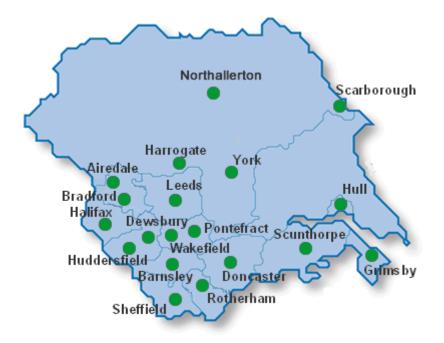


# **INFORMATION BOOKLET FOR GPStRs**



## Foreword

This booklet is intended as a guide to important matters relating to General Practice Specialty Training. It will direct you to a number of web based information resources. If you feel that there are important subjects for General Practice Specialty Training Registrars (GP StRs) that are not dealt with in this booklet, please let me know so that I may include them in future editions.

I hope you will find the booklet helpful and welcome constructive suggestions to improve it.

Enjoy your training in Yorkshire and the Humber.

DR MARK PURVIS Director of Postgraduate General Practice Education & Head of the School of Primary Care

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### **GP Specialty Trainee Representation**

The Associates in Training Committee was created in 2007 to represent Associates in Training (AiT). Further information can be found by using the following link

http://www.rcgp.org.uk/membership/resources-for-members/contact-your-rep.aspx

The AiT Committee has a representative from each Locality in the UK, currently meeting three times each year. Please use the link below to find the GP StR representative for Yorkshire and the Humber:

http://www.rcqp.org.uk/membership/resources-for-members/contact-your-rep/ait-committee.aspx

There are also opportunities for GP StRs to become active politically and/or educationally, with GP StRs having representatives on:

- Faculties of the Royal College of General Practitioners
- Yorkshire and the Humber GP School Focus Groups & Committees
- BMA Committees

If you wish to get involved in any of these, contact your local GP StRs representative or your Training Programme Director if there is not a local GPStR representative.

### The General Medical Council (GMC)

The GMC is responsible for the regulation of all stages of medical education and training.

For full details of all of the GMC's work go to the http://www.gmc-uk.org/

### The Royal College of General Practitioners (RCGP)

The RCGP's Specialty Applications Team evaluates general practice training and makes recommendations for Certificates of Completion of Training (CCT) to the General Medical Council (GMC). Anyone who is undertaking a training programme for general practice leading to a CCT should register with the RCGP as soon as they start their General Practice Training Programme.

The RCGP are responsible for operating a single training and assessment system for UK trained doctors wishing to obtain a CCT in General Practice. The assessment is referred to as the nMRCGP. Satisfactory completion of the training programme and the nMRCGP is an essential requirement for entry to the General Medical Council's GP Register and for membership of the Royal College of General Practitioners.

Further information about the assessment and certification is available from the RCGP's website: <u>www.rcgp.org.uk</u>.

### A Guide to Postgraduate Specialty Training – The Gold Guide

This guidance explains arrangements for postgraduate specialty training programmes in the United Kingdom. You can obtain a copy of the guidance from

https://www.copmed.org.uk/publications/the-gold-guide

### **Educational Agreement between the Training Practice and the GP StR**

This is a statement of the shared educational responsibilities of the training practice and the GP StR. The educational contract supplements the statement of terms and conditions of service and the GP School criteria for a training practice.

