

Guidance on requirements for posts to count towards training December 2020

Background

In the summer, the RCGP and COGPED issued guidance about engagement with the Portfolio during the emergency phase of the COVID-19 pandemic. In essence, the requirements for mandatory WPBA were suspended for 6 months, between 01.03.2020 and 04.08.2020, although trainees were encouraged to continue to make learning entries in the Portfolio where possible and where workload allowed. Since 05.08.2020, WPBA requirements have reverted to normal for all trainees.

Most trainees continued to work and continued to upload evidence to their Portfolios. Some trainees have been unable to work for a variety of reasons:

- where it has not been possible to provide a suitable post or the facility to work remotely.
- the trainers may have felt remote working, even with supervision, was inappropriate for their level of competence / training.
- they have been stranded abroad due to travel restrictions.

Other trainees appear to have continued to work but have made almost no Portfolio entries for variable periods of time.

This raises the question of whether a post or period of time where the trainee has been unable to engage in their job at all and only has evidence of remote learning, or where the trainee has been working but has very limited evidence in their portfolio, could be counted as time in training and if so in what circumstances?

Process

Trainees should have continued to make learning entries in the portfolio during the period 01.03.2020 – 04.08.2020 “where possible and workload allowed”. At the very least trainees must enter a post-hoc log entry explaining their position if their post had been affected and / or they were unable to engage in portfolio work before their Educational Supervisor Review covering this period.

General Practice is a short training programme and needs to meet the minimum training time approved by the GMC. This is normally 3 years. Where trainees have had prolonged absence from clinical contact during the COVID-19 pandemic with no evidence of clinical experience (remote or face to face) or learning, panels should consider using an Outcome 10.2 with the suitable C code and seek approval from their PG Dean for an extension. This consideration should be given whatever their stage of training.

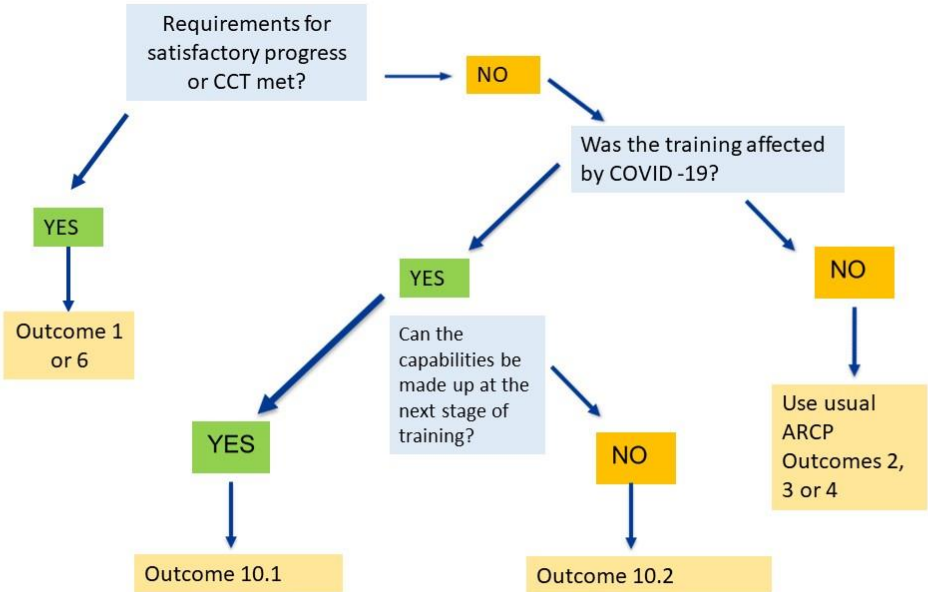
Trainees who have been moved to alternative placements for prolonged periods and are at risk of not fulfilling the minimum specialty training requirements, should be issued with either a 10.2 with an extension, or 10.1 with a plan as to how this component will be completed. This especially applies to trainees at the ST2/3 transition point who need to focus on preparing for the CSA/RCA.

C3	Redeployment could not acquire required experience	Trainee could not acquire appropriate curriculum-related experience due to service changes/pressures from COVID-19, e.g. trainee transferred to work in General (internal) Medicine or similar redeployment.
C4	Prolonged self-isolation needed during COVID-19	Trainee could not acquire appropriate curriculum-related experience during COVID-19 disruption due to need for prolonged self-isolation based on national guidance.

It is good practice to document the deliberations on the ARCP form and the reason the training was either counted or not counted. For example,

“This ARCP panel has considered your explanation for the period XXXX to XXX where the COVID-19 pandemic impacted on your training, and the available training evidence for that period. The panel does/does not feel that this period should count towards the trainee’s overall training time.”

