

GPStR Educational Guidelines for Wessex Deanery

Implemented from August 2009

(Version 2/07/09)

From August 2007 the nMRCGP is the only assessment process required and recognised for satisfactory completion of 3 year GP training programmes in the UK.

The Wessex Deanery GP training programmes provide both developmental and summative assessment during the whole three-years and are intended to cover all that is normally required during training to allow satisfactory completion, leading to the Certification of Completion of Training (CCT) under Article 10 regulations.

The RCGP Curriculum requirements must be completed as provided by the GP training programme across the usual three years. No other certificates, diplomas or higher qualifications are required to qualify and work as a GP in the UK.

The Deanery currently provides additional financial support towards the costs of GP trainee's undertaking the Wessex Facility nMRCGP (AKT/CSA) pre-exam courses; the remaining top up fee is paid by the trainee from their allowance.

All educational activity and time should be based around the Trainee's Learning Plan and organised across the 3 year Training Programme. As a result, study leave for any additional diplomas or qualifications will not normally be required.

Trainee's should however be permitted to undertake training for contraception and IUCD insertion as part of their GP ST1&2 slots, ST3 year, or possibly during a specialty post.

The GPStR Working Week

The normal working week (excluding out-of-hours training) will comprise 10 sessions where the nominal length of a session is 4 hours and should be broken down as follows:

- **7 clinical and in practice education,**
- **2 structured educational** (including day release courses),
- **1 planned independent educational.**

- In-house teaching (tutorial) is nominally one session per week, and is to be included in the 7 Clinical sessions. There must be a scheduled minimum of 2 hours fully protected teaching (tutorial time) in addition to the remaining educational time of this session spread across the clinical week.
- Out of Hours training is in addition to the above.
- Each practice must clearly define the working week in the (BMA) contract as this may vary from practice to practice and will include some Extended Hours as part of the practices current working hours.

A degree of flexibility may be required from time to time in order to meet training needs i.e. **increasing either the number of educational or clinical sessions in order to gain specified competencies** (having decreased the number of clinical or educational sessions accordingly/respectively).

The GPStR will be expected to have had experience and training in all aspects of GP care and provision, this will include some experience of the new “Extended Hours” surgeries but all training must continue to comply with the European Working time Directive.

Trainees need a reasonable balance of all types of practice provision and clinical experience.

The trainee must remain supernumerary to the provision of practice service commitment and work alongside or in addition to a Clinical/Educational supervisor with teaching built into all sessions which should be logged on the e-portfolio and record the activity and its setting.

Professionalism

As a doctor, Trainee’s are required to adhere to the standards of professional and personal conduct and probity laid down by the General Medical Council. All doctors at the Practice are bound by these standards and expected to act at all times in a professional manner towards colleagues, employers and patients.

Variation of existing signed contracts can only be made by mutual agreement of both the Trainee and Training Practice in consultation with the Patch Associate Deans.

The European Working time Directive

The Wessex Deanery recommends that all GPR training must be compliant with the EWTD of a maximum 48 hours averaged across the training attachment.

GP Working week	=	52.5hrs (nGMS) plus Extended hours
GPR Training week	=	40 hrs (Wessex Deanery; 10 * 4hr sessions per week)

EWTD maximum	=	48 hrs per week (averaged over a reference period)
Continuous	=	13 hrs per day (11hrs continuous rest in 24hrs)
	=	24 hrs continuous rest in 7 days
	=	20 minute break in work periods over 6 hrs
Night workers	=	no more than 8hrs work in 24hrs

Occasional variation from week to week may occur over a reasonable time period however the EWTD regulations must be complied with.

On-Call or Out of Hours

- ❖ Details of Out of Hours Training are covered in a separate document.

Out of Hours training should be incorporated into the GP/ST programme as determined by the learning plan agreed with the Educational Supervisor. This out of hours experience may occur in any primary care setting or as part of an additional identified learning need in a suitable hospital supervised setting.

The trainer should facilitate the booking of out-of-hours sessions.

- ❖ All GP/ST1 and 2 trainees are required to do one session per month and only in a supervised capacity in a six month period and these must be documented in the E-portfolio.
- ❖ Out of Hours training for the ST3/GPStR year remains 72 hours within the Wessex Deanery (please see separate out of hours' guidance document).
- ❖ The out of hours experience undertaken during the ST1/ST2 GP slots will not count towards the (72) out of hours ST3/GPR training experience required by PMETB and the RCGP.

All OOH sessions must be documented, logged and reflection on the learning from them recorded in the e-portfolio.

Study leave Budget

The GP Trainee study leave budget for each Hospital post (ST1/2) is held by the Hospital Trust after an agreed amount has been "top sliced" by the Patch Associate Dean for local educational activities. All educational activity should form part of the Learning plan made with the Trainee's Educational supervisor.

Top sliced courses are planned and organised by the local educational team as "high priority" and attendance is regarded as important, **subject to agreement with service provision in the Hospital trust.**

The full amount of GP/ST1 & 2 (6 months) and the GPStR (ST3 12 months) study leave is held by the Patch Associate Dean and they will advise on local arrangements for application too and use of the Study Leave funding.

Mandatory GPStR/ST3 Study Programme

A study leave allowance of not less than 30 days approved study leave will apply (pro-rata for less than 12 months). This is for attendance at the mandatory local dedicated GP programme (i.e. usually the half-day/day release course), on full pay and allowances during the period of twelve months in the practice and pro rata for part time training.

Trainees must provide suitable explanation for non-attendance at this compulsory part of the GP Training Programme and this should be notified to the Trainer and Programme directors at the first opportunity.

Induction and Educational Plan

At the start of any GP/StR/ST placement an appropriate **orientation phase** to include formal induction to the Practice during which opportunities for sitting in with partners and exploring roles of other members of the Practice Team should occur. This should be appropriate for the training grade and prior experience of the Trainee.

A **needs assessment** to establish the GP Trainee's learning objectives should be undertaken using a variety of methods and sources. It should include knowledge, skills and attitudes, in clinical and non clinical domains and review existing plans and progression.

The Trainee and Educational Supervisor should produce a **Learning Plan** for the post within two weeks that outlines the objectives defined in the needs assessment and on which all educational activities and study leave is based.

The learning plan should be reviewed at regular times and modified in the light of ongoing training and assessments. Programme Directors will be able to advise.

Hospital Induction and GPR/ST Slots

When a GP Trainee commences in a GP/ST slot they should be released to attend any required Hospital inductions at the start of each year as appropriate.

Structured Educational Sessions (GPStR/ST3)

Additional External Study leave above attendance at the GP Study Programme (minimum of 30 days) should be based on the learning needs plan made with the Trainee's Educational Supervisor and is part of the **structured education** allowance of the normal working week.

This Structured External Educational Leave is normally an **additional minimum of 5 days** in the 12 months ST3/GPStR post. Additional time above this may be granted for identified significant learning needs and will include time for Professional leave (see below)

Additional Study leave requests must be agreed between the GPStR and their trainer/educational supervisor subject to local guidelines and approval by the Patch Associate Dean or their approved deputy (i.e. Programme Director).

Attendance at the mandatory nominated day or half day release courses is a condition of employment.

Trainer approved additional study needs to be supervised by the Trainers, and may include:

- visits to other agencies (time with district nurse, social worker etc)
- visits to OPD clinics and Hospital Trusts for learning opportunities
- visits to observe and undertake supervised work in other GP Surgeries
- CPD events
- other courses (see earlier)
- study at home
- Optional additional Day Release Course activities.

Independent Educational Session

The normal working week includes 1 session for independent education. These sessions should be discussed, planned and agreed with the trainee's Educational Supervisor and documented on the e-portfolio.

GP-ST1 and 2 posts

A study leave allowance of not less than 15 days approved study leave will apply for 6 month GP/ST1 and 2 posts. All ST3/GPStR guidelines should be applied pro-rata.

This will include attendance at monthly release course, on full pay and allowances during the period of six months in the practice and pro rata for part time training.