Α.	The Training Practice	В.	The GP StR
a)	Will timetable 3 hours protected teaching time per week		Will attend 3 hours teaching time per week
b)	Will provide opportunity to discuss cases during and after each surgery		Will participate in case discussion with the trainer or partner
c)	Will release the GP StR to attend half-day release sessions		Will attend half-day release sessions
d)	Will release the GP StR for up to 15 days study leave, including examination leave, in any 6- month placement to attend courses addressing areas of jointly defined need. Time taken out to attend VTS half-day release sessions is included in the calculation of study leave.		Will develop a personal education plan, which includes agreed methods, in liaison with the trainer. Attendance at courses that do not form part of this learning plan will be in the GP StR's own time.
e)	Will provide adequate equipment to allow the GP StR to take part in assessments.		Will complete assessments appropriate to that post.
f)	Will offer a variety of methods of observing the GP StR in consultation.		Will participate in observed consultations.
g)	Will provide video-recording equipment for use in formative and summative assessments.		Will video-record consultations and view and discuss the tapes with the trainer.
h)	Will provide training in the use of practice computer system.		Will use the practice computer system in line with practice policy.
i)	Will support the GP StR in the use of the eportfolio.		Will use the e-portfolio appropriately.
j)	Will organise a training curriculum that takes account of the GP StR's needs.		Will help prepare this curriculum and work to it.
k)	Will give the GP StR adequate notice of tutorial topics where prior work is required.		Will prepare adequately for tutorials.
I)	Will comply with guidelines on out-of-hours work for the GP StR.		Will fulfil the agreed out-of-hours commitment.
m)	Will provide the GP StR with sufficient clinical experience.		Will act in good faith and provide quality medical care, as would be expected from a future general practitioner.

### **Holiday and Sickness Leave Entitlement**

The **holiday entitlement** when training for General Practice is currently five weeks per year, **two and a half weeks in each six-month post**.

**Two weeks of sickness absence is allowed in any twelve-month period**. Sickness in excess of this allowance must be made up by extending your GP Specialty Training Programme. Should this affect you, please discuss extending your programme with your Training Programme Director who will seek funding approval from the Director of Postgraduate General Practice Education. For further information please read the section on sick leave at

http://www.yorksandhumberdeanery.nhs.uk/pgmde/policies/trainee\_support/

IT IS IMPORTANT THAT THE GP SCHOOL IS INFORMED IF YOU ARE ON SICK LEAVE OR ON MATERNITY LEAVE. YOU SHOULD ALSO INFORM YOUR TRAINER, HOSPITAL CONSULTANT, HUMAN RESOURCES DEPARTMENT AT THE TRUST AND YOUR TRAINING PROGRAMME DIRECTOR.

### **Study Leave**

You are allowed up to 30 days study leave per year but these have to be agreed in good time with your trainer/educational supervisor.

The following will normally be part of the allowance.

- 1 Attendance at courses to assist with <u>preparation for examinations</u>, e.g. acquisition of the necessary 'theoretical knowledge base'.
- 2 To take <u>agreed professional and academic examinations</u>. Usually, only two attempts are permitted. Travel expenses may be funded from the study leave budget but not for overseas examinations or diplomas.
- **3** Attendance at courses or other appropriate activities to acquire specialised skills not easily acquired in the clinical setting.
- 4 Attendance at courses to acquire specialised knowledge associated with clinical training.
- 5 Attendance at <u>GP School Day / Half-Day Release courses</u> is counted as part of the entitlement.
- 6 Paid leave for private study prior to examinations. The authorisation of requests for private leave is discretionary and is subject to the support and formal approval of the local Deputy Director of GP Education, Educational Supervisor and Training Programme Directors. Private study leave will count towards the study leave entitlement and should only be awarded in exceptional circumstances e.g. immediately prior to examinations. No more than 2 days in preparation for an exam and no more than 3 days in total during one ST year.
- 7 This should usually be no more than one week and should only be granted within the exigencies of the service. Private study leave should serve a very specific defined purpose. Its aims and objectives should be discussed and agreed between the trainee and his/her trainer well before the planned dates.

The following is not usually part of the allowance:

• Bleep-free teaching time within the Trust in which the trainee is based and NHS initiatives such as Audit and Clinical Governance activities.

It is important that study leave is planned as otherwise you will discover that you have difficulty covering all of the courses that you need. Your study leave plan should form part of a portfolio that you keep over your training programme. The important thing is that you develop the skills of reflecting on educational needs and planning how you will fulfil them.

It is vital that you take part in Day / Half-day release (local educational activities organised by your Training Programme Directors). If, for any reason, you feel you do not wish to attend the Day / Half-Day Release you should discuss this with your Training Programme Director. On rare occasions this might be allowed but in these situations you would be expected to return to your training practice to provide services to patients.

- All GP StRs are expected to attend the Day / Half-Day Release course.
- Every GP StR should have a clear education plan covering the whole period of training. The education plan should also include periods of study leave for the appropriate purpose. This will be developed with the help of your Educational Supervisor/trainer and must be agreed with them.

### **Appeals Against Study Leave Decisions**

Doctors wishing to appeal a decision reached by their Clinical Tutor, Trainer or Training Programme Director may do so.

Appeals will be considered by the Postgraduate Dean, GP Director and GP Medical Workforce Manager or their nominated Deputies.

### **Contractual Issues**

If you have any concerns about contractual issues you should either contact the Trust Personnel (Human Resources) when in Hospital or take your query initially to the Practice Manager in your Training Practice.

If you have a problem that you cannot resolve the BMA has Specialty staff to deal with this type of problem.

### **National Training Curriculum for General Practitioners**

The RCGP have developed the national training curriculum for General Practitioners. The curriculum was submitted to the Postgraduate Medical Education and Training Board (PMETB) who approved its introduction from August 2007.

The curriculum covers the knowledge and skills that all GP StRs need to learn in order to deliver the highest quality standards of patient care.

The curriculum documents are available from the RCGP Curriculum Site

http://www.rcgp-curriculum.org.uk/

along with a wide range of information and resources relating to the nMRCGP and the new curriculum.

### Minimum Evidence for Assessment

Prior to each review, the GP StR is required to collect a number of pieces of evidence to support judgments that will be made about their progress. The minimum data set required is shown below:

### Specialty Training Year 1

#### Minimums prior to 6 month review:

#### • 3 x COT or mini-CEX

- 3 x CbD
- 1 x MSF, 5 clinicians only
- DOPS
- Clinical supervisors' reports, if in secondary care

#### Minimums prior to 12 month review:

- 3 x COT or mini-CEX
- 3 x CbD
- 1 x MSF, 5 clinicians only
- 1 x PSQ, if in primary care
- CEPS
- · Clinical supervisors' reports, if in secondary care

### **Specialty Training Year 2**

#### Minimums prior to 18 month review:

- 3 x COT or mini-CEX
- 3 x CbD
- PSQ, if not completed in ST1
- CEPS
- Clinical supervisors' reports, if in secondary care

#### Minimums prior to 24 month review:

- 3 x COT
- 3 x CbD
- PSQ, if not completed in ST1

#### Specialty Training Year 3 (primary care)

Minimums prior to 30 month review:

- 6 x CbD
- 6 x COT
- 1 x MSF

Minimums prior to 34 month review:

- 6 x CbD
- 6 x COT
- 1 x MSF
- 1 x PSQ

#### Or Specialty Training Year 3 (half primary and half secondary)

#### Minimums prior to 30 month review:

- 6 x CbD
- 3 x COT
- 3 x mini-CEX • 1 x MSF

#### Minimums prior to 34 month review:

- 6 x CbD
- 3 x COT
- 3 x mini-CEX
- 1 x MSF • 1 x PSQ

### Notes

1. Throughout the training mini-CEX and COT assessments will be used interchangeably. The former being adopted in the secondary care setting, the latter in primary care.

2. CEPS assessment will only need to be carried out until the mandatory practical skills have been assessed as satisfactory.

3. Patient satisfaction will only be assessed in the primary care setting.

4. Multi-source feedback will involve clinical raters only when in secondary care and both clinical and nonclinical raters when in primary care.

### **GP StR Numbering System**

The Gold Guide "A Guide to Postgraduate Specialty Training in the UK" states that all trainees appointed to a run-through specialty training programme will be awarded a National Training Number (NTN) by the School of General Practice.

