

Health Education England London and South East Pharmacy

A Reference Guide for Pharmacy Trainees Requiring Additional Support



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1. Introduction and Background

This 2016/17 edition of *A Reference Guide for Pharmacy Trainees Requiring Additional Support* (TRAS) outlines the educational support processes in place for pharmacists and pharmacy technicians that are undertaking commissioned training in HEE London and South East (HEE LaSE). This guidance is also inclusive of HEE commissioned pharmacy training across Hampshire and Isle of Wight during academic year 2016/17.

These arrangements are specific to:

- Pre-registration Trainee Pharmacists (PRPs)
- Pre-registration Trainee Pharmacy Technicians (PTPTs).
- Foundation Pharmacists (FPs) – across Kent Surrey and Sussex only

This guide also covers trainees that are less than full time and those who are undertaking a break from training (i.e. maternity leave).

This edition incorporates updated guidance following the transition to a London and South East Pharmacy Education team and replaces all previous editions of the Pharmacy TRAS Guidance with immediate effect.

HEE LaSE Pharmacy does not employ pharmacy trainees but is responsible for commissioning training and providing salary support to the employer for some trainee groups. Therefore, HEE LaSE Pharmacy has a legitimate interest in matters arising that relate to the education and training of pharmacy trainees in the employing environment. In this context, this reference guide has been designed to help define the relationship between the employer and HEE LaSE Pharmacy in supporting trainees requiring additional support.

This reference guide provides employers with a set of standardised tools to support the processes of identification, reporting and managing a Trainee Requiring Additional Support (TRAS). In addition, the guide details the triggers and boundaries for the provision of any additional external educational support for trainees where there are issues that may impact on the competency sign-off process and/or completion of the educational programme within the commissioned timescale.

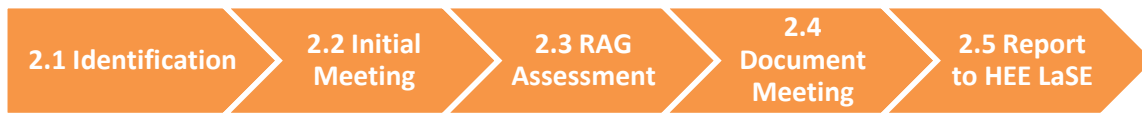
The reference guide also provides information about circumstances which may affect trainee continuation in the training programme and how these issues will be addressed.

All of these processes are part of wider HEE LaSE policy that covers the following groups in training:

- doctors (including primary and secondary care)
- pharmacists and pharmacy technicians
- dentists

Trainees have an employment relationship with their employer, and are therefore subject to their employing organisations policies and procedures and related employment law and legislation. This reference guide is designed to complement and should be read in conjunction with your own local education provider (LEP) policies, to include Human Resource and Occupational Health policies. This reference guide does not address issues relating to terms and conditions of employment (e.g. pay).

2. Identification and Reporting



2.1 Identification of a Trainee Requiring Additional Support (TRAS)

Across all professions, it is recognised that trainees may sometimes encounter difficulties during their training. Concerns that a trainee may need additional support may come to light in many ways:

- trainee requesting support directly
- through regular professional appraisals
- assessments (including failure to complete minimum number satisfactorily)
- clinical governance frameworks (including reporting of serious incidents or complaints)
- clinical audit activities
- information from colleagues
- professional examinations
- litigation

In addition there are a number of signs and symptoms that may indicate that a trainee requires additional support or is in difficulty:

anger	verbal or physical aggression	rudeness	erratic or volatile behaviour	bullying, arrogance
defensive reaction to feedback	new physical illness or worsening of existing physical illness	depression or other mental illness	absenteeism	failure to answer bleeps
poor time-keeping or personal organisation	change of physical appearance	lack of insight	clinical mistakes	failing exams
lack of team working	undermining other colleagues	lack of engagement, withdrawing from learning	communication problems	poor concentration/ distracted

Early identification and intervention at a local level is crucial. Once a trainee has been identified as requiring additional support, often because s/he has presented with one or more of the above signs or symptoms, the next step is to consider what the underlying issue/s might be and to explore the context in which these problems are occurring.

Employers have a responsibility to ensure that mechanisms are in place to support the training of trainees, and to enable problems that may be identified to be addressed at an early stage in an open and supportive way.

Equally, a trainee that is both completing a commissioned training programme and an employee in a healthcare organisation also incurs certain rights and responsibilities in terms of issues relating to their training.

All trainees will have a named Educational Supervisor (ES)¹ for their programme of study. The trainee's ES must ensure that the trainee is aware of and understands the trainee's obligations as laid down in the programme learning agreement and their employment contract. Full details on roles and responsibilities of all those involved in training can be found in the individual programme learning agreements.

Regular feedback should be provided by the ES regarding progress in training as part of educational review meetings. The educational review process is the principal mechanism whereby there is an opportunity to identify concerns about progress as early as possible. This should be a two-way process in the context of an effective professional conversation. Trainees should feel able to discuss the merits or otherwise of their training experience and identify factors that may be inhibiting their progress

If there are concerns about a trainee's performance, based on the available evidence, the trainee must be made aware of these concerns and this should be documented. Trainees are entitled to a transparent process in which they are assessed against the required standards e.g. GPhC, NVQ, told the outcome of assessments and given the opportunity to address any shortcomings.

Trainees are responsible for listening, raising concerns or issues promptly and taking the agreed action. The discussion and actions arising from these formal discussions should be documented. The educational supervisor and trainee should each retain a copy of the documented discussion. If concerns persist or increase, further action should be taken and this should not be left until deadlines for competency sign-off.

2.2 Initial meeting with identified TRAS

If there are any concerns about any trainee identified by persons other than the ES, the trainee's ES should be informed and involved in the first instance. The ES should then arrange to meet with the trainee to explore the concerns as soon as possible.

The Educational Programme Director (EPD)², if different to the ES, must also be involved in any TRAS case from the outset. If the ES requires urgent advice or support at any time in this process, in addition to what they receive from the EPD, they may contact the appropriate HEE LaSE Pharmacy Education Training Programme Director (TPD).

