Frequently asked questions

Below are frequently asked questions for trainees in relation to the impacts on training. We realise you will have lots of questions, we will continue to update this page regularly - please come back to keep updated

**Specialty Recruitment and Interviews (Medicine, Surgery, Psychiatry etc)**

*UPDATED 8 JUNE* The person specification for the specialty I have applied for states that Advanced Life Support (ALS) is a requirement, however courses have been cancelled due to Covid-19. What should I do?

NHS Employers have advised that whilst it remains the case that ALS courses have been cancelled due to social distancing requirements, doctors who would normally be required to have a valid ALS as a condition of starting in post, should be able to take up their jobs. However, organisations will need to assess the skills required and any certification held by individuals and ensure that sufficient training is provided where necessary, so that they can carry out their role safely.

*UPDATED 21 APRIL* What alternative options will be offered to candidates?

We are currently revising all the recruitment processes to ensure selection can take place using different recruitment processes. We are working with medical and dental specialities and recruiters to confirm contingency plans and a revised recruitment timetable has been shared here [7] to ensure appointments can still be made for August 2020.

A letter detailing principles which have been agreed by the four nations for medical specialty recruitment can be found here [8].

*UPDATED 21 APRIL* I have noticed I made a mistake in my self-assessment and over-scored myself. What should I do?

In the event that you realise after submitting your form that you have over-scored on your self-assessment, please contact the lead recruiter for your specialty as soon as possible and no later than 14th April 2020.
Details of the lead recruiters for each specialty can be found in the Medical Specialty Recruitment Applicant Handbook in the Oriel Resource Bank [9].

*UPDATED 21 APRIL* What will the self-assessment validation process entail?

Validation of self-assessment scores will only be completed for specialties for which self-assessment does not ordinarily form part of the selection process. Where validation is being undertaken, applicants will be requested to upload specific evidence which supports their self-assessment scores to a protected location. This evidence will be reviewed in conjunction with their self-assessment form by a clinician for a proportion of applicants. Scores will not be adjusted, however if an applicant is found to have over-scored themselves above an agreed threshold on their self-assessment form, this will be managed under the Medical and Dental Recruitment and Selection (MDRS) Probity Policy.

I applied for an Academic Clinical Fellow post and was due to attend recruitment interviews for benchmarking. As interviews have now been cancelled, what does this mean for me?

It has been agreed with the National Institute for Health Research (NIHR) that contingency plans for specialty recruitment will be used for clinical benchmarking of applicants who were found appointable at academic recruitment. You will be contacted by the lead recruiter for the specialty you have applied for regarding the details for that specialty.

I was found appointable in 2019 recruitment and either turned down the offer of a post or was not made an offer as there were not enough posts available. Can I be offered a post this year based on my previous appointable status?

Recruitment rounds are completely separate both from one year to the next and also within a given recruitment year. It is not possible to carry your score or appointable status forward to a different recruitment round and applications for 2020 recruitment will be considered independently of applications from previous years.

I wish to complain about the selection processes in place. How do I make a complaint?

The MDRS complaints policy is available on the Specialty Training [10] and Oriel [11] websites. This has been recently amended to take into account the changes to the selection processes that have been necessitated by the Covid-19 pandemic.

The contingency selection processes differ to those originally advertised. Can I complain that the advertised process has not been followed?

No. The published selection processes are those that are in place at the time the selection takes place. Changes to the selection process necessitated by the Covid-19 pandemic have been communicated to all applicants and therefore these are now the published processes. A copy of the letter which outlines the process decisions can be found here [12].

If an applicant is unhappy about the selection processes in place and wishes to withdraw their application,
they will not be detrimentally affected if they reapply in future recruitment rounds.

Will candidates who accept an offer of a post on a specialty training programme be able to defer their start date?

