

ARCP and WPBA issues October 2023

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External advisor



ARCP and WPBA issues 2023

- Portfolio changes
- ARCP issues from year
- Combined training
- News WPBA

Transition arrangements

- Everyone must be on the new WPBA programme from **Aug 2022**
- **All assessed on new package irrespective of leave, LTFT, extensions etc from now**
- Differences between old and new
 - 7 less CbDs, 5 less COTs
 - Prescribing assessment
 - Leadership activity
 - Leadership MSF

Shielding trainees

Decisions being made:

- re maximum completely remote, non patient facing time that can count as training time
- minimum time or capabilities that need to be demonstrated face to face with patients to CCT

Take home message

ST1 and 2

- QIP when in GP,
- QIA when not
- One in each year

ST3

- Leadership activity **and**
- Quality improvement activity
- Separate things

Each year need a LEA/SEA and QIA

Clinical supervisor report

- CSR to be done in a primary care post if any of the following apply:
 - the Clinical Supervisor in practice is a different person to the Educational Supervisor,
 - the evidence in the Portfolio does not give a full enough picture of the trainee and information in a CSR would provide this missing information
 - or either the trainee or supervisor feel it is appropriate

Interim ESR

- The Interim ESR can **only** be completed if the trainee is progressing satisfactorily
- Otherwise a full ESR is required at the midpoint of each calendar year
- Trainee does self assessments, 3 action plans and PDP but light touch for ES
- NOT pre ARCP if start interim edit to be full
- Portfolio changed to help ensure not done inappropriately


Safe guarding requirements

- **Safe guarding**

- To include child and adult
- At least one case review entry **per ST** year for each
- Demonstrate involvement with cases and aware of responsibilities
- Needs to state level 3 in certificate of training
- Needed before starting in GP setting and any job involving children
- Annual knowledge update needed annually

PDP issues

- Trainees not reviewing PDP- need at least one achieved in year
- No new PDPs for next review/ post CCT
- PDP ideas only in log
- ES need to accept PDP when doing ESR

 Review of PDP

Title	Target date	Completed	
Management of abnormal vaginal bleeding	24/12/2021	Yes	View
Using bedside US guidance imaging	30/09/2021	Yes	View
Speculum examination	01/02/2022	Yes	View
Antenatal check and postnatal check for women	02/02/2022	Yes	View

Reflection on progress

Date last modified: 28/01/2022 

Please comment on the progress made towards previously agreed objectives

Excellent has met all her PDPs that set.

Please comment on the quality of the PDP

SMART with great reflection on how she has achieved and how this will help in future.

Goals for the next review (0)

 Manage the Agreed PDP

No agreed entries yet listed for this review. [Add some new PDP entries](#)

PDP issues

Trainee's PDP ideas

Chandni has come up with **1 idea**. You may wish to use these ideas to include in the agreed PDP, or you can choose not to progress them.

Management of chronic conditions

Learning | I have been in hospital setting for the last 3 rotations and mostly seen and involved in acute management of conditions however I would like to focus my learning on the long term management of chronic conditions like heart failure, CKD, COPD.
When to request appropriate interval tests for monitoring?
What treatment is appropriate in community setting and when to refer to specialist vs acute setting?

Target date | 10/06/2022

Action ideas | Reviewing elderly patients as likely to have medical comorbidities and formulate management plan. Comparing it what they have already had so far and how other GPs have managed them.

How I will demonstrate success | -reflecting using case base discussions
-feedback from supervisor

✓ Create PDP entry from this

✗ Don't progress this idea

PDP issues

Short title: Management of chronic conditions

Learning or development need: I have been in hospital setting for the last 3 rotations and mostly seen and involved in acute management of conditions however I would like to focus my learning on the long term management of chronic conditions like heart failure, CKD, COPD.
When to request appropriate interval tests for monitoring?
What treatment is appropriate in community setting and when to refer to specialist vs acute setting?