As part of this initial meeting, the ES and trainee need to consider whether a particular incident is a one-off that can be easily remedied, or part of a series of events. A one-off event seldom indicates that a trainee is 'in difficulty' or that extra support is required, apart from exceptional events such as serious misconduct, whereas a longstanding pattern of behaviours is very different. If the ES is unsure whether their trainee should be classified as a TRAS they should refer to the TRAS Assessment Matrix (Appendix 1-3) or contact the appropriate HEE LaSE Pharmacy Training Programme Director (TPD) to clarify.

¹ The Pre-registration pharmacist (PRP) Educational Supervisor is also known as the pre-registration Tutor.

² The Educational Programme Director for PRPs and Foundation Pharmacists (FP) is the person that oversees the pre-registration pharmacist and/or foundation pharmacy training programmes at the Trust. The Educational Programme Director for pre-registration pharmacy technicians (PTPT) is the person that oversees the PTPT training programme at the Trust and is likely to also act as their Educational Supervisor.

We have provided a TRAS Assessment Matrix (*Appendix 1 for Pre-Registration Trainee Pharmacists, Appendix 2 for Pre-Registration Trainee Pharmacy Technicians, and Appendix 3 for Foundation Pharmacists*) to support ES and trainees to identify the appropriate category for areas of potential concern and in order to assess current 'RAG' status to ensure correct prioritisation.

2.3 'Red, Amber, Green' (RAG) Assessment of TRAS

The TRAS Assessment Matrix (*Appendix 1 – 3*) provides further detail around areas for potential concern and the different thresholds for escalation. The TRAS Assessment Matrix is designed to support ES/employer to identify TRAS cases of higher significance and urgency, both at the point concerns are identified and at ongoing progress reviews. This is to support escalation through local 'in-house' support mechanisms or to trigger formal measures.

All TRAS must be allocated a 'RAG' rating when reported to HEE LaSE Pharmacy. Further information on how reports are processed is detailed in Section 2.5.

Any trainee that is commencing or undergoing formal capability process must be classified as Amber as a minimum. Although they will be managed by HR at the Trust, regular educational progress reports outlining impact on educational progression will be expected to be sent to the HEE LaSE Pharmacy TPD.

2.4 Documentation and Action Planning

At this initial meeting, the ES and trainee should complete a Trainee Progress Review Record ([Form A, Appendix 5](#)) and create an action plan ([Form B, Appendix 5](#)). This action plan must:

- be clear/unambiguous
- be agreed by both parties
- have specific, defined actions
- contain action deadlines, review dates and clear consequences

This action plan is a working document between the ES and their trainee that will be revisited and updated as actions are completed over time. It is important that both the trainee and the ES sign the action plan when it is created, updated and reviewed. Section 3.1 contains more information about possible courses of action and support.

This meeting and the resultant action plan must be documented and a copy held by both the ES and the trainee. This may be kept in the trainee's educational portfolio. All documentation and action planning will be requested as evidence in the event that an Educational Panel Review is required (see Section 4).

2.5 Reporting TRAS to HEE LaSE Pharmacy

The ES must submit a 'Trainees Requiring Additional Support Reporting form' to inform HEE LaSE Pharmacy. This on-line reporting form can be found here:

<https://www.lasepharmacy.hee.nhs.uk/dyn/pages/training-1/educational-supervisors/trainee-requiring-additional-support/tras-online-reporting.shtml>

Within this form the ES should disclose the following:

1. The date concerns about the trainee emerged
2. The area of potential concern as categorised by the TRAS Assessment Matrix
3. The classification of the trainee (Red, Amber, Green) as indicated by the TRAS Assessment Matrix
4. Initial meeting documentation and action plan

2.5.1 How HEE LaSE Pharmacy processes TRAS Reports

When HEE LaSE Pharmacy receives a report about a TRAS, it is forwarded to the relevant TPD for their information and recorded on a dedicated database. The case is allocated a reference number and ongoing correspondence regarding the case will utilise this reference number in place of personal details. Personally identifiable information is kept confidential and will not be shared without the approval and consent of the trainee.

The TPD will review all initial reports received and use the information provided to decide whether any case requires re-categorisation, prioritisation and/or investigation by HEE LaSE Pharmacy. If the case requires an urgent intervention the TPD will contact the ES and EPD within 24 hours, otherwise a standardised acknowledgement email will be sent to the ES within 5 working days.

2.5.2 Urgent cases

Urgent cases are those that the HEE LaSE Pharmacy TPD agrees requires fast, formal intervention in the form of HEE LaSE Educational Review Panel (see Section 4). Formal intervention would normally occur only once the ES is able to demonstrate that all internal support mechanisms have been utilised without the desired effect (see Section 3 – Management of a TRAS). It is therefore not expected that HEE LaSE Pharmacy will be required to make an intervention at the time the initial report is received, except in very unique circumstances.

2.5.3 Ongoing Trainee Progress Review Records and Action Plans

The standardised acknowledgement email from the HEE LaSE TPD to the ES will contain details of who to send ongoing information to, along with the expected frequency. These ongoing Trainee Progress Review Records and Action Plans will be monitored by the TPD and guidance and signposting will be offered as necessary.

2.6 Trainee Self-reporting as a TRAS

If you are a trainee and you feel you require additional support with your training, we recommend that you seek support from your ES in the first instance. You should then work with them to utilise this reference guide to identify your personal area/s of concern and identify appropriate support mechanisms to be built into a tailored action plan.

However, depending on the nature of the issue, you may choose to self-report to HEE LaSE Pharmacy directly. You can do so using the online 'Trainees Requiring Additional Support Reporting form' which can be found here: <https://www.lasepharmacy.hee.nhs.uk/dyn/pages/training-1/educational-supervisors/trainee-requiring-additional-support/tras-online-reporting.shtml>

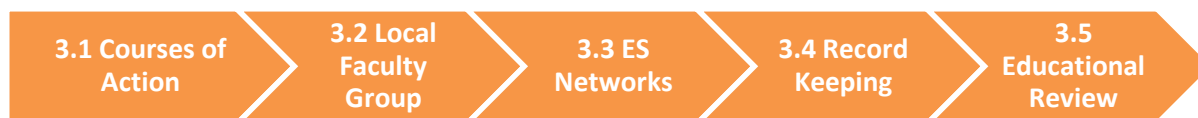
Once this form has been submitted you will be contacted by the relevant HEE LaSE TPD to discuss your situation further and identify/agree next steps, which would usually involve facilitating a discussion with your Educational Supervisor or Educational Programme Director.

