



**WESSEX**

Local Medical Committees

# Getting ready to qualify as a GP?

*What you need to  
know . . .*

Updated February 2021



# The Final Furlong

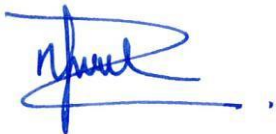
This guide has been written to help you navigate the final few months of your GP training. By now you will be totally au fait with your ePortfolio and what is required of you as a GP trainee. As you qualify the rules change again and up until now there hasn't been a clear checklist of all the expected processes you need to do from all the different organisations.

Many of the VTS schemes will cover these during their Day Release sessions. This guide is to supplement this and also be a point of reference for those who may miss those sessions due to holiday, illness or extended leave or out of programme experiences.

Do visit our website to see more of the resources and services that we offer to GPs. In particular there we have a section for sessional GPs. As a new GP within Wessex you get a free first year's membership if you practice in our area. Thereafter you are covered if you are a partner, salaried or a Retainer GP. If you are a locum then please look at our locum membership page to join up. With any queries or to keep us updated on your contact details then contact us at [office@wessexlmcs.org.uk](mailto:office@wessexlmcs.org.uk).

We hope this guide will be useful and as an LMC we look forward to supporting you in this next stage of your career.

Best Wishes,



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# 1. Applying for your CCT and Applying to be on the GMC Specialist Register

If all has gone well and you are due to qualify as a GP, then you need to apply to the GMC for your CCT.

Before you can practise as a GP you need to be accepted onto the General Medical Council's (GMC's) GP Register.

The GMC and the RCGP confer with each other to confirm you have met all the requirements before adding you but **you have to apply to both the RCGP and the GMC.**



## 2. Applying to the RCGP

This is done through your ePortfolio. You need to check your final ARCP form carefully. There is some [useful guidance](#) on the RCGP website including common errors that can lead to delays.

When you sign your final ARCP form and press the "Apply for CCT" button in your ePortfolio, your application to the RCGP is automatic. When you have done this there should be a message of congratulations.

- The certification team at the RCGP will review the evidence and then make a recommendation to the GMC. This takes up to **15 working days** or longer if documents aren't complete.
- If you have any queries or difficulties the contact the Specialist Applications team on [gpsa@rcgp.org.uk](mailto:gpsa@rcgp.org.uk) or by telephone 020 3188 7656

## 3. Applying to the GMC

You also need to apply to the GMC. They have a short guide on their process [here](#). They should send you a reminder email within the last 4 months of your training, this will be to the email they have on your GMC Online account. We have heard of instances where this doesn't appear to have happened. They will send your invite to your GMC registered email address. **Please check what email address they hold for you** via your [GMC Online account](#). You can then apply, check and update your email address all this account. The current cost is £439 for a CCT (1<sup>st</sup> April 2021).

The GMC will check the recommendation made by the RCGP against your application. If you are successful, they will issue a CCT.

This will take up to **10 working days** but will not be issued before your final 10 days of training.

There are bulges in the applications around the end of January and the first week of February and the end of July and the first week of August – be organised and apply as soon as you can if you are planning to work straight away. It is often prudent to have a few days built in breathing space between finishing training and work commitments if you can afford to, but life doesn't always work that way.



**It is a legal requirement for your name to be listed on the GMC GP register before you can work in NHS general practice in any capacity. This is additional to the Performers List requirement.**

There is a 12-month limit after your expected CCT date for you to apply to get your name on the register. If you haven't completed a full GMC approved training programme, or have been released from training and completed the exam out of programme or missed the 12 month rule then you'll need to use the CEGPR route to apply for certification – please see the RCGP website for

more [details](#) and be aware that the GMC cost is higher at £1676 (1<sup>st</sup> April 2021).

Be aware that your certification may be tax deductible – HMRC change their minds frequently on this so check the [BMA website](#) and discuss this with your accountant.

## 4. Applying to be on the National Performer's List

The National Performer's List used to be held locally. There are now three national lists for Medical, Dental and Ophthalmic performers administrated by Primary Care Support England (PCSE). The lists provide an extra layer of reassurance for the public that clinicians practicing in the NHS are suitably qualified. They also ensure clinicians have up to date training, appropriate English language skills and have passed other relevant checks such as with the Disclosure and Barring Service and the NHS Litigation Authority. You will already be on the Medical Performer's List as a Registrar but you need to update this to practise as a GP. This process has now been made an online process that you complete yourself. They have a page here that tells you how to do this – [GP Registrars completing training - Primary Care Support England](#). Whenever

They will require you to upload a copy of your CCT and copy of medical indemnity.

There has therefore been a statement issued by NHS England that clarifies that if you have CCTd then **you can work as soon as you have submitted the change and evidence to PCSE.**

### *“Change of status (GP Trainee to qualified GP)*

*GP trainees who have newly qualified can work whilst their change notification is being processed by PCSE as they are on the performers list and will be showing on the performers list website. The individual can show they are qualified by producing their certificate of completed training (CCT). This is also reflected on the GMC register which any employer can check if they so wish.”*

You must update the Performer List online any time that you change status as a GP eg salaried/ partner/ locum or your surgery or your home address. You can find the instructions of how to do this here: [Existing Performers - Primary Care Support England](#). If you cannot find your PCSE online account details then the email address and phone number are on the page link in the sentence above.

If you are intending to travel abroad you may wish to organise your change before you leave but note that you need to still perform some services within England during each year in order to maintain your status on the List. There is a suggested minimum figure of 40 sessions per year which would be taken from your appraisal discussion. But if you are going abroad or taking a career break then do consider calling us first and chat the scenario through as coming off and going back onto the Performer's List is a very significant process and worth avoiding if possible.

Anyone can check your status on the National Performer's List status online at this address <https://www.performer.england.nhs.uk/>

## 5. Finding Work – What do you want to do?



There is an excellent guide written by a collaboration of organisations in the South West. The guide can be downloaded by anyone if you scroll to the bottom of the RCGP Severn Faculty page and there is a link to download 'How to survive as a new GP'.

The [survival guide from Severn](#) they help you think about what you want from your career and what work might suit you best.

## 6. Updating your CV

Think ahead and get your CV written in your last 5 months of being a trainee. If you are intending to locum or apply for salaried posts you will want to have your CV ready to send out around 3 months in advance. Consider what your employer is looking for. Locum CVs need to be brief and to the point. Those for salaried posts should more in depth. Those for partnership positions need to include significant details and management/ leadership experience. There is no perfect CV and just as every GP surgery is different, so is what they are looking for – if you can try to find out what they would like – a 17 page in depth account of your life or a 4-page succinct summary?

For some guides to get you thinking look at the links below:

[Writing your medical CV \(bma.org.uk\)](http://www.bma.org.uk)

<http://careers.bmj.com/careers/advice/view-article.html?id=3043>

Be inquisitive. You can have a look at other people's CVs that are already on the internet for inspiration about layout. Think about what works and what doesn't.

## 7. Updating your Medical Indemnity

The great news is that from 1<sup>st</sup> April 2019 the Clinical Negligence Scheme for General Practice (CNSGP) came into force. This is the state backed indemnity that will automatically cover everyone working in General Practice in relation to NHS services. No payments or specific membership are required to benefit from this scheme run by NHS Resolution.

That said you must familiarise yourself with the scope of work that is covered automatically by this new scheme. You will need to remain a member of a Medical Defence Organisation (MDO), e.g. MDDUS, MDU, MPS. This is because inevitably there may be work that comes your way that is **PRIVATE** and therefore you will not be covered, e.g. private medicals, DVLA forms, requests etc. Also, if you provide non-core services or additional services such



as minor surgery/implants/coils it is worth clarifying your cover. Every MDO has a slightly different offer and we would highly recommend that you compare each organisation's offer and cost as they will differ.

It is important to understand that the CNSGP will only provide cover for litigation by patients. It will not provide help in the form traditionally offered by MDOs such as support with GMC hearings, inquests, criminal cases etc. Therefore, it is strongly recommended that you remain a paid up member of a MDO. As ever if you change your number of sessions or work that you do you need to contact your MDO to let them know.

The good news is that as a result the MDO subscriptions are significantly reduced now from their historical levels. For more in depth explanation and advice visit our [website](#).

## 8. Join the LMC

You may well already be on our mailing list. When you qualify from a VTS within the Wessex LMCs area you are entitled to a free first year's membership. This means that you will receive our invaluable email updates and notification of other upcoming events and resources. You are also entitled to our support whenever you need it. We are there when you don't know who to ask. To benefit from this offer simply email the office team at [office@wessexlmcs.org.uk](mailto:office@wessexlmcs.org.uk) who will take any relevant details from you.



*Ask the LMC when you don't know who to ask. . .*

## 9. Keeping on top of Appraisal Requirements

While tempting to log out of your ePortfolio for the last time and heave a huge sigh of relief, you do need to be mindful that requirements do not end. Most find the demands for appraisal are much less cumbersome than those for training, but they do nevertheless need to be done. You may also wish to consider downloading or printing out your ePortfolio for future use.

There are multiple ways of keeping records of your CPD. Do whatever is easiest for you. The most important thing is **to record it** and in particular **the impact** of what you have learnt.

Currently in COVID times there is uncertainty about appraisals and there have been pauses. The process has also been significantly altered to reduce unnecessary demands on GPs. The focus is much more on wellbeing.

To record your learning we can recommend Fourteen Fish [www.fourteenfish.com](http://www.fourteenfish.com) which has a [free CPD “learning diary”](#) that tallies up your hours done and also can be emailed in so that you can type your entry onto your iPad and then send it into your log when you get home. This gives you both an easy to access log of your notes together with a record for your CPD. The learning log can be easily exported to the MAG form or downloaded as an easy to read PDF. There is also an app which allows you to input your learning and reflections on the go/during CPD events.

Other options include – the RCGP kit (Clarity), the MAG form, the Severn Appraisal Toolkit, GP tools etc

Get linked in to local education by looking at our education and events. We are currently holding regular webinars for GPs. You can also find other local events via these pages from [Primary Care Education South West](#) or your [local RCGP Faculty](#).



## 10. Getting Your Appraisal Sorted

When you qualify your details will usually be passed to the Appraisal service who will then contact you.

You should have your first appraisal at or just before 12 months after your final ARCP.



You will be notified 3 months in advance of your dedicated month (ie 8 months after you qualify).

Hampshire and Dorset: Wessex Appraisal Service are based at Health Education England (Otterbourne). They are keen to hear from you by telephone 01962 718574 or you can email them [Appraisal.WX@hee.nhs.uk](mailto:Appraisal.WX@hee.nhs.uk) to let them know of your contact details.

Please visit their website: [www.wessexappraisal.org](http://www.wessexappraisal.org) for more information and up to date news about appraisals in this area.

Bath, Gloucester, Swindon & Wiltshire: The GP Appraisal team are contactable by email at [england.md-bgs@nhs.net](mailto:england.md-bgs@nhs.net) or by telephone on 0113 8253510.

You can find more information about appraisals in general at this website: [Contact your revalidation team - GP Appraisals and Revalidation](#)

Systems are in place that generally you won't need to contact them, but it is helpful to make sure they have the correct contact information for you.

Email them with your qualifying date, current contact information (email address and postal) and the best method of contacting you – email is preferable.

If you have moved into the area you may also wish to contact them although again systems should be in place via the Performer's List to alert them to your arrival. Likewise, if you are leaving the area contact your new team as soon as possible. Most trainees are having an appraisal before they qualify – make sure you set a good PDP for the year ahead in preparation for your first appraisal. It is worth reading this excellent guide on the RCGP website about myths – although note this is with regards to the normal appraisal process and not all is applicable to the 'light' version that we are currently seeing under COVID. [Mythbusters appraisal and revalidation \(rcgp.org.uk\)](http://rcgp.org.uk)

## 11. Revalidation

Usually the issuing of a CCT will become your first revalidation date since qualifying as a doctor and therefore your next revalidation date will be in 5 years' time. Have a look on the [RCGP website](#) to familiarise yourself with the requirements or in simple form with a video here [How do I revalidate? - GP Appraisals and Revalidation](#).

## 12. Looking After Yourself

Qualifying and the initial few years as a fully qualified GP are a steep learning curve. It is likely to be a busy few years with lots of demands on you both physically and mentally.

Make sure you keep time for your family and social life – there is life outside of work. One of the key things you can do is keep a network around you, there is good evidence that connections are key to happiness. **We highly recommend forming or joining a 'small group'**.

