FELLOWSHIP
BY NOMINATION
BY APPLICATION

GUIDANCE NOTES

NOMINATOR
SECONDER
NOMINEE
Dear Members and Fellows

The vast majority of our colleagues up and down the country are doing a fantastic job in ever more difficult circumstances. As health services come under pressure, our role becomes even more important to the communities that we serve. It is essential that we recognise the efforts of our Members in the very many ways in which they choose to make their contributions to General Practice.

For a number of years now we have been trying to challenge the perception that the College is an 'ivory tower'. The College is, in fact, tens of thousands of GPs in thousands of consulting rooms throughout the world. Our local networks are the only way that Members doing a good solid job, consistently and with quiet dedication, can be identified. Just as the MRCGP has become the marker of quality on entry into general practice, I hope that all good general practitioners will, in time, be recognised through Fellowship.

You will know a colleague who should be ‘FRCGP’; who should be acclaimed and commended. Perhaps you are at a point in your career at which you are setting yourself a professional development target. We have learnt that we are in the most part a humble bunch. We don’t like to put our hands up for praise, we don’t like to ‘sell ourselves’. This should not hinder us from being tangibly appreciated by our profession.

Our Fellowship, we hope, combines the thrill of being recognised through nomination with a judgment by peers. We are trying to avoid a tick-box exercise or facile measurement, and we have a desire to minimize the paperwork involved. Most importantly, it is based locally with faculties trusted to put in place local networks to recommend Fellows.

I hope that you will find the forms easy to complete. We all have many forms to complete in our professional lives and we want to make this as simple as possible.

With very best wishes

Mike Pringle
President

March 2013
WHAT IS FELLOWSHIP?

Fellowship is the highest level of Membership of the College. The College’s first Fellows were elected in 1969. A Fellow of the College exemplifies its motto ‘cum scientia caritas’, and is an ambassador for the College’s standards and values in whom the College is happy to signal its pride.

MEMBERSHIP OF THE RCGP

Throughout this document, and the Fellowship process, you will see ‘Member’ which refers to members of the Royal College of General Practitioners who have passed the College’s assessments (MRCGP or iMAP). Associates are ‘members’ of the College and not eligible to participate in the appointment of Fellows.
POTENTIAL ACHIEVEMENT CATEGORIES

The following achievement categories may be referred to when preparing statements/citations. These areas of achievement are designed to assist contributors in structuring their submissions; enable Faculty Fellowship Committees to consistently review and recommend Members; and to assist the Fellowship and Awards Committee in their role in quality ‘control’ and random sampling.

Clinical Practice

The intention is that patients of a doctor who is a Fellow of the College should be confident that he or she, regardless of any other accomplishments, practises to a clinical standard with which the College is satisfied, delivering safe personal medical care.

The nature and quality of a candidate’s clinical responsibilities should be clear.

For nominees working in the National Health Service, Faculty Fellowship Committees are required to perform checks as to the nominee’s standing with the General Medical Council and their inclusion on a Primary Care Organisation/Local Area Team’s Performer’s List (or equivalent for candidates based in the Republic of Ireland) – these checks provide independent triangulation of the candidate’s own description of their clinical standards and those given by the nominating team. They act as safeguarding measures to help ensure that certain clinical standards are being upheld by the candidate, and that there are no performance issues likely to bring the College into disrepute. Nominees working in private or independent practice or as part of the armed services however, are exempt from the NHS requirement to be on a Performer’s List. This means that it is not possible to perform this check for these candidates - other means of verification of their clinical standards are therefore needed, that are neither more nor less demanding for candidates working in the NHS, so as to have an equitable and robust system of quality assurance.

Similarly, the verification of Overseas members clinical standards is difficult through the standard process described above, as these candidates’ ways of working and the quality assurance procedures used may be different from those in the UK.

The following criteria specifically relate to ‘atypical nominees’, such as those groups described above, providing a process for the quality assurance of their clinical performance, where the standard procedure is not suitable. These are mandatory requirements where the candidate is in active clinical practice.

A) For doctors in independent practice:

1. Potential Fellows should be members in good standing of the Independent Doctors Federation.
2. The nominee should submit, as part of his or her nomination, copies of the summary, personal development plan and sign-off of appraisals covering
3. Evidence should be provided that the nominee has acted on significant clinical action points identified in the appraisals.

B) For doctors in the armed services, Overseas members and other ‘atypical’ groups:

1. The nominee should be in good standing with the appropriate statutory regulatory authorities and also a member in good standing of the appropriate professional academic body.
2. That body should administer, and/or require the nominee to participate in, a process of annual clinical appraisal. Details of this process should be made available to the Fellowship and Awards Committee of Council, who should be satisfied that it is comparable in standard and rigour to that obtaining in the NHS.
3. The nominee should submit details of his or her three most recent consecutive appraisals, together with the name of, and permission to contact if necessary, the appraiser.
4. Evidence should be provided that the nominee has acted on significant clinical action points identified in the appraisals.
5. The nominee should declare and provide details of any serious complaints brought in the last year, and of any significant event audits.