Action to take: Reviewing elderly patients as likely to have medical comorbidities and formulate management plan. Comparing it what they have already had so far and how other GPs have managed them.

Target date: 10/06/2022

How will you demonstrate: -reflecting using case base discussions
-feedback from supervisor

Save Cancel

PDP issues

Agreed PDP

Goal 1: Management of chronic conditions

Edit

Learning	I have been in hospital setting for the last 3 rotations and mostly seen and involved in acute management of conditions however I would like to focus my learning on the long term management of chronic conditions like heart failure, CKD, COPD. When to request appropriate interval tests for monitoring? What treatment is appropriate in community setting and when to refer to specialist vs acute setting?
Target date	10/06/2022
Action ideas	Reviewing elderly patients as likely to have medical comorbidities and formulate management plan. Comparing it what they have already had so far and how other GPs have managed them.
How I will demonstrate success	-reflecting using case base discussions -feedback from supervisor




Portfolio changes


Starting 6/10/22 trainees will be required to confirm their progress in various aspects of WPBA as part of their ESR preparation. This is a new page that will be flagged to be completed before the ESR can be submitted. [More information](#)

Portfolio changes

- Additional advice popups
- Acronyms
- Information banners
- Dictation option
- Requirements declaration-WPBA evidence
- Road maps
 - Training map

Training map

Start a new review period  Roadmaps  Requirements  Acronyms

 ST3 Roadmap

Acronyms and new terms that might be helpful

ST1 / 2 / 3 GP specialist trainee – in year 1 / 2 / 3

AKT Applied Knowledge Test

CSA Clinical Skills Assessment

RCA Recorded Consultation Assessment

WPBA Workplace Based Assessments

OOH Out of Hours

UUC Urgent and Unscheduled Care

WPBA Evidence

I have reviewed my last ARCP and completed any actions required: Yes No

I have met all the WPBA requirements for this stage of training: Yes No

I have an up to date Adult Safeguarding level 3 certificate.If this was completed more than 12 months ago I have completed a knowledge update in the past 12 months.I have completed a reflection on an adult safeguarding case within this training year:

Yes No

I have an up to date Child Safeguarding level 3 certificate.If this was completed more than 12 months ago I have completed a knowledge update in the past 12 months.I have completed a reflection on a child safeguarding case within this training year:

Yes No

I have completed face to face ALS or BLS with AED within the last 12 months  : Yes No

I have uploaded my Form R(England only) to the compliance passport (only required pre ARCP). I have completed an SEA/LEA for any complaints:

Yes No

WPBA Evidence

I have reviewed my last ARCP and completed any actions required: Yes No

I have met all the WPBA requirements for this stage of training: Yes No

What has not been achieved and why and what is the plan to achieve this?:

Learning logs

Spread of entries

	Clinical Case Reviews	15 entries
	Supporting Documentation/CPD	2 entries
	Learning Event Analysis/Significant Event	0 entries
	Reflection on Feedback	0 entries
	Leadership, Management and Professionalism	1 entry
	Quality Improvement Activity	0 entries
	Prescribing	0 entries
	Clinical Examination and Procedural Skills	2 entries
	Placement Planning Meeting	0 entries
	Academic Activity	0 entries

All entries Training map

Settings

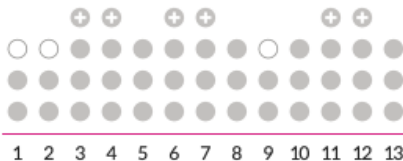
Review period: 20/06/20 - 04/02/21
 ST3: 05/08/20 - 03/08/21
 Deanery: Oxford
 Training prog: Reading & Newbury VTS
 Current post: Sonning Common Heal...

