

## **GPStR Educational Review, Assessment and ARCP Panel East Midlands Healthcare Workforce Deanery Process**

### 1.0 Introduction

As defined in “*A Guide to Postgraduate Specialty Training in the UK – The Gold Guide*” there are three key elements that will allow GPStRs to progress as a GP Specialty Registrar (GPStR). These are annual planning, appraisal and assessment. These three elements join together to form the basis of the Annual Review of Competence Progression (ARCP). From August 2007 all GPStRs will be required to undertake this process in order to gain their CCT, this process supercedes the use of VTR forms, except those trainees in transition.

### 2.0 Educational Appraisal/Review

Throughout their training programme GPStRs will be required to meet with their named Educational Supervisor (ES) a minimum of three times per year; beginning (annual planning meeting), middle (mid-year review meeting) and end (end of year review meeting). The purpose of the meetings is generally to establish a learning agreement by identifying educational needs, review the evidence which is accessed via the e-portfolio and complete an end of year Educational Supervisors Structured Report which is generated by the e-portfolio (Appendix 1). It is the GPStR's responsibility to ensure that assessments are undertaken at the appropriate time and all evidence is available to the ES prior to the review.

The Deanery suggests that the annual planning meeting takes place within four weeks of the start of the training year. The mid-year review meeting after 6 months and the end of year review at 8 weeks before the end of that training year. The e-portfolio is structured to provide the ES with a screen shot at these points in the GPStRs training which details which assessments they have undertaken as well as indicating what should have been taken. As described above, the end of year review meeting will allow the ES to generate an Educational Supervisors Structured Report. It is at this meeting that the ES will discuss with the GPStR whether they feel the GPStR has made satisfactory progress or not. Should the ES feel unable to recommend that the GPStR has made satisfactory progress then they should seek advice from the appropriate Course Organisers (CO)/Programme Director (PD) (CO/PD). The ES and CO/PD along with appropriate input from the GPStR will make a recommendation to the Chair of the panel. Should the recommendation be one of unsatisfactory progress the CO/PD should prepare a report for the Chair which details the issues and the GPStR and ES should also receive a copy of that report.

At the end of each 4 month post the Clinical Supervisor (CS) is also required to generate a Clinical Supervisors Report (CSR) which is available on the e-portfolio and should be taken into account at as part of the educational appraisal. As well as the educational appraisal meetings, it is suggested that at the end of each 4 month post, the ES check the GPStR's e-portfolio including the CSR and any assessments that have been carried out. If it is all satisfactory it is suggested that ES e-mails the GPStR to confirm that they too believe the post has been satisfactorily completed and that they have no outstanding

issues. It is suggested that the ES arranges a meeting with the GPStR if any of the following occur: -

- They feel there some outstanding issues with the post
- Unsatisfactory assessments
- Unsatisfactory CS report
- Insufficient evidence in e-portfolio

Any concerns identified by either the reviews or checks at the end of each 4 month post should be discussed with the GPStR immediately. If the ES feels they cannot resolve the issues they should refer to the Course Organisers (CO)/Programme Director (PD). An action plan should be generated detailing specific learning needs.

### 3.0 Assessment

As defined on the Royal College of General Practitioners website ([www.rcgp.org.uk](http://www.rcgp.org.uk)) various assessment strategies have been developed in order to meet the requirements of the GP curriculum and PMETB. As a minimum the GPStR should have completed the following assessments at each review period. It is the GPStR responsibility to arrange for the assessments to take place. All of the paperwork and assessment forms are available on the e-portfolio for which everyone involved in the GPStR's programme will have a password.

#### **ST1**

<b>6 Month Review</b>	<b>10 month Review</b>
3 x COT) or Mini-CEX	3 x COT) or Mini-CEX
3 x CBD	3 x CBD
1 x MSF	1 x MSF
DOPS if in Secondary Care	DOPS if in Secondary Care
CSR if in Secondary Care	PSQ if in Primary Care
	CSR if in Secondary Care

#### **ST2**

<b>18 Month Review</b>	<b>22 month Review</b>
3 x COT) or Mini-CEX	3 x COT) or Mini-CEX
3 x CBD	3 x CBD
DOPS if in Secondary Care	DOPS if in Secondary Care
PSQ if first time in Primary Care	PSQ if first time in Primary Care
CSR if in Secondary Care	CSR if in Secondary Care

#### **ST3**

<b>30 Month Review</b>	<b>34 month Review</b>
6 x COT	6 x COT
6 x CBD	6 x CBD
1 x MSF (clinical and non-clinical)	1 x MSF (clinical and non-clinical)
	PSQ
In ST3 GPStR should have also made plans to or completed the AKT and CSA	

