Annual Review of Competency Progression Panels Policy

This policy sets out the procedure for the ARCP
EQUAlITY ACT 2010

Health Education East of England (HEEoE) is committed to equality and diversity within the organisation and this policy is in line with the Equality Act 2010. HEEoE will ensure that the application of any part of this policy does not discriminate, either directly or indirectly, against anyone on the grounds of race, disability, sex, gender reassignment, sexual orientation, religion or belief, age, pregnancy or maternity, marriage or civil partnership. An Equality Impact Assessment (EqIA) will be carried out on an annual basis or in light of any amendments made to ensure this policy will not have a positive or adverse impact on any trainee.

1 Introduction

The Annual Review of Competence Progression (ARCP) panel provides a formal process which uses the evidence gathered by the trainee relating to their progress in the training programme. The ARCP panel is a mandatory process and is normally undertaken on an annual basis and is applicable to all specialty trainees.

The ARCP panel has two objectives: to consider and approve the adequacy of the evidence, providing the evidence is satisfactory and to make a judgement about the trainee’s suitability to progress to the next stage of training and/or to confirm that the training has satisfactorily been completed.

Membership of the ARCP Panel must comply with the Gold Guide

The panel should consist of at least three members; the Postgraduate Dean/ nominated deputy or the training programme director, the chair of the specialty training committee, college/faculty representatives, educational supervisors and Associate Deans are all appropriate members. In addition it may be appropriate that a representative from the employing organisation sit on the panel, and where a negative outcome is expected a member of the senior HEEoE team must be also present. A minimum of 10% of ARCP panels must be reviewed by a lay and external panel member.

The purpose of this policy is to provide clarity regarding the core standards required for ‘collecting the evidence’ in preparation for the ARCP and setting out the next steps following the “outcome” decision.

2 Collecting the Evidence

The trainee will be notified in writing of their ARCP panel a minimum of 6 weeks prior to the meeting.

The evidence must be submitted to the Health Education East of England (“HEEoE”) no-less than 3 weeks prior to the date of the panel. The increased use of e-portfolio will reduce the paperwork needed to be sent to the ARCP panel.

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2 Gold Guide 7.50
3 Gold Guide 7.51
**Concerns with trainee performance**

Where the Educational Supervisor has identified any concerns or shortcomings they are required to inform the Programme Director and HEEoE representative in advance of the ARCP panel. Any notes of discussions and subsequent actions agreed between the Educational Supervisor and the trainee during the course of the training post under review should be provided to the ARCP panel. Where the trainee does not already have a copy of these notes, they must also be provided to the trainee in advance of the ARCP panel. It is important that agreement is sought from the trainee by the Educational Supervisor that these notes will be shared with the ARCP panel.

Where there is a negative assessment of the trainee by the Educational Supervisor it may be necessary for the Training Programme Director to produce an additional report detailing the events which led to the negative assessment. The trainee must receive a copy of this report prior to the ARCP panel meeting and where there is a risk to patient safety the Postgraduate Dean, Trust HR and the Clinical/Medical Director at the Trust must be informed.

Where the trainee makes a response to the additional report this must be made available to the ARCP panel.

Where an unsatisfactory outcome is likely, the trainee should be informed in writing of the concerns and a senior member of HEEoE team should be invited to sit on the ARCP panel.

**3 Outcomes**

Following the ARCP panel the ARCP outcome must be recorded either on the e-portfolio or in written format using the ARCP outcome report which can be found in the Gold Guide. Where there is an unsatisfactory outcome (Outcomes 2, 3 or 4) an additional report must be compiled by the Chair of the ARCP panel comprising of the reasons for the outcome and the objectives / action plan required for the next period of training. (This may be completed on the e-portfolio or by using the unsatisfactory outcome report from the Gold Guide). A copy of the ARCP panel decision must be provided by HEEoE to the following parties: trainee; relevant college; Training Programme Director; Educational Supervisor; and Medical Director. Where the outcome is not communicated electronically the trainee must sign and return a copy of their Outcome report within 10 working days of the ARCP panel outcome decision which will be stored on the trainee’s HEEoE personnel file. The next assessment date must be clearly marked on the Outcome report.

