

# Thames Valley Local Team

## Revalidation and ARCP: Information for Resident Doctors

Every doctor who is fully registered with a licence to practise needs to have a revalidation recommendation made every 5 years, demonstrating that they are up to date and practising safely.

Residents Doctors additionally must have a revalidation recommendation made when they complete their training (CCT - Certificate of Completion of Training).

Fulfilling the requirements of your training programme and participating fully in the ARCP (Annual Reviews of Competence Progression) process acts as the equivalent to the annual medical appraisal for non-training doctors.

Failure to do so can be considered as ‘non-engagement’ with revalidation which ultimately may result in the GMC (General Medical Council) removing your licence to practise.

**Before your ARCP**

**Check** you are‘connected’ to us. Click [here](http://www.gmc-uk.org/doctors/information_for_doctors/gmc_online.asp) to log on to your GMC Online account*.*

You will need to ensure you have selected ‘NHSE (NHS England) Education Thames Valley’ as your Designated Body (DB) with Dr Paul Sadler as your Responsible Officer (RO).

By connecting to us, we will be able to see when your revalidation submission date is.

**Complete** the following as per the deadline advised by your programme team

* Form R (Parts A and B) – TIS (Trainee Information System) Self Service – Part B includes a self-declaration covering all your practice and asks about health, probity, involvement in significant events, serious incidents and complaints. Updates on any previously declared concerns should be included along with references to any e-portfolio entries.
* Whole Scope of Practice Form – your revalidation recommendation is based on ALL work you undertake as a doctor, including any voluntary and locum work that is not part of your training programme. It is therefore very important that you declare this work on this form and get it signed by the person supervising the work. You must also discuss any non-training work with your Educational Supervisor to ensure it is appropriate and is not impacting on your training or health. Guidance and forms available [here](https://thamesvalley.hee.nhs.uk/resources-information/trainee-information/revalidation/form-r/).
* Educational / Academic Supervisors Report – including the question as to whether the educational supervisor is aware of any unresolved investigations, health or probity concerns which may affect revalidation.
* OOP (Out of Programme) paperwork as specified by your Training Programme Director and Programme Team (more detailed OOP revalidation requirements can be found in [Appendix 1](#_Appendix_2_-)).

**During the ARCP**

The panel will review the above information alongside any Incident Reports (detailing incidents, concerns and complaints) which have been submitted by your employer.

**The panel’s role is:**

* To review any involvement in incidents and complaints and ensure sufficient reflection and learning has taken place.
* To review the whole scope of practice and ensure sufficient evidence is recorded.
* To confirm whether the panel is aware of any fitness to practise concerns which could affect revalidation.
* To state clearly on the outcome form if there are any ongoing investigations or other known concerns which may impact on a resident doctor’s fitness to practise.
* To complete:
1. ARCP Revalidation checklist
2. Revalidation section on ARCP Outcome Form
* It is not the responsibility of the panel to make a recommendation for revalidation – this rests with the RO.

**After the ARCP**

When your revalidation submission is due the revalidation team uses the information provided at your ARCP to inform the RO’s recommendation.

If any additional information or clarification is required, the revalidation team will contact you.

When a revalidation recommendation is made the revalidation team will email you to confirm this.

If you have completed your training (and getting CCT) and will **not** be taking a period of grace, please let the revalidation team know so they can ensure your recommendation is made prior to you leaving. england.revalidation.tv@nhs.net

**Late / Missing Form R?**

If you did not submit your Form R within the specified timescale you will have received an Outcome 5.

You will be required to remedy this situation within 2 weeks. In addition, you will be written to by the RO to remind you of the importance of engaging with revalidation.

If your Form R is submitted within this additional 2-week timeframe you will receive the ARCP Outcome appropriate for your educational progression.

If after this additional 2 weeks the Form R is still not submitted, you risk being given an Outcome 2, 3 or in exceptional circumstances a 4.

You will also be required to meet with the RO to explain the reasons behind the failure to submit the form and be notified that you are risking a ‘non-engagement’ recommendation.

An Outcome 1 or 6 **cannot** be awarded until such time as the Form R is submitted.

More information can be found on our webpages

<https://thamesvalley.hee.nhs.uk/resources-information/trainee-information/revalidation/>

## Appendix 1 - OOP guidance

**Revalidation Guidance for Resident Doctors on Out of Programme (OOP)**

All doctors now must revalidate at 5 yearly intervals and, for resident doctors**,** againat the point of award of CCT. This clock is generally not influenced by periods of OOP. The only time that this may change is if you are having a career break at the time of revalidation and have not been able to collect any evidence. In this case the responsible officer may need to defer their recommendation until you resume practice.

You therefore need to continue to collect cumulative evidence to support your revalidation and all aspectsof your practice as a doctor must be accounted for. Depending on the type of work you are doing while out of programme, you may need to collect different, and possibly more, evidence than for the usual ARCP.

**Your ARCP date will be set in advance as usual and you will be required to submit evidence as requested by your Training Programme Director.**

You must retain your licence to practise and registration when out of programme even if you are overseas.

**For Resident Doctors in ALL types of OOP**

The Postgraduate Dean will remain as your Responsible Officer (RO) while you are OOP and your prescribed connection stays with NHSE Education Thames Valley. While you are away you will need to do the following, on at least an annual basis:

* Engage with and complete the requirements of any training component of work you are undertaking, including provision of a Supervisor’s Report, completion of online portfolios and any workplace-based assessments as specified by your specialty. This continues during any work overseas.

* Engage in, and provide documentary evidence of involvement with, the appraisal or review process in your host organisation, and retain any paperwork for submission to the ARCP panel. For example, if you are doing an OOPE (Out of Programme for Clinical Experience) in a different specialty.

* Complete the Form R, listing any wider work that you perform, and answering the revalidation declaration about any incidents, complaints, health and probity in readiness for revalidation.

* Complete a Whole Scope of Practice form if relevant, detailing your entire scope of practice including locum and other wider work as a doctor which is NOT part of your training programme. Provide evidence that you are satisfying the GMC domains across that scope of practice. This form must be signed by the person who is supervising that work as well as your Educational Supervisor.

* Complete an annual OOP return, this will be sent to you by your Programme Manager.

* Where applicable, engage with any Supported Return to Training initiatives run by your school or local office prior to leaving, during, and upon your return to training.

For extra requirements in individual OOP types please see details over the page:

**Out of Programme for Research (OOPR)**

Your School (in conjunction with the GMC) will have decided in advance whether or not you can count some of your research time towards your certificate of completion of training (CCT), but the evidence required for revalidation will not change.

**In addition to all the generic evidence** you need to provide to the ARCP panel, as described above, you will need to do the following:

* Be aware of and abide by the GMC Guidance on Good Practice in Research: <https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/good-practice-in-research/good-practice-in-research>

* Submit a completed academic supervisor’s report for each period/post of research.

* If you are also carrying out clinical work, you will also need to provide a Clinical or Educational Supervisor’s report through your e-portfolio or on paper.

**Out of Programme Pause (OOPP)**

During your OOPP you should keep a clear record of your experience and reflections via a logbook. This is a key component and evidence base required for the gap analysis process required on your return to training.

You must complete an appraisal with the employing organisation covering the OOPP role. Contact the appraisal/revalidation team in the organisation early on to get this arranged.

**Out of Programme for Career Break (OOPC)**

For periods of OOPC you will need to:

* Keep an accurate record of any clinical work you undertake whilst you are not working in your training programme, including any assessments or appraisals. Please note that any clinical or other paid work should have been agreed in advance as part of your OOP Application.

* Keep an accurate record of any educational events that you are involved with; for example, attending training days and record this in your portfolio.

* If you do not undertake any medical work at all during your period of OOPC, then the RO may recommend a deferral of your revalidation date.

More detailed guidance on the OOP Application process can be found on our [webpages](https://thamesvalley.hee.nhs.uk/resources-information/trainee-information/training-options/out-of-programme-oop/).