There are also a range of other support options available, including the Professional Support Unit (PSU) Services and Practitioner Health Programme (PHP), which you can find out how to access through the information available at the above web-link, and Pharmacist Support, an independent support charity for the profession <http://www.pharmacistsupport.org/>.

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If you have concerns about malpractice, wrongdoing or fraud, you can also call the whistle blowing helpline for specialist signposting, advice and guidance. For more information: <http://wbhelpline.org.uk/>

3. Management of a TRAS



3.1 Possible Courses of Action and Support

Following identification of a TRAS, the ES and trainee must develop an action plan to support remediation of the issue/s identified.

Appendix 4 provides examples of commonly encountered issues for trainees across healthcare and sets out possible courses of action and support in each example. The list of suggestions is not exhaustive and is designed to be used to guide the development of issue appropriate SMART objectives.

HEE LaSE also expects that the ES/TRAS will liaise with the following parties, as appropriate, in identifying courses of action and support:

- EPD
- Local Faculty Group (LFG)
- Human Resources Department (Trust)
- Occupational Health (Trust)
- The General Pharmaceutical Council
- Higher Educational Institutes or underpinning knowledge provider
- UK Border Agency

3.2 The role of the Local Faculty Group (LFG) or equivalent

The Local Faculty Group (LFG), or equivalent, must be informed of all trainees requiring additional support, current and retrospective. The TRAS agenda item must focus on supporting the decision making and any change implementation required with regards to the TRAS case. This will support both the ES and the TRAS.

The ES must ensure that individual TRAS progression is discussed within the LFG. The LFG must keep records of all TRAS action plans and ensure agreed actions from action plans are followed. All documentation must be kept (either electronically or hard copy) for the duration of the training programme and according to Trust Records Management policy for staff information.

If the trainee is reclassified from amber to red, the LFG will be notified at the next meeting and implications relating to progression discussed. The Chair of the LFG may choose to anonymise the individual trainee in the minutes and s/he will be responsible for keeping the key to the coding confidential.

LFG meetings are generally held quarterly. The Chair of the LFG is expected to support utilisation of LFG membership as appropriate for urgent or increased priority TRAS case discussion between meetings.

3.3 The role of the Educational Programme Director Network in management of a TRAS

Educational Supervisors and Educational Programme Directors are encouraged to utilise available networks facilitated by HEE for sharing of ideas and best practice with regards to identification and management of (anonymised) TRAS cases.

With consent of both parties, the HEE LaSE Pharmacy TPD may be able to facilitate a temporary 'buddy' or mentor arrangement with another EPD/ES where they have significant experience or knowledge in specific trainee issue areas.

3.4 Ongoing Record Keeping

Accurate and prompt documentation minimises disagreement about the facts, and results in an audit trail that can help relate future problems to past patterns of performance or behaviour.

Good records also reduce the scope for future challenge. All trainees have the right of appeal following any Educational Panel Review meeting outcome, and documentation will be required by an appeals panel. All documentation must comply with the requirements of the Data Protection and Freedom of Information Acts in relation to processing, retention and security of records.

Records relating to a trainee that requires additional support or who is in difficulty may subsequently form part of regulatory proceedings. Therefore recording of information must be of a standard and character where undue legal challenges can be avoided.

Records of conversations should be held confidentially with the knowledge and consent of both the trainee and the person who has conducted the assessment of the issue.

The trainee should be given a copy of any documentation concerning his or her performance and encouraged to keep such copies in his or her records or portfolio for discussion at appraisals. S/he should be made aware of where the notes will be stored and who will have access to them. The Freedom of Information Act (2005) allows the right of access to information held about practitioners/trainees (subject to exemptions where appropriate) and so any documentation could be accessed through this.

Information should be stored securely e.g. through password protection on computers or in locked filing and in accordance with Trust Records Management Policy for staff information.

3.4.1 Transferring information (**Foundation Pharmacist Trainees only – Kent Surrey and Sussex**)

Transfer of information about trainees' progress from post to post should be standard procedure, including areas of concern. When a foundation pharmacist moves to a new employer the transfer of information about any disciplinary or competence issue is important, both for patient safety and to support the trainee.

Information transferred should take the form of a written, factual statement about any formal actions taken against the trainee and the nature of any triggers, **but not about incidents where the trainee was exonerated.**

The trainee should be informed of the information transfer but patient safety must override personal confidentiality. If the trainee moves again, the problem escalates or others become involved, it may become necessary to pass the record to others, again with the consent of the trainee where possible.

The sharing of information must be with permission of the LFG Chair. Very sensitive information is best transferred by the Dean for Pharmacy or Pharmacy TPD to the new Trusts EPD.

3.5 The role of HEE LaSE Pharmacy in Management of a TRAS

Initial reporting will be treated as information-only by the HEE LaSE TPD's. Subsequent reports and progress updates will be monitored and guidance and signposting will be offered as necessary.

Intervention by HEE LaSE Pharmacy will only occur where the educational supervisor is able to demonstrate that all internal educational support mechanisms have been appropriately utilised but that poor trainee performance and/or professional competence remains unsatisfactory and places completion of the educational programme within the commissioned timeframe at risk.

At this stage, the relevant HEE LaSE TPD will recommend that a formal educational review panel is formed (see Section 4).

4. HEE LaSE Pharmacy Educational Review Panel

Where poor trainee performance and/or professional competence remains unsatisfactory and/or completion of the educational programme within the commissioned timeframe is at risk, the HEE LaSE TPD will recommend that an Educational Review Panel is formed.

The HEE LaSE Pharmacy Educational Review Panel will have the following objectives:

- To review the evidence and documentation regarding matters of educational performance or progression in training and make a judgement about whether the trainee's progress and/or performance has been satisfactory.
- To make time-bound recommendations over focussed or additional remedial action.
- To determine whether the training duration needs to be extended.

The panel meeting will be formed of three parts:

1. Individual opportunity for the ES and the Trainee to summarise the pre-circulated evidence/documentation and offer any additional information for consideration by the panel.
2. Panel review of the evidence and consideration of outcomes. Trainees and ES should not attend this part of the meeting.
3. ES and Trainee meet with the panel after its discussion of the evidence and agreement as to the outcome(s).

