Who are the School of Primary Care?

Central Team – Who we are

Head of School – Dr Simon Newton (From 01/10/2020 - Dr Lizzie Eley)

GP Education Programme Officers – Clare Whittle, Kirsty Weaver, Rachel Williamson and Sarah Phillips

GP Education Programme Administrator – Jackie Pullin

GP Business Placement Trainee – Sophie McCarron

IGPR Programme Manager – Helen Stredder



IGPR Programme Support Administrator – Jessica May Balfour and Lucy Turriff

Patch Programme Managers

- Bath: Paula Cain paulacain@nhs.net
- Bristol: Mandy Price <u>Mandy.Price@nbt.nhs.uk</u>
- Gloucestershire: Hilary Carter-Thompson hilary.carter-thompson@nhs.net
- Somerset: Penny Bridges
 Penny.Bridges@YDH.NHS.UK
- **Swindon**: Siobhan Timms/ Michala King <u>s.timms@nhs.net/ michala.king1@nhs.net</u>

When to send an e-mail:

- Study Leave queries
- Feaching and VTS queries
- Adding hospital Clinical Supervisors to Eportfolio
- Questions regarding specific posts
- Change Forms/ LTFT Applications/ OOP Applications

What do the School of Primary Care do?

Changes to your Training Programme

Sometimes it is necessary to take time away from training, e.g. parental leave, sick leave, approved time out of programme (e.g. OOPE and OOPC). Every time you need to take time away from training (even for just one day!) please complete a CHANGE FORM and send this to your Patch Manager.

We can then use this information to determine whether this will affect your CCT date (last day in training) or your next ARCP date. We will e-mail you with this information. Each trainee is able to take up to 14 days away from training for sick leave, maternity/paternity leave, compassionate leave, etc. in each ST year before any time needs to be made up.

The clock stops with regards to ESRs and ARCPs when you are out of training. This means that if you take 1 month away from training, your next ESR date and ARCP date are likely to also be deferred by 1 month.

Less than Full Time Training



LTFT training is available for doctors in the training grades for whom full-time training is not practical for "well-founded individual reasons", e.g. childcare/carer responsibilities and health issues.



All trainees who wish to be considered for LTFT training in the Severn Deanery should complete the online application form on this website in the first instance and return it to their Patch Manager:

http://primarycare.severndeanery.nhs.uk/training/trainees/less-than-full-timetraining/

ARCP Panels

ARCP dates are available on the E- portfolio:	After your first ARCP Panel (please see below for dates) the date for your next ARCP Panel will be added to your E-portfolio.
For trainees starting in Aug 2020 – first ARCP is likely to be held in:	 January 2021 for those applying for ATCF (reduction of 6 months in ST1 for transferable competencies) March 2021 for those applying for ATCF (reduction of 4 months in ST1 for transferable competencies) July 2021 for those completing a standard 36-month GP programme, both full time or part time
After this ARCP panels will be held every 12 months	unless there is a change to your training programme that necessitates an extension e.g. maternity leave or sick leave

ARCP Panel Process



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entry required for final ST3 ARCP	= on	ly require	id for final	ST3 AR	CP

Form R	177M	The second s
Have you uploaded a new Form R?		A new version of the Form R was released in Spring 2017. Please ensure that this version is used as the old version is no longer accepted by Revailation. http://www.sevendeuanety.nhs.akvabcut- uenzyvadatioxichow/chordhorments.and.guidance
Here you completed the Time Out of Training (TOOT) worker of the Form R?		This section is very important for calculating any necessary charges to CCT dates. Plasme complete is carefully. You need to include all days of TOCT, not all working upw. If you have not taken any TOCT, we dill need a thin every box, expectively the table foce. Por longer periods of TOCP, the secole can be useful for working at this number of days, way, themediate com
Work place based assessments	3/764	
Have the correct number of COTe/CSDs at: been done?		See www.mpp.org.aktp/training.and-exame/mmpp-wonkplace-based-assessment wpba.aspe regarding the requirements
Have the MSFs enough respondents?		5 for each MSF in ST1 and 10 for each MSF in ST3
Have the MSP's and PSQ been released by the supervisor and commented on?		Unless the MSF/PSQ are released, they cannot be seen by the panel and will not be counted as evidence
is there a CSR for each clinical attachment?	-	This includes each 4 month attactment and is required by the ARCP parel.
Clinical Examination and Proceedural shifts (CEPs)		A reminder that to AM GMC requirements to earliefactory completion of training, the final ARCP panels for STa will rescure to see evidence that trainees an completent in all infinate examinations (ternate breast, mate and ternate genital, rectal and provides).
		Trainees should therefore document in their final CEPS self-rating the location of evidence for each of these areas so that their supervisor can verify it.
		Evidence may include sid DDPS pasessmeth. CEPs forms, mini-Ces, CDTs, CSR, Learning Log entries, Note that Log antiles alone careof provide side evidence of competence, as there needs to be objective evidence try a sublishing qualifies observe one Tgp (International guardiantum) esamitring workplace hand-anasoment-estraceon-tox/sor-mroge-endpace target. Based and auto