Message your trainee

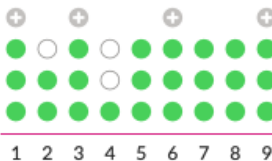
ESR preparation

Requirements Prepare

Capabilities



Clinical experience groups



PDP

- Learn to be competent in analyzing a...
- Specific - I would like to become...
- Learn and become competent at joint injections

Previous Action plans

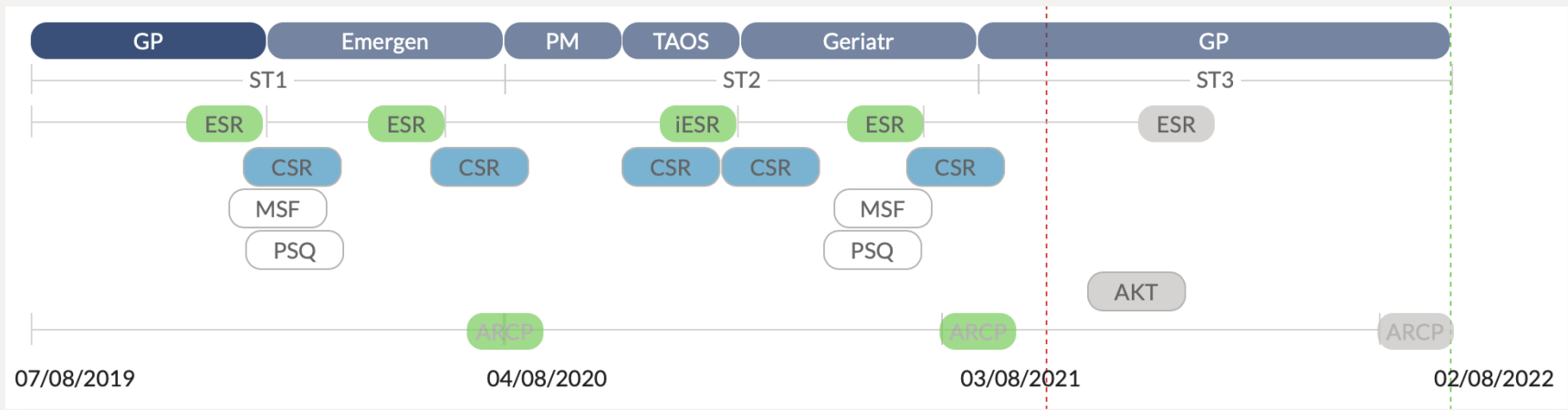
Community orientation
 I will have moved into Oxford deanery so I hope to advance my knowledge of co...

Training map

[Portfolio overview](#) [ESR preparation](#) [Start a new review period](#) [ST3 Roadmap](#)

Trainee | Dr Antonio Stavrou
Stage of training | ST3
Percent of full time | 100%
Current post | General Practice Sonning Common Health Centre

Your Training programme / Deanery can correct any information that is not correct.



GPST3 Full-time

Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12
CCR x 4	CCR x 4	CCR x 4	CCR x 4	CCR x 4	CCR x 4	CCR x 4	CCR x 4	CCR x 4			
UUC: Reflective Log entries, OOH Evidence & Summary Grid Attached To 'Supporting Documentation' Log Entries											
			Quality Improvement Activity			Learning Event Analysis					
				Clinical MSF		Leadership Activity				Leadership MSF	
CEPS: Breast		CEPS: Prostate		CEPS: Male Genital		CEPS: Rectal		CEPS: Female Genital			
	COT	COT	COT	COT		COT	COT	COT			
		CAT	CAT	CAT		CAT	CAT				
		Prescribing Assessment				Patient Satisfaction Questionnaire					
	AKT					RCA					
PPM					iESR/ESR				FORM R		
									ESR		

Supervisor to start a new review period. You can add entries for first appraisal post-CCT.

Due 2 weeks before ARCP

Mandatory Certificates:
 BLS
 Childrens Safeguarding level 3
 Adult Safeguarding level 3







ARCP
 / / /

CCT
 / / /

Notes:


Education assessments

[+ New entry](#) [📈 Scores over time](#)

	CbDs & CATs	1 / 2 entries
	CSR	0 / 1 entry
	CEPS Assessment	3 entries
	Prescribing	0 entries
	COTs / Audio-COTs / Mini-CEX	2 / 2 entries
	QIP	0 entries

Case details

Outline of the Case:

What type of consultation was this?: In person  Virtual/ remote consultation 


Level of Complexity: Low Medium High




Time taken for observation (mins):

Banners e.g

We have added a direct link to the InnovAiT publications within the portfolio. This can be accessed by clicking on the Training Map and then on 'InnovAiT'.

