**NHS England, working across the North East and North Cumbria**

**Memorandum of Understanding**

Between

The Hub Practice

and

The Spoke Practice

And

NHS England, North East and North Cumbria Postgraduate School of Primary Care

**The Hub Practice;** will hold the fundingand provide the specific teaching and assessments necessary for the MRCGP. The hub practice must be an already approved training practice or in the process of becoming an approved training practice.

**The Spoke Practice**; will provide clinical supervision supporting postgraduate doctors with day to day clinical issues in debriefing sessions and provide pastoral care as required. The Spoke trainer will attend a one day [Level 1 Clinical Supervisor training course](https://madeinheene.hee.nhs.uk/general_practice/Trainers/Level-1-Clinical-Supervisor-Training). They will receive a certificate confirming they are registered with the School of Primary Care as a Primary Care Clinical Supervisor, which will be valid for 5 years.

Level 1 CS training will cover:

* Giving feedback
* Educational theory on problem-based learning
* Record keeping. The practices will need to have a clear communication of progress of the postgraduate doctor in the form of a shared trainer held record, including use of educators notes on the postgraduate doctors eportfolio

The Spoke practice can deliver a maximum of one tutorial per month but would not be expected to perform any of the required workplace-based assessments [WPBA] for the postgraduate doctor – these would remain the responsibility of the Hub practice. The Clinical Supervisor would need to be available for clinical queries as they arose and to provide opportunities for debriefing after surgeries to confirm safe practice has been delivered.

There will be a practice visit to the Spoke practice as part of the approval process for the GMC.[The visit checklist](https://madeinheene.hee.nhs.uk/LinkClick.aspx?fileticket=sJMKu85TO3g%3d&portalid=6) outlines what will be looked at during the visit.

**Both practices**; will need to provide a period of induction to allow the postgraduate doctor to settle into the systems and culture of the practice, this is usually up to 2 weeks in total but is flexible according to need.

Training and other issues will be shared between trainer and clinical supervisor on educators notes of the e-portfolio. The Spoke supervisor will have access to the e-portfolio but would not be expected to do WPBA. There will be a statement included in the postgraduate doctor work schedule to highlight that both supervisors will have access to the postgraduate doctor ePortfolio but this should also be discussed at induction.

The postgraduate doctor can work in no more than two practices (one hub and one spoke). The postgraduate doctor should have access to a clinical supervisor at all times

The postgraduate doctor must be based in the hub training practice for at least 50% of their time [four sessions if full time, pro-rata if LTFT]. The generic timetable must also include:

* One session for in-house tutorials
* One session for self-directed study
* Postgraduate doctor will be released for regional teaching sessions as stipulated by the Training Programme. These form part of the postgraduate doctor's Study Leave allowance.

A [job plan](https://madeinheene.hee.nhs.uk/LinkClick.aspx?fileticket=MigsmlfAmDk%3d&portalid=6) will need to be submitted to and approved by the relevant GP Training Programme.

**The Hub Practice**

(Hub Trainer signature):

Date:

Name:

Organisation:

**The Spoke Practice**

(Spoke Trainer signature):

Date:

Name:

Organisation: