

Training in General Practice

A Guide for Practice Managers



Introduction

This guidance provides an overview of GP Specialist Training and a resource pack for Practice Managers within an established GP Training Practice, or those embarking on becoming a GP Training Practice.

Section One provides a brief description of the national requirements in relation to GP training including the approval processes for trainer and educational environments plus trainee Lead Employer information.

Section Two provides details about Health Education England and where to find local information relevant to each area within the East of England region.

Section Three provides some useful resources, a number of generic document templates that may be of use to both GPST Trainers and Practice Managers.

Please note that guidance and information changes over time, it is important therefore to also refer to the relevant webpages detailed throughout this document.

Section One

1.1 A brief overview of Medical Training in the UK

Following graduation from Medical School, newly qualified doctors undertake two years of the Foundation Programme (FY1 and FY2). Although this is largely undertaken in hospital posts, just over half of the trainees in the second year of the programme (F2) will undertake a 4 month placement in General Practice. Trainees successfully completing the Foundation Programme will be eligible to apply for Specialty Training.

Those trainees who are successful in an application for GP training will undertake a three-year training programme composed of hospital posts and posts within General Practice. These trainees are known as GP Specialty Trainees (GPSTs).

The General Medical Council (GMC) is the overall regulator; not only for each doctor on the medical register, but also for the delivery of all medical education in the UK, from undergraduate (medical school) through to all levels of specialty training to Completion of Certificate of Training (CCT). The GMC provides guidance and criteria for training and for trainers i.e. educational and clinical supervisors in all specialties, and hold Health Education England to account in ensuring that the educational and the quality standards for GPST education, their educational supervisors and trainee placements are complied with.

More details can be found on the GMC webpages at <http://www.gmc-uk.org/education/standards.asp>

The Royal College of General Practitioners (RCGP) sets the Curriculum requirements for GP Specialist Training which describes the attitudes, skills and experience required to become a competent GP in the UK NHS. The curriculum describes the educational framework that forms the basis of GP Speciality training and sets the foundation for career-long development.

More detail can be found on the RCGP webpages at <https://www.rcgp.org.uk/>

The expansion of GP training capacity is a key national directive in addition to creating greater opportunities for GPSTs to experience more time in general practice throughout their training programme.

Nationally, all training programmes for GPSTs are moving away from the historical 18 month acute experience and 18 month General Practice experience to an aspirational 12 month acute and 24 month General Practice experience. This will see GPSTs spending more time in General Practice but also in what are called Integrated Training Posts (ITPs) for at least 6 months of their training.

An example of a typical aspirational 3 year GPST training programme is as follows:

- Year 1 - 3 x 4 month core hospital posts e.g. Medicine, A&E, Paed's, O&G
- Year 2 - 6 months in GP and 6 months in an Integrated Training Post (ITP)
- Year 3 - 12 months in GP

ITP's are intended to provide not only more time in general practice but also for GPSTs to spend time in new types of trainee placements like community frailty services, sexual health services or community psychiatric services.

A typical ITP placement would see the GPST spending half of their working week in GP and the other half in the community service. In practice this means that each ITP post will have 2 GPSTs rotating round each other for this 6 month placement.

1.2 Educational Supervisors

Every GPST must have a named Educational Supervisor (ES). The ES is a qualified GP in practice who is a trained and approved educator and is the main support for the GPST throughout the whole of their 3 year period of training. The ES undertakes formal periodic reviews of the trainee and assesses their competence to practice. GPSTs are placed in the practice of their named ES in their final year of training.

In every placement, each GPST must also have a Clinical Supervisor (CS) who may or not be a medical doctor but must be a trained and approved educator. A CS is the main support for a GPST for the duration of that particular placement i.e. either 4 or 6 months.

Details of the GP educational pathways, courses and application forms for prospective GP Trainers can be found on the HEE website [here](#) but in summary approved educators fall into the following Tiers:

- **Tier 2a:** Out of Hours Supervisors - who can provide Clinical Supervision to GP Trainees in Out of Hours Settings
- **Tier 2b:** Associate Trainers - who can provide Clinical Supervision to GP Trainees (up to ST2) and Foundation Doctors in GP practices.
- **Tier 3:** GP Trainers - who can provide Clinical and Educational Supervision to all stages of GP Trainees and Foundation Doctors in GP practices.
- **Tier 4** Educators can be Training Programme Directors.
- **Tier 5** Associate Deans, Heads of School, Postgraduate Deans.