Learning logs

 Spread of entries

	Clinical Case Reviews	9 entries
	Supporting Documentation/CPD	1 entry
	Learning Event Analysis/Significant Event	0 entries

 All entries  Training map

 Settings  Introduction

Review period: **28/01/23 - 30/06/23**

Next ARCP: 13/06/2023

ST2: 03/08/22 - 01/08/23



ARCP issues from year

Issues in year

- Difference between Action plans and PDP-need both
- Lack of future looking PDP- next review and post CCT
- Safeguarding – lack of evidence, logs and update
- QIA- needed each year
- QIP in ST1/2 GP post
- QIA and leadership must be different activities
- LEA/SEA- needed each year
- Delay in getting CCT and performers list
- Non intimate CEPS- lack of any let alone range
- ARCP- look at requirements of previous panel
- Trainees off sick at time of ARCP- panel not aware

Issues in year

- BLS/ AED-needed each year even if ALS in date, online no longer counts- all updates **must be hands on from 31st August 22, NEED cert to state PAEDs and adult**
- Referrals to panel mid year- via PD and AD team
- CSR place to comment on observations, ESR is reviewing evidence in portfolio
- Trainees not sitting exams in training time
- ESR review period dates and need completing 2 weeks before panel
- Form R-incorrect TOOT and need SEA/LEA on all complaints, declared and in portfolio,
- TOOT need to match portfolio and form R

No more chasing emails

- Too much missing evidence
admin don't have time to chase,
too many trainees to chase
takes too long
they are not responding
- PDs will be checking and completing triage week before panel
- Educator note added stating anything missing- not guaranteed
- At panel check for all evidence if not present on day outcome 5
- 2 weeks to add/ reviewed at next panel
- Add as log stating ARCP evidence or ES to add educator note detailing
- If not present outcome 2 or 3 will be issued

ESR Dates

- Check before signing off that date is correct and ends day of review
- Set new one straight away- requirements page wont work until
- Missing evidence will have to be added in new review
- Check they have all evidence they need before signing off
- Will lose access between last review and next one starting if not set up

Delay in getting CCT and performers list

- Now delay in CCT and getting on performers list
- All final ARCPs 2 months before CCT date - unless extensions
- More outcome 5s likely panel will not be chasing
- Trainee able to work straight after CCT date
- Can request later if accept CCT may be delayed
- Time in training no longer minimum unless wish to work in Switzerland

Total time in training check 3 lots of 365 - 49 (14 in each ST year plus extra 7 allowed in ST3) 1046 minimum total for full CCT


ESR Dates

 All entries  Training map

 Settings

Review period: **04/08/21 - 29/01/22**


ST1: 04/08/21 - 02/08/22

Deanery: Oxford 

Training prog: Reading & Newbury...

Current post: Royal Berkshire Hos...

The Training programme / Deanery can correct any information that is not correct.

 Message your trainee

Trainee | Dr [REDACTED]

Stage of training | ST1

Percent of full time | 100%

Current post | Palliative medicine Royal Berkshire Hospital

Start of review period: 04/08/2021

Planned date of next ESR: 29/01/2022

Months:

January 2022						
Mo	Tu	We	Th	Fr	Sa	Su
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

BLS with AED Paeds and adult

- Going forward both adult and paed needs to be coded in certificate for BLS each calendar year
- Must be hands on
- If cert does not state need to put in log to support that it did
- Do on line paed module and upload supporting documentation

