**General Practice ARCP Decision Aid – East of England – ST1, ST2 and ST3 GP Trainees**

This document should be used by the Trainee, Educational Supervisor and ARCP panel to review trainee progression against curriculum requirements.

| RCGP Mandatory Requirements | | | |
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| **Competency / Evidence** | **ST1** | **ST2** | **ST3** |
| Enhanced Form R | Fully completed with digital signature and uploaded as a shared log entry on eportfolio | Fully completed with digital signature and uploaded as a shared log entry on eportfolio | Fully completed with digital signature and uploaded as a shared log entry on eportfolio |
| Consultation Observation Tool (COTs) if in Primary Care **Or** Clinical Evaluation Exercise (Mini-CEX) if in Secondary Care | 6 x COTs / Mini-CEX as appropriate | 6 x COTs / Mini-CEX as appropriate | 12 x COTs 1-3 of which should be Audio-COTs |
| Case-based Discussion (CBD) | 6 | 6 | 12 |
| Multi Source Feedback (MSF) | 2 separate MSFs each with a minimum of 5 clinician responses in a hospital post or 10 responses in a GP post (5 clinicians and 5 non-clinicians) | N/A | 2 separate MSFs each with a minimum of 10 responses (5 clinicians and 5 non-clinicians) |
| Patient Satisfaction Questionnaire (PSQ) | 1 (in Primary Care Placement) | | 1 (2 if none completed at ST1 or ST2) |
| Directly Observed Procedures (DOPS) | No longer required – Please see CEPs | | |
| Clinical Examination and Procedural Skills (CEPS) | The range of observed examinations/procedures will depend on the needs of the trainee and the professional judgement of their supervisors but as a minimum, by the time of CCT, must include observed competent assessments of breast, rectal, prostate, female genitalia and male genitalia examinations. The trainee should also be submitting CEPS log entries. Relevant evidence for these capabilities needs to be gathered regularly throughout each review period and recorded in your ePortfolio | | |
| Applied Knowledge Test (AKT) | N/A | Pass | |
| Clinical Skills Assessment (CSA) | N/A | | Pass |
| CPR/AED Certificate | N/A | N/A | Certificate showing CPR/AED valid beyond date of CCT |
| Clinical Supervisors Report | 1 for **each** hospital post completed during the ST year (including ITPs) | 1 for **each** hospital post completed during the ST year (including ITPs) | Recommended if the Clinical Supervisor is **not** also the Educational Supervisor |

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| Educational Supervisor's Report (ESR) The most recent ESR must be <u>dated no earlier than 2 calendar months</u> before the ARCP panel date | 1 every 6 months – Please ensure an ESR is completed prior to maternity leave or significant planned period out of programme | 1 every 6 months – Please ensure an ESR is completed prior to maternity leave or significant planned period out of programme | 1 every 6 months – Please ensure an ESR is completed prior to maternity leave or significant planned period out of programme |
| Out of Hours (OOH) – all OOH activity should be evidenced in the OOH section of the learning log. Please record a running tally of total hours worked in the log entry title eg Base Shift 48/108 hours worked | 6 hours for every pro-rata full time equivalent month spent in a GP post<br>- Up to 10% of the total can be related to inductions and online working<br>- Up to 20% on innovative forms of unscheduled care<br>- 70%+ with a traditional OOH provider | 6 hours for every pro-rata full time equivalent month spent in a GP post<br>- Up to 10% of the total can be related to inductions and online working<br>- Up to 20% on innovative forms of unscheduled care<br>- 70%+ with a traditional OOH provider | At the final ESR, the educational supervisor needs to confirm that the trainee has attained OOH competency. They should also confirm that the trainee has completed the minimum contractual amount of OOH work (108 hours if 18 months of GP, or pro rata) |
| Level 3 Safeguarding | By the **time of the final ESR,** the trainee needs to have provided<br>1. A shared log entry documenting their attainment of Level 3 safeguarding knowledge<br>2. A shared log entry reflecting on the application of that knowledge | | |
| Audit or Quality Improvement Project | As a minimum, by the **time of the final ESR,** the trainee needs to have provided a shared log entry demonstrating their personal participation in audit or Quality Improvement work. A personally completed 2 cycle audit or Quality Improvement project is recommended. | | |
| Significant Event Analysis (SEA) | The trainee should demonstrate personal participation in significant event analysis by **the time of their final ESR.** This should preferably happen on a regular basis throughout training. | | |
| SUIs and GMC referrals | All Significant Untoward Incidents (SUI) or GMC referrals must be documented on Form R and be accompanied by a shared eportfolio SEA log entry | | |
| **Personal Learning Record** | | | |
| Learning Log that **overall** demonstrates reflection (analysis, self-awareness and learning) and curriculum coverage | Sufficient provision of reflective shared learning logs should be provided in each ESR review period in order to demonstrate appropriate curriculum coverage and progress towards demonstrating the 13 professional competencies | Sufficient provision of reflective shared learning logs should be provided in each ESR review period in order to demonstrate appropriate curriculum coverage and progress towards demonstrating the 13 professional competencies | Sufficient provision of reflective shared learning logs should be provided in each ESR review period in order to demonstrate appropriate curriculum coverage as well as having demonstrated the 13 professional competencies |