Normally, applicants can only defer the start date of their specialty training programmes on the following grounds:

- Statutory grounds such as personal ill health, maternity or parental leave.
- Applicants who have accepted a General Practice training programme may be permitted to defer for non-statutory reasons, subject to approval, as previously stated on the General Practice National Recruitment Website ([https://gprecruitment.hee.nhs.uk](https://gprecruitment.hee.nhs.uk) [13])

As an exception, in response to the global pandemic, Health Education England has agreed that applicants in England will be permitted to apply for a deferral due to Covid-19. Deferral application numbers will be kept under review and regions will look at requests on a case by case basis. Examples of grounds when this may be approved include:

- Applicants with visa issues caused by the pandemic, although support will be offered to address these
- Applicants who have outstanding competencies from their current training programme due to being redeployed to support the pandemic
- Applicants affected by the cancellations of Professional and Linguistic Assessments Board tests (PLAB) by the GMC
- Applicants who have been supporting the response to Covid-19 on the frontline wishing to take a break prior to commencing training
- Applicants who are still supporting the response to Covid-19 abroad or who are affected by on-going restrictions on flights

Please note that the above does not apply to Foundation training or the devolved nations, who will be considering their own policies. The process for deferrals in England related to Covid-19 will be shared in the coming weeks. Please do not contact lead recruiters for further information at this stage.

Why is recruitment still going ahead rather than being postponed for six months or a year?

Those applying for training posts are currently working hard to provide care and we want them to be able to progress in their careers. They are also an essential part of the workforce and recruitment enables their deployment in training posts. Recruitment of trainees is therefore a priority across all four nations to ensure the continuation of training programmes as well as supporting the NHS to fill vacant roles. Contingency plans have been agreed in order to maintain August 2020 start dates.

Why has self-assessment been chosen as a method of assessment over other options such as Skype?

Currently there is significant pressure on clinical time and the ability to run Skype interviews is severely compromised. Great consideration has been given to each of the possible options and how they fitted with the general recruitment principles, including use of self-assessment, which were agreed by senior clinical
representatives from across the four nations, and junior doctor representatives from the British Medical Association Junior Doctors Committee (BMA JDC) and Academy of Medical Royal Colleges (AoMRC) trainees? committee, supported by the Medical and Dental Recruitment and Selection (MDRS) Team.

Although consideration was given to a number of different assessment models, the best option for a consistent process which could be delivered was self-assessment.

Self-assessment already forms part of the selection process for most of the specialties which will be using it in the current recruitment round. This is a process which applicants are familiar with and for specialties which use this as part of the standard recruitment process, applicants have already submitted information as part of their application.

We are dealing with unprecedented circumstances and have had to adjust recruitment processes accordingly in line with the resource available.

For specialties using self-assessment to appoint candidates, will there be any form of interview (eg Skype)?

Specialties using self-assessment to make offers to posts will not have any form of interview. Specialties which do not normally require self-assessments to be completed at the point of application, will use validation as part of the recruitment process, however this will not involve direct communication between the applicant and a clinician and will be based on evidence upload only.

If the Covid-19 pandemic had not occurred, I would have gained additional experience (eg through a rotation, course, conference etc), which would have affected my overall score. How is this being taken into consideration?

Many applicants are being deployed into clinical settings which they would not have been expected to be in at this time and planned events such as courses or conferences have been cancelled. In order to make the process fair, applicants are unable to adjust their self-assessment scores. For specialties which ask for experience by the time of appointment, any prospective experience included in an application form will be considered as if it had happened.

Can I amend my self-assessment score if I now have additional evidence that will give me more points?

Unfortunately, we cannot accept additional evidence. Your score and ranking will be calculated using the answers you submitted when you completed your self-assessment. This is to ensure that the scores submitted and used for ranking are all representative of the same time period and do not disadvantage applicants whose experience has been severely disrupted due to the current pandemic.

I have underscored myself on my self-assessment. Can I amend my score?
Unfortunately, applicants are unable to amend their self-assessment scores after submission. Your score and ranking will be calculated using the answers you submitted when you completed your self-assessment. This is to ensure that the scores submitted and used for ranking are all representative of the same time period and do not disadvantage applicants whose experience has been severely disrupted due to the current pandemic.

Prospective candidates build knowledge and experience between application and interview, which may improve their portfolio score. Is this a fair process?

Applicants are being deployed into clinical settings which they would not have been expected to be in at this time. In order to make the process fair to all applicants, it has been agreed that applicants will not be permitted to submit additional evidence to increase their self-assessment score after it has been submitted, ensuring all applicants will have had the same opportunities in relation to their application.

What does it mean that a proportion of self-assessment scores will be validated for some specialties?