The environment where trainees are placed must also be approved as an Educational Environment in accordance with the GMC (see section 1.4).

1.3 Remuneration

Practices with a trainee in post receive a trainer grant. This is paid 6-monthly in arrears. Trainers are paid for some educational supervision duties when the trainee is not in the practice with them, for example, educational supervisor reports. All educational supervisors automatically receive payments for continuing professional development. All details can be found [here](#).

1.4 Trainer and Organisation Approval

Doctors who have undertaken the relevant educational pathway and have met the criteria to become a trainer, will be invited to submit their application to become a GP Trainer. The process involves the completion of the New Trainer Approval and Assessment Application which asks the doctor to draw on the experiences he/she has had and reflect on those experiences. All information is to be included in the application form. There is no requirement to send any additional supporting documentation.

Organisational approval is encouraged to be at scale, for example, primary care networks, and should incorporate applications to host learners within the wider workforce. A separate form for recognition of the educational environment needs to be submitted to the local training hub for this purpose. Again all of the information required should be presented within the form with no need for additional documents to be submitted.

Practice Managers can play a crucial role; not only in the completion of the application forms by providing practice specific data and reference to policies, but also in the accreditation and re-accreditation processes.

Most of the policies required are standard ones which are required for good governance and for CQC registration such as the process for staff induction, H&S, the management of complaints or serious incidents. In addition, some other policies will be needed that relate specifically to the support of trainees such as an absence cover plan e.g. a rota plan that indicates who will be supporting/supervising the Trainee on any given day when the Trainer may not be available, Video recording and consent protocols etc.

Of importance is how the trainee will be inducted into the practice and what their work programme looks like, paying particular attention to the Junior Doctor Contract.

Example templates for trainee specific policies, protocols and work plan are provided in Section 3.

The process for approval is changing to take into consideration PCN footprints and the flexibility this affords to increase training capacity within Primary Care. In addition, a risk-based approach will be adopted by using quality data such as CQC registration, trainee feedback or local intelligence the relevant CCGs may hold. Plans are taking shape to ensure where possible, that a single approval process is used for multi-professional groups of trainees e.g. nurses, pharmacists, First Contact Practitioners.

The revised 'Handbook for Virtual Approval Visits' is available here:



Handbook for Virtual
Approval Visits v2.doc

Information on PCN pilot sites will be made available on the HEE webpages as the processes are finalised.

1.5 GP Trainee Employment Status

GP trainees are employed by a Lead Employer which is the appropriate Acute Trust linked to the GP Training Programme area. The Trust is therefore responsible for the Trainees employment, payment of the salary, car mileage claims, study leave allowance etc.

For the EoE Region, St Helen and Knowsley NHSFT is the employing organisation for all GPSTs and works in partnership with HEE and the host organisation i.e. where ever the GPST is placed.

For all initial queries please contact the Lead Employer Helpdesk Team on the contact information below e.g. General employment queries, trainees salary and contractual queries (2002/2016), Rotations/Recruitment, Maternity/Paternity/Adoption leave, Removals/Relocation and Excess mileage, Annual Leave queries, Sickness Absence queries, etc.

Lead Employer Helpdesk	Lead.employer@sthk.nhs.uk	0151 478 7777
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1.6 Host Organisations

Wherever a GPST is placed is referred to as a 'Host Organisation' i.e. Acute Trust, GP Practice or Community Provider. All these places must be approved by HEE and will be placed on the GMC approved training site list.

The role of the Host Organisation is to:

- Provide a high-quality training placement.
- Provide local induction for the GPST.
- Produce a work programme that is conducive to the Junior Doctors Contract
- Provide access and awareness to the host organisations policies and procedures.
- Provide 'day to day' supervision in line with Lead Employer Policies e.g. reporting to lead employer of absences, expense claims etc.