The following is a summary of the main points, full details can be found in the Gold Guide.

### Training numbers

- National Training Numbers (NTNs) will only be awarded to doctors in specialty training programmes which, subject to satisfactory progress, have an end point of the award of a CCT/CESR.
- The main purpose of a training number is to support educational planning and management by enabling Postgraduate Deans to keep track of the location and progress of trainees.
- Additionally, the award of an NTN informs workforce data, by documenting within each country and within specialties, how many doctors are in each specialty training programme at any time and providing indicative evidence as to when their training is likely to be completed.
- A CCT can only be awarded to a doctor who has been allocated a NTN by competitive appointment to a training programme designed to lead to the award of a CCT and who has successfully completed that programme.
- Following appointment to a specialty training programme, an NTN will be awarded by the School of General Practice within the HEE YH organisation.
- The NTN is unique to the trainee for the period the trainee holds the number in that specialty training programme. The NTN may be changed for a given trainee if that trainee is subsequently appointed competitively to a different specialty or academic programme.
- Where an NTN has been issued, it will be held so long as the trainee is in specialty training or is out of programme on statutory grounds or for out of programme activity which has been agreed with the Postgraduate Dean.

### Registering with the Postgraduate Dean

- All trainees must register with the Postgraduate Dean by signing and returning the Registration form R.
- The Postgraduate Dean will issue a training number to each doctor registering using form R. This procedure should be completed within one month of start date. This will:
  - a) Ensure the doctor is registered on the Postgraduate Dean's database
  - b) Initiate the Annual Review of Competence Progression process through which progress in training is monitored so long as the doctor remains in training
  - c) Enable the Postgraduate Dean to confirm for the new employer the relevant details of the new trainee and their training number
  - d) Record the date of entry into the programme or post
  - e) For those trainees with an NTN or those entering a core training programme, result in the Postgraduate Dean forwarding a copy of the registration form to the relevant Royal College or Faculty advising that a new trainee has been registered in HEE YH and giving his/her training number and PMETB programme approval number.

A trainee should not hold more than one NTN at the same time, except in circumstances approved by HEE YH.

- Registration for specialty training and the NTN will be confirmed each year by the Postgraduate Dean. Subject to a satisfactory assessment of progress determined by the Annual Review of Competence Progression process and confirmation that the conditions for holding the NTN have been met, registration in the programme will be maintained. If a trainee is undertaking approved additional or remedial training, the NTN will continue to be retained.
- Before an NTN is issued trainees will be required to indicate formally that they accept the Conditions of taking up a training post
- Failure to comply with these requirements may result in the removal of the NTN by the Postgraduate Dean. The arrangements for appealing against the loss of a NTN are described in the Gold Guide.

### Maintaining a National Training Number (NTN) continuing registration

- Trainees in specialty training programmes as defined in the Gold Guide will retain their NTNs through satisfactory progress and performance.
- Trainees can maintain their NTN and therefore continue registration with HEE YH even when they
  take time out for research and may no longer be employed by the NHS, or take an agreed leave
  of absence or career break, as long as they agree and adhere to the protocol as set out in the
  Gold Guide.
- Trainees holding an NTN in one locality who are successful in their application for an interdeanery transfer will be allocated an NTN by the receiving Postgraduate Medical and Dental Education organisation/Locality.
- It is a requirement of holding an NTN that trainees undertake all assessments, both formative and summative, as required by the PG Dean. It is expected that trainees will allow for at least two attempts at CSA and AKT during their planned training prior to any additional training time being granted. During any additional training time MRCGP assessments should be attempted at every opportunity

#### When is a training number given up?

The training number will be given up when a trainee:

- Is no longer on the GMC register
- Has completed their training programme or post
- Is assessed as not being suitable for continuing training in the specialty in their current locality.
- Permanently relinquishes their place in a training programme
- Decides not to complete the training programme agreed with the Postgraduate Dean
- Does not comply with the requirements for registering or maintaining their registration with the Postgraduate Dean.