Where the documentary evidence provided is incomplete or otherwise inadequate documentation has been provided to the ARCP panel, no decision should be taken about the performance or progress of the trainee. The failure to produce timely, adequate evidence for the ARCP panel will result in an *Incomplete* outcome (Outcome 5) and will require the trainee to explain to the ARCP panel and HEEoE the reasons for the deficiencies in the documentation.
Where there is an unsatisfactory outcome (2, 3, or 4) the supplementary documentation for trainees with an unsatisfactory Outcome report must be completed by the ARCP panel, this information may be completed on e-portfolio. The information must be made available to the parties listed above. The employing authority’s HR department should be provided with a copy. The trainee must be given right of an appeal against an unsatisfactory outcome.

Outcome 2

Where the trainee is given an Outcome 2 the report must set out the specific competences the trainee must achieve within a set timescale. 4 (Gold Guide 7.61)

Outcome 3

Where the trainee is given an Outcome 3, an additional report detailing the intended outcome of the remedial training and the proposed timescale will be required. In addition a full report of the circumstances leading to the remedial training including areas of weakness or negative reports must be sent to the employer’s medical staffing/HR department. This information must be shared with the trainee and agreement to share this information with the new employer and trainers is a pre-requisite of staying on the training programme. 5

Outcome 4

Where the trainee is given an Outcome 4, they will be required to give up their NTN number and to leave the training programme but may wish to seek further advice from the Postgraduate Dean or their current employer about future career options, including pursuing a non-training but service-focused career pathway. 6

4 Review and Appeals

The trainee will have the right to request a review of an Outcome 2/RITA D award. There is no further right of appeal against an Outcome 2 / RITA D. The trainee will have the right of appeal against an Outcome 3 or 4/RITA E Stage 2/3 award. The reader should refer to HEEoE’s Appeal policy which can be found on the Health Education East of England website under the heading Policies and Procedures.

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4 Gold Guide 7.61
5 Gold Guide 7.63
6 Gold Guide 7.70
ARCP / RITA Process

Deanery Administrator informs trainee of date of ARCP / RITA panel and collates documentation

Deanery Administrator emails Training Programme Director (TPD) to ask for identification of any doctors who may receive a negative outcome

School Coordinator collates all paperwork including additional reports for doctors who may receive a negative outcome

No concern identified

Concern Identified

Trainee not required to attend ARCP / RITA panel

Trainee required to attend ARCP / RITA panel

Educational Supervisor to provide supporting information (7.35) which must be received 2 weeks before ARCP / RITA panel

Consider if TPD is required to provide an additional report. If TPD report provided, trainee must be given opportunity to respond

Consider whether trainee needs to be informed of possible outcome of their assessment. TPD invites a senior member of the Deanery to attend ARCP / RITA panel hearing

Deanery administrator prepares ARCP / RITA panel bundle of paginated documents / e-portfolio / learning log

Panel can reach a decision

Panel can not reach a decision

Outcome 1 or RITA C
Satisfactory outcome

Outcome 2 or RITA D
Additional report required detailing specific competences and timeline

Outcome 3 or RITA E
Stage 2
Additional report required detailing intended outcome of remedial training and timeline

Recommendation for Outcome 4 or RITA E Stage 3
Postgraduate Dean will review paperwork and confirm whether to release trainee from training programme. Inform employer

Outcome 5
Incomplete evidence presented

Trainee not required to attend ARCP / RITA panel

Trainee required to attend ARCP / RITA panel

Panel can reach a decision

Panel can not reach a decision

Outcome 1 or RITA C
Satisfactory outcome

Outcome 2 or RITA D
Additional report required detailing specific competences and timeline

Outcome 3 or RITA E
Stage 2
Additional report required detailing intended outcome of remedial training and timeline

Recommendation for Outcome 4 or RITA E Stage 3
Postgraduate Dean will review paperwork and confirm whether to release trainee from training programme. Inform employer

Outcome 5
Incomplete evidence presented

Trainee to sign and return report within 10 working days

Complete outcome report and send to trainee, Training Programme Director, Educational Supervisor, Medical Director, Employing Authority and Clinical Tutor. Place copy on file and e-portfolio.
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