For nominees/candidates not working in general practice

The nomination should demonstrate how activity in the nominee’s/candidate’s own clinical field has furthered the care of patients in general practice and how they have aimed to uphold the ethos of the College.

Patient-Centred Practice

Nominations/applications in this category might show evidence of ‘practical caritas’.

It may be possible to indicate practical changes to practice arising from patient involvement or suggestions. The nominee/applicant may be involved in a patient participation group, in the practice or more widely.

Leadership

Nominees/candidates might have been involved in activities such as RCGP work at Faculty, national or international level, work with primary care organisations or other healthcare bodies, including at practice level, or in any field (including the medico-political) where he or she has the opportunity to promote the quality and reputation of general practice.

Nominators and Committees might want to consider the nature, scope, scale and length of service of the candidate’s leadership role; the impact and outcomes of the
achievement; and any degree of self-sacrifice to serve needy communities or patients.

Important leadership qualities also include the empowerment of others.

The degree of achievement might be titrated against the scale of the challenge – in other words, achieving a great deal in a relatively minor role might be seen as the equivalent of lesser success at a more major and challenging role, and vice versa.

**Teaching and Education**

The following are examples of roles and activities Faculty Fellowship Committees might wish to review for recommendation to Fellowship:

1. At least five years as a GP VTS trainer / undergraduate teacher / Foundation Year 1 or 2 supervisor
2. Appointment as a GP Tutor or Course Organiser (England) or equivalent
3. Undertaking a national assessment role, either within the College (e.g. MRCGP examiner; MAP, QPA or QTD assessor) or outside the College (e.g. Summative Assessment assessor)
4. Acting as an appraiser
5. Appointment as a Senior Lecturer
6. Appointment as an undergraduate or Foundation Programme Director or equivalent
7. An appropriate postgraduate qualification in teaching or education such as Diploma in Medical Education
8. Publication on educational topics in peer-reviewed journals
9. A substantial contribution to the development or delivery of undergraduate or postgraduate courses
10. Work of national significance in undergraduate or postgraduate medical or health care education

Or:

1. At least one year as a Deputy or Associate Director of Postgraduate GP Education (England) or equivalent, or as a Deputy or Associate Postgraduate Dean
2. Appointment as a Director or Dean of Postgraduate GP Education or as a Postgraduate Dean
3. Appointment as a Professor or Reader in General Practice
4. Attained an appropriate postgraduate qualification at Masters level or above
5. A management or leadership role in a national assessment process
6. Authorship of books on medical or health care education
7. Evidence of work of international significance in undergraduate or postgraduate medical or health care education
Innovation and Creativity

The environment and context in which a GP works affects the extent of the effort required to be innovative.

Innovation has been described as ‘applied creativity’ and ‘a constituent of design’\(^1\). Nominators submitting in this category might wish to point to identifiable outcomes of the nominee’s innovative or creative activity in one or more of the following areas:

i. Clinical care, e.g. innovative models of care delivery or the application of best practice
ii. Teamwork, e.g. innovative ways of multidisciplinary working
iii. Non-academic publications e.g. newsletters, journalism, articles, commentary, books
iv. The philosophy of primary care, e.g. new ways of describing, analysing or explaining aspects of general practice through, for example, lectures, writing or the media
v. Teaching, e.g. initiating original ways of teaching and learning in the practice, or within vocational training
vi. Media engagement, e.g. promoting the understanding of, and higher standards for, primary care through contributions to newspapers, magazines, radio and television
vii. Particularly strong candidates in this category are likely to be – at least within the profession – well-known by virtue of the impact of their work. They might have had an influence on some aspect of the discipline at national level, or be associated with a particular ‘high profile’ project. Educational innovators might, for example, have developed new materials for e-learning, distance learning, continuing professional development or multi-professional education

Academic and Research

The following are examples of achievements a potential Fellow might demonstrate if submitting in this category:

i. A postgraduate degree in research e.g. taught Masters with significant research component, MPhil, MD or PhD
ii. Publications in peer-reviewed journals
iii. A research post in university department, or substantive role within research network or accredited research practice
iv. Membership of a research management or funding body (e.g. NHS R&D committee, RCGP Research Group, MRC)
v. Membership of the editorial board of a primary care research journal
vi. Recipient of a national research award or personal research development award (e.g. John Fry medal, Research Council or NHS training fellowship)

\(^1\) Prof. Richard Kimbell, Goldsmiths University of London, 2002
vii. Invitations to present research work at national or international meetings
viii. Evidence of obtaining project grants or attracting research funding to undertake work relevant to general practice
ix. Contribution to research capacity development e.g. by supervising research students.