Combined training

Combined training

- Replaces shortened program ACTF and CEGPR
- Trainees must apply before starting ST1 at application
- Complete process in fourteen fish in first few months
- Application if suitable gets submitted to college
- If approved previous experience can count towards training time 4-12 months
- First ARCP at 6/12 not at proposed end of ST year
- Needs to have achieved all requirements of ST1 year but prorate numbers of assessments and CCR
- If making progress approved at ARCP and transitions at 6/12 to ST2
- Trainees will not be chased- if not done will stay on full

WPBA News

New developments

- CEPS- expansion
- Not covered in RCA
 - Wont be assessed in New module/SCA
 - Trainees not doing what required currently of range in each ST year non-intimate observed CEPS
 - Concerns that trainees not able to do a focused GP safe examination
- Requirements summary sheet
 - Website and fourteen fish

KEY: Mandatory Range of others

Prostate examination			0
Rectal examination	✓	15/04/2022	1
Female Genital - bimanual			0
Female Genital - speculum			0
Breast examination	✓	23/08/2023	2
Male genital examination			0
Respiratory system			0
Ear, Nose and Throat			0
Abdominal system			0
Cardiovascular system			0
Musculoskeletal system			0
Neurological system			0
Child 1-5 years			0


GMC mandated "intimate" CEPS

Skill	Achieved	Last done	Count
Prostate examination			0
Rectal examination			0
Female Genital - bimanual			0
Female Genital - speculum			0
Breast examination			0
Male genital examination			0

Please note: Skills are only ticked as achieved if the assessor completing the CEPS has marked the Assessment of Performance as "Competent to perform the procedure unsupervised".

This table does not reflect any CEPS assessments that were completed on the old portfolio. The old assessments can still be used to demonstrate competence as long as they document that you are competent to perform the procedure unsupervised.

Other CEPS

These other CEPS help inform the Educational Supervisor sign off of the CEPS capability, demonstrating your ability to examine patients correctly across a wide range of systems, including the mandatory CEPS and a range of other CEPS 

Skill	Achieved	Last done	Count
Respiratory system			0
Ear, Nose and Throat			0
Abdominal system			0
Cardiovascular system			0
Musculoskeletal system			0
Neurological system			0
Child 1-5 years			0

By signing the trainee of as competent, I am satisfied that I have no concerns in their ability to examine patients correctly across a wide range of systems, including the mandatory CEPS and a range of other CEPS as listed in the CEPS summary. This could be through your own observations and assessments of the trainee examining patients, and/or the workplace-based assessments by trained and suitable assessors.

If you think this is or should be the trainee's **final review**, please grade them as: NFD - Below expectations; Competent or Excellent (*Meets / Above expectations is not appropriate as the expectation is Competence*).

Your rating: Needs further development Competent Excellent

Date last modified: 29/11/2022

Evidence to support your rating:

Save

Save as finished

Word descriptors for ratings

New CATs

- [Document management](#)
- [Duty doctor](#)
- [Routine consulting day](#)
- [Laboratory and radiology results review](#)
- [Electronic / digital/ online consultation review](#)

Below is a list of CAT options available:

- Case based Discussion (CbD)
- [Random case review\(s\)](#)
- [Leadership activities](#)
- [Prescribing assessment follow up](#)
- [Referrals review](#)
- [Document management](#)
- [Duty doctor](#)
- [Routine consulting day](#)
- [Laboratory and radiology results review](#)
- [Electronic / digital/ online consultation review](#)
- [Other](#)

