

**Conditions of taking up a training post  
in the Northern Ireland Deanery  
(Note: this is NOT an offer of employment)**

Dear Postgraduate Dean

On accepting an offer of a training post in the Northern Ireland Deanery, I agree to meet the following conditions throughout the duration of my training:

1. to always have at the forefront of my clinical and professional practice the principles of *Good Medical Practice* for the benefit of safe patient care. . Trainees should be aware that *Good Medical Practice* (2006) requires doctors to keep their knowledge and skill up to date throughout their working life, and to regularly take part in educational activities that maintain and further develop their competence and performance
2. to ensure that the care I give to patients is responsive to their needs, that it is equitable, respects human rights, challenges discrimination, promotes equality, and maintains the dignity of patients and carers
3. to acknowledge that as an employee within a healthcare organisation I accept the responsibility to abide by and work effectively as an employee for that organisation; this includes participating in workplace based appraisal as well as educational appraisal and acknowledging and agreeing to the need to share information about my performance as a doctor in training with other employers involved in my training and with the Postgraduate Dean on a regular basis
4. to maintain regular contact with my Head of Specialty School, Specialty or Foundation Training Programme Director (TPD) and the Deanery by responding promptly to communications from them, usually through email correspondence
5. to inform the Head of School and your Employer of any change in circumstances e.g. maternity leave/sick leave
6. to participate proactively in the appraisal, assessment and programme planning process, including providing documentation which will be required to the prescribed timescales
7. to ensure that I develop and keep up to date my learning portfolio which underpins the training process and documents my progress through the programme
8. to use training resources available optimally to develop my competences to the standards set by the specialty curriculum
9. to support the development and evaluation of this training programme by participating actively in the national annual GMC/COPMeD trainee survey and any other activities that contribute to the quality improvement of training

I acknowledge the importance of these responsibilities. If I fail to meet them I understand that the Postgraduate Dean may require me to meet with him/her to discuss why I have failed to comply with these conditions. I understand that this document does *not* constitute an offer of employment.

I am aware that the Northern Ireland Medical and Dental Training Agency (NIMDTA) has an obligation to collect and keep data in order to perform its statutory functions. I understand that:

1. NIMDTA must comply with its obligations under the Data Protection Act 1998
2. appropriate measures have been put in place to ensure the safety and integrity of the data held by NIMDTA.
3. data will be processed for the following purposes:
  - 3.1 recruitment, selection and appointment to a programme of training within the Northern Ireland Deanery
  - 3.2 placement to a training post within a programme of training
  - 3.3 to support the assessment and appraisal process for doctors in training
  - 3.4 to provide information on educational support services available
  - 3.5 to provide information on educational events
  - 3.6 to establish participation in research activities
  - 3.7 to support educational, professional development and workforce planning initiatives
  - 3.8 Statistical profiling of sensitive data where it is considered to be ethically appropriate
  - 3.9 to provide information on health and safety issues;
4. in the interests of patient safety it may be necessary to transfer personal information to other health and social care organisations or statutory bodies, in accordance with the principles and conditions set out in schedules 1, 2 and 3 of the Data Protection Act 1998.

Yours sincerely

\_\_\_\_\_  
Trainee's signature

Trainee's name (printed): \_\_\_\_\_

GMC Number: \_\_\_\_\_

Date: \_\_\_\_\_