A framework which is fair to all trainees and fair to patients is needed for assessing whether the level of disengagement can be attributed to COVID-19 or not. The ARCP panel will make the final decision based on the algorithm below. These decisions will be taken on an individual case basis.



Additional FAQs

Q: My Trainee has been working remotely and wants to know if it can count towards training?

A: Yes – provided there is evidence of clinical or non-clinical work being undertaken, linked to the current workplace as well as continued engagement with the Portfolio and bone fide evidence of studying and learning during that time which is linked to the 13 capabilities of the curriculum. The WPBA requirements are the same for all trainees: <https://www.rcgp.org.uk/training-exams/training/mrcgp-workplace-based-assessment-wpba.aspx> whether they are working remotely or not.

Q: My Trainee had a period when they were unable to work and wants to know if it can count towards training?

A: Periods when trainees are unable to work for logistical reasons that exceeds the [guidance on managing time out of training](#) (e.g. awaiting the IT to enable working from home) are generally counted as either in programme (if there is evidence of non-clinical work being undertaken, continued engagement with the Portfolio and bone fide evidence of studying and learning during that time) or Special leave if there was none. Special leave would not normally count towards training time.

Q: What about Time Out of Training?

A: A flexible approach to time-off due to illness or COVID-19 related self-isolation requirements, will be taken. However, there is a minimum requirement of training time that the trainee should complete which is three years, however, [guidance on managing time out of training](#) includes some flexibility to allow for time away for short periods of statutory leave and this includes time off to self-isolate etc. These periods are likely to vary in length, and there will be individual trainee circumstances to consider and a variable amount of evidence presented for training progress. ARCP panels will need to consider training progress throughout the whole ARCP period when reaching their decision.

Q: My trainee has continued to work but has entered very little in their Portfolio

A: For the period 01.03.2020 – 05.08.2020, the ARCP panel will make the final decision based on the trainee's adherence to the guidance to continue to make learning entries in the Portfolio where possible and workload allowed during the period. At very least trainees must enter a post-hoc learning log entry before the Educational Supervisor Review of this period that includes a valid explanation of any specific gaps, with reasons why the training has been so affected by COVID-19 if there is a period when little evidence entered. [WPBA](#) requirements resumed on 05/08/20 for all trainees, whatever their circumstances.

Q: My trainee has been able to work and gain experience in non-clinical posts. Can this count?

A: Posts and experience which are relevant to the curriculum and can be evidenced as such can contribute, provided they have been prospectively approved for training by the GMC. Details of what posts are appropriate are defined in the new [programme construction guidance](#). This includes some non-clinical, patient facing posts, such as Public Health.

Appendix 1 – O10 C code options

If Panels are considering awarding a non-standard Outcome; 2;3;4;5, they should consider carefully whether the trainees progress has been impacted by COVID-19, before issuing and therefore whether Outcome 10.1 or 10.2 would be more appropriate.

<p>A supplementary C code should be used to indicate the nature of the disruption to the trainee. Multiple C codes can be selected to best describe all the circumstances affecting an individual trainee. 10.1 and 10.2</p>	<p>C3</p>	<p>Redeployment could not acquire required experience</p>	<p>Trainee could not acquire appropriate curriculum-related experience due to service changes/pressures from COVID-19, e.g. trainee transferred to work in General (internal) Medicine or similar redeployment.</p>
<p>10.1 and 10.2</p>	<p>C4</p>	<p>Prolonged self-isolation needed during COVID-19</p>	<p>Trainee could not acquire appropriate curriculum-related experience during COVID-19 disruption due to need for prolonged self-isolation based on national guidance.</p>
<p>10.1 and 10.2</p>	<p>C5</p>	<p>Inadequate progress in this training year prior to COVID-19</p>	<p>Trainee was NOT on course to receive an outcome 1 or 6 prior to COVID-19 but, given the disruption an unsatisfactory outcome cannot be awarded as the trainee may have been able to achieve satisfactory progression by the time of the ARCP had there not been disruption.</p>

10.1 and 10.2	C6	Incomplete evidence due to COVID-19	Due to COVID-19 disruption, incomplete information has been supplied and/or is available to the ARCP panel, e.g. trainee unable to obtain supervisor reports.
10.2	C8	Royal College or Faculty exam cancelled with trainee at CCT date	Trainee could not attempt the exam as it was cancelled due to COVID-19 disruption and will need to sit at the next available opportunity
10.1 and 10.2	C12	Other issue related to COVID-19 (please describe)	To capture any COVID-19 issue not covered by codes C1 to C11.