The aim of these GP/ST slots is **to enhance and widen the GP Trainee learning and provide the opportunity for a wider range of experience** in GP training and is not simply to be just further ST3/GPStR experience.

ST1/2 Hospital Posts Study Leave

The total Study leave allowance during Hospital posts is as per the Trust guidelines for ST Trainees but GP Programme Directors will advise on local provisions and arrangements for GP Trainee's

Educational supervision of GP/ST1 and 2 posts

During the whole period of GP Speciality training in Hospital and General Practice the trainee will have a nominated GP Educational Supervisor. They will meet with the trainee regularly to assess their progress and help to define learning needs.

During each of the ST1&2 hospital jobs there should be opportunities to spend days in General Practice, meet with other VTS trainees and meet the GP Educational Supervisor.

Normally the trainee should be able to spend 2 days in every hospital placement in General Practice working with their Educational Supervisor. This will help to orientate the Trainee to General Practice, and help identify learning in the hospital posts.

These placements will be organised by the GP Training Programme Directors, working with the Clinical and Educational Supervisors.

In addition, there are often lunchtime meetings organised for the local GPs, and GP Trainers in different localities. In some hospitals there may also be separate teaching sessions organised especially for the GP Trainees during their hospital training placements.

External Courses

The only courses that attract central funding are the scheme (DRC), pre-exam nMRCGP and DFFP Theory courses (Practical sessions are not funded). The Deanery does not support GP Trainees attending regional tertiary standard speciality training or undertaking external exams such as the DRCOG, DCH or MRCP.

Trainees should also **not** attempt to qualify as GPwSI during their standard training programme.

nMRCGP Wessex RCGP Facility Courses

The Wessex deanery provides core funding support for all trainee's in addition to the Standard Study Leave allowance for the Wessex RCGP Faculty AKT and CSA courses. The RCGP will charge an attendance/registration fee for these two courses to the trainee which is claimable as part of the Study leave allowance from the Patch Office.

Attendance at the Wessex Facility RCGP funded courses are additional to the existing Structured Study leave and days for Professional leave in GP Placements (but not from Hospital posts).

The Deanery recommends that the AKT course should not be undertaken until the ST2 year at the earliest and the CSA course not until commencement of the ST3/GPStR.

The RCGP will charge a minimal re-attendance fee should any trainee require to re-attend the courses following an exam failure.

Should any trainee fail 2* or more sittings of the nMRCGP assessments they will be required to see the Patch Associate Dean for an educational review and advice in case early additional support or guidance is required.

- (This means 2 CSA or AKT fails or 1 CSA and 1 AKT fail)

It is recommended that the AKT exam should not be taken too early in the ST2 year and that the CSA exam is not taken until sufficient GP consultation experience has been gained by the trainee in the ST3/GPStR year.

Professional Leave

Professional leave of up to 5 days for GP Trainee's (in GP Placements) is recognised and supported by the GP School for specific activities which will enhance the GPStR's Professional Journey and are of value to the GP School and/or the National and/or the local GP community.

This leave can only be taken as part of the overall Learning needs plan of the trainee and may only be permitted if satisfactory progression towards final certification is being demonstrated. This leave does not apply during Hospital post attachments and will need to be approved **by both the GP Trainees trainer and the local Programme Directors**

Examples are attendance at:

- New Trainer Courses and Established Trainer Courses to help GP Trainers improve their teaching skills.
- **QA practice visits as part of the inspecting team.**
- GP School committees, e.g. School Board, GP-STC etc.
- Local professional committees e.g. LMC, RCGP and Wessex Faculty.
- National Professional Committees e.g. GPC, RCGP Council.
- Leadership skills course (Wessex Deanery)
- Trainee representation (AiT committees both Regional and National)

Appraisal

The annual ESR is the GPStR's "annual appraisal" and the final ESR for the ARCP will be the appraisal paperwork that trainees need take to the PCT to gain their place on the performers list. This has been nationally agreed between the RCGP, COGPED and the SHAs. This final ESR (Appraisal) should specifically also look at the Trainee's future needs and education over their coming year as a newly qualified GP.

RDW July 2009.