Evidence provided to the panel may relate to other issues and concerns such as clinical safety, health or undermining within the workplace. Whilst the panel is not in a position to investigate or deal with these issues, it will be able to signpost to the relevant Trust clinical governance, risk management or employment policies under which further consideration and investigation can be carried out as necessary.

The panel will recommend one of 5 outcomes, described below:

Outcome 1 – Satisfactory progress
Satisfactory progress is defined as achieving the competences in the curriculum approved by the GPhC at the rate required.
Outcome 2 – Development of specific competencies required – no additional training time needed
The trainee's progress has been acceptable overall but there are some competences that have not been fully achieved and need to be further developed. It is not expected that the rate of overall progress will be delayed or that the prospective date for completion of training will need to be extended or that a period of additional remedial training will be required. Where such an outcome is anticipated, the trainee should appear before the panel. The panel will need to specifically identify in writing the further development that is required. The documentation will be returned to the EPD and ES, who will make clear to the trainee and the employer(s) what must be done to achieve the required competences as well as the assessment strategy for these. It will be essential to identify and document that these competences have been met and the timescale for this should be agreed with the trainee.

<p>Outcome 3 – Inadequate progress; additional training time required</p> <p>The panel has identified that a formal additional period of training is required that will extend the duration of the training programme e.g. the core training programme end date. Where such an outcome is anticipated, the trainee must attend the panel meeting. The trainee, educational supervisor and employer will need to receive clear recommendations from the panel about what additional training is required, the intended objectives and proposed timescale, as well as the circumstances under which it should be delivered (e.g. concerning the level of supervision). It will, however, be a matter for HEE LaSE Pharmacy to determine the details of the additional training in the context of the panel's recommendations since this will depend on local circumstances and resources.</p>
<p>Outcome 4 – Released from training programme</p> <p>The panel will recommend that the trainee is released from the training programme if there is still insufficient and sustained lack of progress despite having had additional training to address concerns over progress. The trainee may wish to seek further advice from the HEE LaSE Dean for Pharmacy or their current employer about future career options.</p> <p>This outcome may also be recommended in circumstances where there is no educational performance-linked need for additional training.</p>
<p>Outcome 5 – Incomplete evidence presented; additional training time may be required</p> <p>The panel can make no statement about progress or otherwise since the educational supervisor and/or trainee has supplied either no information or incomplete information to the panel. The educational supervisor and/or trainee will have to supply the panel with a written account within five working days as to why the documentation has not been made available to the panel. This correspondence will be by copy to the Chief Pharmacist.</p> <p>The panel does not have to accept the explanation given and can require the educational supervisor and/or trainee to submit the required documentation by a designated date so that it can be considered by a panel and an outcome issued.</p> <p>Alternatively, the panel may agree what outstanding evidence is required from the trainee for Outcome 1 (and the timescale in which it must be provided) and give authority to the Chair of the panel to issue Outcome 1 if satisfactory evidence is subsequently submitted. However, if the Chair does not receive the agreed evidence to support Outcome 1, then a panel will be reconvened.</p>

Any concerns that emerge about a trainee's fitness to practise must be reported to the Dean for Pharmacy for further advice and guidance.

The panel would not issue an outcome when the trainee is absent due to statutory leave (e.g. maternity or sick leave) or where training has been suspended. In these circumstances, the panel will record the reasons for this.

While the panel must recommend the outcome for an individual trainee on the basis of the submitted evidence, it must also take into account any mitigating factors on the trainee's part such as personal circumstances and any period when the training time has been paused. This may mean that a shorter period of time than expected has been available in which to make progress and the panel decision should take this factor into consideration.

The initial outcome from the panel review may be provisional until quality management checks have been completed. The outcome(s) recommended by the panel for **all** trainees will be made available by the Dean for Pharmacy to:

- The Trainee
- The Trust Educational Programme Director (EPD)
- The trainees Educational Supervisor (ES)
- The Chief Pharmacist
- The relevant education training provider

All trainees should receive standard written guidance relevant to their outcome, which as appropriate should detail the duration of any extension to training, requirements for remedial action, and reference to the review and appeal processes.

4.1 Quality Assurance of the TRAS Educational Review Panel

Since decisions from the panel have important implications for both patient safety and individual trainees, there should also be external scrutiny of its decisions from two sources:

- a lay member to ensure consistent, transparent and robust decision-making on behalf of both the public and trainees
- an external advisor from the pharmacy specialty but from outside of the training programme or school. The external advisor may be an education provider representative if not otherwise represented on the panel.

All members of the panel (including the lay member and those acting as an external advisor) must be trained for their role. This includes training on fitness to practise, and equality and diversity issues. This training should be kept up to date and refreshed every three years.

4.2 The role of the Dean for Pharmacy in the TRAS Review Panel

When an Outcome 4 recommendation is made by the TRAS review panel, the Dean of Pharmacy will be notified of that recommendation and they will confirm this in writing to the trainee, including their right to appeal the decision.

Contact Details for the Health Education London and South East Pharmacy Training Programme Directors

<p>General TRAS Enquiries Laura McEwen-Smith <i>Lead for Trainees Requiring Additional Support</i> Email : lauramcewen-smith@kss.hee.nhs.uk Tel : 07500 765608</p>	<p>KSS (H/IOW) Pre-Registration Trainee Pharmacists Marc Miell <i>Pre-registration Pharmacists Training programme Director</i> Email: mmiell@kss.hee.nhs.uk Tel: 07500 765674</p> <p>London Pre-Registration Trainee Pharmacists Rachel Stretch <i>Pre-registration Pharmacists Training programme Director</i> Email: rstretch1@kss.hee.nhs.uk Tel: 07824 384170</p>
<p>Pre-Registration Trainee Pharmacy Technicians Liz Fidler <i>Associate Head of Pharmacy and Pre-Registration Pharmacy Technician Training Programme Director</i> Email : lfidler@kss.hee.nhs.uk Tel : 07795 616861</p>	<p>Foundation Programme Pharmacists (Kent Surrey and Sussex only) Kumud Kantilal <i>Foundation Training Programme Director</i> Email: kkantilal@kss.hee.nhs.uk Tel: 07711 466766</p>

Appendix 1 - Trainees Requiring Additional Support Assessment Matrix for Pre-registration Pharmacists (PRP)

