

Capability, conduct and managing concerns

20 September 2023, Version 1

The term Supervisor is used throughout this document to denote someone who is acting as a Supervisor or Mentor to an international dental graduate working in general practice whilst obtaining their performer list number without conditions. They are the named dentist identified to NHSE that is responsible for providing reports and sign off for clinical references for this person.

Introduction

This is a brief, practical guide for managing the concerns and challenges that can arise whilst supervising other dentists. It is not exhaustive, and it is expected that the Supervisor will use their experience, mentoring and educational skills in conjunction with gaining support from the Clinical Adviser.

Dentists new to the NHS can experience a wide range of challenges, both professional and personal during this transition phase. Problems may be intrinsic or extrinsic and evoke differing responses.

They raise concern when manifested by:

- Underperformance
- Changes in behaviour
- Failure to progress satisfactorily

Early intervention can prevent escalation and reduce any negative impact on their progress. As soon as you have concerns, you should:

1. Engage openly and honestly with the individual
2. Evidence, validate and document your concerns carefully
3. Share the information gained with the dentist.

Most issues can and will be dealt with at a local level with appropriate action plans, assessment, and support. Advice should be sought from the Clinical Adviser if the issues are not locally resolved, and any concerns related to patient safety must be reported to them immediately.

The main source of support and first port of call should be your Clinical Adviser. You should expect to work closely with them in the assessment and management phases. The nature of support required will be determined by the issues raised. For complex or high risk cases, external advice and support may be appropriate. This may be accessed via advice following guidance from the Clinical Adviser.

Please remember that irrespective of the issues, the individual dentist can and will expect to be treated fairly and consistently in a transparent, evidence-based, and supportive process.

Many dentists new to the NHS will have good levels of insight and approach the Supervisor if they have concerns about their own performance, health, or personal issues. These may have transient or longer term implications for performance depending on the nature of the problem. However, some will lack insight, not feel able, not know how to approach the problem or be in denial. Then the onus will be with the Supervisor to identify these individuals and provide appropriate support.

Overall performance is dependent on, and the result of, complex interactions. Performance can be thought of as the synthesis of capability (the ability to do the task) and conduct (the quality of personal interaction and behaviour demonstrated by the practitioner).

Capability requires

1. A suitable environment demonstrating:

- An ethos and culture which promotes learning involving all of the practice team
- Understanding, recognition and acceptance of the limitations and fallibilities of an international dental graduate consistent with being new to NHS practice
- Provision of appropriate patient safeguards and support
- Effective administrative support and functional equipment, IT, and referral systems
- A wide range of patients whose requirements will facilitate learning and progression
- A suitable workload in terms of quantity, variety, and complexity of treatment to meet their development needs. This will vary with each individual dentist.

2. A competent practitioner demonstrating:

- Clinical competence appropriate and comparable to that of their peers
- Safe, evidence based practice
- An ability to identify theoretical knowledge relevant to the clinical need and how theory translates into practical application
- Effective and justified decision making pathways
- Good communication skills with patients and professional colleagues
- Ability to deliver good patient experiences and patient outcomes

3. Capacity—a healthy practitioner demonstrating:

- Good physical health
- Good mental health
- Resilience in adverse and challenging circumstances
- Recognition of differing needs and acceptance of support required where appropriate

Conduct requires

1. Appropriate and acceptable behaviours demonstrating:

- Respect for others
- Adherence to professional standards, guidelines, educational agreements and practice policies

2. Ethical and professional attitudes demonstrating:

- Honesty, authenticity, and insight
- Responsibility for and ownership of actions and outcomes

Early Warning signs

Dentists experiencing difficulties tend to display certain types of behaviours and attitudes, the most common of which are:

1. Lack of insight:
 - failure to accept constructive criticism
 - lack of flexibility
 - resistance to change
 - defensiveness
 - inappropriate requests for help
2. Reduced levels of professionalism:
 - poor behaviour and attitude
 - arrogance
 - disrespect towards patients, staff and professional regulatory frameworks and governance
 - misuse of internet or social media
3. Inability to take personal responsibility and ownership:
 - a significant number of minor incidents apparently outside their control, that cause persistent minor infringements, e.g., punctuality, missing deadlines, needing to finish the day early, delays in completing
 - failure to confront issues
4. Poor personal organisation and time management, disengagement from the educational Process:
 - failure to utilise clinical time and opportunities effectively
 - difficulties with project work, reflections, and audits
5. Erratic or inappropriate behaviour:
 - outbursts
 - inappropriate behaviour with colleagues or patients
 - imagined slights, victim mentality
6. Low work rate:
 - difficulties in completing tasks within a reasonable timeframe-clinical or administrative
 - unusually long appointments/inappropriate number of appointments for courses of treatment
 - turning up early and leaving late without completing tasks
 - procrastination, avoidance of certain procedures
8. Patient complaints and negative feedback from peers and colleagues
9. Poor quality clinical work and/or failure to evidence progression
10. Disappearing act:
 - persistent failure to respond to requests via email, text, and voicemail
 - frequent short term sickness absence without medical advice or confirmation.

Questions to consider

1. What are the primary issues?
2. What are the contributing and /or mitigating factors?
3. Is there a patient safety issue?
4. Is the practice environment fit for purpose?
5. Is the dentist physically and mentally fit and well?
6. Can they demonstrate clinical competence?
7. Do they know when to ask for help appropriately?
8. Is their conduct and behaviour satisfactory?
9. Do they have insight into their performance?
10. Will they engage with a support process?
11. What evidence do you have to substantiate your concerns?

Dentists who experience difficulties which impact on performance will require appropriate support. However, the underlying problems are usually multifactorial, interrelated, and complex. Each situation will require careful analysis so that correct action can be taken.

Important information may come from the allocated dental nurse, dental colleagues, the practice team, and patients via formal or informal routes. It is important that any team member or patient raising concerns is fully supported. All verbal concerns must be listened to carefully. Discussions must be documented, signed, and dated by all parties to have validity.

The level of concern and risk needs to be established from hard evidence and thorough, objective analysis. This will determine the level and type of support that will be required. If you have concerns about your Mentee, you must have evidence to support this. Concrete examples of their actions, lack of action or behaviours should be collected.

Top Tips

If you identify performance concerns:

1. Get robust objective evidence – concrete examples
2. Document all conversations making sure verbal information is recorded and signed
3. Talk to your Clinical Adviser
4. Maintain confidentiality
5. Engage with the dentist – be open and honest about your concerns
6. Reassure the dentist that the common goal is to get them to satisfactory completion of the ECSP within the timeframe
7. Discuss the support process with them so they know what to expect
8. Work with the dentist to come up with solutions rather than just listing the problems and identify methods to address these and the person's learning needs
9. Develop an action plan and agree how to provide evidence it has been completed

What should I do if they pose a risk to patients?

1. You must alert your Clinical Adviser
2. Provide robust, fully documented evidence of all conversations and concerns with supporting examples
3. You must treat the individual strictly in accordance with employment law, practice governance, local and national guidelines at all times.

Support can be found at:

<https://www.england.nhs.uk/supporting-our-nhs-people/support-now/>

Support can be gained via your local professional committee or your indemnity organisation.

Professional support is also available through Practitioner Health:

w: www.practitionerhealth.nhs.uk t: 0300 030 3300 e: prac.health@nhs.net

In personal crisis and unable to cope, text NHSPH to 85258