Particularly strong candidates in this category might have achieved one or more of the following:

i. A significant body of publications in the leading peer-reviewed journals
ii. A senior position in a university department (Reader or Professor)
iii. Award of Fellowship of the Academy of Medical Sciences or of other Royal Colleges as a result of contributions to research
iv. Evidence that his or her own research has had an impact on national policy or practice
v. Invitations to deliver eponymous lectures
vi. Editorship of a primary care research journal.
# Section One | Fellowship by Nomination

## The Process

<table>
<thead>
<tr>
<th><strong>Nominator</strong></th>
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</table>
| Member or Fellow | Faculty Member not necessarily a Fellow  
500 Word Citation | 500 words summarising the nominee’s key achievements to date |

<table>
<thead>
<tr>
<th><strong>Faculty Fellowship Committee</strong></th>
<th></th>
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| Logs member as possible candidate | Check not already being nominated  
Check 5 years in good standing | Chance to flag up any early concerns to avoid upset  
Check with GMC and PCO/LAT (or equivalent) |

<table>
<thead>
<tr>
<th><strong>Nominator</strong></th>
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<tbody>
<tr>
<td>Engages 2 x seconders</td>
<td>Identifies 2 x seconders who know the candidate but who will remain anonymous until appointed</td>
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<thead>
<tr>
<th><strong>Seconders</strong></th>
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</table>
| Member or Fellow (except in exceptional circumstances)  
400 Word Supporting Statement | Faculty Member not necessarily a Fellow  
400 words supporting the nominator |

<table>
<thead>
<tr>
<th><strong>Nominee</strong></th>
<th></th>
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</table>
| 1000 words  
Complaints declaration | Member 5 years in good standing  
1000 words covering key career achievements to date |

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<thead>
<tr>
<th><strong>Faculty Fellowship Committee</strong></th>
<th></th>
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</table>
| Faculty Provost and/or Chair approves | Receive 4 x forms as submission from nominator  
Review and sign off application  
Forward names to fellowship@rcgp.org.uk using Faculty Recommendations form |

<table>
<thead>
<tr>
<th><strong>Quality Assurance Panel</strong></th>
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</table>
| Random Sampling of recommended candidates  
All rejected candidates | Convened as independent panel (ongoing reviews)  
Quality and consistency review |

<table>
<thead>
<tr>
<th><strong>Fellowship Unit</strong></th>
<th></th>
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<tbody>
<tr>
<td>GMC Conditions check</td>
<td>Check license and registration</td>
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<tr>
<th><strong>Fellowship Committee</strong></th>
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<tbody>
<tr>
<td>Fellowship Unit</td>
<td>Review and submit to Council if in agreement</td>
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<thead>
<tr>
<th><strong>Fellowship Unit</strong></th>
<th></th>
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</thead>
</table>
| Inform nominee and faculty | Letter to nominee re outcome  
Fee request |
1. The College Ordinances require that the candidate must have been a Member of the College in good standing for at least five **continuous** years at the date of nomination to the Faculty Fellowship Committee.

2. As nominator you must be a Member or Fellow of the College in good standing. You must not be a family relation of the nominee.

3. Your nomination must be endorsed by two seconders. Their role is to confirm the accuracy of the application and to attest to the qualities and achievements on which you base the nomination for Fellowship. As nominator you should engage the seconders **without consultation** with the candidate.

4. At least one member of the ‘nominating team’ should be in a position to attest to the nominee’s clinical work (either yourself or one of the seconders), having worked in close clinical contact with the candidate for at least five years. This member of the nominating team must be a Member or Fellow of the College in good standing; the length of their membership is not specified. The other two members of the nominating team must be Members or Fellows of the College in good standing for at least five **continuous** years at the date of nomination to the Faculty Fellowship Committee.

5. In the event that you are not able to attest to the nominee’s clinical work, and are unable to identify an eligible seconder (either a current Member or Fellow of the College in good standing) in this position, as nominator you should instead approach the nominee’s appraiser to request external validation of their good clinical standards. The appraiser should be asked to provide a statement of up to 400 words describing the quality of the nominee’s clinical work, to be appended to your own citation. The appraiser is not required to be a Member or Fellow of the College. Two seconders should still be sought to support the nomination.

6. In exceptional circumstances, it is possible for a seconder to not be a Member or Fellow of the College – this will be a matter for consideration by the Chair of the Fellowship and Awards Committee.