Area of potential concern	Green Reported to HEE LaSE for information Managed by Trust internal support mechanisms TRAS Action Plan in place	Amber Reported to HEE LaSE for information Managed by Trust internal support mechanisms Escalation through Trust formal processes if necessary i.e. HR TRAS Action Plan in place	Red Reported to HEE LaSE for possible intervention Trust formal processes should be underway i.e. HR in relation to case TRAS Action Plans submitted for Educational Panel Review
Knowledge, Skills and Performance (KSP)	Failure to demonstrate sufficient work-based assessments; time management and basic organisational skills; basic skill development issues requiring adaption of educational plan	Repeated failure to achieve performance standards; Trust capability investigations; other KSP issues which are likely to lead to an unfavourable outcome in GPhC progress review, performance standards, timely completion of programme or registration assessment	Specific concerns which may require external remediation or training extension
Progression in Training	Trainee not meeting expected progression milestones. Trainee has needs that have required the content/structure of educational plan to be substantially adapted	Failure at 13 or 26 week progress review; other progression issues which are likely to lead to an unfavourable outcome in GPhC appraisal, performance standards or timely completion of programme	Failure at 39 week progress review; requests for training extension
Safety and Quality	Low level clinical incidents	Any safety/quality issue which is likely to lead to an unfavourable outcome in GPhC progress review or timely completion of programme	Investigated serious incidents/never events; serious patient safety concerns which call into question a trainees fitness to practice
Communication, Partnership and Teamwork	Mismatches between trainer and trainee; acting effectively in a team; rapport with colleagues and patients	Relationship breakdown between trainer and trainee	Specific concerns which may need external panel review, assessment or remediation
Maintaining Trust/ Professionalism	Minor issues i.e. punctuality, documentation	Trust probity/conduct investigations; addiction/substance misuse	Police investigations, cautions or convictions; Trust probity/conduct/disciplinary findings
Health	Low level health issues which are unlikely to affect progression	Any sickness absence that requires notification to GPhC (5 days or longer); health issues which may require change in programme/post; addiction/substance abuse	Extent of absence is jeopardising achievement of requisite number of days practice; concerns over trainee fitness to practice; requests for training extension on health grounds

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Area of potential concern	Green Reported to HEE LaSE for information Managed by Trust internal support mechanisms TRAS Action Plan in place	Amber Reported to HEE LaSE for information Managed by Trust internal support mechanisms Escalation through Trust formal processes if necessary i.e. HR TRAS Action Plan in place	Red Reported to HEE LaSE for possible intervention Trust formal processes should be underway i.e. HR in relation to case TRAS Action Plans submitted for Educational Panel Review
Other	Low level personal issues	Personal issues which may impact upon progression require a change in post/programme; maternity leave/other planned prolonged absence; visa issues	Trainee allegations of undermining, bullying or harassment; visa or work permit not in place at commencement/during training

Appendix 2 - Trainees Requiring Additional Support Assessment Matrix for Pre-registration Pharmacy Technicians (PTPT)

Area of potential concern	Green Reported to HEE LaSE for information Managed by Trust internal support mechanisms TRAS Action Plan in place	Amber Reported to HEE LaSE for information Managed by Trust internal support mechanisms Escalation through Trust formal processes if necessary i.e. HR TRAS Action Plan in place	Red Reported to HEE LaSE for possible intervention Trust formal processes should be underway i.e. HR in relation to case TRAS Action Plans submitted for Educational Panel Review
Knowledge, Skills and Performance	Failure to demonstrate sufficient work-based assessments; time management and basic organisational skills; basic skill development issues requiring adaption of educational plan	Re-sitting UPK assignments; repeated failure to achieving NVQ competencies; Trust capability investigations; other KSP issues which are likely to lead to an unfavourable outcome in NVQ/UPK programme completion by deadline	Specific concerns which may require external remediation or training extension
Progression in Training	Trainee not meeting expected progression milestones. Trainee has needs that have required the content/structure of educational plan to be substantially adapted	Less than 35% completed in the first 8 months; other progression issues which are likely to lead to an unfavourable outcome in NVQ/UPK programme completion by deadline	Not expected to meet the Year 1 progression benchmark (35% NVQ completion), expected unfavourable outcome in NVQ/UPK programme completion by deadline
Safety and Quality	Low level clinical incidents	Any safety/quality issue which is likely to lead to an unfavourable outcome in NVQ programme completion or registration	Investigated serious incidents/never events; serious patient safety concerns which call into question a trainees fitness to practice
Communication, Partnership and Teamwork	Not acting effectively in a team; poor rapport with colleagues and patients; mismatches between ES and trainee	Any communication/teamwork issue which is likely to lead to an unfavourable outcome in NVQ programme completion or registration; relationship breakdown between ES and trainee	Specific concerns which may need external panel review, assessment or remediation
Maintaining Trust/ Professionalism	Minor issues i.e. punctuality, documentation	Trust probity/conduct investigations; addiction/substance misuse	Police investigations, cautions or convictions; Trust probity/conduct/disciplinary findings
Health	Low level health issues which are unlikely to affect progression	Any sickness absence longer than 4 weeks; health issues which may require change in programme/post; addiction/substance abuse	Extent of absence is jeopardising achievement of requisite number of days practice; concerns over trainee fitness to practice; requests for training extension on health grounds

Area of potential concern	<p>Green Reported to HEE LaSE for information Managed by Trust internal support mechanisms TRAS Action Plan in place</p>	<p>Amber Reported to HEE LaSE for information Managed by Trust internal support mechanisms Escalation through Trust formal processes if necessary i.e. HR TRAS Action Plan in place</p>	<p>Red Reported to HEE LaSE for possible intervention Trust formal processes should be underway i.e. HR in relation to case TRAS Action Plans submitted for Educational Panel Review</p>
Other	Low level personal issues	Personal issues which may impact upon progression or require a change in post/programme; maternity leave or other planned prolonged absence; visa issues that are likely to affect ability to train	Trainee allegations of undermining, bullying or harassment; visa or work permit not in place at commencement/during training

Appendix 3 - Trainees Requiring Additional Support Assessment Matrix for Foundation Pharmacists (FP) Kent Surrey and Sussex only

