Improving People Practices

Doctors in Training Programme

The Doctors in Training programme aims to support providers in addressing six identified principles, which when implemented, have been widely recognised as helping to improve the pre-employment experience of doctors in training.

Further details about each of the principles, including associated progress to date is included below.

Process and Data

The process and data workstream is looking at the end-to-end processes, the systems used and the transfer of data between these systems. The aim is to reduce the duplication of completing application forms, pre-employment checks and the repetition of statutory and mandatory training unnecessarily for doctors in training.

It covers three of the six principles:

- **Principle 1**: Meeting the Code of Practice that sets out who needs to do what 12/8/6 weeks prior to a doctors’ rotation start date
- **Principle 2**: Automated transfer of data between Health Education England (HEE) and each employer’s ESR system – known as the TIS/ESR interface.
- **Principle 3**: Automated transfer of data between employers via ESR’s pre-employment Inter Authority Transfer (IAT)

Progress to date

Having brought together several key stakeholders and super users, the workstream has completed detailed end-to-end process maps across a number of HEE offices, lead employers and employing NHS organisations. We have gathered samples of all the communications, forms and guides that doctors receive prior to joining a new employer. We have also reviewed all the systems and data fields used to establish what data is collected and how it is transferred, while determining any gaps in the data collection.

Through a collaborative approach, we have involved stakeholders in reviewing the findings and prioritising the improvements that need to be made. In workshops we have also designed a target end-to-end process that would optimise the process for doctors in training.

Next steps
It is really starting to take shape. All the outputs are currently being documented and converted into individual improvements that can be implemented over the coming weeks and months.

The work has really helped to build a consensus around the improvements and we are now looking at some ‘quick wins’, while firming up implementation plans, and the resources required to deliver the wider improvements.

**Core Skills Training Framework**

- **Principle 4**: Recording the national core skills training framework competencies (CSTF) in the ESR for doctors in training

For quality and consistency, we are working towards:

- A sustainable, national Core Skills Training Framework (CSTF) which is subject to robust verification and assurance processes.
- Aligning employers to the 11 core skills set out in the CSTF.

To reduce repetition, we will ask organisations to upload the 11 core skill competencies into ESR via the Inter-Authority Transfer (IAT) form, and new employers to accept these competencies.

**Progress to Date**

The NHS ESR Programme have agreed to develop an inbound interface with third-party training systems for the 11 core skills and are now putting together a plan for implementation.

By August 2019, we have an ambition that:

- An interface is fully operational in lead employer organisations and the 11 core skill competencies to be uploaded into ESR
- CSTF self-declaration and verification processes will be reviewed and updated if needed. Employers who have recently made, or refreshed, their alignment to the CSTF will not be asked to apply any changes immediately but will be expected to make any amendments at an appropriate time going forward.

By August 2020, we would like all employers to capture the 11 core skill competencies within ESR or have a fully functional interface in place and have uploaded this information into ESR via this route.

**Next steps**

NHS Improvement is supportive of trusts starting to make appropriate arrangements to align to the CSTF, if they have not already done so. It is
recommended that self-declaration to the CSTF is made within the last 2 years.

Immunisations and Vaccinations

- **Principle 5**: Agreement to the minimum standards for immunisations and vaccinations. Consistently recording and accepting the transfer of this information through ESR

There is currently no minimum list of pre-employment immunisations and vaccinations. Further, without a standard naming convention, data is also recorded in different ways (e.g. chicken pox may be recorded as varicella). We will ask employers to use the core list and standard nomenclature for immunisations and vaccinations that we are developing, with variation taking place only where there is a clear and justifiable clinical reason.

To enable an individual’s immunisations and vaccinations records to transfer between organisations, we ask employers to:

- Accept information from previous employers
- Support the upload of this information directly into ESR, or through a secure alternative process, into ESR. We will use the Inter-Authority Transfer form on ESR and minimise the amount of incomplete or missing immunisation and vaccination information.

**Progress to Date**

A workshop was held on 5 February 2019 to develop a core list of pre-employment immunisations and vaccinations with standard nomenclature and legal and professional concerns around the transfer of these records.

A second workshop on 19 March 2019 mapped the flow of occupational health data from the time of application to occupational health clearance being received. This included reviewing the type of information being transferred and the parties that send and receive it. This information is currently being pulled together and will be made available in due course.

**Redesign of Onboarding and Induction**

- **Principle 6**: Redesign onboarding and induction processes to minimise the number of repeated activities during this first stage of joining a trust.

We would like employers to redesign their pre-employment processes, often referred to as onboarding and induction, by implementing the six principles and six pre-employment check standards.

**Next steps**
There is no universal definition of onboarding and induction which means that individuals often use the same term while meaning different things. We would like to adopt consistent terminology and on Thursday, we will be asking you for your thoughts on our proposed definitions.

**Understanding the Lead Employer Role**

**Progress to Date**

We recognise that Lead Employers have a wealth of experience and knowledge regarding the onboarding and induction of doctors in training and to help us capture this, we have developed a questionnaire with input from lead employers, HEE and NHS Improvement colleagues. It will also help us identify together what we as a system can do whilst understanding what actions can be taken locally to ensure improvement for the August 2019 rotation.

We have also been in contact with those organisations that were pilot sites and fast followers in the Streamlining the Rotational Process for Doctors in Training project as we believe their experience will add to our understanding.

**Next steps**

Feedback from these organisations is currently being reviewed. We plan to provide a summary along with improvement suggestions during the later part of April 2019. This summary will include learning from the lead employers, pilot sites and fast followers around the six principles of streamlining and the completion of the six pre-employment checks: Identification, professional registration and qualification, employment history and references, right to work, work health assessments, and criminal record checks.

We are also planning to bring organisations together in early May 2019 to help support improvements to the doctors in training onboarding and induction experience in time for the August 2019 rotation.

Whilst the aim of this work is to support enhancing the experience of junior doctors as they rotate through the NHS system we believe it also has benefits for other staff groups, including those staff involved in the administration of the process.

**Get Involved**

If you want to know more about the Doctors in Training programme or to get involved, email nhsi.people_strategy@nhs.net with your contact details and which areas you are interested in.