#### <u>Notes</u>

- 1. A trainee dismissed after due process by an employer will normally be deemed by the Postgraduate Dean to be unsuitable to continue within the specialty training programme and will have their training number removed and their place on the programme terminated.
- 2. In all cases where an NTN is removed, the Postgraduate Dean will inform the trainee in writing of the reasons for this decision. The doctor will have the right of appeal. Relevant employing authorities need to be party to any decisions for removal of an NTN from a trainee in their employ since normally this will also mean that their employment contract will be terminated but the decision for the NTN to be removed rests with the Postgraduate Dean. This must be done fairly and must satisfy the requirements of employment law.
- 3. It is open to those who have had their training numbers removed, or have given them up voluntarily to re-apply for competitive entry to specialty training at a later date should circumstances change. Entry in such cases would be by competition with other applicants.
- 4. Each training number is an alpha-numeric code containing four elements.
- **YHD** Three letter prefix indicates the relevant locality e.g. HEE YH
- **800** Three digit number for the specialty in which the CCT training programme is being undertaken. In this case General Practice.
- **00001** Five digit number to identify the individual trainee
- **C** A single letter suffix indicating route to certification being taken
  - C For all trainees undertaking three years specialty training on the approved PMETB curriculum and will apply to enter the Specialist Register through holding a Certificate of Completion of Training (CCT)

### **Out-Of-Hours (OOH) Training**

Full information relating to the OOH requirements for General Practice Specialty Training (GPST) can be found on the GP School website at the following link:

http://www.yorksandhumberdeanery.nhs.uk/general\_practice/trainees/out\_of\_hours/

OOH work is an important part of GPST and cannot be avoided. The way in which OOH care is provided continues to evolve and a variety of different models are available in Yorkshire and the Humber. A constructive way to look upon OOH working is to consider it as an educational activity. In Yorkshire we expect that GP StRs should be able, on completion of training, to achieve the competencies set out in the RCGP curriculum and Gold Guide.

### Your Training Rotation

When you commenced GPST either the GP School or your Training Programme should have clarified the posts you were required to undertake as part of your training rotation. If there is uncertainty, however, you should contact your Training Programme Director in the first instance.

### **Out of Programme (OOP)**

Yorkshire and the Humber welcomes applications for Out of Programme Experience to allow trainees the opportunity for time out to gain wider experiences.

Please see the following link for further information:

http://www.yorksandhumberdeanery.nhs.uk/general\_practice/trainees/out\_of\_programme\_(oop)

### The Trainee Trajectory

This is a map of the three year training scheme for StRs, including Assessments, Courses and Service Commitments which need to be undertaken, from the StRs Induction Course, to achieving CCT. Please see the following link for more detailed information:

http://www.yorksandhumberdeanery.nhs.uk/general\_practice/trainees/

### **Obtaining a Certificate of Completion of Training (CCT)**

This may seem a long time in the future, but there are some things you need to know as you go along.

- You need to have a Certificate of Completion of Training (CCT) before you can work independently in general practice.
- You have to apply for this yourself. Details are available on the GMC and RCGP websites.<u>http://www.rcgp.org.uk/training-exams/becoming-a-gp/entry-to-gp-the-register/certificate-of-completion-of-training-cct-guidance-for-gp-trainees.aspx</u>

In order to apply for a Certificate of Completion of Training (CCT) doctors in training need to provide evidence of satisfactory completion of their training placements.

All GPStR's must register with the RCGP at the start of their training programme. Registration is online. To register with the RCGP please visit the RCGP website: https://integra.rcgp.org.uk/membersarea/membership/.

