

**Runner up one (second place)**  
**Miss Charlotte Patient (East of England)**

**Job title of nominee (e.g. consultant, sonographer etc.):**  
Consultant Obstetrician Gynaecologist

**Formal training roles held by nominee (e.g. head of school, training programme director, college tutor etc.):**  
Head of School

**Statement of nomination (600 words):**

Miss Charlotte Patient, our recently appointed Head of School, is the East of England nominee for trainer of the year. My starting point in the search for our regional nominee was the recently compiled Training Evaluation Form data, which included a field for trainees to name and describe a trainer who has exerted a particularly profound positive effect upon their training and well being. Miss Patient was named several times more frequently than the nearest rival, even allowing for the fact that she is based at a large unit with many trainees.

A selection of comments offers further insight:

*"Excellent in every way; always approachable, sound clinical knowledge, incredible trainee support and willingness to spend time discussing difficulties"*

*"Simply Wonderful"*

*"Incredibly Supportive"*

Notwithstanding the above I resolved to investigate further, fearing allegations of an unoriginal stitch-up was I to nominate my own Head of School. The result of my canvassing the options of fellow trainees at Cambridge, and the many who have rotated through Cambridge at some point in the past was a revelation, and I was able to lay my trepidations aside without hesitation.

I heard of Charlotte Patient the clinician and educator, a rare doctor who is able to turn everyday rounds into a master class in clinical decision making, enabling her junior colleagues to actually understand the reasoning behind and the practical application of clinical guidelines. While doing so she remains an exemplar in maintaining the principle of sharing decision making with her patient, which is such a crucial and often neglected goal in our specialty.

I was told of Charlotte Patient the passionate trainer, who knows exactly which skills each of her many trainees need to work on, and who takes the time to track them down when opportunities arise to practice these under her deft and reassuring supervision, regardless of how much of her own time this consumes. Trainees have spoken of how habitual errors in their technique were spotted and gently corrected, leading to improvements in patient care that will last through careers.

My colleagues also spoke of Charlotte, a friend and mentor they were able to approach in times of personal and professional difficulty when they doubted their choice of specialty and their ability to persist and flourish. At least two fellow trainees doubt they would have continued without her support and encouragement.

Equally clear has been her effort in making sure that she does not stand alone in imparting these qualities. She is passionate in her encouragement of consultant colleagues to adopt a similar approach towards teaching and supporting trainees. This has become altogether more evident since her appointment as Head of School and I have had the pleasure of seeing her zeal for improved training transferred to regional college tutors at school board and other meetings.

It is a tremendous outcome that my region has appointed a Head of School with such a genuine love for, and track record in upholding the needs of trainees. Miss Patient is a role model as clinician, educators and mentor and as such I hope the judging panel will agree with my view that this should be recognized not only by a flurry of positive feedback she is accustomed to, but also with a more concrete gesture. I thank you for your time in considering this nomination.

**Runner up two (third place)**  
**Miss Neelam Potdar (East Midlands)**

**Job title of nominee** (*e.g. consultant, sonographer etc.*):  
O&G Consultant

**Formal training roles held by nominee** (*e.g. head of school, training programme director, college tutor etc.*):  
Nil

**Statement of nomination (600 words):**

This consultant has been nominated by the region on the basis of outstanding TEF form responses. In addition, when individual submissions were requested for national trainer of the year nominations, this consultant was proposed more often than any other.

Despite having a wide area of practice and publishing credentials, this consultant's attitudes and approach to training have been particularly inspirational, in the words of one nominator "She has been an outstanding and fantastic mentor who had a very positive impact on my training...and proves UHL motto 'caring at its best' whether it's a junior doctor, staff or patients." As much as her clinical acumen, it is her enthusiasm and resilience that have made a great impact on those trainees who have encountered her. To them, she is a great example of a modern clinician in gynaecology and she has shown them through her behaviour and attitudes how enjoyable the job can prove to be.

