Royal College of Physicians associate college tutor role description

Purpose and scope

Royal College of Physicians (RCP) associate college tutors (ACTs) have an important and key role in supporting their local RCP college tutor (CT) by acting as representatives for, and the link between, physician trainees and their CT. In essence, the ACTs represent the interests of junior doctors who are training for a career as a physician, and they are concerned with issues relating to professional training, postgraduate education and the maintenance of clinical standards. ACTs are a vital part of the RCP’s strategic aims and they provide valuable support for their CT in addition to acting as the voice of trainees within their trust.

The importance of ACTs has prompted the need for a clear description of the role, its value for an individual’s professional development and the RCP’s expectations of those who are successfully appointed.

RCP relationships and local networks

ACTs are expected to report to their CT for guidance, and will be regionally linked to the RCP via their CT, regional adviser and regional office. ACTs, along with their CTs, are expected to attend any regional meetings that are set up by their regional adviser. ACTs should be in contact with their local trainee representatives, new consultant representatives and the RCP chief registrar (where there is one) within their hospitals.

Why become an ACT?

- development of management and leadership skills
- an opportunity to get involved in teaching and training
- an opportunity to represent peers and support trainees within their trust
- a chance to work with the CT and be a part of the local RCP regional network with the regional adviser
- an opportunity to get involved with the work of the RCP
- opportunities to design and develop projects to improve trainee experience
- a gateway to future leadership roles, eg as a CT
- recognition of involvement with the RCP.
Role description

Trainee representation

- ACTs represent the interests of junior doctors who are training for a career as a physician. They act as a link between trainees, the CT and the RCP. Because ACTs have direct access to their CT and to the RCP itself, they can give feedback on local educational and professional issues.
- ACTs will be vital in supporting implementation of the internal medicine (IM) curriculum.
- It is recommended that ACTs make contact with physician trainees in their hospital to explain their role, promote education and support professional development and training (including flexible training). Issues that ACTs may be involved in include those related to professional training, postgraduate education and the maintenance of clinical standards.
- ACTs would meet with trainees as part of a junior doctors forum for physician trainees (a frequency every 6 weeks is advised but this may vary to suit local circumstances) in order to gain trainees’ feedback and to address any issues that arise. It is important that ACTs maintain confidentiality and do not disclose confidential information.
- ACTs would be available to provide peer support for their physician trainees. Difficult issues that arise, or that ACTs are unable to address, should be discussed immediately with their CTs.
- The RCP is being asked by many organisations such as the Care Quality Commission (CQC) about staffing levels and concerns voiced by junior doctors in individual trusts. ACTs and other trainees may escalate such concerns to the CT. If the CT then feels that the concerns are not being addressed locally and require escalation, they can communicate with the Linacre fellow or the registrar at the RCP.
- ACTs support their CT in their duties, eg ensuring that teaching programmes are organised and well attended, and that careers guidance and practical support is accessible for all trainees. ACTs should also be involved in helping their CT with the organisation of a practical assessment of clinical examination skills (PACES) teaching programme.
- ACTs will provide a valuable contact point for the dissemination of information from the RCP and should ensure timely distribution of news and events to their trainees.
- ACTs will also be expected to maintain regular contact with the regional trainee representatives who sit on the RCP Trainees Committee, to ensure that there is two-way communication of issues relating to training that is of local, regional and national importance.

Working with RCP CTs

- ACTs will be overseen by, and report to, the CTs within their hospitals.
- Once appointed, ACTs should meet with their CTs and discuss the objectives that they hope to achieve in their role (please see ACTs appointment checklist form). This may be to ensure the continuation of current good practice within the trust, but it may also be to outline a new project or development that they would like to make during their appointment and the time frame in which this should be completed.
- It is good practice for ACTs to meet with their CT periodically (about every 2 months), for an update and to enable objectives outlined upon appointment are being met.
RCP local and national meetings

• The RCP runs national meetings for CTs and ACTs. ACTs are encouraged to attend these days to network with colleagues and to keep up to date.

• ACTs are encouraged to attend regional meetings that are organised and chaired by the regional adviser to discuss RCP and professional matters.

• ‘Update in medicine’ visits are held annually across the country and they provide an excellent opportunity to meet the RCP president and other senior officers. ACTs are encouraged to attend these updates, when possible.

• Additionally, ACTs should make contact with their regional representative on the Trainees Committee as outlined above (trainees.committee@rcplondon.ac.uk) and with the local regional adviser (via the RCP regional office).
RCP associate college tutor appointment process

Qualification and tenure

- In the majority of instances, ACTs would be core (core medical training (CMT)/IM) or higher specialty trainees, although locally employed doctors are welcome to apply.
- It is expected that an ACT is a subscribing member of the RCP.
- The RCP recommends that within one hospital there should be at least one CT and ideally (depending on the trust’s size) two ACTs, with one at core (CMT/IM stage 1) level and other at higher trainee level.
- In larger hospitals there may be need for more ACTs but the recommendation is that there are no more than two ACTs for each CT.
- The ACT role should be advertised formally by the CT in conjunction with the outgoing ACT.
- Interested candidates should express their interest in writing to their CT.
- An informal interview process, conducted by the CT and postgraduate medical education department, will determine the successful candidate.
- The duration of the role is likely to be determined by the time the successful candidate spends at the hospital concerned. As a general guide, it is envisaged that most ACTs will hold the post for a minimum of 1 year and a maximum of 3 years. This time frame allows for continuity within the role and it provides an opportunity for ACTs to become involved in more substantial work.
- Upon demitting the role, there should be a formal handover to the successor by the outgoing ACT, with a period of shadowing where possible.
- The geographical area for which ACTs are responsible should be the same as that of the local CT. This is the area that is covered by the trust / health board or by a particular hospital within the trust / health board, depending on local circumstances. It should include those hospitals that are separate from the main district general hospital (DGH) – for example, many trusts have outlying hospitals for palliative care, rehabilitation etc.

Evidencing engagement with ACTs

- Any change of ACT should be communicated to the RCP regional teams via the CT and the employing hospital, copying in: RCPTutors@rcplondon.ac.uk.
- ACTs are expected to complete the ACT appointment checklist form, to evidence their engagement with the ACT role. This form will be sent to ACTs after they have notified the RCP via their local regional office of their appointment.