Public Services Delivery
Scotland

Supported Improvement: Working Guidance

Healthcare Science



Supported Improvement: Working guidance

NHS Public Services Delivery Scotland | Healthcare Science

Purpose

This guidance and the accompanying escalation pathway and documentation templates provide a structured approach when expected training outcomes have been clearly defined but are not being met. The aim is to identify the training difficulty, understand contributing factors, and agree appropriate support and actions to help the trainee progress.

The process should be collaborative, proportionate and evidence based. It should not begin with an assumption that the difficulty is caused by the trainee. Training, supervision, environmental and individual factors should all be considered fully.

Key principles

Principle	What it means	Example
Early	Raise concerns promptly.	Discuss difficulties when they emerge rather than allowing concerns to accumulate.
Specific	Use evidence, not assumptions.	Record dates, examples, agreed deadlines and previously communicated expectations rather than describing the trainee as “poorly organised”.
Supportive	Focus on improvement.	Agree targeted learning, additional supervised practice or more frequent feedback, where appropriate.
Fair	Consider the whole training context.	Consider whether expectations were clear and whether supervision, training opportunities, workload, wellbeing or other factors contributed.
Consistent	Apply standards consistently.	Apply programme requirements fairly, taking account of the trainees’ stage and any agreed reasonable adjustments.
Documented	Keep accurate records.	Record significant concerns, discussions, agreed support, actions and review dates.

Please see escalation flow diagram pathway in Appendix 1 and high-resolution image here: PSD HCS Supported Improvement and Escalation Pathway

DRAFT

1. Establish what is expected

Before deciding that there is a concern with training, establish what is expected of the trainee. The training team should answer the following questions before progressing through the PSD HCS Supported Improvement process:

- What is the trainee expected to do, and how is this documented?
- What specific learning outcome, competence, behaviour or standard is involved?
- Is the expectation appropriate for the trainee's stage of training?
- Is this expectation documented in the training plan or programme requirements?
- Has the expectation been clearly explained to the trainee, and do they understand it?
- Has the trainee had sufficient opportunity, training, supervision and resources to achieve it?

Only after these questions have been answered should the process move to supported improvement and ask: What evidence suggests that the expectations are not being met?

- Has the trainee had sufficient opportunity to practice or demonstrate the required competence?
- Has relevant feedback previously been provided?

Fundamental to supported improvement: Start with the expected standard and the evidence of what has happened. Do not start by trying to identify what is "wrong" with the trainee.

2. Identify and act early

Not every training difficulty requires a formal Supported Improvement Plan. Many issues can be addressed through routine supervision, feedback and adjustment to training. Supported Improvement should be considered where concerns persist, are significant, or require a more structured approach to understanding and supporting progress.

- Address concerns as they emerge rather than waiting for a formal review or assessment point.
- Use regular trainee-supervisor discussions to identify difficulties early and agree support before concerns become established.
- Focus on specific behaviours, performance and outcomes, and communicate these clearly to the trainee.
- Seek advice early from the Training Programme Lead or Manager, or the Healthcare Science quality assurance team at PSD Scotland, if concerns are escalating.
- A single serious event may require immediate action. In other circumstances, a concern may emerge through a pattern of events. Avoid drawing conclusions from an isolated incident without considering its context.

3. Gather and clarify the evidence

- Record facts, not opinions. Describe observed events, behaviours or outcomes rather than assumptions about their cause.
- Where information is reported by others, distinguish direct observation from second-hand information. For significant concerns, seek specific examples and, wherever possible, corroborating information.
- Include the trainee's perspective and draw on multiple evidence sources where possible.

DRAFT

Record

- What happened
- The expected standard
- When it happened
- Who directly observed it
- The impact on training, patients, the service or the team
- Whether it has occurred previously

Relevant information may include

- Directly observed work or behaviour
- Examples of work produced
- Training and competency records
- Documented feedback
- Previous meeting records and agreed actions
- Assessment outcomes
- Information from supervisors or others directly involved in training
- The trainee's own account and reflections

Avoid relying on hearsay or assumptions.

Rather than: "The trainee is disorganised."

Record: "Three pieces of work agreed for completion by Friday were submitted the following Monday. The agreed deadlines were documented at the previous supervision meeting."

4. Communicate clearly

- Involve the trainee early in understanding the concern and identifying contributing factors.
- Discuss concerns openly and constructively, explaining the expected standards.
- Actively seek the trainee's perspective.
- After significant discussions, provide an agreed written summary covering the concern, the trainee's perspective, agreed actions and support, and the review date.
- Where the trainee disagrees with a concern or interpretation, record and explore their perspective. Do not treat disagreement itself as evidence of a problem.

Suggested prompts

- What is your understanding of the concern?
- Do you agree with the examples described?
- Is there anything you think has been misunderstood or is missing?
- Are there factors that you feel have affected your progress?
- What training or support have you received so far?
- What has helped?
- What additional support do you think would be useful?

