

Reasonable adjustments for trainees

What adjustments might supervisors need to make for their trainees?

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Supervisors of trainees need to be aware of reasonable adjustments. In this article, Dr Chris Tiplady explains what these are and how they can improve the working environment for trainees, which ultimately can lead to better patient care.

I don't want this article to be a rehash of all the legal aspects of the Equality Act or to be the equivalent of an HR policy describing what reasonable adjustments are. You will have all of those in your places of work. They are basic, fundamental aspects of being an employer, a recruiter, a manager, a teacher or a supervisor. Instead, what I want to do is inspire those of you who are supervisors to go find the relevant policies on your workplace websites and bookmark them to read later. Like so many other policies, you will only know you needed them long past the time you should have used them.

Reasonable adjustments make for a greater workplace

I have chosen to concentrate on the roles you have, or will have, in interviewing, employing, training and supporting trainees. I want you to think about the practical preventative work you can do in your departments, such as early recognition, early intervention and prompt management of concerns or difficulties. These are all aspects of reasonable adjustments, all aspects of your department being a place where people will choose to work. You need to be self-aware and think about your thinking. How do you make decisions about trainees, when do you get frustrated, what is difficult and why? Training should be rewarding, but at times it can be intense, hard work and time-consuming.

Good training environments are great places to work; recruitment is easier, retention is better and there is substantial evidence that better training means better patient care.^{1,2}

Reasonable adjustments are one part of a bigger system that surrounds staff. Recognise that most people really struggle with sharing their vulnerabilities, illnesses or disabilities. The pressure of clinical service, the competition for training in the places they want to work and departments where culture seems to be all about survival of the fittest make this a particular issue for resident doctors. The role of the supervisor in setting that culture is paramount.

Doctors are also used to solving problems, fixing what is broken and doing it all themselves. There are so many times a well-meaning supervisor thinks they can fix something for their trainee. When your trainee is ill, vulnerable or disabled in some way, then this is a situation where it has to be about them, not you. The way you fix problems for yourself is very unlikely to be the way someone else needs it to be done. You might know all about the illness, but that is a very different issue to addressing associated workplace issues. Accept that this is one area you are not an expert in. Accept that you have no right to know everything about that individual. Their health is private, they only need to share with you what they are happy to. You would not want your own health issues discussed with every single member of your department, either.

Managing a situation when a trainee needs reasonable adjustments is a balance for many different decision-makers. Keep the trainee in the middle. You are part of a team in which everyone has a different role. There will be occupational health with their link to the trainees' clinical requirements, human resources and contract issues, departmental staff and how the place works, the rota maker, the clinical team, the training programme lead, the manager who can source things the trainee may need, and so on. Each of these people is an expert; they will have been there before, they will know what to do, they will know of precedent and, if they don't know what to do, they will know who to ask.

How can supervisors make reasonable adjustments?

There are mistakes you can make as a supervisor when it comes to reasonable adjustments or the Disability Act, like failing to listen to the concerns and complaints of previous trainees. Supervisors can also be accused of having unfounded or biased views about their trainees. How many times have you listened to rumour rather than fact? You need to be objective and separate hearsay from the truth. Remain open to all explanations and possibility; do not pre-judge. Be understanding and empathic, as you don't need to normalise difficult situations.

What you need to do is to think about your role as a supervisor. You set the theme and tone of your department. Think about prevention – setting the culture, how you react, how you respond to complaints or criticism, what active role you take to think about the needs of people entering your world. Be empathetic and understanding – listen and react with thought, effort and time. You may be able to help with really simple things like a later start in the day, a new piece of

equipment or a quiet space for your trainee. It could be something more complex that only an employer or occupational health can help with – these are the times you step aside and let the experts do their thing.

It might help to think about the 'Drama Triangle' described by Karpman in the 1960s. It is a useful model that describes the dysfunctional positions you can take when helping someone. The triangle outlines 3 roles and how people in these roles might think or feel – the 'victim' (I'm helpless, please help me), the 'rescuer' (here I am, I can fix it) and the 'persecutor' (it's all the victim's fault). These are dysfunctional ways of thinking as they induce a spiral of helplessness, blame and resentment. Watch out for falling into one of these roles; watch out for co-dependency and stop trying to fix everything for everyone yourself. Make sure you document, communicate and escalate any issue connected to health or disability. Supervision is a complex role that requires time, recognition and training. A supervisor needs a very particular set of skills, well described by the General Medical Council³ and the Academy of Medical Educators.⁴

You, as a supervisor, therefore, need to be aware of the Disability Act and the very clear advice in law regarding adjustments employers must make (see Box 1).⁵ Your role is understanding that and being part of the team that makes it easy for people who may need protection under the act. Making this normal, and making things fair, makes things reasonable.

Box 1. Defining what reasonable adjustments are.⁵

Reasonable adjustments are changes an employer makes to remove or reduce a disadvantage related to someone's disability. For example:

- finding a different way to do something
- making changes to the workplace
- changing someone's working arrangements
- providing equipment, services or support.

Reasonable adjustments are specific to an individual person. They can be for physical or mental health conditions. They can cover any area of work.

The law (Equality Act 2010) says that employers must make reasonable adjustments when:

- they know, or could reasonably be expected to know, someone is disabled
- a disabled staff member or job applicant asks for adjustments
- someone who's disabled is having difficulty with any part of their job
- someone's absence record, sickness record or delay in returning to work is because of, or linked to, their disability.

Meet the author



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