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OPINION ARTICLE

Functions of Dermatology Residents' Supervisors[☆]

Funciones de los tutores de residentes de Dermatología

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Training future dermatologists is part of our function as physicians, who must transmit our knowledge to the generations who will replace us. This forms part of the daily routine of our professional activity in all hospitals with teaching accreditation for training residents. I think we can all agree that it is essential to train new dermatologists and that they be trained as well as possible.

This transmission of knowledge, skills, and attitudes between generations has always existed in the world of medicine and specifically in dermatology, probably intuitively and in an unstructured manner. But the MIR medical specialist training system, based on learning in a working environment, did not begin to function until the 1960s with the "Seminario de Hospitales" (seminary of hospitals), which later spread within the national health system thanks to the pilot programs. It was in 1984, through Royal Decree 127/1984,¹ that the MIR training system became, very generally, structured, with regulation of specialist medical training and acquisition of the title of medical specialist, which has undoubtedly been a key element in the prestigious development of our health care system.

Subsequently, Law 44 of 21 November 2003,² on the organization of health care professions, modernized the specialism training system into Health Sciences and adapted this system to the consolidation of the Spanish state of

autonomous regions. Royal Decree 1146 of 6 October 2006³ which regulated the special occupational relationship of resident for the training of Health Science specialists was a development of that law. This provided the regulation, for the first time and in a systematized and detailed way, of the occupational aspects of the relationship that connects these trainee specialists with the centers in which they train, and also of basic aspects such as the figure of the tutor, teaching units, teaching committees and assessment procedures.

Nevertheless, it was essential to continue to advance and evolve to get our training system to have excellence as its goal. Because of this and because of the need to adapt to the European Higher Education Area, new regulations were set out in 2008, in Royal Decree 183/2008.⁴ This royal decree contains an overall list of all the specialisms in health sciences, in the open and flexible configuration of the teaching units, and regulates basic aspects of the different collegiate and single-person bodies that are involved in the training process, laying out a common set of regulations for the entire resident assessment system by means of instruments that make it possible to determine compliance with the quantitative and qualitative goals and professional skills that a resident must acquire, according to the provisions of the corresponding training program, and introducing the option to review assessments into that process. But changes were also made to some teaching figures, especially in the expansion of the competencies of the tutor as a key figure in the process of training residents, in Article 11 of the royal decree. The tutor is defined as a single-person teaching body and the concept, functions and manner of appointment are established (Table 1).

The functions of the tutor are clearly set out in the royal decree, giving this figure a central role in the training of res-

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Table 1 Profile and Functions of the Residents' Tutor.

Residents' tutor: profile and functions	
The tutor is the <i>specialist professional in active service</i> who, being accredited as such, has the mission of <i>planning and actively collaborating</i> in the learning of knowledge, skills and attitudes of the resident in order to <i>ensure compliance with the training program of the specialism in question</i> .	Active, accredited specialist Plan Collaborate Ensure
The tutor is the <i>leading figure responsible</i> for the <i>teaching-learning</i> process of the resident and shall, therefore, maintain <i>continuous and structured contact</i> with the resident, regardless of the disposition of the teaching unit in which the training process is carried out.	Leading figure responsible Continuous and structured contact
The main functions of the tutor are to <i>plan, manage, supervise</i> and <i>assess</i> the entire training process, proposing, as appropriate, improvement measures in the provision of the program and encouraging self-learning, the gradual assumption of responsibilities, and the research ability of the resident.	Plan Manage Supervise Assess
The tutors of each specialism shall propose the <i>standard guidelines or training itinerary</i> of the specialism, which shall be approved by the Teaching Committee, subject to the provisions of the corresponding program. The aforementioned guidelines, which shall be applicable to all residents of the specialism who train in the teaching unit in question shall be understood to be without prejudice to its <i>adaptation to the individual training plan of each resident</i> , drawn up by the tutor in coordination with the heads of the patient-care units and other tutors of residents training in the teaching center or unit.	Standard guidelines or itinerary Adaptation
The tutor, who, unless with justified cause or in specific situations deriving from the inclusion of core criteria in specialist training, <i>shall be the same tutor throughout the training period</i> , shall have assigned to them a <i>maximum of five residents</i> .	Same tutor Maximum of 5 residents
The autonomous regions shall adopt the measures necessary to ensure <i>sufficient dedication of tutors</i> to their teaching activity, either within or outside their ordinary working hours.	Dedication

idents, as the figure responsible for the process of teaching and learning by means of *planning, management, supervision and assessment* of the resident, specifying that there shall be continuous structured contact and clearly establishing that the tutor is responsible for proposing the guidelines or training itinerary of the residents and their adaptation to each of them.

Concept of the tutor: the tutor is an active professional who, being accredited as such, has the mission of planning and actively collaborating in the learning of knowledge, skills and attitudes of the resident in order to ensure compliance with the training program of the specialism in question.

Profile of the tutor: the profile of the tutor shall be appropriate to the professional profile designed by the training program of each specialism. The tutor is the leading figure responsible for the teaching-learning process of the resident and shall, therefore, maintain continuous and structured contact with the resident, regardless of the disposition of the teaching unit in which the training process is carried out. Furthermore, the tutor, with the aim of following this learning process, shall hold periodic interviews with other tutors and professionals involved in the training of the resident, with whom they shall analyze the ongoing learning process and the corresponding training assessment reports, which shall include those of the rotations carried out.

Functions: the main functions of the tutor are to *plan, manage, supervise* and *assess* the entire training process, proposing, as appropriate, improvement measures in the provision of the program and encouraging self-learning, the

gradual assumption of responsibilities, and the research ability of the resident.