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| Curriculum Coverage | The trainee should demonstrate good curriculum coverage by linking learning log entries with up to 3 curriculum chapters, where appropriate | The trainee should demonstrate good curriculum coverage by linking learning log entries with up to 3 curriculum chapters, where appropriate | The trainee should demonstrate good curriculum coverage by linking learning log entries with up to 3 curriculum chapters, where appropriate |
| Reading and Validation of Learning Log Entries | The clinical supervisor should read the learning log entries regularly and, where appropriate, make comments and/ or validate the log entry against the 13 professional competencies | The clinical supervisor should read the learning log entries regularly and, where appropriate, make comments and/ or validate the log entry against the 13 professional competencies | The clinical supervisor should read the learning log entries regularly and, where appropriate, make comments and/ or validate the log entry against the 13 professional competencies |
| Personal Development Plan (PDP) | This should be reviewed and updated at every ESR. An active PDP would also involve the trainee creating PDP objectives between ESRs. All objectives should be SMART in nature (Specific, Measurable, Achievable, Relevant and Time-bound). | This should be reviewed and updated at every ESR. An active PDP would also involve the trainee creating PDP objectives between ESRs. All objectives should be SMART in nature (Specific, Measurable, Achievable, Relevant and Time-bound). | At the time of their final ARCP, the trainee should have open PDP objectives to take forward into their first year as a qualified GP. These will form part of their first NHS appraisal. |

**General Practice ARCP Decision Aid – East of England - Extensions to Training During ST 1-3**

If the trainee is working in an extension period during their ST1-3 years, they will need to achieve the requirements stipulated by the ARCP panel. They should also provide the minimum Eportfolio evidence listed below.

| 6 Month Extension Post (for whole time equivalent) | | | |
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| **Competency / Evidence** | **ST1** | **ST2** | **ST3** |
| Case-based Discussion (CBD) | 3 | 3 | 6 |
| Consultation Observation Tool (COTs) if in Primary Care **Or** Clinical Evaluation Exercise (Mini-CEX) if in Secondary Care | 3 x COTs / Mini-CEX as appropriate | 3 x COTs / Mini-CEX as appropriate | 6 x COTs |
| Other WPBA | As required by ARCP | As required by ARCP | As required by ARCP |
| Out of Hours (OOH) | If in primary care, 6 hours per FTE month worked | If in primary care, 6 hours per FTE month worked | This will depend upon whether or not the trainee had completed the statutory amount of OOH work and was thought to have achieved competence in OOH care at the time of their ST3 ESR.<br>- Where that is the case, the trainee would only need to undertake further OOH work if it is thought to be an appropriate part of the learning plan to help the trainee meet the requirements of the ARCP panel eg pass CSA<br>- Where that is not the case, the trainee would need to carry on with OOH work until they have completed the minimum statutory amount and achieved competence in the view of their ES |

**General Practice ARCP Decision Aid – East of England - ST4 Commissioning and Leadership Fellows**

This document should be used by the Trainee, Educational Supervisor and ARCP panel to review trainee progression against curriculum requirements for trainees completing the ST4 Commissioning and Leadership Fellowship year. This should be used in conjunction with the ST1-3 ARCP requirements document.