Practices must be aware of and comply with the Doctors in Training Contract which can be found at <https://www.nhsemployers.org/pay-pensions-and-reward/medical-staff/doctors-and-dentists-in-training>

In all circumstance it is vital that the Host Organisation communicates with the lead employer on all GPST employment matters.

Section 2

Health Education England (HEE) is responsible for the co-ordination, quality assurance, delivery, and funding of postgraduate medical and dental education in England. More information about HEE can be found at <https://www.hee.nhs.uk/> and <https://heeoee.hee.nhs.uk/>



In terms of the leadership and management structure in relation to GP education for the EoE Region, Professor Bill Irish is the Post Graduate Dean and the Responsible Officer for the revalidation of doctors in training, Dr Janet Rutherford is the Primary Care Dean and Dr Sally Derrick is the Head of GP School.

Sitting underneath Dr Rutherford and Dr Derrick are a number of Associate Deans who provide leadership and support to the GPST Training Schemes, Training Programme Directors, Trainers and Trainees in addition to leading on strategic HEE workforce, quality and educational workstreams.

Please click [here](#) for up-to-date information and contact details of who's who within the EoE region and the contact details of local GPST schemes.

2.1 GP Training Programme Directors (TPD)

Training Programme Directors run the local GPST Schemes. Their role is to co-ordinate the formal teaching of trainees in order to meet the RCGP curriculum requirements, provide pastoral support to trainees and support for exam preparation. They also play a role in quality assurance of training placements and are responsible for the placement of trainees making sure they meet the required time within both the acute and primary care settings.

TPD's co-ordinate and lead the Annual Review of Competence Progression (ARCP) for all trainees within the local scheme and liaise with HEE on all aspects of trainee progression.

TPDs also provided the main point of contact for Clinical and Educational Supervisors and hold regular meetings with primary care educators (Local Trainers Workshops/Meetings) and with secondary care educators (Faculty Board Meetings) to ensure the programme is continually evolving and improving.

The details of your local TPDs and Scheme Administrators can be found on the HEE webpages [here](#).

2.2 Training Hubs

Training Hubs are based within each Integrated Care System footprint and are the community arm of HEE. They are responsible for workforce development, increasing placement capacity, supporting and developing educational programmes and improving retention.

Training Hubs will also be responsible for the assessment and approval process for Host Organisations from August 2021.

More information is available on the relevant Training Hub Webpages as follows:

- Bedfordshire, Luton and Milton Keynes – <https://work-learn-liveblmk.co.uk/training-hubs/>
- Cambridgeshire and Peterborough – <https://cptraininghub.nhs.uk/>
- Hertfordshire and West Essex – <https://www.hwetraininghub.org.uk/>
- Mid and South Essex - <https://www.msehealthandcarepartnership.co.uk/>
- Norfolk and Waveney – <https://www.norfolkandwaveneyccg.nhs.uk/health-services/primary-care/training-hub>
- Suffolk and North East Essex - <https://ipswichandeastsuffolkccg.nhs.uk/CEPN.aspx>

Section 3

3.1 GPST Placement with General Practice

As with any new member of the team, it is important that the GPST feels welcome and is inducted into the practice. In addition to the GPST Educational or Clinical Supervisor, the Practice Manager plays a crucial role in the induction and on-going support and education of the GPST in all non-clinical aspects of general practice.

The local TPD scheme administrator will provide you with details for your allocated trainees in advance of their start date which enables you to contact the trainee to provide any pre-starter practical information about the practice.

The following templates and policy documents can be used as reference guides to create bespoke; practice specific documents relevant for a GPST. These are in addition to your normal good governance policies and procedures i.e. those required for CQC registration and will be required at the time of your HEE practice assessment/approval visit.

They should be readily available to your allocated GPSTs and could form part of the practice 'Welcome Pack'.

Example New Starter Checklist, Induction and Working Week



Example New Starter Checklist.docx



Example of GP Trainee Induction Template.docx



Example GP Trainee Normal Working Week.docx

Example Policies/Procedures



Example Audio visual and photographic Policy.docx



Example CCTV Policy.docx



Example Clinical Supervision Policy.docx



Example Homeworking policy.docx



Example lone-worker-policy.docx

3.2 Study Leave

Time

GP trainees have an annual study leave entitlement of 30 days of which 15 days are allocated to the half-day release programme. Part-time trainees are entitled to study leave on a pro-rata basis. Trainees must ensure they confirm the time off required for study leave with the Clinical Supervisor/Rota Coordinator/Practice Manager in accordance with your local processes (minimum of 6 weeks in advance).