## 4.0 Annual Review of Competency Progression Panel

To allow for ST3s to gain CCT in readiness for their end date, the ARCP panels will be arranged at least 6 weeks before the end of that training year. The Deanery will write to the GPStRs informing them of the panel dates, requesting them to complete a Form R (Appendix 2) and prepare their portfolio for assessment and send any other evidence they feel relevant that is not available via the e-portfolio. They will have **6 weeks** to return/prepare this. GPStRs will only be asked this once, there will be no reminders. The ES will also need to complete the

The panel will assess the documentation and evidence and make a judgement as to their progression outcome and complete an Annual Review of Competence Progression Outcome form (Appendix 3). *The purpose of the panel is not an assessment of the GPStR, it is an assessment of the documentation and evidence provided and from there a judgement will be made.*

### 4.1 Outcomes

A satisfactory progression outcome indicates that the GPStR is achieving progress and competency at the expected rate and they will progress to their next year.

If the GPStR is an ST3 and the panel judge that the evidence indicates that they have demonstrated all the required competencies, the GPStR will be recommended for completion of training. The GPStR will then need to collate all ARCP outcome forms and any other evidence and apply to the RCGP for their CCT.

Should the GPStR fail to prepare the evidence; a judgement of “insufficient evidence” will be given and the GPStR will have to write to the panel and explain the reasons why he/she failed to provide the evidence; they will also be required to meet with the panel at a later date. If the panel are satisfied with the explanation a separate outcome form is completed indicating satisfactory progression or recommendation of CCT.

If the initial panel makes a judgement that the evidence submitted, or the explanation of the lack of evidence, is unsatisfactory, the GPStR will be required to meet with a second panel. The initial panel and the GPStR should already have been made aware that the judgement may be “unsatisfactory progress” by the CO/PD. On meeting with the GPStR the second panel will include a representative from the Clinical Performance and Support Unit to decide whether: -

- development of specific competencies is required but no additional time is required
- Inadequate progress by trainee – additional time is required
- Incomplete evidence presented – additional time may be required.
- Whether the trainee is released from training programme

A supplementary outcome form will also be completed.

A copy of the Outcome form will be sent to the CO/PD and ES. The ES should use the form as a basis for further educational appraisals. The GPStR will also be sent a copy and asked to sign it and return it to the deanery within **10 working days**. The GPStR should also keep a copy of the signed form. At this point the CO/PD with the ES should meet with the GPStR to discuss the outcome and plan the next year which should be

documented. The deanery will also send a copy of the form to the RCGP along with the form R and also retain the forms on the GPStR's deanery file.

#### 4.2 Panel Members

The initial panel will consist of at least three members. One will be an Associate GP Director who will chair the panel. Other members will include either educational supervisors, course organisers/programme directors, college/faculty representative and/or the Chair of the STC. A lay member and an external trainer will review 10% of the outcomes for quality assurance purposes. Should the second panel require to meet with the GPStR the Postgraduate GP Dean/DPGPE will be notified. A member of the Clinical Performance Support Unit (CPSU) will also be a member of the panel to assist in the implementation of any remedial training that may be required.

#### 4.3 Dates of Panels

The review panels will take place from Mid-July until end of July. Panels reviewing ST3 GPStR evidence and those GPStRs that have been identified as a concern will be reviewed first, this will allow for application of CCT or remedial/extension to training to be organised if necessary. The Deanery will notify all trainees, CO/PDs and ES when the panels are expected to convene. It is the deanery's responsibility to arrange the panels.

#### 5.0 Appeals Procedure

GPStRs can appeal an outcome in writing to the Postgraduate Dean within **10 working days** if the recommendation is for their training period to be extended or terminated. This is a two step process. The first step involves discussion between the GPStR, the College and COs/PD. A common understanding should be reached and the GPStR will either accept or not that the competencies have not been demonstrated. Should they not accept, they can appeal to the Postgraduate Dean/DPGPE within **10 working days** requesting a formal appeal hearing which should be arranged.

