

QueenslandCountryPractice

Advancing rural health solutions



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Introducing Queensland Country jDocs

A unit of Darling Downs Hospital and Health Service

RG Supervision Essentials

RRMEO
Supervisor
Module

- Intro RRME0 module
- Giving Feedback (1'Preceptor Model) – video
- Show Video clips on feedback
- E-Learning Activity

QC jDocs
Guidelines

- Introduce the Queensland Country jDocs Guidelines incl. Supervision
- Supervision is patient safety

Workshop
Activity

- 'True and False' Questions
- 'Round Robin' Workshop

Panel
Session

- 'Ask the Experts''
- Q&A session (5 questions for 5 panel members)

**From Supervisor to
Superwiser**

What is Queensland Country jDocs

Queensland Country **jDocs** is a program that:

- Is safe and reliable for both junior doctors and patients
- Provides supervision that benchmarks national standards
- Currently in development is an ACRRM developed curriculum that will provide junior doctors with a quality education and training experience
- Curriculum is anticipated to be available Term 1 of the medical year 2018

Key Features of the Education Framework

- Uses the **Australian Curriculum Framework for Junior Doctors** as the foundation
- ACRRM will oversight the standards and program of education which has been tailored to a specific location
- 5 online modules
- Log book (optional)
- Junior Doctors are provided with **Certificate** of completion

Accreditation

Following implementation of the Curriculum, supervisors will be accredited by ACRRM upon following specifications:

- Current unrestricted registration
- Fellowship
- No less than 5 years experience in a rural setting
- Ability to act as appropriate role model
- Demonstrated commitment to professional development

Supervisor Role

Supervision elements have been **benchmarked** against **national standards** and include:

- Orientation and induction
- Formal and Informal supervision
- Pastoral care
- Resilient supervision

Clinical Governance

The program has been **designed** in such way to:

- Manage clinical governance risk
- Be active and assertive in advocating best patient care and safety for junior doctors
- Be committed to resilience

Supervisor Module

QCP has worked with ACRRM in development of an online module for Supervisors in RRMEO

Dr Tim Kelly, former ACRRM Board Director and former CEO of Adelaide to Outback GP Training Program, and currently contracted to deliver GP training to College standards will launch this module during this workshop

Panel Discussion

To start off the Workshop, we will commence with a few words of wisdom from our panel

As part of the panel, we have:

- A new supervisor
- An experienced supervisor
- A junior doctor
- A medical educator
- A hospital based supervisor

New Supervisor

Supervision is perceived by some as an increasing burden, especially with the changing needs of the new generation. By being a supervisor, you can expose yourself to adverse things such as criticism, safety risk and double patient workload. In addition, the medico-legal environment and expectation has changed. So, you have recently put your hat in the ring to be a supervisor

Q:Can you explain why someone would contemplate to be a supervisor?

Experienced Supervisor

In the medical media, you hear of junior doctors concerned with workload, fatigue, difficulty with work-life balance, bullying, harassment, stress etc. This creates a different dynamic and Supervisors these days need to be more vigilant and aware of these factors and instincts, in addition to their teaching duties.

Q: Can you provide some hints/pearls of wisdom of how to shift these aspects into a more balanced, rewarding and equitable relationship?

Junior Doctor

Q: How should we address the balance between your obligations and your supervision expectations and those of your Supervisor, who is attempting to navigate through your needs and expectations as a junior doctor?

Medical Educator

Supervision is not easy and open to criticism.

Q: When recruiting Supervisors, how do you explain and overcome elements such as perception, fear, expected conduct, values etc?

Hospital based Supervisor

The dynamic of being a Supervisor in a hospital environment can be different experience than being in a primary care situation.

Q: How do you tailor supervision that matches the perceived skills, confidence, and experience and team capability of the junior doctor with patient acuity?

Q: There are many variables depending on the context of the junior doctor, so how do you determine the minimum level and build scalability for the unforeseen?

True or False Questions

True



False



True or False

Question 1

▶ Good supervisors are born, not made

True  False 

True or False

Question 2

- ▶ The quality of the supervisory relationship is the key to effective supervision

True  False 

True or False

Question 3

- ▶ The ultimate purpose of supervision is to ensure patient safety

True  False 

True or False

Question 4

- ▶ Success as a supervisor depends more on technical knowledge than on people skills.

True  False 

Medical practitioners are encouraged to engage in teaching and training and supervising less-experienced colleagues

Question 1

What are some of the rewards and/or benefits of being a supervisor?

A common source of conflict in a supervisory relationship is an imbalance between support and challenge (too much support and not enough challenge will not aid the junior doctors' learning process)

Question 2

What are some strategies to build an effective supervisory relationship?

Giving feedback is one of the keys to assisting a junior doctor to grow and learn from their experience.

Question 3

As a supervisor, practical tips to provide effective feedback include.....

Supervisors have many roles and responsibilities and as such need to be supported in their roles as role models, mentors, facilitators, teachers, assessors etc.

Question 4

Can you offer some suggestions of ways in which we can support doctors who supervise?

Finding sufficient time for supervision is a challenge for which there are currently insufficient solutions

Question 5

What are some strategies that you have utilised to address this challenge?

RRMEO Demonstration