

Near-peer support

Heads of terms

April / 2021

The Health Education England (HEE) [Foundation Programme Review](#) (2018-19) heard that some foundation doctors felt uncomfortable reaching out to senior colleagues for advice relating to what they perceived to be routine matters.

Foundation doctors suggested that trainees would make effective supervisors, but the challenges in allowing the latter to act as educational supervisors (while managing their own training, supervision, and rotations) were considered prohibitive.

The use of trainees as mentors or near-peer supporters was encouraged by the Review. Acting as a near-peer supporter is a pathway to developing the skills and experience needed to become a clinical or educational supervisor.

HEE and the Academy of Medical Royal Colleges (the Academy) established a short-life working group to explore and develop setting up a scheme whereby trainees support foundation doctors. The term 'near-peer support' was judged to be most appropriate to reflect that the proposed scheme [blends aspects](#) of both buddying and mentoring.

HEE and the Academy recognise that there are some such schemes in place in some regions (e.g. WARD in the South West). Where Local Education Providers (LEPs) already have a strong existing framework for mentoring, buddying or near-peer support, they can continue with these arrangements. If there is no defined framework or formal scheme available, however, LEPs are advised to adopt the scheme outlined in the accompanying Implementation Guide. This will ensure all foundation doctors and trainees have adequate access to near-peer support opportunities.

It is anticipated that all LEPs in England will adopt the scheme (or have a comparable one in place), following the recommendation in HEE's Foundation Programme Review. LEPs in Scotland, Wales and Northern Ireland are also encouraged and warmly welcomed to adopt this scheme if they wish.

The scheme is underpinned by the following principles:

- The [Foundation Charter](#) lists as an expected standard that Trusts/ LEPs must facilitate a near-peer support network (see point 11, page 12). Successful existing schemes can continue and need not be replaced. Where no such scheme exists, the template provided here should be implemented.
- Foundation doctors should have access to support from a trainee more senior than themselves, but not one who is too distant (hence 'near-peer'), who better understands the challenges faced during the foundation years.
- The scheme would be available to all foundation doctors. Participation would not be mandatory, but they would be asked to 'opt-out' if they do not wish to participate to encourage take-up.
- Trainees who wish to take part as near-peer supporters will need the support of their educational supervisor (ES). Trainees with an Annual Review of Competency Progression (ARCP) outcome 3, 4 or 5 are not advised to take part, to enable them to focus on their own progression.



- Clinical Fellows or equivalent Specialty Doctors should also be considered eligible to be near-peer supporters, but will need access to local support if they do not have an ES.
- Matching of near-peer supporters with foundation doctors will happen at local (Trust) level. Research on differential attainment suggests that having a mentor from a similar background can be more successful. This should be facilitated where a specific request is made.
- There will be a no-fault break period if either or both parties wish to dissolve the arrangement and a new pairing should be instituted instead. There will be more formal escalation pathways at local level where serious concerns are raised.
- Both foundation doctors and near-peer supporters will have opportunities to feed back on how the scheme is working for them. The foundation doctor's feedback on the support they have received should be shared (where appropriate) with their supporter, to help them develop their skills.
- Near-peer supporters will receive recognition for taking part. Near-peer support can be linked to the Generic Professional Capabilities (GPCs) as part of specialty training, and evidence of skills gained can be gathered for use at their ARCP.

NB: This framework is intended to support the implementation of near-peer support as a base level requirement. If individual LEPs wish to provide further/ additional initiatives – e.g. group peer-support sessions, opportunities for trainees to train as mentors – this would also be welcomed, and can be arranged locally.