look at the training relationships (primarily trainer/ee).
* Check effective use of the training year.
* A chance to look at attitudinal issues.
* Practical advice/reassurance for new trainers

2. To obtain the view of an external trainer

* Provision of confidential time/sounding board (for Trainer and GPStR) with external person
* Safety net to ensure equity for GPStR relative to others.
* Benchmarking/confirmation of expected progress.
* External Moderation of WPBA marking
* Early warning system for potential failure

3. To facilitate trainer development (both for visitor and visitee).

**Timetable:**

The MTA should take place in January for August starters, and 6 months into training for other starts. However, preparation should begin well in advance of the review date.

October: Programme directors e-mail list of those to visit/be visited

November: Visiting Trainer contacts visitees and arranges date

Early January: Visitees to e-mail pre-visit Reports to visiting trainer, having first shared them with each other.

Mid January: Visiting trainer to make contact by phone with both trainer and GPStR to be visited. Check main aims/hopes for visit and any particular issues not obvious from the written Report.

End Jan: Visit.

**Framework for visit:**

Prior to the visit

* Pre-Visit reports from trainer and registrar should have been seen by Visiting Trainer in advance of visit
* Visiting Trainer and Visited Trainer should routinely speak on phone in advance of visit whether there are concerns or not.

During visit

* Confidential time for Visitor and Trainer
* Confidential time for Visitor and GPStR
* Learning Activities Review Visitor and GPStR (including review of ePortfolio and recent nodal review + all practice based activities) -
* Visitor, Trainer and GPStR review of registrar consultation video\* /tutorial video\*/ COT benchmarking based on needs of visitees
* Shared Summary / Feedback / Future Plans

After visit

* -Report of Visit from Visiting Trainer emailed to both Visited Trainer and GPStR
* Visitees add their comments and return to Visiting Trainer and VTS
* Visitees complete feedback form for Visiting Trainer and return to them for their own records / appraisal folder

\* one of these may be omitted depending on time constraints and the educational needs of the trainee and the trainer

**Suggested areas to cover within the MTA:**

**Learning activities Review (trainee and trainer both present)**

* Is e-portfolio up to expectation?
* Check Out of Hours sessions and e-Portfolio log - One per month
* CPR up to date
* AKT progress
* CSA progress
* Tutorials - appropriate to length of stay? Content and time
* Consultation timings
* Review of 30 month (or most recent) nodal review
* Reading list

**Confidential Time for the Registrar**

Rules of confidentiality should be the same as for patients. Discussion is confidential and this can only be breeched with consent or discussion as to why confidentiality needs to be breeched. Ideally Visiting Trainer should act as a broker to keep issues in house.

Any issues can be discussed but suggested headings are:

* Concerns
* Relationships
* Benchmarking - Is this registrar at the stage they should be at? Are they at expected level in the ePortfolio?
* Trainer Development
* Equity - adequate but fair input by registrar into practice
* nMRCGP - Are they on course?
* Checking - Chance for registrar to get the view of an outsider and see if it tallies with what their trainer and practice are saying
* Attributes and insights
* Practice issues - are there any concerns about support from colleagues / time set aside for them for training / the practice as a learning environment?
* What works well? What might be changed to make it a better learning environment?

**Confidential Time for the Trainer**

The same principles (including confidentiality) and headings should be used as for the trainee. In addition a disucssion regarding the trainer's strengths and weaknesses as an educator will be helpful.

**Consultation Video Review**

The video should first be marked against the Consultation Observation Tool (COT) and then a more general discussion should take place where the headings might be:

* stage of development as a GP - assess
* is the registrar on course
* stage of consultation skills development
* to separate the summative use as the consultation observation tool (COT) from the formative, suggest tick the boxes first, discuss any problems and then use the session formatively
* attitudes

**Tutorial Video Review**

Visited Trainer should specify how they would like this used or whether there is a specific area they want to look at or question they would like answered. A 10-15 minute vignette of a tutorial should be observed and then discussion should follow. Discussion may focus on issues raised in the reports or the confidential time.

Possible tools for tutorial analysis:

* [**Jane Ogden Behaviour Checklist**](http://highered.mcgraw-hill.com/sites/0335214711/)
* [**Kirkpatrick Evaluation**](http://www.kirkpatrickpartners.com/OurPhilosophy/tabid/66/Default.aspx)
* Peile work

**Mid Term Assessment Paperwork**

**Trainer’s Report:**

**What are your registrar's overall strengths? (including knowledge, skills, attitudes, teamworking)?**

**What are your registrar's main areas for development or areas of concern? (including knowledge, skills, attitudes, teamworking)**

**Is there a particular focus you would like this assessment to have:**

* **For the registrar?**
* **for you?**

**Do you have any concerns that this registrar might not complete nMRCGP by the end of their normal training period?**

**Are there any aspects of your relationship with your registrar which are impeding learning?**

**Registrar’s Report:**

**What are your overall strengths? (including knowledge, skills, attitudes, teamworking)**

**What are your main areas for development? (including knowledge, skills, attitudes, teamworking)**

**Is there a particular focus you would like this assessment to have:**

* **for you?**
* **for your trainer?**

**Do you have any concerns that you might not complete nMRCGP by the end of your normal training period?**

**Are there any aspects of your relationship with your trainer which are impeding learning?**

**Are there any aspects of your training practice which are impeding your learning?**

**Are there any things which you would like to do for your training which you have not managed to arrange?**

**Is there anything else you would like to discuss about your vocational training scheme?**

**Post Visit Paperwork:**

**Feedback form for mid-term evaluation of training -** To be filled in by both trainee and visited trainer independently

**Date of visit:**

**What did you hope would be achieved by this visit?**

**What was achieved?**

**Any particularly valuable insights gained?**

**What methods did you find particularly helpful/unhelpful? (e.g. preparatory work, tutorial analysis, discussion, written feedback etc)**

**What could have made it better?**

**Thank you.**

**Please return to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Visiting Trainer)**

**Mid Term Assessment Report -** To be completed by the visiting trainer and shared with both the trainee and trainer.

**Trainee’s name:**

**Trainer’s name:**

**Visiting Trainer**:

**Date of Mid Term Assessment:**

1. **Training Relationships** - **Please comment on the following areas:**

* **Trainer / Trainee**
* **Trainee / Primary Health Care Team**
* **Trainee / Patients**

1. **Trainee Progress - Please give details of:**

* **Trainee's Current Learning Activities**
* **Trainee's Roles and Responsibilities within the practice (including surgery timetable, consultation length, other activities)**
* **Trainee's Progress towards nMRCGP (is satisfactory progress being made and is trainee on track to pass?)**
* **Are there any areas of concern?**

1. **Training practice as a learning environment**

* **What is working well?**
* **Are there any areas for improvement?**

**Comments should be invited and any mutually agreed adjustments made before a copy is sent to the programme directors and attached to the eportfolio as a "professional conversation" supporting document.**