- Propose the *standard guidelines or training itinerary* of the specialism to the Teaching Committee.
- Propose *external rotations* to the Teaching Committee, specifying the proposed goals.
- *Guide* the resident throughout the training period, establishing a schedule of regular meetings, with a minimum of four meetings per year.
- Carry out *periodic interviews* with other tutors and professionals who are involved in the training.
- Complete the standardized *training assessment* reports, which shall be included in the personal record of each trainee specialist.
- Write the *annual report* for the annual assessment of the resident in the process of acquiring professional skills, both in patient care and in research and teaching.
- Welcome the resident on their *incorporation* into the Teaching Unit or Center and inform them of the organization of said unit or center through a *welcome program*.
- Notify the teaching center or unit of requests by residents to take part in courses, conferences, and other teaching activities that require permission.
- Any others aimed at planning, stimulating, directing, following up and assessing the learning process of the resident in the health care organization setting.
- Moreover, and in close relationship with the teaching organization, *they shall organize, coordinate, direct and*

control the development of the teaching program of each of the residents in training in their charge, in order to attain the goals proposed for the training period of each resident.

- Update and properly apply the necessary skills for the resident to achieve significant learning, *identify the real skills* acquired by the resident and be able to verify that the learning of the trainee specialist has been incorporated into their clinical practice.
- Attend, collaborate on, and take part in *non-patient care activities* of the teaching center or unit, in relation to the training of residents, and in activities organized by the teaching center or unit for the tutors.
- Advise the Teaching Committee on matters pertaining to the training of the specialism.
- *Identify the training needs* and learning goals of the trainee specialists, which shall be set out in an individual training plan for each resident.
- Act as *referee and interlocutor of the resident*, resolving incidents that may arise between the resident and the organization and watching out for the teaching and training interests of the resident.
- *Encourage teaching and research activity*, advise on, and supervise the research work of the resident.
- Encourage the *gradual assumption of responsibility* in patient care by the resident, supervising the content and performance of the patient-care activity of the residents. Advise, inform, and promote bibliographic progression in matters relating to the specialism and to care practice.
- Perform *ongoing training assessment* of the trainee specialist and take part in annual and final assessment committees with the Chair of the Teaching Committee to assess compliance with the teaching goals. Supervise and complete the "Book of the Trainee Specialist" of the trainee specialist in their charge.
- Any other tasks that may be assigned to them by the training program of the corresponding specialism.

The tutor is the figure ultimately responsible for the resident's training process vis a vis the institutions and, ultimately, vis a vis society. In this regard, the function of assessing the resident is fundamental, as the tutor is telling society that that resident is fit to carry out their function as a specialist.⁵⁻⁸

Order SCO/581, of 22 February 2008,⁹ which establishes the general criteria relating to the composition and functions of the teaching committees and head of specialist training studies, also mentions the appointment of the tutor. Said *appointment* shall be carried out by the governing body of the body running the teaching unit, at the proposal of the teaching committee and following a report of the head of the patient-care unit of the corresponding specialism, among previously accredited professionals, who provide their services in different units integrated in the teaching center or unit and who hold the title of specialist. Furthermore, each tutor shall be the tutor of no more than 5 residents and shall be the same tutor for the 4 years of the residency.

Although 10 years have gone by since the royal decree of 2008 was passed, difficulties remain in implementing all the aspects mentioned in it. The tutor is an essential figure in the residents' training process; nevertheless, there is considerable ignorance regarding the tutor's functions among

Table 2 Skill Domains.

Skill Areas
1 Clinical expert (patient care)
2 Scientific foundations (medical knowledge)
3 Health promotor, resource manager (practical based in the health care setting)
4 Professional values, attitudes, and ethics (professionalism)
5 Critical analysis and research Self-learning
6 Information processing
7 Communicator

health care professionals and residents. In terms of our specialism, the training program was published in 2007 (Order SCO/2754 of 4 September 2007)¹⁰; that is, before the publication of the royal decree of 2008, which establishes the functions of the tutor.

Furthermore, the Autonomous Regions shall be responsible for the development of the Royal Decree of 2008 with the objective of determining the mechanisms that will make it possible to establish accreditation, appointment, time dedicated to teaching and recognition of the tutors. Nevertheless, only a few have done so, which leaves us, in many cases, with a lack of regulations. In any event, the development of the functions of the tutor established in the royal decree requires time to be dedicated to it. Teaching residents is the responsibility of the entire department and must be included in the planning of the department, including the teaching time dedicated by the tutor. *Teaching accreditation* is a commitment to society and the structural, organizational and human resources to carry it out must be made available.¹¹ The tutor, as the person responsible for the residents' training process, should be involved in the planning of the department's activity insofar as it affects the residents, and their functions must be considered as part of *clinical management*.⁴ All the members of the department should be informed of the development of the training of their residents by means of an annual meeting held by the residents' tutor.

Specialist health care training must develop the initiatives that make it possible to respond to the new society, adapting us to the new context of education and international professional practice. In this regard, skill-based medical training is the future into which we are headed, with simple assessment tools that have been validated and accepted by all the agents involved in the training process.¹² "Competence would be the effective ability to successfully carry out a fully identified work activity"¹¹ (Table 2). The tutor would be the backbone of this entire skill-learning process, which will lead to returning to society a specialist of real and proven ability, which can be measured through results.^{6,7}

It is the responsibility of all of us to ensure that the specialist training system, which has produced such good results in Spain, continues to improve and adapt to the new times. The *tutor* must assume his or her important role of *leadership* in the training process and claim their functions and rights, which will undoubtedly result to the benefit of the residents' training.¹²

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