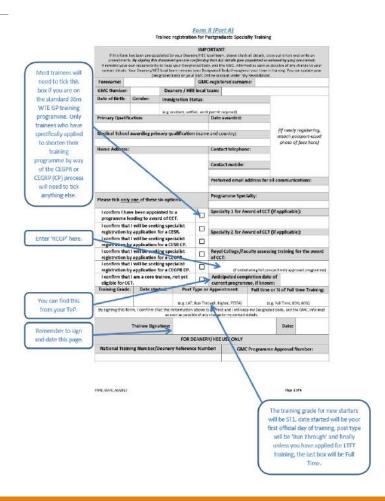
- 1. Trainees are notified six weeks in advance of their ARCP date by the central admin team via email.
- 2. If you think you are not due to have an ARCP please contact the central admin team. Do not ignore the notification.
- 3. During the six-week preparation period, trainees are to use our checklist to ensure they have completed the necessary ARCP requirements.
- 4. ARCP panel (made up of APDs, TPDs and a lay rep) sit. They review each portfolio in detail and agree an outcome based on the evidence in each trainee's portfolio.
- Post-panel, the central admin team will contact any trainees who have received an unsatisfactory outcome to outline next steps.
 We will also complete satisfactory ARCP forms.

How to complete a Form R

- You need to complete a new Form R each time you have an ARCP Panel.

- We send a guidance document with the 6-week ARCP notification e-mail to help you complete this form. We hope that this will make the process much easier for you.

- You will need to upload the Form R to your Learning Log in your E-portfolio before your ARCP Panel.



WPBA Requirements for ST1 (From August 2020)

https://www.rcgp.org.uk/training-exams/training/new-wpba/assessment-requirements.aspx

GP specialty training year one (ST1)

minimum requirements prior to 12-month review	4 x mini-CEX (if in secondary care) / Audio COT/COT (if in primary care) 4 x CbD/CAT 1 x MSF (with a minimum of 10 responses) CEPS as appropriate Clinical Supervisors Report (CSR) for each post Placement Meeting for each post Learning Logs – 36 case reviews (3 per month) 1 x Learning Event Analysis 1 x QIP in GP 1 x mid-year review and 1 x Educational Supervisor Report (ESR)
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What is changing in Primary Care education?

Changes to Adult and Child Safeguarding Requirements for GP Training The key changes are as follows:



• All trainees at the beginning of their ST1 period must undertake training in both child and adult safeguarding. This non-participatory learning may be online or face to face training and must be documented in the ePortfolio.



• There needs to be further knowledge updates documented in the ePortfolio at the beginning of both the ST2 and ST3 years.



• There needs to be evidence of at least one piece of participatory learning documented in the eportfolio for both child and adult safeguarding in each ST year.



Further information can be found on the RCGP website: https://www.rcgp.org.uk/training-exams/training/mrcgp-workplace-basedassessment-wpba/cpr-aed-and-child-safeguarding/child-and-adultsafeguarding.aspx

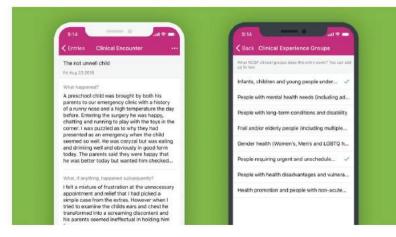
New E-portfolio from August 2020

- From w/c 14/09/2020 Severn GP trainees will move to using the new FourteenFish e-portfolio.
- FourteenFish is built around a modern Portfolio platform that is used by thousands of GPs across the UK.
- All GP trainees starting in August will use the current RCGP e-portfolio for their first 1.5 months.
- All information entered into RCGP e-portfolio will be automatically transferred over to the FourteenFish platform.
- More information is available on the RCGP website: <u>https://www.rcgp.org.uk/training-exams/training/mrcgp-trainee-eportfolio/new-trainee-eportfolio-landing.aspx</u>

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Mobile app

Record learning logs and review existing entries on the go. Even if you don't have an internet connection.



Competency Evidence	setting		gent and Unschedule 2. Understanding the organisational aspects of NHS - out of hours care, nationally and at local level		3. The ability to make appropriate referral to hospitals and other professionals		4. The demonstration of communication and consultation skills required for urgent, unscheduled or out of hours care		5. Individual personal time and stress management		6. Maintenance of personal security, and awareness and management of security risk to others	
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Urgent and Unscheduled Care (UUSC)

- Move away from counting hours to a competency-based system.
- We have an UUSC passport for keeping a track of competence evidence in UUSC settings. This needs to be completed before each ARCP panel which covers a primary care placement.
- We have UUSC log sheets that need to be completed for each shift as evidence for your portfolio.
- In ST1/2 GP posts, trainees need to demonstrate some UUSC competency evidence.
- By the end of ST3, trainees must demonstrate multiple examples of evidence across all six UUSC competencies. Trainees will find it difficult to do this by completing less than 72 hours in UUSC settings.
- More info and UUSC FAQs on our website.

Central Team Email

<u>SEVGPSupport.SW@</u> <u>hee.nhs.uk</u>

Please ask us about:



WPBAS, UUSC

CHANGES TO YOUR TRAINING PROGRAMME AND CCT DATES