

Dear GP ST

Please find below some generic feedback relating to recent (summer) ARCP panels.

As you are aware you need an ARCP panel once per year and may also need an additional panel at gateway from one training year to another or if you have previously had an adverse outcome.

It is important that prior to any panel that your WPBA evidence is up to date and that you have fulfilled any of the requirements regarding educational assessments relevant to your stage of training. For LTFT trainees the requirements are pro rata for an annual panel but will need to be complete for a gateway review.

### **Compliance Passport**

***This needs to be up to date each year and evidence uploaded prior to your ESR submission date***

The Panel Chairs noted that many trainees did not have the mandatory evidence/incorrect evidence uploaded in good time.

### ***Child and Adult Safeguarding***

Safeguarding training is an integral and ongoing part of both GP training and professional development as a qualified GP.

**All trainees require in date evidence of level 3 safeguarding for both adult and child safeguarding** from the start or early part of their training in ST1 and thereafter throughout their training.

Going forwards all trainees then need a knowledge update annually and this needs to include a demonstration of their knowledge, key safeguarding information and the appropriate action to take if there are any concerns. In addition, all trainees require a minimum of one participatory piece of learning and reflection for both adult and child safeguarding in each training year\*. Evidence of learning for both the knowledge component and reflective exercises need to be documented in the trainees learning log.

### ***BLS/AED***

You must demonstrate competence in CPR and AED use for all of your placements. This needs to have been done through a practical workshop or training session. An eLearning module by itself is not sufficient. CPR and AED training may be completed through Advance Life Support (ALS) or Basic Life Support workshops (BLS).

Once complete you must scan, upload and attach a valid certificate of competence into a learning log entry in the 'supporting documentation' section of your Portfolio. Your Educational Supervisor can then validate it. This will be checked to ensure it is in date at each ARCP panel.

It is your responsibility to maintain your CPR and AED skills by regular attendance at training run by an approved Resuscitation Council trainer/assessor.

### **Certificate of competence in CPR and AED**

The certificate must be issued by a Resuscitation Council (UK) instructor or equivalent, and conform to the Resuscitation Council (UK) guidelines in place at that time.

Most CPR/Basic Life Support certificates have an annual expiry but if you have completed practical courses which have a longer expiry, then this needs to be clearly visible on the certificate.

It is essential that the certificate is valid at the time of CCT and extends beyond the end date of training.

This latest round of ARCP panels allowed online evidence of BLS/AED in line with interim pandemic arrangements. Trainees should continue to remain appraised of any current RCGP guidance in this regard.

Further information can be found at;  
[CPR, AED and safeguarding \(rcgp.org.uk\)](https://www.rcgp.org.uk/cpr-aed-and-safeguarding)  
[Workplace Based Assessment WPBA \(rcgp.org.uk\)](https://www.rcgp.org.uk/workplace-based-assessment-wpba)

### **Form R**

Please ensure that the form R is uploaded to the compliance passport  
In addition Trainees MUST email a copy of the Form R to [gpspecialtytraining.nimmdta@hscni.net](mailto:gpspecialtytraining.nimmdta@hscni.net) for ARCP pre-checking and revalidation purposes. Admin at NIMMDTA need to ensure all TOOT etc. tallies with what is on file.

### **WPBA**

You need to meet all requirements each year. Your portfolio platform sets these out in a user friendly way and these numbers are the minimum requirements in any training year (LTFT pro-rata rules apply for annual reviews).

**If you have not met all the requirements within the training year you are at risk of an adverse outcome at ARCP.**

Further information on WPBA requirements can be found here:  
[WPBA assessments \(rcgp.org.uk\)](https://www.rcgp.org.uk/wpba-assessments)  
[Workplace Based Assessment WPBA \(rcgp.org.uk\)](https://www.rcgp.org.uk/workplace-based-assessment-wpba)

**Clinical case review** Minimum 3 per month (pro rata)  
MUST relate to clinical encounters ONLY

Panel Chairs noted that some trainees were logging all activity as clinical case reviews with resulting inflated numbers of CCRs without real evidence of clinical encounters.

Please ensure that reflections on **educational activity** are logged under Lecture/seminar, tutorial, supporting information or academic activities – **These should not be logged as clinical case reviews**  
Ensure mandatory evidence is in the correct place in portfolio e.g. **QIA is a Learning log entry/QIP is an educational assessment.**

Please note that the **Quality Improvement Project (QIP)** is carried out in the ST2 year and **Quality Improvement Activity (QIA)** is required across all years of training. At the end of training you must have evidence of at least 1 QIP and 2 QIAs

A **Clinical Supervisor's Report (CSR)** is required for every hospital placement.  
An Educational supervisor cannot sign off your **Educational Supervisor's Report (ESR)** until the CSR is complete

For final reviews it is imperative that all mandatory **CEPS** are complete and appropriately evidenced. Please try to gather evidence sequentially and log it in a timely manner to enable your ES and CS to follow your progression and compile their ESR and CSR in good time.

### **Educational Supervisor's Report**

It is important that the ESR has personalised self-rating reflection across the capability areas. The new portfolio can pull reflective evidence from learning log entries but it is helpful if the trainee can tie this evidence together with a reflective narrative within their self-rating.

Where there is lack of evidence of self-rating, the panel may award an adverse outcome and ask for additional evidence.

Further information on ESRs with some helpful examples of self-rating can be found here [Educational Supervisors Review \(ESR\) for Workplace Based Assessment \(rcgp.org.uk\)](https://www.rcgp.org.uk/education/educational-supervisors-review-ESR-for-workplace-based-assessment)

For most trainees it is sufficient to have one iESR and one ESR prior to panel (there will however be exceptions to this and it will not be possible to submit an iESR)

[CSR, iESR, ESR and PDP \(rcgp.org.uk\)](https://www.rcgp.org.uk/education/educational-supervisors-review-ESR-for-workplace-based-assessment)

### **Academic trainees (GPARTS)**

Academic trainees will need to evidence progression in both clinical and academic aspects of their training. A separate form for GPARTS academic progress will be presented to ARCP panel for their consideration. GPARTS will be notified of this in advance.

### **Help and support**

If you are unsure of your requirements or are having difficulty please speak to your Educational Supervisor or your Programme Director or contact the admin team at NIMDTA [gpspecialtytraining.nimmdta@hscni.net](mailto:gpspecialtytraining.nimmdta@hscni.net)