**Professional Support Unit Thames Valley   
Referral Form for trainees**

The PSU provides coaching to support doctors, dentists and pharmacists to achieve goals related to performance and training.

* ***Please complete all six sections of the form before submitting.***
* ***Self-referrals are only accepted for trainees who are experiencing a career dilemma to allow for confidential access to career support.***
* ***Referrals related to performance concerns need to be completed by the lead educator****. Common reasons for educator referral to PSU include:*
  + *Development of self-confidence.*
  + *Support in dealing with the complexity and uncertainty of medicine.*
  + *Organisational skills development needed to support completion of workplace-based assessments and/or clinical workload.*
  + *Supporting trainees working towards finding balance in their life.*
  + *Developing insight into working with colleagues and teams.*
  + *Support in recognising the impact of cultural and communication differences.*
  + *Development of learning skills and exam skills, both written and oral.*
  + *Managing exam anxiety, particularly following exam failure(s).*
  + *Support during challenging periods of training following specific incidents, personal or professional.*

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| --- |
| *Is this a*   * *career dilemma self-referral?* |
| * *performance related educator referral?* |

* *If you are referring for an individual who does not hold a training number, there is an alternative form. Please contact* [*psu.tv@hee.nhs.uk*](mailto:psu.tv@hee.nhs.uk) *to obtain the correct form.*

*\* Denotes a required field*

# 1. Trainee details

a) First name(s): Click here to enter text.\*

b) Surname: Click here to enter text.\*

c) Date of birth: Click here to enter text.

d) Email address: Click here to enter text.\*

e) Mobile phone number: Click here to enter text.\*

f) Current place of residence: Click here to enter text.\*

g) GMC/GDC number (for our use as a unique identifier): Click here to enter text.\*

# 2. Training details

a) Specialty school/foundation training/other: Choose an item.\*

b) Location of current post (and next if rotation imminent): Choose an item. \* Next: Choose an item.

c) Grade/specialty year: Click here to enter text.\*

d) Date of last ARCP (if applicable): Click here to enter text.\*

e) Outcome of last ARCP (if applicable): Choose an item.\*

Further details if necessary: Click here to enter text.

# 3. Educational team details

*We ask that every performance referral has a ‘Lead Educator’. This will be the member of the trainee’s educational team who has taken the lead in supporting the trainee, they are usually the person who knows the trainee and their context the best.*

a) Name of Lead Educator: Click here to enter text.

b) Email address of Lead Educator: Click here to enter text.

c) Educational role of Lead Educator: Click here to enter text.

d) Place of work of Lead Educator: Click here to enter text.

*Please add the following information to complete the picture of the trainee’s educational team and ensure that we can maintain communication and keep the trainee’s support consistent:*

e) Role, name and email address of any other educators involved, e.g. CS/ES/College Tutor/TPD/Head of School: Click here to enter text.

*In accordance with the Deanery Trainee in Need of Support Policy, PSU input should only be considered after local support has been offered. Therefore, the Trainee’s educational team must have provided guidance and support to assist the trainee in the first instance. Please indicate below what has already been done by the team and attach notes from any meetings and a copy of an educational needs assessment/Performance Improvement Plan to the referral email.*

f) What has already been done: \*

Meeting(s) with ES?

Meeting(s) with TPD?

Educational Plan/PIP/Educational needs assessment?

Occupational Health referral?

Discussion with Director of Medical Education (if appropriate)?

# 4. Referral details

*a) The coaching process needs the trainee to take control of their situation, to set themselves targets and work towards them in a supportive environment. It also sometimes involves difficult personal insights. As such, coaching is generally only effective when the coachee is fit for work; it may be that Medic Support or a GP provide better support until health issues have been resolved when coaching could begin.*

Are there any health issues (physical or mental) that may impact on this referral? Please expand if appropriate and indicate whether the trainee is currently working or on sick leave.

Click here to enter text.\*

b) Please specify the reasons for referral and your expectations of PSU involvement:

Click here to enter text.\*

# 5. Pre-submission checklist

*All referrals are considered on a case by case basis to ensure that the PSU is the most appropriate support for the referee and then matched with a coach who is best placed to provide effective, specialist input.*

Trainee consents to referral and transfer of information to PSU

a) For a career dilemma self-referral please submit with:

An up-to-date copy of your CV

Most recent ESR and/or panel outcome

b) For a performance related Educator referral please submit with:

An up to date copy of the trainee’s CV

Most recent ESR and/or panel outcome

A copy of an educational plan/needs assessment/PIP

In order to facilitate effective triage and to ensure productive and transparent contracting, please ensure that the referral email is cc’d to:

The trainee

The educational team to include TPD, ES and/or CS

# 6. Monitoring

# *The PSU collects data on the background of its clients and would be grateful for completion of this section, which is voluntary. The information given must be as specified by the trainee.*

1. Gender: Choose an item.
2. Please indicate which best describes your ethnic background: Choose an item.

*Privacy*

The PSU is a confidential service and we will not share your personal information. We periodically analyse anonymised data about referrals. We will hold and process your data in line with the HEE privacy policy, which can be found at  <https://www.hee.nhs.uk/about/privacy-notice>

If you have any questions about how we will use the information on this form, please email [psu.tv@hee.nhs.uk](mailto:psu.tv@hee.nhs.uk)

*For office use only*

Choose an item.