Area of potential concern	Green Reported to HEE LaSE for information Managed by Trust internal support mechanisms TRAS Action Plan in place	Amber Reported to HEE LaSE for information Managed by Trust internal support mechanisms Escalation through Trust formal processes if necessary i.e. HR TRAS Action Plan in place	Red Reported to HEE LaSE for possible intervention Trust formal processes should be underway i.e. HR in relation to case TRAS Action Plans submitted for Educational Panel Review
Knowledge, Skills and Performance	Failure to demonstrate sufficient work-based assessments; time management and basic organisational skills; basic skill development issues requiring adaption of educational plan; missed learning set (<i>should complete pre-work and contact academic facilitator for advice/further information</i>)	Repeated failure of work based assessments FS1: Missed two learning sets and failed to meet action plans put in place locally. Failed mock or 1 st attempt OSCE/MCQ; unsatisfactory RITA at 4 or 12 months FS2: Missed one learning set	FS1: Missed three or more learning sets and failed to meet action plans put in place locally. Failed mock or 2 nd attempt OSCE/MCQ; unsatisfactory RITA at 17 months FS2: Missed more than one learning set. Unsatisfactory RITA issued Any formal Trust capability process triggered in relation to skills
Progression in Training	Trainee raised issues relating to workload demand FS1: Up to two months behind with educational plan FS2: Up to two months behind with educational plan	Concerns trainee not coping with workload demand FS1: Up to 3 months behind schedule for portfolio tasks and not adhering to local action plans FS2: Up to 2 months behind schedule for portfolio tasks and not adhering to local action plans	FS1: Over 3 months behind schedule for portfolio tasks FS2: Over 2 months behind schedule for portfolio tasks
Safety and Quality	Low level/non-investigated clinical incidents	Any safety/quality issue which is likely to lead to an unfavourable assessment or programme outcome	Investigated serious incidents/never events; serious patient safety concerns which call into question a trainees fitness to practice
Communication, Partnership and Teamwork	Not acting effectively in a team; poor rapport with colleagues and patients; mismatches between ES and trainee	Any communication/teamwork issue which is likely to lead to an unfavourable outcome in programme completion; relationship breakdown between trainer and trainee	Specific concerns which may need external panel review, assessment or remediation
Maintaining Trust/Professionalism	Minor issues i.e. punctuality, documentation raised in MiniTAB	Significant issues raised in MiniTAB; any Trust probity/conduct investigations; addiction/substance misuse	Major issues raised in MiniTAB; any Police investigations, cautions or convictions; Trust probity/conduct/disciplinary findings

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Area of potential concern	Green Reported to HEE LaSE for information Managed by Trust internal support mechanisms TRAS Action Plan in place	Amber Reported to HEE LaSE for information Managed by Trust internal support mechanisms Escalation through Trust formal processes if necessary i.e. HR TRAS Action Plan in place	Red Reported to HEE LaSE for possible intervention Trust formal processes should be underway i.e. HR in relation to case TRAS Action Plans submitted for Educational Panel Review
Health	Low level health issues which are unlikely to affect progression; trainee on sick leave (planned or unexpected) for 4-8 weeks but on track with programme prior to leave	Any absences of 4-8 weeks but behind with programme prior to leave; any health issues which may require change in programme/post; addiction/substance abuse	Sick leave of 2 months or more; concerns over trainee fitness to practice; requests for training extension on health grounds
Other	Low level personal issues	Personal issues which may impact upon progression or require a change in post/programme; maternity leave or other planned prolonged absence (not sick leave)	Trainee allegations of undermining, bullying or harassment

Appendix 4 – Trainee Issues and Possible Courses of Action and Support

Trainee issue	Possible courses of action and support
<p>Assessment/examination performance:</p> <p>failure to achieve performance standards failure to meet programme progress benchmarks skills elements issues unsatisfactory appraisals</p>	<p>Educational intervention with more supervision.</p> <p>Targeted or repeat training with clear educational objectives and yardsticks of success.</p> <p>Monitored at Local Faculty Group or, in more urgent cases, one-off case-review by LFG membership.</p> <p>Clearly identified and documented action should be taken wherever possible, prior to invoking formal measures to address capability and performance in employment. For example regular TRAS meeting with action plan and review of SMART objectives; reflection on areas to support development; planned assessments; change to educational plan; review meetings with section practice supervisor.</p> <p>Issues of this kind would be categorised on the TRAS Assessment Matrix as ‘knowledge, skills and performance’ or ‘progression in training’ for reporting to HEE LaSE</p>
<p>Generic professional development:</p> <p>rapport with patients, staff and families respect for people holding different views cultural acclimatisation acting effectively within the team motivation, maturity, a lack of insight. time management and basic organisational skills</p>	<p>Identify the issues with care. A mentor, coach or role model may be required. Sometimes professional development issues are a result of a lack of awareness or training need. Consider work shadowing, support, training, planning of assessments, observations and reflective practice, work on emotional intelligence, interpersonal skills. Consider targeted ‘soft skills’ training or short courses.</p> <p>Although an underlying personality trait cannot easily be changed, the resultant behaviours may be moderated. So, when a trainee’s behaviour is in question, ES may wish to discuss with the trainee, the relevant EPD and HR/Occ. Health to identify possible contributory factors, offer a judgement about the likelihood of successfully addressing the concerns, and make recommendations.</p> <p>Issues of this kind would be categorised on the TRAS Assessment Matrix as ‘communication, partnership and teamwork’ or ‘maintaining trust/professionalism’ for reporting to HEE LaSE</p>
<p>Professional behaviour:</p> <p>Integrity Probity</p>	<p>These are serious issues, which may require further assessment through psychologists. These are likely to be conduct as well as educational matters.</p> <p>Involvement with Trust HR team is essential.</p>