Relatively recently appointed as a consultant, she has worked hard to develop new clinical initiatives. Whilst doing so, she has not forgotten the importance of training or in involving trainees with aspects of areas with which they may not be so familiar (for example subfertility and tertiary fertility care). A good example of her commitment to regional training is that she established an intermediate ultrasound course available to trainees across the local education and training board. Not only does she arrange for a wide array of contributors (including radiologists and nurse sonographers) to supervise hands on training, she also secures funding to ensure that the course is cost free to delegates.

She has taken a particular interest in demonstrating gynaecology imaging and helping trainees to achieve their basic and intermediate competencies in gynaecological ultrasound. This has, if necessary, been achieved in clinics outside normal working hours. This commitment to encouraging opportunities in relatively unorthodox situations is typical of this consultant. Whilst it is one thing to encourage the achievement of competencies in a trainee's own time, it is another to provide opportunities without the inimical pressures of other clinical or family commitments imposing on them. This consultant fully recognises these pressures for she was formerly a trainee in the centre in which she is now a consultant. Trainees report that she particularly understands the pressures of gathering evidence and is assiduous when it comes to completing work placed based assessments.

Although this consultant has not formally sought roles in teaching or delivery of training, she has nevertheless had a profound effect on the morale and learning of her trainees. For this reason, the region feels she is most deserving of the nomination for RCOG trainer of the year.

**Runner up three (fourth place)**  
**Dr Evelyn Ferguson (West of Scotland)**

**Job title of nominee (e.g. consultant, sonographer etc.):**  
Consultant Obstetrician and Gynaecologist

**Formal training roles held by nominee (e.g. head of school, training programme director, college tutor etc.):**  
College Tutor. Member of the Part 3 MRCOG SubCommittee

**Statement of nomination (600 words):**

This trainer should win the RCOG Trainer of the Year award due to her success and enthusiasm for the promotion of clinical excellence throughout the deanery. In this year's Trainee Evaluation Form (TEF) she was the most frequently cited person when trainees were asked to name a member of the MDT who had had a positive impact on their training. She takes an active role at every level: from arranging medical student education, through rota management in her own unit, and innovative educational development for regional teaching.

She is a driving force within her own unit, ensuring that the trainees' individual educational needs are addressed. The unit has recently won a commendation from the RCOG as one of the top 10 performing Trusts in the country and this is largely down to her interest and commitment to arranging a rota which balances educational needs and service provision. The unit is now highly recommended for Gynaecology training, Obstetric training, Professional development and Overall performance. In her role as rota coordinator, she promotes a culture which allows continuity of training and focuses on the individual needs of trainees at each level. She encourages junior trainees to become independent practitioners within a safe and supported environment, ensures that middle grade trainees can explore specialist areas of interest to better inform choice of ATSM and senior trainees can consistently access clinical time to allow their progression and completion of ATSM. Along with ensuring provision of individual training needs, she also ensures to the best of her ability that trainees can have advance notice of out of hours shifts, allowing for an improved work-life balance. All of the above factors contribute to the outstanding performance of the unit in the TEF and has promoted the unit as a competitive placement within the deanery.

In addition to her work with the individuals in her own unit, this trainer is committed to improving teaching at all levels. She has set up a programme of clinical teaching for medical students seconded to the unit which has also consistently won high marks in student feedback. This programme is lead by the registrars in the unit and allows a structure for medical student learning which ensures that the curriculum is well understood. It also promotes the development of the skills of clinical teaching for the registrars, which can otherwise be difficult to attain.

This trainer is also very active in the provision of regional teaching. She runs a theory based symposium twice a year on the interpretation of CTG which has recently been video-linked to trainees in Egypt. This provided a valuable learning experience for both sides: not only did it educate in the NICE guidelines on CTG interpretation and the physiology behind this, it also allowed exploration of the differences in clinical practice. She has also developed innovative simulation skills courses in advanced labour ward techniques which have had excellent feedback from senior trainees. This trainer is dedicated and enthusiastic in her promotion and development of training within obstetrics and gynaecology throughout the deanery. She is approachable and encouraging towards trainees in her own unit and treats them as individuals, promoting a safe and supportive working environment. This attitude extends to medical students and to provision of advanced regional teaching within the deanery. Her commitment and drive towards improvement of training deserves to be recognised and we hope that she wins the RCOG Trainer of the Year.