



Workplace Based Assessment (WPBA) Requirements from 1 January 2021

Following the first lockdown the WPBA programme restarted on the 1st August 2020. All trainees whether on the new or old WPBA programme should already have been documenting evidence of their learning and been completing their assessments since this time.

With news of the latest lockdown an RCGP and COGPED working party reviewed the current WPBA requirements. It is recognised that many educators and trainees are working in challenging times but it is essential that the education of GP trainees continues during the COVID-19 pandemic. Trainees still need to demonstrate an understanding of the GP capabilities and would potentially be disadvantaged and unable to progress in training if their supervision, which includes their assessments, stopped during this time.

Trainees therefore need to comply with the WPBA requirements, irrespective of whether they are following the [old](#) or [new](#) programme.

Flexibility in the WPBA programme during the COVID-19 pandemic

Assessments including CSRs

It is recognised that trainees may need to be deployed to other areas, particularly those who work in the non-primary care settings. Educational provision should still be part of any deployment.

If for any reason a trainee is unable to complete for example a placement planning meeting, an assessment or their CSR then they must contact either their ES or TPD. This also needs to be documented in the educator notes of the trainees Portfolio so the ARCP panel can be made aware of any shortfall and the reasons why.

Clinical Examination Procedures and Skills (CEPS)

Clinical Examination Skills are a key skill for any GP. Whilst there is less opportunity to demonstrate these skills by undertaking the full range of both mandatory and other CEPs

due to the change in balance of face to face consultations and remote consultations, the requirement to meet this capability is mandated by the GMC.

With regard to trainees who are shielding and approaching their final ARCP but whom have not completed the CEPS requirements then two options exist, of which the first is preferred:

1. Evidence of having undertaken the examination earlier in training provided by a senior clinician of the post they were working in at the time or recorded in a log entry followed by a step by step explanation to their current ES at their ESR on how they would normally conduct such an examination.
2. Consideration by the assessor as to whether the Guidance already given for trainees with a disability includes the trainee being assessed. That guidance states: "...For example, one possible approach might be that a trainee who cannot physically carry out an examination refers the patient to a colleague to carry it out. In a training context, to satisfy the CEPS requirement, the observer (who could be the person who performs the examination) should document on the assessment form the part of the CEPS they did observe, and document why it was necessary for the examination to be done in this way."

Basic Life Support

Online evidence of Cardiopulmonary Resuscitation will remain acceptable during the pandemic

Educational Supervisors Review (ESR)

It is important that trainees continue to meet with their Educational Supervisors. The annual ESR in the new Portfolio reduces the time taken to complete an ESR. If the trainee has rated themselves correctly, justified this rating and there is linked evidence for each of the capability areas, the ES can simply agree, stating that they have confirmed this to be correct. The interim ESR further reduces this workload for trainees who are progressing satisfactorily at the mid-point of the training year.

Who can undertake assessments during the pandemic

Trainees are reminded that assessments (including ESRs) can be undertaken by any suitably accredited educationalist. If trainees are having any difficulty obtaining assessments within their own practice due to their usual educator being unable to work at a crucial time, they should approach their TPD in the first instance for further support.

Trainees who are shielding

For trainees who are vulnerable and shielding, it is hoped they will have access to IT equipment to be able to continue consulting with patients. If this is not possible then they should contact their ES and /or TPD who can escalate this further.

ARCP panels where mandatory evidence is missing

In order to be issued with a Satisfactory Outcome, all mandatory evidence must be provided by the trainee. However, panels should exercise discretion over the timing of receipt of the evidence. In cases where the quantity of evidence missing is small and unlikely to alter the Outcome issued, and the reason for its absence is a temporary disruption of the practice's ability to deliver their educational role, the ARCP panel should issue a deadline for submission of the absent evidence for the chair to review.