Trainee issue	Possible courses of action and support
<p>Substance abuse</p>	<p>Where there are concerns that a colleague may have a substance abuse problem the local HR department and Chief Pharmacist must be informed immediately.</p> <p>If substance abuse leads to disciplinary action, or suspension from clinical duties being recommended, both HEE LaSE and GPhC (for PRP and Foundation Trainees) must be informed before the disciplinary action is concluded.</p> <p>Trainee may benefit from self-referral to Pharmacist Support, an independent support charity for the profession http://www.pharmacistsupport.org/</p> <p>Trainee may benefit from self-referral to Professional Support Unit (PSU) or Practitioner Health Programme (PHP) – an NHS treatment service for those unable to access confidential care through mainstream NHS routes due to the nature of their role and/or health condition.</p> <p>For probity issues refer to GPhC’s Standards of Conduct, Ethics and Performance. Refer significant probity concerns to the Chief Pharmacist for consideration under the appropriate organisational code of conduct. This may result in formal disciplinary action being taken.</p> <p>Issues of this kind would be categorised on the TRAS Assessment Matrix as ‘maintaining trust/professionalism’. In some instances, substance abuse may be categorised under ‘health’ or ‘safety and quality’ for reporting to HEE LaSE</p>
<p>Safety and Quality:</p> <p>investigated incidents/never events</p> <p>patient safety concerns</p> <p>fitness to practice issues</p> <p>serious untoward incidents (SUI)</p>	<p>On occasion, a trainee might make or be involved in a critical or serious, isolated clinical error. Such situations may lead to a formal investigation and are stressful for all staff involved.</p> <p>Pastoral support should be offered to the trainee throughout the process.</p> <p>If the trainee is involved in a serious issue they should be RAG classified as ‘Red’.</p> <p>Areas for Serious Untoward Incident classifications could be:</p> <ul style="list-style-type: none"> • child protection issues • death or serious injury of a patient involving the intervention of a trainee • mental health and substance misuse • “never events” (http://www.england.nhs.uk/ourwork/patientsafety/never-events/) • professional misconduct

Trainee issue	Possible courses of action and support
	<ul style="list-style-type: none"> • staff related issues such as breaches of confidentiality <p>Local HR/Trust employment policies must be followed immediately.</p> <p>The Educational Supervisor should inform the following people immediately in writing and at each stage of any such investigation:-</p> <ul style="list-style-type: none"> • Chief Pharmacist • Chair of the LFG • Trust EPD • HEE LaSE Training Programme Director <p>The Chief Pharmacist should manage the next steps in line with Trust HR policies and clinical governance.</p> <p>Where personal misconduct is unconnected with training progress, employers may need to take action in accordance with local policy.</p> <p>If a trainees fitness to practise is considered impaired, the GPhC Fitness to Practise Directorate must be told (<i>PRP and FP only</i>) and the relevant HEE LaSE Pharmacy TPD should be informed in writing.</p> <p>Issues of this kind would be categorised on the TRAS Assessment Matrix as ‘safety and quality’ for reporting to HEE LaSE</p>
<p>Health concerns:</p> <p>health issue that may impact upon training sickness absence in breach of programme /registration limitations change in programme/post required</p>	<p>Ensure trainee is registered with a GP through normal channels.</p> <p>Trainee may benefit from self-referral to Practitioner Health Programme Referral - an NHS treatment service for those unable to access confidential care through mainstream NHS routes due to the nature of their role and/or health condition i.e. mental health.</p> <p>All trainees who are unable to train and work on health grounds should be managed under occupational health arrangements and are eligible through their employer for statutory sickness absence and pay, which is dependent on their length of service.</p> <p>In the case of long-term sickness absence, the ES should arrange for a change control form to be completed for any trainees receiving salary support as this will be discontinued for this time. The HEE LaSE Pharmacy TPD should be kept informed about progress and any indication of a return to work.</p> <p>An Occupational Health (OH) assessment can provide the employer with objective view on the health of the trainee and an</p>

Trainee issue	Possible courses of action and support
	<p>opportunity for the trainee to discuss their health confidentially with someone not associated with assessing their training. The ES should write a detailed referral letter to OH to specify the areas which it would be helpful for an OH report to cover i.e. is the trainee fit for their current role? (<i>it may be necessary to expand this to include particular responsibilities or tasks needing specific consideration as part of the assessment</i>).</p> <p>The ES, along with representatives from HR should consider:</p> <ul style="list-style-type: none"> - any short or long term adjustments that need to be made to the trainees working pattern or environment - the likely duration of absence or inability to undertake specific aspects of the role in case of phased return - Whether the trainees medical problems are contributing to behaviour/performance at work - Whether the trainee would be considered disabled under the appropriate legislation <p>ES and HR/OH should then consider recommendations regarding a return to work plan and/or reasonable adjustments to the workplace.</p> <p>HEE LaSE Pharmacy will only review TRAS health matters (including occupational health advice) to ensure appropriate decisions are made regarding training. Following the outcomes of above described investigations, the ES should contact the HEE LaSE Pharmacy TPD to discuss any adjustments needed to facilitate the successful completion of the training programme. This can be highly sensitive so trainee consent, in line with the Data Protection Act, is essential at all times.</p> <p>Refer to the relevant employing organisation’s blood borne virus policy where appropriate, and take advice from the organisation’s HR and OH departments. If the health issues pose a risk to patient (or trainee) safety Occupational Health may be able to make workplace adjustments in conjunction with clinical, managerial and HR colleagues.</p> <p>Where a trainee’s fitness to practise is impaired by a health condition, the GPhC Fitness to Practise Directorate must be told (<i>PRP and FP only</i>) and the relevant HEE LaSE TPD should be informed in writing.</p> <p>If a trainee fails to recognise risk to patients presented by their health issues or fail to co-operate with measures to protect patients in this context the employers may need to take action in accordance with local policy.</p>

Trainee issue	Possible courses of action and support
	<p>Issues of this kind would be categorised on the TRAS Assessment Matrix as ‘Health’. In some cases, substance misuse may be categorised as ‘safety and quality’ or ‘maintaining trust/professionalism’ for reporting to HEE LaSE</p>
<p>Disability affecting learning:</p> <p>For example,</p> <p>dyslexia autism spectrum disorder</p>	<p>Disability is very personal and varied, so standardised approaches (e.g. a generic 25% extra time for exams in the case of dyslexia) are not always helpful to trainees or sufficient for their needs.</p> <p>Trainees who may be experiencing performance issues or stress at work which may be a result of previously undiagnosed disability difficulties should be encouraged to discuss the matter in confidence with HR/Occupational Health/their ES or Line Manager.</p> <p>Employers have a duty under the Equality Act to ensure that employees with disabilities (including dyslexia) are not treated unfavourably and are offered reasonable adjustments or support. Large employers i.e. NHS Trusts would be expected to fund diagnostic assessments for their employees.</p> <p>Following the diagnostic assessment, or where an employee is able to show an existing assessment report or diagnosis, a workplace needs assessment should then be arranged with a field specialist in order to determine the most appropriate accommodations, training and support that would be successful in mitigating any weak areas and reduce stress. This needs to be managed with the support of local HR and Occupational Health service and is not something that either the individual or the educational supervisor would be able to work out for themselves.</p> <p>Following the outcomes of any above described assessments, the ES should contact the HEE LaSE Pharmacy TPD to discuss any adjustments needed to facilitate the successful completion of the training programme. This can be highly sensitive so trainee consent, in line with the Data Protection Act, is essential at all times.</p> <p>Issues of this kind would be categorised on the TRAS Assessment Matrix as ‘Other’ for reporting to HEE LaSE</p>