7. Practice colleagues may nominate or second. Only one practice colleague per application can be accepted. If a practice colleague is the nominator then no further practice colleagues could be engaged as seconders.

8. Subject to these guidelines, the choice of supporters is a matter for you, though the Fellowship Committee of Council will wish to be satisfied that they are in a position to make unbiased, comprehensive and value-added statements. The seconders’ forms should be returned to you.

9. The application must include a 500 word citation outlining the achievements of the nominee to date and covering the appropriate achievement categories to provide structure, explaining to the Faculty Fellowship Committee the esteem in which the candidate is held.

10. Once you have completed your citation, you should pass this with the candidate’s statement to your identified seconders who will confirm, in 400 words, their accuracy and reliability, and provide any other appropriate insights to assist the Faculty Fellowship Committee in their discussions.

11. The nominee should be asked for 1000 words outlining and **reflecting** on their key career achievements to date in relation to the criteria for Fellowship. Nominees are advised to write in a reflective manner and not provide bulleted lists or copies of their CVs. They will be required to agree to accept the appointment if it is offered; pay the fee of £620; uphold the aims of the College; and declare any complaints, breach in terms of service or litigation.
12. If the nominee is in active clinical practice, they are required to provide details of their clinical care within their statement.

13. All forms must be submitted electronically to the Faculty Fellowship Committee Chair as a ‘whole’ application. Nominators should submit their form, the two seconders’ forms and the nominee’s form in one email.

14. Nominations for Fellowship are considered by the Faculty Fellowship Committee, before being forwarded to the Fellowship and Awards Committee of Council. Faculty Fellowship Committees are responsible for checking with the General Medical Council’s GP Register and (for nominees working for the NHS) locally with the Primary Care Organisation/Local Area Team’s Performer’s List (or equivalent for candidates based in the Republic of Ireland) for any outstanding performance issues likely to bring the College into disrepute. The Committee of Council, on an ongoing basis, agrees a list of names it will recommend to Council for election to Fellowship at the next College General Meeting. A final GMC check will be made by the Fellowship Unit prior to the Fellowship and Awards Committee of Council convening at its meetings twice a year (in April and October).

15. If your nomination is not successful, the Chair of the Faculty Fellowship Committee or Fellowship and Awards Committee of Council will write to you giving details of the Committee’s decision with reasons, after it has been reviewed by the Quality Assurance Panel of the Fellowship and Awards Committee of Council. The recommendation of the Committee of Council is final. There is no appeal. However, you may nominate in subsequent years if there is fresh evidence for the Committee to consider.

16. For nominees in independent practice, the armed services, Overseas members and other ‘atypical’ groups, there are specific criteria and evidence required, related to their clinical performance, which should be provided as part of their submission. Fulfillment of these criteria and requirements provides an independent means of verification as to the candidate’s clinical standards, in the absence of being able to perform a check with the Primary Care Organisation/Local Area Team’s Performer’s List (as is the standard process for candidates working for the NHS). These are mandatory requirements where the candidate is in active clinical practice – nominators and nominees are asked to refer to the accompanying guidance provided under the Clinical Practice achievement category for details of these criteria.

17. Overseas candidates for nomination should contact the Chairman of the International Committee in the first instance for guidance on completion of forms.

18. There is no closing date for receipt of nominations, however to be considered at a particular Council meeting for appointment at a particular General Meeting, nominators are asked to see the calendar in section three of this document.
1. The College Ordinances require that you, the seconder, must be a Member or Fellow of the College in good standing.

2. In exceptional circumstances, it is possible for a seconder to not be a Member or Fellow of the College – this will be a matter for consideration by the Chair of the Fellowship and Awards Committee.

3. Two seconders are required in addition to the nominator to support an application for Fellowship.

4. At least one member of the ‘nominating team’ should be in a position to attest to the nominee’s clinical work (either yourself, the other seconder or nominator), having worked in close clinical contact with the candidate for at least five years. This member of the nominating team must be a Member or Fellow of the College in good standing; the length of their membership is not specified. The other two members of the nominating team must be Members or Fellows of the College in good standing for at least five **continuous** years at the date of nomination to the Faculty Fellowship Committee.

5. Practice colleagues may act as seconders but only one practice colleague per application can be accepted. If a practice colleague is the nominator then no further practice colleagues could be engaged as seconders. Family members may not second applications.

6. By supporting the application, you confirm that you consider the candidate worthy of the award of Fellowship, and that your opinion is unbiased and based on direct personal knowledge.

7. Seconders are engaged by nominators and free to discuss the application with the rest of the nominating team. **No discussion should take place with the candidate.** It is helpful to the Faculty Fellowship Committee if your observations as seconders expand and build upon information given elsewhere in the application, rather than reiterate it. A simple endorsement of another nominating team member’s comments is not sufficient.