| RCGP Requirements | | |
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| **Competency / Evidence** | **ST1-3** | **ST4 year** |
| Enhanced Form R | Please review ST1-3 decision Aid | Fully completed with digital signature and shared as a log entry |
| Consultation Observation Tool (COTs) | Please review ST1-3 decision Aid | 12 – of which up to 6 can relate to your Fellowship work |
| Case-based Discussion (CBD) | Please review ST1-3 decision Aid | 12 – of which up to 6 can relate to your Fellowship work |
| Multi Source Feedback (MSF) | Please review ST1-3 decision Aid | Not required unless only insufficient completed to date |
| Patient Satisfaction Questionnaire (PSQ) | Please review ST1-3 decision Aid | Not required unless only 1 completed overall in training to date |
| Directly Observed Procedures (DOPS) | No longer accepted – Please see CEPs | |
| Clinical Examination and Procedural Skills (CEPS) | These should have been provided by the time of the ST3 ARCP. Where appropriate, the trainee could continue to provide observed CEPs as well as CEPS log entries. | |
| Applied Knowledge Test (AKT) | Please review ST1-3 decision Aid | N/A – this should already have been passed |
| Clinical Skills Assessment (CSA) | Please review ST1-3 decision Aid | N/A – this should already have been passed |
| CPR/AED Certificate | Please review ST1-3 decision Aid | Certificate valid beyond the revised ST4 CCT date |
| Clinical Supervisors Report (CSR) | Please review ST1-3 decision Aid | Recommended if the Clinical Supervisor is **not** also the Educational Supervisor |
| Out of Hours (OOH) | Please review ST1-3 decision Aid | Not required as long as the trainee had completed the minimum statutory amount of hours by their ST3 ARCP and had been assessed as being competent in OOH work |
| Educational Supervisor's Report (ESR) | Please review ST1-3 decision Aid | 1 every 6 months – Please ensure an ESR is completed prior to maternity leave or significant planned period out of programme |
| Level 3 Safeguarding | Please review ST1-3 decision Aid | This evidence should have been provided at the time of the ST3 ARCP. Please ensure that your level 3 safeguarding certificate will still be in date beyond your final CCT |
| Audit or Quality Improvement project | Please review ST1-3 decision Aid | Evidence relating to your ST4 project work should be provided |

| Significant Event Analysis (SEA) | Please review ST1-3 decision aid | Please review ST1-3 decision aid |
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| SUIs and GMC referrals | All Significant Untoward Incidents (SUI) or GMC referrals must be documented on the form R and be accompanied by a shared eportfolio SEA log entry | |
| **Personal Learning Record** | | |
| Learning Log | Please review ST1-3 decision aid | Please review ST1-3 decision aid |
| Curriculum Coverage | Please review ST1-3 decision aid | Please review ST1-3 decision aid |
| Reading and Validating Log Entries | Please review ST1-3 decision aid | Please review ST1-3 decision aid |
| Personal Development Plan (PDP) | Please review ST1-3 decision Aid | At the time of their final ARCP, the trainee should have open PDP objectives to take forward into their first year as a qualified GP. These will form part of their first NHS appraisal. |

**General Practice ARCP Decision Aide – East of England -  Academic Trainees**

This document should be used by the Trainee, Educational Supervisor and ARCP panel to review trainee progression against curriculum requirements for trainees on a 4 year academic training programme. The 4th year of academic work usually tends to be worked on a 50:50 basis spread across the ST1 and ST3/4 years. The 4th year is not included in the statutory 36 months required for GP training.  An Academic representative will have provided an Academic Report prior to the ARCP.

| RCGP Requirements | | |
|---|---|---|
| **Competency / Evidence** | **ST1-2** | **ST3-4** |
| Enhanced Form R | Fully completed with digital signature and uploaded as a shared log entry on eportfolio | Fully completed with digital signature and uploaded as a shared log entry on eportfolio |
| Consultation Observation Tool (COTs) **if in Primary Care** **Or** Clinical Evaluation Exercise (Mini- CEX) **if in Secondary** | Pro-rata depending on % academic vs clinical time <br><br> 6 x COTs / Mini-CEX as appropriate | Pro-rata depending on % academic vs clinical time <br><br> 12 x COTs / Mini-CEX as appropriate |
| Case-based Discussion (CBD) | Pro-rata depending on % academic / clinical<br>6 | Pro-rata depending on % academic / clinical<br>12 |
| Multi Source Feedback (MSF) | Please review ST1-3 decision Aid | 2 separate MSFs each with 5 clinicians and 5 non-clinicians for the overall period |
| Patient Satisfaction Questionnaire (PSQ) | Please review ST1-3 decision Aid | 1 (2 if none completed at ST1 or ST2) |
| Directly Observed Procedures (DOPS) | No longer accepted – Please see CEPs | |
| Clinical Examination and Procedural Skills (CEPS) | The range of observed examinations/procedures will depend on the needs of the trainee and the professional judgement of their supervisors but as a minimum, by the time of CCT, must include observed competent assessments of breast, rectal, prostate, female genitalia and male genitalia examinations. The trainee should also be submitting CEPS log entries. Relevant evidence for these capabilities needs to be gathered regularly throughout each review period and recorded in your ePortfolio | |
| Applied Knowledge Test (AKT) | Please review ST1-3 decision Aid | Pass |
| Clinical Skills Assessment (CSA) | N/A | Pass |
| CPR/AED Certificate | N/A | Certificate showing CPR/AED valid beyond date of CCT |
| Clinical Supervisors Report (CSR) | Please review ST1-3 decision Aid | Recommended  if the Clinical Supervisor is **not** also the Educational Supervisor |