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Trainee issue	Possible courses of action and support
Alleged discrimination:	<p>Involve Chief Pharmacist and Educational Programme Director (if appropriate depending on circumstances).</p> <p>ES need to consider whether a trainee's performance or behaviour is being influenced by direct or indirect discrimination or by a lack of a support network.</p> <p>HR will need to be informed if discrimination is alleged, as this is an employment matter which could lead to a grievance being raised.</p> <p>Issues of this kind would be categorised on the TRAS Assessment Matrix as 'Other' for reporting to HEE LaSE</p>
Alleged bullying:	<p>Involve Chief Pharmacist and Educational Programme Director (if appropriate depending on circumstances).</p> <p>The identification and effective management of bullying can be complex and challenging.</p> <p>HR will need to be informed if bullying is alleged, as this is an employment matter which could lead to grievance being raised.</p> <p>Issues of this kind would be categorised on the TRAS Assessment Matrix as 'Other' for reporting to HEE LaSE</p>
Training environment: <ul style="list-style-type: none"> • mismatches between trainee and educational/practice supervisor • excessive workload • wrong level of expertise expected of trainee • supervision not congruent with level of expertise expected 	<p>Involve Educational Programme Director.</p> <p>The ES and EPD should review local education systems and infrastructure with Local Faculty Group support.</p> <p>May involve discussion with local Human Resources Department, Occupational Health, HEE Quality Improvement Team and Trust Quality Lead.</p> <p>Issues of this kind would be categorised on the TRAS Assessment Matrix as 'Other' for reporting to HEE LaSE</p>
Personal issues: <ul style="list-style-type: none"> partner/spouse relationship bereavement, critical family illness visa problems 	<p>Trainee should be advised to self-refer to Pharmacist Support, an independent charity supporting the profession www.pharmacistsupport.org</p> <p>Trainee should be advised to refer themselves to Practitioner Health Programme – an NHS treatment service for those unable to access confidential care through mainstream NHS routes due to the nature of their role and/or health condition.</p>

A Reference Guide for Pharmacy Trainees Requiring Additional Support

Trainee issue	Possible courses of action and support
	<p>Encourage trainees to access counselling and support services of the LEP through their human resources (HR) and occupational health (OH) departments and/or counselling services.</p> <p>Discuss with the trainee whether the relevant HEE LaSE TPD should be informed with details i.e. in case of resulting extension request.</p> <p>Issues of this kind would be categorised on the TRAS Assessment Matrix as 'Other' for reporting to HEE LaSE</p>
<p>Prolonged planned absence:</p> <ul style="list-style-type: none"> • Maternity leave 	<p>Trainees who are due to commence maternity leave or other planned periods of prolonged absence prior to completion of the training programme must be RAG classified as 'Red' and reported to HEE LaSE Pharmacy as soon as possible. The ES should arrange for a change control form to be completed for any trainees receiving salary support as this will be discontinued for this time. Trust HR and the Education Provider should also be informed. The HEE LaSE Pharmacy TPD will contact the ES to discuss the impact on the training programme and any adjustment able to be made to facilitate the successful completion of the training programme.</p> <p>Issues of this kind would be categorised on the TRAS Assessment Matrix as 'Other' for reporting to HEE LaSE</p>

Appendix 5 – Form A - Trainee Progress Review Record

Please complete this form with the trainee when concerns emerge. This form should be completed in conjunction with the TRAS Action Plan - Form B, if applicable.

Name of trainee:	
Name of Educational Supervisor:	
Persons present at the meeting:	
Date of meeting:	
Meeting led by:	
TRAS Assessment Matrix Category:	
Initial RAG Assessment Rating:	
Description of presenting issue:	
Summary of progress: <ul style="list-style-type: none"> Progress against objectives (specifically refer back to Action Plan Form B) 	
Discussion: <ul style="list-style-type: none"> Ongoing concerns New Actions (document on Action Plan) 	

Please consider the following and note issues identified:

Are they safe to practice:	Yes/No
Clinical performance:	Yes/No
Physical illness:	Yes/No
Environmental issue (workload/support)	Yes/No

Appendix 5 – Form B – TRAS Action Plan

Form B:

TRAS Action Plan – Working Document

This is a working document between the ES and their trainee that will be revisited and updated as actions are completed over time. It is important that both the trainee and the ES sign the action plan when it is created and at each review.

Document agreed SMART goals and objectives, i.e.:

- Specific*
- Measurable*
- Achievable*
- Relevant*
- Time framed*

Use work-based assessments as appropriate

Identified area of concern	SMART Objectives	How will I address them (action & resources)	Date set to achieve goal	Date actually completed

Date of next review:		(Circle the following if appropriate)	
		Refer to Occupational Health: Yes/No	Involve: Chief Pharmacist / HE LaSE Pharmacy Team / Other

Signed:.....
Trainee

Signed:.....
Educational Supervisor

Signed:.....
Educational Programme Director (or equivalent)

Form B continued. TRAS Action Plan Review

Review Number..... Date of Review:

Main points discussed:

Action points:

Action plan updated: Yes/No

Date of next review:		(Circle the following if appropriate)	
		Refer to Occupational Health: Yes/No	Involve: Chief Pharmacist / HE LaSE Pharmacy Team / Other

Signed:.....

Signed:.....

Signed:.....

Trainee

Educational Supervisor

Educational Programme Director (or equivalent)

Review Number..... Date of Review:

Main points discussed:

Action points:

Action plan updated: Yes/No

Date of next review:		(Circle the following if appropriate)	
		Refer to Occupational Health: Yes/No	Involve: Chief Pharmacist / HE LaSE Pharmacy Team / Other

Signed:.....

Signed:.....

Signed:.....

Trainee

Educational Supervisor

Educational Programme Director (or equivalent)