8. Your completed form should be returned to the nominator (not to the candidate) for submission.
1. The College Ordinances require that you, the nominee, must have been a Member of the College in good standing for at least five continuous years at the date of nomination to the Faculty Fellowship Committee.

2. Your nomination is being endorsed by two seconders (identified by the nominator) whose role is to confirm the accuracy of the application submitted by the nominator, and to attest to the qualities and achievements on which the nomination for Fellowship is based. The seconders’ will remain anonymous to you until completion of the process.

3. At least one member of the ‘nominating team’ should be in a position to attest to your clinical work (either the nominator or one of the seconders), having worked in close clinical contact with you for at least five years. This member of the nominating team must be a Member or Fellow of the College in good standing; the length of their membership is not specified. The other two members of the nominating team must be Members or Fellows of the College in good standing for at least five continuous years at the date of nomination to the Faculty Fellowship Committee.

4. Your nominator must be a Member of Fellow of the College in good standing. He or she must not be a family relation.

5. In the event that your nominator is not able to attest to your clinical work, and is unable to identify an eligible seconder (either a current Member or Fellow of the College in good standing) in this position, they should instead approach your appraiser to request external validation of your good clinical standards. The appraiser will be asked to provide a statement of up to 400 words describing the quality of your clinical work, to be appended to the nominator’s citation. The appraiser is not required to be a Member or Fellow of the College. Two seconders should still be sought by the nominator to support the nomination.

6. In exceptional circumstances, it is possible for a seconder to not be a Member or Fellow of the College – this will be a matter for consideration by the Chair of the Fellowship and Awards Committee.

7. Practice colleagues may nominate or second. Only one practice colleague per application can be accepted. If a practice colleague is the nominator then no further practice colleagues could be engaged as seconders.

8. The application must include a 1000 word statement outlining and reflecting on your key career achievements to date in relation to the criteria for Fellowship. Nominees are advised to write in a reflective manner and not provide bulleted lists or copies of their CVs. Nominees may wish to consider the six achievement categories to provide structure to the statement. The College understands that most GPs are humble by nature so a factual account, which should be comfortable to write, will be sufficient when received as part of a whole application. An honest account of good medical practice and patient care should be presented.

9. If you are in active clinical practice, please provide details of your clinical care within your statement.

10. All forms must be submitted electronically.

11. Once you have completed your statement, you should email the form to your nominator who will complete the process.

12. You are required to agree to accept the appointment if it is offered; pay the fee of £620; uphold the aims of the College; and declare any complaints, breach in terms of service or litigation. By
13. Nominations for Fellowship are considered by the Faculty Fellowship Committee, before being forwarded to the Fellowship and Awards Committee of Council. Faculty Fellowship Committees are responsible for checking with the General Medical Council’s GP Register and (for nominees working for the NHS) locally with the Primary Care Organisation/Local Area Team’s Performer’s List (or equivalent for candidates based in the Republic or Ireland) for any outstanding performance issues likely to bring the College into disrepute. The Committee of Council, on an ongoing basis, agrees a list of names it will recommend to Council for election at the next College General Meeting. A final GMC check will be made by the Fellowship Unit prior to the Fellowship and Awards Committee of Council convening at its meetings twice a year (in April and October).

14. Candidates for Fellowship should keep the College informed of any pending or upheld formal complaints, breach of terms of service, litigation, referral to the General Medical Council or similar, or local authority; or any past referral to the General Medical Council, whether or not upheld. Any substantive referrals to the National Clinical Assessment Service should also be declared. Checks will be made by the Faculty Committees and the Fellowship Unit at varying stages throughout the formal process but candidates are expected to be forthcoming with such information.

You are required to declare any complaints against you on the nominee’s form. The President (as Chair of the Fellowship and Awards Committee of Council) will be engaged by the faculty to investigate whether the case should be referred back to the Fellowship and Awards Committee for further consideration, or whether the application should be halted. Rarely are complaints a bar to Fellowship and any declarations should not deter you from completing the form.

15. For nominees in independent practice, the armed services, Overseas members and other ‘atypical’ groups, there are specific criteria and evidence required, related to your clinical performance, which should be provided as part of your submission. Fulfillment of these criteria and requirements provides an independent means of verification as to the candidate’s clinical standards, in the absence of being able to perform a check with the Primary Care Organisation/Local Area Team’s Performer’s List (as is the standard process for candidates working for the NHS). These are mandatory requirements where the candidate is in active clinical practice – nominators and nominees are asked to refer to the accompanying guidance provided under the Clinical Practice achievement category for details of these criteria.