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| Academic Supervisors Report | An academic Supervisor report should be provided for every period of academic training | An academic Supervisor report should be provided for every period of academic training |
| Out of Hours (OOH) – all OOH activity should be evidenced in the OOH section of the learning log. | Please review ST1-3 decision Aid | At the final ESR, the educational supervisor needs to confirm that the trainee has attained OOH competency. They should also confirm that the trainee has completed the minimum contractual amount of OOH work (108 hours if 18 months of GP, or pro rata) |
| Educational Supervisor's Report (ESR) The most recent ESR must be <u>dated no earlier than 2 calendar months </u>before the ARCP panel date | Please review ST1-3 decision Aid | 1 every 6 months – Please ensure an ESR is completed prior to maternity leave or any significant planned period out of programme |
| Level 3 Safeguarding | N/A | By the **time of the final ESR,** the trainee needs to have provided<br>1. A shared log entry documenting their attainment of Level 3 safeguarding knowledge<br>2. A shared log entry reflecting on the application of that knowledge |

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| Audit or Project or Quality Improvement Project | By the **time of the final ESR,** the trainee needs to have provided a shared log entry demonstrating their personal participation in audit or Quality Improvement projects | |
| Significant Event Analysis (SEA) | The trainee should demonstrate personal participation in significant event analysis by **the time of their final ESR.** This should preferably happen on a regular basis throughout training. | |
| SUIs and GMC referrals | All Significant Untoward Incidents (SUI) or GMC referrals must be documented on the form R and be accompanied by an eportfolio SEA log entry | |
| **Personal Learning Record** | | |
| Learning Log that **overall** demonstrates reflection (analysis, self-awareness and learning) and curriculum coverage | Sufficient provision of reflective shared learning logs should be provided in each ESR review period in order to demonstrate appropriate curriculum coverage and progress towards demonstrating the 13 professional competencies | Sufficient provision of reflective shared learning logs should be provided in each ESR review period in order to demonstrate appropriate curriculum coverage as well as having demonstrated the 13 professional competencies |
| Curriculum Coverage | The trainee should demonstrate good curriculum coverage by linking learning log entries with up to 3 curriculum chapters, where appropriate | The trainee should demonstrate good curriculum coverage by linking learning log entries with up to 3 curriculum chapters, where appropriate |
| Reading and Validation of Learning Log Entries | The clinical supervisor should read the learning log entries regularly and, where appropriate, make comments and/ or validate the log entry against the 13 professional competencies | The clinical supervisor should read the learning log entries regularly and, where appropriate, make comments and/ or validate the log entry against the 13 professional competencies |
| Personal Development Plan (PDP) | This should be reviewed and updated at every ESR. An active PDP would also involve the trainee creating PDP objectives between ESRs. All objectives should be SMART in nature (Specific, Measurable, Achievable, Relevant and Time-bound). | At the time of their final ARCP, the trainee should have open PDP objectives to take forward into their first year as a qualified GP. These will form part of their first NHS appraisal. |

**GP ARCPs - Guidance to Trainees and Educational Supervisors**

**General Guidance**

- Please ensure you check all evidence on the ARCP decision aid relevant to your stage of training is uploaded and shared on your eportfolio. **Unshared information will not be visible to the ARCP panel**.
- Failure to upload or share documentation may result in a local ARCP panel referring a trainee to attend a central ARCP panel so that an unsatisfactory ARCP outcome can be considered. Please note that panels **do not** have access to your personal library
- Minimum evidence is a guide and trainees are recommended to complete more than the minimum number of assessments
- The eportfolio should be used as a training tool throughout your training so that mandatory assessments and  evidence of your learning is provided on a continuous basis
- The ARCP panel will be more interested in the quality of the learning logs a trainee has provided than the number of logs. The trainee needs to show that they have covered the curriculum and demonstrated the 13 professional competencies by the tome of their final ARCP.
- Trainees are reminded not to share a large number of learning log entries at once; you should allow time for your clinical supervisor (CS) to review and comment, especially prior to your Educational Supervisor Review (ESR). Please note that unshared entries are not visible to your CS or to the ARCP panel
- The ESR must be within 2 calendar months of the ARCP panel
- Out of Programme (OOP) reviews should be done by the educational supervisor (ES) while the trainee is away on maternity leave or OOPC. The trainee does not contribute to these reviews
- The trainee should check the posts listed on ePortfolio are correct. This can have an impact on your ARCP and CCT date. Please contact your local administrator if any alterations are needed

**Less Than Full Time Trainees**

- Less than full time trainees (LTFTs) normally undertake their Eportfolio assessments on a pro rata basis, according to the percentage of hours worked. For example, if a trainee is working at 50%, their ST1 year will last 2 calendar years and they will have 2 calendar years in which to provide the required evidence for their ST1 year
- LTFT trainees will have an ESR every six months, and an ARCP panel usually once a year.