Further information about registering can be found at the following link: http://www.rcgp.org.uk/membership

GPStR's will sit the nMRCGP assessment for certification including the Applied Knowledge Test (AKT), Clinical Skills Assessment (CSA) and the Workplace Based Assessment (WPBA). For information about the nMRCGP: the CCT and Membership Assessment please visit the RCGP's website at the following link:

http://www.rcgp.org.uk/gp-training-and-exams.aspx

If doctors in training have further queries having read the information on the RCGP website, they should seek further advice from their local Training Programme Directors (TPDs) and Educational Supervisors (ES).

### **Appeals**

A very small number of doctors will be refused a certificate by the GMC. There are clear mechanisms to appeal against this. Full details are available from the GMC website:

http://www.gmc-uk.org/doctors/aboutunsuccessful.asp

#### Framework for a written contract of employment

To obtain a copy of the 'Framework for a written contract of employment: guidance for GP Speciality Registrars' please visit the BMA's web site:

http://www.bma.org.uk/support-at-work/contracts/juniors-contracts

### Working outside your contract

The standard contract for a trainee post in General Practice is for 40 hours a week. Hospital posts during GP training may be for more hours than this but will not exceed 48 hours per week. The European Time Directive allows work up to 48 hours per week. This can be averaged over a 17 week reference period.

It may be possible to do extra work outside your contract. If you wish to do this you should notify and seek permission from your clinical and educational supervisor. You will need to tell them the extent of the work that you are doing and get them to signify their agreement by making an educator note in your e-portfolio. It is your responsibility to check that you do the hours of work that you have said that you would do and do not exceed 48 hours per week. Please remember to include any time spent in Out of Hours training in calculating the hours spent in a working week.

We would not normally allow a trainee to work outside the programme if they are struggling with their training. This is why we need the clinical and educational supervisor to know, and to give consent. We will not allow working outside the programme for any trainee whose last ARCP panel gave an adverse outcome.

Please remember to declare the extent of any work outside the programme on your form R each year.

### Complaints

We trust your training in Yorkshire and the Humber will be a pleasant experience but, if you should have any difficulties or complaints regarding your training, it is advisable to approach the Consultant or Trainer to whom you are attached in the first instance. At the same time you should inform your Training Programme Director so that they are aware that you have raised an issue with your Supervisor. Your Training Programme Director should help you to resolve the issue should you need their support or intervention. However, if you are still unhappy about the matter after involving your Training Programme Director, please do not hesitate to inform the Deputy Director of Postgraduate General Practice Education responsible for your area or the Director of Postgraduate General Practice Education. Their names and addresses are included in the 'Useful Names and Addresses' section of this booklet.

### **Useful Web Sites**

Postgraduate Medical and Dental Education (Health Education Yorkshire and the Humber)	http://www.yorksandhumberdeanery.nhs.uk/
General Practice Section	http://www.yorksandhumberdeanery.nhs.uk/general_practice/
British Medical Association (BMA)	http://bma.org.uk/
Royal College of General Practitioners (RCGP)	http://www.rcgp.org.uk/
Department of Health	http://www.dh.gov.uk/en/index.htm

### **Some Useful Names and Addresses**

Postgraduate Medical and Dental Education (Health Education England - Yorkshire and the Humber) - Headquarters & West Yorkshire Office

Department for NHS Postgraduate Medical & Dental Education Willow Terrace Road University of Leeds Leeds LS2 9JT

Director of Postgraduate General Practice Education Dr Mark Purvis E-mail: <u>mark.purvis@hee.nhs.uk</u>

Grace Coggill – Personal Assistant Email: <u>grace.coggill@hee.nhs.uk</u>

Deputy Director of Postgraduate General Practice Education in West Yorkshire (Airedale, Bradford, Dewsbury/Pontefract/Wakefield, Leeds and Pennine) Dr David Rose E-mail: david.rose@hee.nhs.uk

Postgraduate Medical and Dental Education (Health Education Yorkshire and the Humber) - North & East Yorkshire and North Lincolnshire Office

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