Evidence	ST1		ST2		ST3	
	Required	<input checked="" type="checkbox"/>	Required	<input checked="" type="checkbox"/>	Required	<input checked="" type="checkbox"/>
Mini-cex/COTs all types	4		4		7	
CBD / CAT	4 CbD		4 CbD		5 CAT	
MSF	1 (with 10 responses)		1 (with 10 responses)		2 (1 MSF, 1 Leadership MSF)	
CSR	1 per post ^a		1 per post ^a		1 per post ^a	
PSQ	0		0		1	
CEPS	Ongoing- some appropriate to post		Ongoing-some appropriate to post		In 3 years 5 intimate + a range of non intimate ^b	
Learning logs	36 Case review		36 Case reviews		36 Case reviews	
Placement planning meeting	1 per post		1 per post		1 per post	
QIP	1 (in GP)		1 (in GP) – if not done in ST1		0	
Quality improvement activity	All trainees must demonstrate involvement in Quality Improvement at least yearly					
Significant event	Only completed if reaches GMC threshold of potential or actual serious harm to patients- check for Fitness to practice concerns					
Learning Event Analysis (LEA)	1		1		1	
Prescribing	0		0		1	
Leadership	0		0		1	
Interim ESR	1 ^c		1 ^c		1 ^c	
ESR	1		1		1	
Safeguarding adults level 3	Certificate and reflective log entry ^d		Certificate, annual knowledge update and reflective log entry ^d		Certificate, annual knowledge update and reflective log entry ^d	
Safeguarding children level 3	Certificate and reflective log entry ^d		Certificate, annual knowledge update and reflective log entry ^d		Certificate, annual knowledge update and reflective log entry ^d	
BLS/AED	Annual evidence of Competence in CPR and AED for all placements ^e		Annual evidence of Competence in CPR and AED for all placements ^e		Annual evidence of Competence in CPR and AED for all placements ^e	
Form R	In log ^f		In log ^f		In log ^f	
Covid self dec	In log		In log		In log	
PDP	At least one achieved in year and one for next review		At least one achieved in year and one for next review		At least one achieved in year and one for post CCT period	
Any requirements of last ARCP	Check met if previous ARCP		Check met		Check met	

^a **CSR** to be completed in a primary care post if any of the following apply: The clinical supervisor in practice is a different person from the educational supervisor. The evidence in the Portfolio does not give a full enough picture of the trainee and information in the CSR would provide this missing information, and either the trainee or supervisor feel it is appropriate.

^b **5 Intimates** need to be observed and include rectal, breast, female genital including bimanual, male genital and prostate. A range of other **non intimate CEPS** relevant to General Practice is also required.

^c **The interim ESR** review can be completed at the mid point of each year only if the trainee is progressing satisfactorily. If there are any concerns about the trainees performance or they have had an unsatisfactory/developmental outcome in their previous ARCP then the full ESR will be required.

^d If a trainee does not have a placement within a specific training year that includes children, then it is not mandatory (but still recommended) to record and document their learning on **Child safeguarding**. Level 3 safeguarding cert lasts 3 years but a knowledge update is needed **in addition** in each year if not completing the full level 3 in that training year.

^e Currently on line **BLS certificate** accepted during COVID but hands on encouraged and likely to become mandatory, **ALS** though lasting for 3-4 years needs to be updated with annual evidence of Competence in CPR and AED for all placements.

^f **Form R** in log- Required annually before each ARCP

Assessments- should be **spread throughout the training year** with roughly half being done in each review period.

Less than Full time trainees are expected to do the same total number in the full training year but prorate in each review period dependent on their percentage of time training. See roadmaps for further details.

Portfolio intro

- <https://vimeo.com/791095590/6d7e3ac726>

Portfolio Fourteen fish

<https://www.rcgp.org.uk/training-exams/training/mrcgp-trainee-eportfolio/new-trainee-eportfolio-landing.aspx>



ARCP and admin platform

- <https://www.rcgp.org.uk/training-exams/training/mrcgp-trainee-eportfolio/new-trainee-eportfolio-landing/fishbase-introduction.aspx>



FishBase

Reminder

- Ask PDs before GP admin
- Check RCGP website before emailing
- Get trainee to- go to RCGP direct not google it, new website
- Check last ARCP early
- Check requirements page
- Use the summary sheet sent
- Use educators notes- e.g sick leave monthly total
- LTFT trainees check all evidence at end of year, as ARCP are annual not at transition point, next ARCP may be too late and requirements may not be accurate
- Educator note to advise if trainee off sick ARCP should not happen