16. Overseas members for nomination should contact the Chairman of the International Faculty Fellowship Committee in the first instance for guidance on completion of forms.
## SECTION TWO | FELLOWSHIP BY APPLICATION

### THE PROCESS

<table>
<thead>
<tr>
<th><strong>APPLICANT</strong></th>
<th><strong>NOMINATOR</strong></th>
</tr>
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</table>
| 1000 words Complaints declaration | • Member 5 years in good standing  
• 1000 words summarising key career achievements to date.  
• Engages nominator |
| **SECONDER** | **FACULTY FELLOWSHIP COMMITTEE** |
| Member or Fellow (except in exceptional circumstances)  
500 word supporting statement | • Check not already being nominated through FFC  
• 500 words summarising the applicant’s key career achievements to date  
• Identifies 2 x seconders who know the candidate but who will remain anonymous until appointed  
• Faculty Member not necessarily a Fellow  
• Submits nomination to Faculty Fellowship Committee |
| **QUALITY ASSURANCE PANEL** | **FELLOWSHIP UNIT** |
| Random sampling of recommended candidates  
All rejected candidates | • Receive 4 x forms as submission from nominator  
• Review and sign off application  
• Forward names to fellowship@rcgp.org.uk using the Faculty Recommendations form |
| **FELLOWSHIP COMMITTEE** | **FELLOWSHIP UNIT** |
| Faculty Provost and/or Chair approves | • Check license and registration |
| **FELLOWSHIP UNIT** | **FELLOWSHIP COMMITTEE** |
| GMC conditions check | • Review and submit to Council if in agreement |
| Inform applicant and faculty | **FELLOWSHIP UNIT** |
| • Letter to applicant re outcome  
• Fee request |
1. The College Ordinances require that you, the nominee, must have been a Member of the College in good standing for at least five continuous years at the date of nomination to the Faculty Fellowship Committee.

2. You should identify a nominator to support your application. The nominator must be a Member or Fellow of the College in good standing. They may not be a family relation.

3. The nominator should identify 2 seconders whose role is to confirm the accuracy of the application submitted by you and the nominator, and to attest to the qualities and achievements on which the application for Fellowship is based. The seconders’ will remain anonymous to you until completion of the process.

4. At least one member of the ‘nominating team’ should be in a position to attest to your clinical work (either the nominator or one of the seconders), having worked in close clinical contact with you for at least five years. This member of the nominating team must be a Member or Fellow of the College in good standing; the length of their membership is not specified. The other two members of the nominating team must be Members or Fellows of the College in good standing for at least five continuous years at the date of nomination to the Faculty Fellowship Committee.

5. In the event that your nominator is not able to attest to your clinical work, and is unable to identify an eligible seconder (either a current Member or Fellow of the College in good standing) in this position, they should instead approach your appraiser to request external validation of your good clinical standards. The appraiser will be asked to provide a statement of up to 400 words describing the quality of your clinical work, to be appended to the nominator’s citation. The appraiser is not required to be a Member or Fellow of the College. Two seconders should still be sought by the nominator to support the nomination.

6. In exceptional circumstances, it is possible for a seconder to not be a Member or Fellow of the College – this will be a matter for consideration by the Chair of the Fellowship and Awards Committee.

7. Practice colleagues may nominate or second. Only one practice colleague per application can be accepted. If a practice colleague is the nominator then no further practice colleagues could be engaged as seconders.

8. Your application should be up to 1000 words outlining and reflecting on your key career achievements to date in relation to the criteria for Fellowship. Applicants are advised to write in a reflective manner and not provide bulleted lists or copies of their CVs. Nominees may wish to consider the six achievement categories to provide structure to the statement. The College understands that most GPs are humble by nature so a factual account, which should be comfortable to write, will be sufficient when received as part of a whole application. An honest account of good medical practice and patient care should be presented.

8. If you are in active clinical practice, please provide details of your clinical care within your statement.

9. All forms must be submitted electronically.

10. Once you have completed your statement, you should email the form to your nominator who will complete the process.

11. You are required to agree to accept the appointment if it is offered; pay the fee of £620; uphold the aims of the College; and declare any complaints, breach in terms of service or litigation. By
completing and forwarding the form to the nominator you will agree to this.

12. Applications for Fellowship are considered by the Faculty Fellowship Committee, before being forwarded to the Fellowship and Awards Committee of Council. Faculty Fellowship Committees are responsible for checking with the General Medical Council’s GP Register and (for applicants working for the NHS) locally with the Primary Care Organisation/Local Area Team’s Performer’s List (or equivalent for candidates based in the Republic of Ireland) for any outstanding performance issues likely to bring the College into disrepute. The Committee of Council, on an ongoing basis, agrees a list of names it will recommend to Council for election at the next College General Meeting. A final GMC check will be made by the Fellowship Unit prior to the Fellowship and Awards Committee of Council convening at its meetings twice a year (in April and October).