As the pressures on the workforce have mounted in recent years there is increasing evidence that doctors are becoming more stressed and there is an emphasis to help us recognise and manage it. We will all feel stressed at times but when it starts to affect our physical and mental health it is important we look for the services out there to help. A good place to start if you recognise stress in yourself is to look at our website for resources and signposting [Wessex LMCs: Support](#)

There is also a nationwide service called Practitioner Health. This is a service for GPs or GP trainees, with issues relating to mental health concerns or addiction problems, often where this might be affecting their work. People have used the service for burnout, anxiety, depression and drug or alcohol addiction. It is a self-referral service and free. After an initial assessment with a GP for between 1 and 2 hours then treatment can be offered including CBT from outside of the NHS. You can find out more information and how to refer yourself here at [Practitioner Health](#)

Wessex LMCs recognises the pressures all GPs face and in addition to everything above we have a GP Support and Development Scheme. This scheme aims to help those who are facing difficulty which is causing them to feel unsettled. The scheme involves an initial confidential chat with a Medical Director. After this, depending on the needs, individualised advice, support and signposting will be offered. The LMC will also offer other potential avenues of support. These can include coaching, GP mentoring, GP Listener support, counselling and facilitation. The LMC will contribute £50 per session for up to 6 sessions towards coaching or GP mentoring through the scheme and £25 per session for up to 6 sessions towards counselling.

There are other services out there which may be able to offer free support and/or coaching and the LMC will endeavour to make people aware of the lowest cost option they are aware of if it is deemed an appropriate fit for the needs. For all details about GPSD scheme please click [here](#).

Another opportunity that exists for members working in Severn area include the Severn Faculty run a newly qualified GP mentor scheme if you are working in that area. Click [here](#) for more details and look under faculty initiatives.

## 13. Join or Form a Small Group

Before you finish your ST3 year why don't you make arrangements to keep meeting with a small group or join an existing one. Look at the following guidance, [Seedlings](#) to create your own successful small group or use the [PBSGL](#) route for a ready-made option. You will find this helps you in several ways – clinically, socially and for CPD requirements. Also look around for your local First5 group from the RCGP. If you are locumming you may wish to consider joining a chambers model such as the [NASGP](#) or [Pallant Chambers](#) to help you with a sense of community and reduce potential isolation.

## 14. Pensions

Pensions are a recognised source of considerable difficulty and anxiety at the moment. We would strongly advise that you keep every payslip, or any details of pension payments submitted for your own records. This is because the current system does not have a good track record of reliably storing this information. By taking responsibility for keeping all your own records you may protect yourself in the future as the burden of proof may sit with you if they cannot find their records.

## 15. Type 2 Medical Practitioner Forms

GP trainees have no need to fill in this form but once qualified you must submit this form in the February after the financial year which runs March-April eg if you were a salaried GP from September 2019 until October 2020 you would need to submit a Type 2 medical practitioner form in February 2021 and February 2022.

You can decide whether you are a type 2 medical practitioner by looking at the list below.

This form and your submission of it is the reconciliation process for the NHS Pension scheme to bring together all your earnings if you have done any 'Type 2 work' to check you have paid the right contributions – see checklist below to see if you are a 'Type 2 medical practitioner'. Pension contributions are done on a tiered basis – this process allows them to check you have been in the right tier and so paid the right amount. It also ensures that your payments are allocated to your pension account.

A type 2 medical Practitioner is:

- a salaried GP formally employed by a GP practice, APMS contractor or by a Local Health Board

- a long-term fee based/self-employed GP who works for a GP practice, APMS contractor, Local Health Board for a period of, generally, six months or more
- a GP who works solely on an employed or self-employed basis for an Out of Hours Provider that is not an NHS Trust/Foundation Trust
- a GP who works for a CCG on a self-employed basis
- a GP who does GPwSI work

The form and associated guidance can be found [here](#):

and FAQs [here](#):

Completed forms can be submitted online or by post:

<https://pcse.england.nhs.uk/contact-us>

or

Primary Care Support England, PO Box 350, Darlington, DL1 9QN.

## 16. References

Wessex LMCs [www.wessexlmcs.com](http://www.wessexlmcs.com)

RCGP [www.rcgp.org.uk](http://www.rcgp.org.uk)

GMC [www.gmc-uk.org](http://www.gmc-uk.org)

National Performer's List <https://www.performer.england.nhs.uk/>

(Please see links within text for other references)

## 17. Abbreviations

ARCP	Annual Review of Competence Progression
CCT	Certificate of Completion of Training
CEGPR	Certificate of Eligibility for GP Registration
CPD	Continuing Professional Development
ESR	Educational Supervisor Report
GMC	General Medical Council
MAG	Medical Appraisal Guide
MDDUS	Medical & Dental Defence Union of Scotland
MDU	Medical Defence Union
MPS	Medical Protection Society
OOH	Out of Hours
RCGP	Royal College of General Practitioners
VTS	Vocational Training Scheme
WGPET	Wessex Educational GP Trust



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