Specialties for which self-assessment does not ordinarily form part of the selection process, but which will use this to offer and appoint to posts, require applicants to complete a self-assessment in the coming weeks. Some validation of scores will be required by clinicians using evidence uploaded by applicants to a protected location in order to verify that self-assessment scores are correct. Approximately 30% of scores will be validated in this way.

What happens to specialties who have already concluded interviews?

For specialties where interviews have already been fully completed, interview scores will be maintained and used to make offers.

Specialties which were halfway through the interview process when face to face interviews were cancelled, will require all applicants to undertake the new process.

Who made decisions regarding recruitment contingency plans?

All general principles supporting the appointment of doctors to medical specialty training programmes from August 2020 were agreed by senior clinical representatives from across the four nations, and junior doctor representatives from the British Medical Association Junior Doctors Committee (BMA JDC) and Academy of Medical Royal Colleges (AoMRC) trainees' committee, supported by the Medical and Dental Recruitment and Selection (MDRS) Team.

I have concerns about the validity of appointment using unvalidated self-assessment scores. How do I know this process is fair?

The majority of specialties using self-assessment to appoint applicants already use self-assessment via the application form as part of the standard selection process and this is an assessment method that applicants are familiar with.
Where this is being used for a specialty for which this does not form part of the application process, a proportion of scores will be validated by clinicians to ensure that applicants have scored themselves correctly in line with the scoring matrix for that specialty.

GMC Good Medical Practice holds that "as a good doctor you will maintain trust in you and the profession by being open, honest and acting with integrity". Applicants are required as part of the specialty recruitment process, to make declarations on their application form relating to their honesty and probity. Instances of candidates trying to gain an unfair advantage by over-scoring and/or exaggerating achievements will be taken extremely seriously. This could lead to an application being deemed not appointable, or, in very serious cases, could be reported as a probity matter to the GMC.

**What assurance can be given that the amended recruitment and selection processes are as robust as they were prior to the pandemic?**

There is acknowledgement that we have no evidence that the recruitment contingency processes are as robust as the normal gold standards, however we are dealing with unprecedented circumstances and have had to adjust recruitment processes accordingly in line with the resource available.

Great consideration has been given to each of the general recruitment principles, which were agreed by senior clinical representatives from across the four nations, and junior doctor representatives from the British Medical Association Junior Doctors Committee (BMA JDC) and Academy of Medical Royal Colleges (AoMRC) trainees' committee, supported by the Medical and Dental Recruitment and Selection (MDRS) Team.

**Will applicants be penalised if they choose to reapply to medical specialty training next year?**

Applicants who wish to reapply to medical specialty training in a future recruitment round will be subject to the requirements of the person specification of their chosen specialty which is in place at that time. National person specifications are reviewed on an annual basis and any amendments are subject to sign off by the relevant recruitment governance structures.

Should you take up a training post following the current recruitment round and wish to reapply to continue specialty training in the same specialty in another region, you will be required to follow guidance as published in the 2021 Medical Specialty Recruitment Applicant Handbook. You can find the 2020 Medical Specialty Recruitment Applicant Handbook in the Oriel Resource Bank [9] for reference.

**My exam that was scheduled has now been cancelled and this is a requirement of the person specification for the specialty I have applied for. What does this mean for me?**

For doctors in all specialties, where an exam is a requirement for entry to the specialty and has been cancelled by the relevant Royal College due to Covid-19, applicants will not be disadvantaged and will still be allowed to enter specialty training. In instances where an exam is outstanding at the point of entry to the specialty, applicants will be required to have passed the exam(s) within their first year of training.

**When will medical recruitment be rescheduled?**
We are keen that medical recruitment is disrupted no more than absolutely necessary and, as such, are urgently working will all Royal College recruitment teams to reschedule these recruitment events. We expect to have this completed by early April, but obviously all plans will be subject to change, depending on the developing situation.

**Given the Covid-19 pandemic, will medical and dental specialty recruitment interviews be cancelled?**

Due to the Coronavirus (COVID-19) pandemic and recent developments regarding social distancing, as of 17th March 2020, all face to face specialty recruitment interviews (both medical and dental) have been cancelled with immediate effect. Communications have been sent to applicants and panellists to inform them of this decision, which was taken during this exceptional circumstance in view of:

- Increased demand on the time of NHS staff in response to the pandemic.
- Trusts / Health Boards across the country instructing their staff not to travel.
- The need to support more vigilant public health measures and protect applicants and recruiters who would have been coming to recruitment events.