Funding

Trainees in the East of England may apply for study leave activity of any cost for courses that are mandated by the curriculum or those that are not, referred to as 'aspirational'. The eligibility criteria and process must be adhered to in order for applications to be approved. Depending on the type and cost of their request, the application process may vary. Please see the [study leave webpage](#) for further details.

3.3 Change in Circumstances

Trainees considering any of the below should first discuss their plans with their Training Programme Director.

Please click the relevant link for information on the specific policies and procedures:

- [Less Than Full Time Training \(LTFT\)](#)
- [Out of Programme](#)
- [Supported Return to Training](#)
- [Inter-Deanery Transfers \(IDTs\)](#)

3.4 Trainees in Difficulty

Despite training being rewarding, there are occasions where a trainee may need some extra support to help them through a difficult situation.

HEE EoE's Professional Support and Well-being service recognises that training to become a GP takes considerable time, determination, effort, and skill. During this time trainees will inevitably undergo periods where they need additional support. This may be due to encountering adverse clinical events, experiencing a variety of wider life events or struggling with concerns relating to training and / or career progression.

It is recognised that there are times when trainees would benefit from increased and specialist support, beyond which the clinical and educational supervisor can provide. The Professional Support and Well-being service is able to provide this support for both trainees and their educators.

For further information on the support available and how to refer, please click [here](#).

COMMON ACRONYMS	
AKT	Applied Knowledge Test. This will be a machine marked test of knowledge as one of the 3 integrated and triangulated components of the MRCGP [RCGP]
ARCP	Annual Review of Competency Progression
BMA	British Medical Association
CBD	Case Based Discussion
CCT	Certificate of Completion of Training
CPD	Continuing Professional Development
CEGPR	Certificate of Eligibility for the GP Register
CS	Clinical Supervisor
CSA	Clinical Skills Assessment. One of the 3 integrated and triangulated components of the MRCGP
CBD	Case Based Discussion
COT	Consultation Observation Tool; as part of the WPBA will largely be based on MRCGP video performance criteria
DOPS	Direct Observation of Procedural Skills
DPGPE	Dean of Postgraduate General Practice Education
DRS	Doctors Retainer Scheme
FPGPR1	Finance Payment GPR form (for trainees employed by the practice)
FTSTA	Fixed Term Specialty Training Appointment [MMC]
FY1	Foundation Year 1
FY2	Foundation Year 2
GP	General Practice/General Practitioner
GMC	General Medical Council
GPC	General Practice Committee
GPStR	General Practice Specialty Training Registrar
GPT	General Practice Tutor
HEI	Higher Education Institutes
ILT	Institute of Learning & Teaching

HEE KSS	Health Education England across Kent, Surrey & Sussex
LAB	Local Academic Board
LFG	Local Faculty Group
LTFT	Less than Full Time
LLA	Lifelong Learning Adviser
LMC	Local Medical Committee
Mini-CEX	Clinical Evaluation Exercise
MCQ	Multiple Choice Question papers
MSF	Multisource Feedback
MRCGP	Membership of Royal College of General Practitioners
NHS	National Health Service
PAD	Patch Associate Dean
PDP	Personal Development Plan
PD	Programme Director (GP) (formerly known as VTS Course Organiser)
PSQ	Patient Satisfaction Questionnaire
NRO	National GP Recruitment Office
RCGP	Royal College of General Practitioners
RTG	Run Through Grade
SAC	Selection Assessment Centre (Recruitment of GP Trainees)
SEAT	Single Employer Acute Trust
SEGPR1	Placement confirmation form (for trainees employed by the SEAT)
TSC	Trainer Selection Committee
WTE	Whole Time Equivalent
WPBA	Workplace Based Assessment, the evaluation of a doctor's progress over time in their performance in those areas of professional practise best tested in the workplace