13. Candidates for Fellowship should keep the College informed of any pending or upheld formal complaints, breach of terms of service, litigation, referral to the General Medical Council or similar, or local authority; or any past referral to the General Medical Council, whether or not upheld. Any substantive referrals to the National Clinical Assessment Service should also be declared. Checks will be made by the Faculty Committees and the Fellowship Unit at varying stages throughout the formal process but candidates are expected to be forthcoming with such information.

You are required to declare any complaints against you on the nominee’s form. The President (as Chair of the Fellowship and Awards Committee of Council) will be engaged by the faculty to investigate whether the case should be referred back to the Fellowship and Awards Committee for further consideration, or whether the application should be halted. Rarely are complaints a bar to Fellowship and any declarations should not deter you from completing the form.

14. For applicants in independent practice, the armed services, Overseas members and other ‘atypical’ groups, there are specific criteria and evidence required, related to your clinical performance, which should be provided as part of your submission. Fulfillment of these criteria and requirements provides an independent means of verification as to the candidate’s clinical standards, in the absence of being able to perform a check with the Primary Care Organisation/Local Area Team’s Performer’s List (as is the standard process for candidates working for the NHS). These are mandatory requirements where the candidate is in active clinical practice – nominators and applicants are asked to refer to the accompanying guidance provided under the Clinical Practice achievement category for details of these criteria.

15. Overseas members for nomination should contact the Chairman of the International Faculty Fellowship Committee in the first instance for guidance on completion of forms.
SECTION TWO | FELLOWSHIP BY APPLICATION

GUIDANCE FOR NOMINATORS

1. The College Ordinances require that the candidate must have been a Member of the College in good standing for at least five **continuous** years at the date of nomination to the Faculty Fellowship Committee.

2. As nominator you must be a Member or Fellow of the College in good standing. You must not be a family relation of the nominee.

3. Your nomination must be endorsed by two seconders. Their role is to confirm the accuracy of the application and to attest to the qualities and achievements on which you base the nomination for Fellowship. As nominator you should engage the seconders **without consultation** with the candidate.

4. At least one member of the 'nominating team' should be in a position to attest to the applicant’s clinical work (either yourself or one of the seconders), having worked in close clinical contact with the candidate for at least five years. This member of the nominating team must be a Member or Fellow of the College in good standing; the length of their membership is not specified. The other two members of the nominating team must be Members or Fellows of the College in good standing for at least five **continuous** years at the date of nomination to the Faculty Fellowship Committee.

5. In the event that you are not able to attest to the nominee’s clinical work, and are unable to identify an eligible seconder (either a current Member or Fellow of the College in good standing) in this position, as nominator you should instead approach the nominee’s appraiser to request external validation of their good clinical standards. The appraiser should be asked to provide a statement of up to 400 words describing the quality of the nominee’s clinical work, to be appended to your own citation. The appraiser is not required to be a Member or Fellow of the College. Two seconders should still be sought to support the nomination.

6. In exceptional circumstances, it is possible for a seconder to not be a Member or Fellow of the College – this will be a matter for consideration by the Chair of the Fellowship and Awards Committee.

7. Practice colleagues may nominate or second. Only one practice colleague per application can be accepted. If a practice colleague is the nominator then no further practice colleagues could be engaged as seconders.

8. Subject to these guidelines, the choice of supporters is a matter for you, though the Fellowship and Awards Committee of Council will wish to be satisfied that they are in a position to make unbiased, comprehensive and value-added statements. The seconders’ forms should be returned to you.

9. The application must include a 500 word citation outlining the achievements of the nominee to date and covering the appropriate achievement categories to provide structure, explaining to the Faculty Fellowship Committee the esteem in which the candidate is held.

10. Once you have completed your citation, you should pass this with the candidate’s statement to your identified seconders who will confirm, in 400 words, their accuracy and reliability, and provide any other appropriate insights to assist the Faculty Fellowship Committee in their discussions.

11. The candidate will provide you with up to 1000 words outlining and **reflecting** on their key career achievements to date in relation to the criteria for Fellowship. Applicant’s are advised to write in a reflective manner and not provide bulleted lists or copies of their CVs. By engaging you as nominator they agree to accept the appointment if it is offered; pay the fee of £620; uphold the aims of the College; and declare any complaints, breach in terms of service or litigation.
12. If the nominee is in active clinical practice, they are required to provide details of their clinical care within their statement.

13. All forms must be submitted electronically to the Faculty Fellowship Committee Chair as a ‘whole’ application. Nominators should submit their form, the two seconders’ forms and the nominee’s form in one email.

