Advanced Trainee Committee Meeting November 2015

There was a further ATC meeting last week. There are a number of changes to be noted by trainees and supervisors the main one being a change in the pathway for trainees in difficulty.

1. Trainees in Difficulty.

From 1st Jan 2016 there is a new 3 stage program for trainees in difficulty. Stage 1:If supervisors are concerned about a trainee they will initiate a meeting with the trainee and formulate a plan of action for the remainder of the term. It may be necessary to involve the program-training director at this stage but the College will not be directly involved and if the matter is resolved the College need not be aware of the issue. If the concerns are not alleviated then the trainee moves to stage 2 whereby a written report is submitted to the training support unit and the advanced training committee monitors the progress of the trainee before deciding on the outcome, which may be resolution of the issue with accreditation of training, deferred accreditation pending a further period of review or referral to stage 3 which involves a comprehensive review of training. The changes to this process have been made to allow it to be more transparent and it is now a more legally robust process. The full details can be found from the Training Support Unit on the RACP website.

1. There is a proposal to scrap the mid-year report and replace it with an extra final supervisors report from 2017 onwards. More details about this will be available when a final decision is made.
2. It has been raised by both trainees and supervisors, that there is little feedback to the supervisors about the strengths and weaknesses of specific rotations. Trainees with particular issues about a training post have not had the ability to raise them confidentially. It is proposed that a single page is added to the final supervisors report, that is completed by the trainee AFTER the supervisor has signed off on the form. There will also be the option to speak to an ATC member if requested.
3. The College is looking at providing guidelines for the main College project. There is currently a large discrepancy in the standards of submitted projects. It is acknowledged that some supervisors are established researchers whereas others are not. Trainees should be encouraged to liaise with “researchers” if their supervisors are not research trained.
4. There are currently 117 nephrology trainees who each submit at least one project per year. Every project is marked by two committee members independently. There has recently been a reduction in the number of committee members, which means a lot of projects for each committee member to mark! One suggestion put forward it that every unit with a trainee is asked to mark a number of projects, in proportion to the number of trainees that they have.
5. Attendance at supervisor workshops was again noted to be poor. It was acknowledged that courses are not always well advertised and clinicians are not always willing to stay for an extra half day at conferences if the workshop is attached but it was felt that overall attendance could and should be improved. I have asked to be informed of upcoming workshops and I will circulate the dates when available.
6. A final point should be clarified for trainees as there is recurrent confusion in this area: The RACP oversees training, ensuring that sites are suitable and that trainees progress through training appropriately. The RACP is NOT responsible for the provision of actual training posts – these are state based. This has been a problem mainly for adult trainees, some of whom thought that being accepted onto the nephrology training program guaranteed them jobs for the 3 core years. Job allocation will continue to be a competitive process and having completed 2 years of nephrology will not guarantee being accepted to a post in the 3rd year. Trainees should also be aware of the maximum training periods accredited in any one institution.

The next meeting is in May 2016 – please let me know of any issues that need highlighting before then.