DRAFT

5. Consider the whole picture

- Once the concern is clearly defined, explore what may be contributing to it. Avoid deciding on the cause before gathering and discussing the evidence.
- Also consider what is going well. Existing strengths, successful approaches and areas in which the trainee is progressing normally may help identify appropriate support and avoid drawing conclusions from difficulties in one area.

Skills and knowledge

- Does the trainee know what is required?
- Have they developed the required knowledge or skill?
- Have they previously demonstrated it successfully?
- Is additional teaching, practice or feedback required?

Training and supervision

- Has sufficient training been provided?
- Is supervision appropriate and accessible?
- Has feedback been clear, timely and consistent?
- Have different supervisors communicated consistent expectations?

Training environment

- Has the trainee had sufficient opportunity to gain the required experience?
- Are service pressures, workload, rota arrangements, placements, equipment or other resources affecting training?
- Are there any specific tasks or aspects of the working environment that present barriers to progress?
- Are team or working relationships contributing?

Individual factors

- Has the trainee identified wellbeing, confidence, health or personal circumstances affecting training?
- Are there any learning, accessibility, or support needs that should be considered to support training and development?
- Might reasonable adjustments or Occupational Health advice be appropriate?

Previous experience

- Is there relevant previous feedback or a recurring difficulty?
- Has previous experience adequately prepared the trainee for the current stage?
- Is additional induction or transition support required?

Not every training difficulty is caused by the trainee. Trainers should not investigate health, disability or personal circumstances beyond what is necessary and appropriate for the training process. Where specialist advice is required, use the appropriate Occupational Health, workforce or support route.

DRAFT

6. Agree and provide appropriate support

- Once the concern and likely contributing factors are sufficiently understood, agree proportionate actions with the trainee.
- Support should address the specific issue identified rather than simply increasing the volume of training or assessment.
- Supported Improvement should not consist solely of repeated assessment. The plan should identify what training or support will help the trainee develop before progress is reviewed.

The plan should clearly record

- The specific area requiring improvement
- The expected standard or outcome
- Actions for the trainee
- Support and actions to be provided by trainers or the training centre
- How progress will be demonstrated
- The timescale
- The review date

Support may include

- Additional or more frequent supervision
- Targeted teaching or learning
- Supervised practice
- Additional opportunities to demonstrate competence
- Structured feedback
- Mentoring
- Portfolio or academic support
- Adjustments to the sequencing or timing of training
- Occupational Health or wellbeing support
- Reasonable adjustments, where appropriate

7. Review progress

- Review progress at the agreed time using the evidence and success criteria recorded in the Supported Improvement Plan.
- Has the agreed support been provided?
- Has the trainee completed the agreed actions?
- What evidence demonstrates progress?
- Has the expected standard been achieved?
- Are the original contributing factors still relevant?
- Has new information emerged?
- Is further support required?

Possible outcomes

- Sufficient improvement demonstrated: Supported Improvement can end.
- Improvement demonstrated but further development or support is required: revise or extend the plan.

DRAFT

- Insufficient improvement despite appropriate support: seek advice and consider further action.
- New or more serious concerns identified: consider appropriate escalation.

8. Seek advice or escalate when needed

- Supported Improvement does not replace established organisational processes. Some concerns require advice or action outside, or alongside, the Supported Improvement process.

Seek advice promptly where concerns involve:

- Immediate patient, trainee or staff safety
- Serious professional conduct or governance concerns
- Significant health or wellbeing concerns
- Disability or reasonable adjustments requiring specialist advice
- Attendance, employment or capability matters
- Lack of progress despite appropriate training and support

Where concerns may relate to conduct, capability, attendance, health, disability, reasonable adjustments or other employment matters, trainers should seek advice through the appropriate local management, education, Occupational Health, workforce/HR, governance or organisational policy route. Supported Improvement does not replace local organisational policies or statutory or professional requirements.

Before progressing Supported Improvement, check

☐ Is the expected standard clear and appropriate for the trainee's stage?

☐ Is the requirement documented within the training plan or programme?

☐ Does the trainee understand what is expected?

☐ Have appropriate training, supervision and opportunities been provided?

☐ Can the concern be described using specific evidence or examples?

☐ Have direct evidence, reported information and opinion been distinguished?

☐ Has the trainee's perspective been actively sought and recorded?

☐ Have training, supervision and environmental factors been considered?

☐ Have wellbeing and reasonable-adjustment needs been considered where relevant?

☐ Is the proposed support directly related to the identified difficulty?

☐ Are actions, responsibilities, success criteria and review dates clear?

☐ Have significant discussions and agreed support been documented?

☐ Is advice or escalation required through another organisational process?

Suggested trainee documentation structure with templates

1. Local Trainee Induction checklist
2. Expected Training Outcomes
3. Evidence of Concern
4. Supported Improvement Action Plan
5. Supported Improvement Review and Outcome

Appendix 1 Supported Improvement Escalation Pathway

High resolution source image found here: PSD HCS Supported Improvement and Escalation Pathway