#### 6.0 Transitional Arrangements for Progression

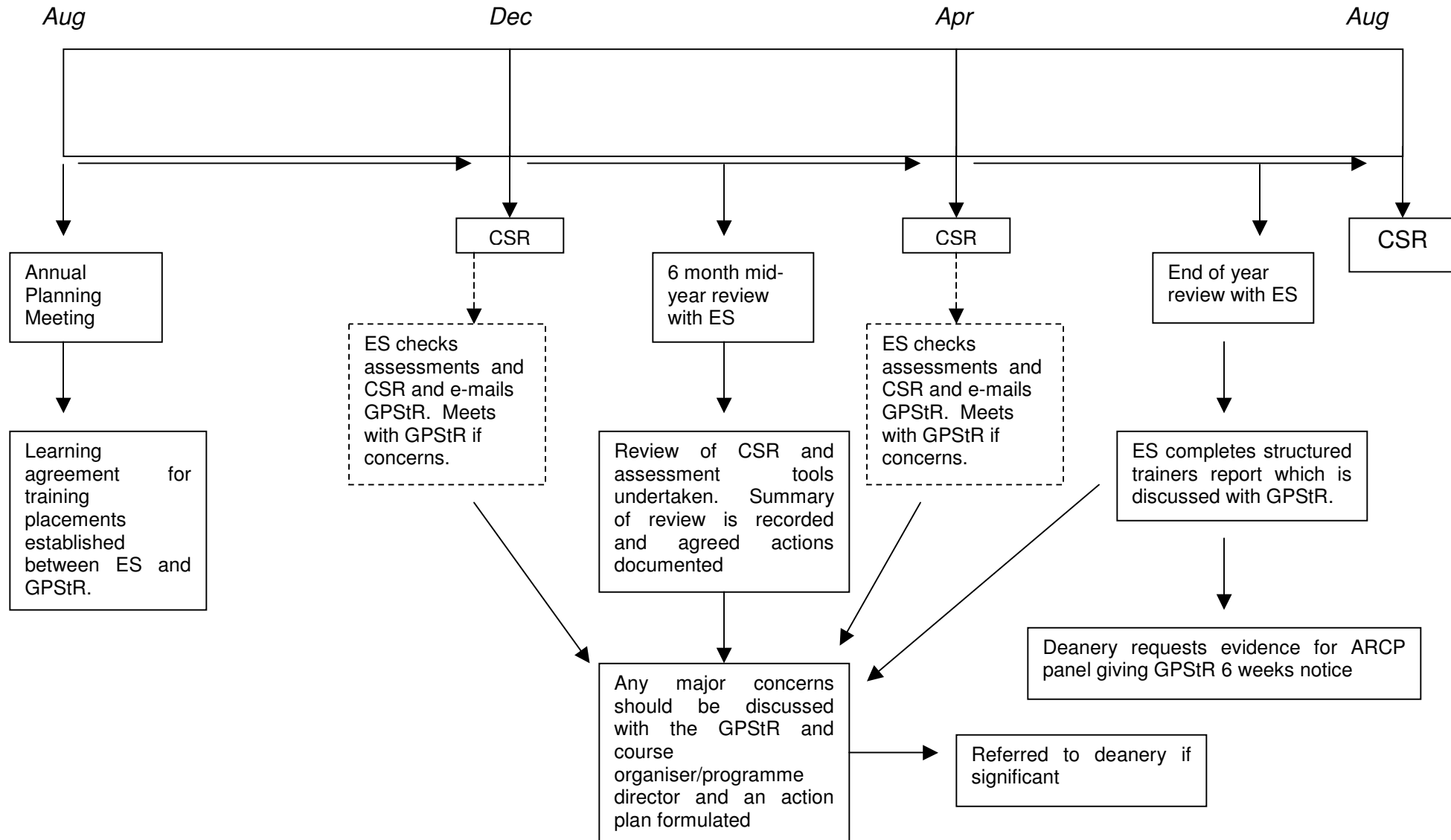
GPStRs who are entering ST2 or ST3 from August 2007 will have completed some training prior to gaining access to the ePortfolio. Therefore, **training posts which were started before 1<sup>st</sup> August 2007 should be documented using VTR forms**. Training posts which begin on or after 1<sup>st</sup> August 2007 should be documented using ARCP forms. If a training post was begun before 1<sup>st</sup> August but completed after (eg a post that ran from April to October) it should be documented using a VTR form. This means that doctors entering ST2 or ST3 this August will document their training using a combination of VTR forms and ARCP forms.

The exception to this are GPStRs who have less than 12 months still to complete as at 1<sup>st</sup> August 2007 and who will not be undertaking Workplace Based Assessment. Doctors in this position will not need to access the e-Portfolio and should document all of their training using VTR forms.

## Acronyms

AKT – Applied Knowledge Test  
ARCP – Annual Review Competency Progression  
CBD – Case Based Discussion  
CCT – Certificate of Completion of Training  
CO – Course Organiser  
COT – Consultation Observation Tool  
CPSU – Clinical Performance Support Unit  
CSA – Clinical Skills Assessment  
CSR – Clinical Supervisors Report  
DPGPE – Director of Postgraduate GP Education  
DOPS – Direction Observation of Procedural Skills  
ES – Educational Supervisor  
GPStR – General Practice Specialty Registrar  
Mini CEX – Mini Clinical Evaluation Exercise  
MSF – Multi Source Feedback  
PD – Programme Director  
PSQ – Patient Satisfaction Questionnaire  
ST – Specialty Training

## GPStR Appraisal and Assessment Process Flow Chart



## GPStR Annual Review of Competence Progression (ARCP) Panel – Process Flow Chart