14. Applications for Fellowship are considered by the Faculty Fellowship Committee, before being forwarded to the Fellowship and Awards Committee of Council. Faculty Fellowship Committees are responsible for checking with the General Medical Council’s GP Register and (for applicants working for the NHS) locally with the Primary Care Organisation/Local Area Team’s Performer’s List (or equivalent for candidates based in the Republic of Ireland) for any outstanding performance issues likely to bring the College into disrepute. The Committee of Council, on an ongoing basis, agrees a list of names it will recommend to Council for election to Fellowship at the next College General Meeting. A final GMC check will be made by the Fellowship Unit prior to the Fellowship and Awards Committee of Council convening at its meetings twice a year (in April and October).

15. If the application is not successful, the Chair of the Faculty Fellowship Committee or Fellowship and Awards Committee of Council will write giving details of the Committee’s decision with reasons, after it has been reviewed by the Quality Assurance Panel of the Fellowship and Awards Committee of Council. The recommendation of the Committee of Council is final. There is no appeal. However, you may nominate in subsequent years if there is fresh evidence for the Committee to consider.

16. For nominees in independent practice, the armed services, Overseas members and other ‘atypical’ groups, there are specific criteria and evidence required, related to their clinical performance, which should be provided as part of their submission. Fulfillment of these criteria and requirements provides an independent means of verification as to the candidate’s clinical standards, in the absence of being able to perform a check with the Primary Care Organisation/Local Area Team’s Performer’s List (as is the standard process for candidates working for the NHS). These are mandatory requirements where the candidate is in active clinical practice – nominators and nominees are asked to refer to the accompanying guidance provided under the Clinical Practice achievement category for details of these criteria.

17. Overseas candidates for nomination should contact the Chairman of the International Committee in the first instance for guidance on completion of forms.

18. There is no closing date for receipt of applications, however to be considered at a particular Council meeting for appointment at a particular General Meeting, nominators are asked to see the calendar in section three of this document.
1. The College Ordinances require that you, the seconder, must be a Member or Fellow of the College in good standing.

2. In exceptional circumstances, it is possible for a seconder to not be a Member or Fellow of the College – this will be a matter for consideration by the Chair of the Fellowship and Awards Committee.

3. Two seconders are required in addition to the nominator to support an application for Fellowship.

4. At least one member of the ‘nominating team’ should be in a position to attest to the nominee’s clinical work (either yourself, the other seconder or nominator), having worked in close clinical contact with the candidate for at least five years. This member of the nominating team must be a Member or Fellow of the College in good standing; the length of their membership is not specified. The other two members of the nominating team must be Members or Fellows of the College in good standing for at least five continuous years at the date of nomination to the Faculty Fellowship Committee.

5. Practice colleagues may act as seconders but only one practice colleague per application can be accepted. If a practice colleague is the nominator then no further practice colleagues could be engaged as seconders. Family members may not second applications.

6. By supporting the application, you confirm that you consider the candidate worthy of the award of Fellowship, and that your opinion is unbiased and based on direct personal knowledge.

7. Seconders are engaged by nominators and free to discuss the application with the rest of the nominating team. No discussion should take place with the candidate. It is helpful to the Faculty Fellowship Committee if your observations as seconders expand and build upon information given elsewhere in the application, rather than reiterate it. A simple endorsement of another nominating team member’s comments is not sufficient.

8. Your completed form should be returned to the nominator (not to the candidate) for submission.
### TO BE ELECTED AT ANNUAL GENERAL MEETING

<table>
<thead>
<tr>
<th>Committee/Panel</th>
<th>Actions</th>
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<tbody>
<tr>
<td><strong>FACULTY FELLOWSHIP COMMITTEE</strong></td>
<td>- Formally submits names to Fellowship Unit</td>
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<tr>
<td></td>
<td>- Can be submitted on an ongoing basis (subject to cut-off date for upcoming Council)</td>
</tr>
<tr>
<td><strong>QUALITY ASSURANCE PANEL</strong></td>
<td>- Convened as independent panel on an ongoing basis throughout the year</td>
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<td>- Quality and consistency review</td>
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<td><strong>FELLOWSHIP AND AWARDS COMMITTEE</strong></td>
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<td>- Submits to next upcoming Council (either June or September) subject to cut-off date for Council</td>
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<td><strong>COUNCIL</strong></td>
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<td><strong>SEPTEMBER</strong></td>
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<td>- Writes to Member</td>
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<td>- Formal declaration of Fellowship to be awarded at general meeting</td>
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<tr>
<td><strong>GENERAL MEETING</strong></td>
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<td></td>
<td>- Award made</td>
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<td>- Certificate bestowed</td>
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### TO BE ELECTED AT SPRING GENERAL MEETING

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<td>- Submits to next upcoming Council (either November or February) subject to cut-off date for Council</td>
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