**What will happen regarding Situational Judgement Tests (SJT) and Multi-Specialty Recruitment Assessments (MSRA) that are required as part of the recruitment process?**

In light of guidance around social distancing, we have taken the decision to postpone SJTs and MSRAs at this time. Applicants should not attend an SJT or MSRA centre if they have not already done so. We are aware that the majority of test centres around the world have closed due to restrictions on movement.

Where medical specialties have agreed as part of their contingency plans the use of an SJT, this will be delivered via an online platform. Specifics of delivery will be communicated to any affected applicants in due course.

**If my interview arrangements have changed (eg they have been postponed or an online interview has been arranged) and I have already booked travel and accommodation, will I be reimbursed?**

If you have already made travel arrangements following acceptance of an invite to interview, you should endeavour to obtain a refund. If no refund is provided, you can claim your expenses in line with the Candidate Expenses Policy, which can be found in the Resource Bank on the Specialty Training Website. Please note that caps will still apply and you may be asked to provide evidence that the expense was non-refundable.

*UPDATED 27 MAY* I require a visa to work in the UK and my interviews have now been postponed. What does this mean for me?

This will depend on whether you are currently sponsored by HEE or not.

**Currently sponsored by HEE:**

The Home Office announced on 31st March 2020 that doctors with visa’s due to expire before 1st October
2020 will automatically be extended for one year. Therefore, if you are already sponsored by HEE and your visa is due to expire before 1st October 2020, you will automatically be granted a further year leave to remain if you will be continuing in your training post.

If your HEE sponsored visa is due to expire after the 1st October 2020, you will need to report your change of circumstances to the HEE Overseas Sponsorship Team.

Trainees who are eligible for the Home Office automatic one-year extension should have been contacted by the HEE Overseas Sponsorship Team. If you have not received any communication please contact tier2@hee.nhs.uk [15].


**Not currently sponsored by HEE**

We are working with specialties and recruiters to confirm contingency plans for their recruitment processes and a revised timetable will be shared as soon as possible, however we are not anticipating a change to the post start dates.

Due to changes to the shortage occupation list, with the exception of Public Health, there is no longer a requirement to start in post within 6 months of the publication date of the advert for the specialty. As such, changes to the recruitment timeline are unlikely to have a significant effect on your visa application if you are new to HEE, however these may impact on your start date in post.

If you are not currently sponsored by HEE, you will need to make your application for a new Tier 2 visa before you are able to commence training. The Home Office have confirmed that employers/sponsors may allow in-country migrants who have pending applications, due to the current suspension of UKVCAS application centres in the UK, to start work before their visa application has been fully approved. This is only possible where migrants have met the following:

You are making an in-county application (i.e. within the UK)

You have been assigned a Certificate of Sponsorship (CoS)

You can only commence in the post as stated on your CoS

You have submitted your application before your current visa expired? you must provide evidence of this to your employer. For example, take a screenshot to show the application was submitted in time and provide the email with an application reference confirming the details. Please note, if employers are not satisfied an application has been submitted in time, they may want to defer the commencement of employment until there is a grant of leave and a new BRP.

Further information can be found here: https://www.gov.uk/guidance/coronavirus-covid-19-advice-for-tier-2-4-and-5-sponsors [17]

Please note that this temporary concession is for in-country applications only, for applicants applying from outside of the UK you will require a Biometric Resident Permit (BRP), or visa stamp in your passport, before you can commence work.
*UPDATED 27 MAY* I am in a Core training programme and require an extension to my HEE visa to move into a Higher Specialty training programme. How does this affect me?

The Home Office announced on 31st March 2020 that doctors with visa’s due to expire before 1st October 2020 will automatically be extended for one year where they are continuing to be sponsored by the same sponsor. Therefore, if you are already sponsored by HEE and you visa is due to expire before 1st October 2020, you will automatically be granted a further year leave to remain and will be able to continue in your training programme. If you are currently sponsored by HEE and your visa expires after 1st October 2020 you will need to submit your extension application to the Home Office before your current visa expires. If you do not get your new Biometric Residence Permit (BRP) back prior to your post start date, you will still be able to commence in post, however you will require some additional checks by your employing Trust.

Trainees who are eligible for the Home Office automatic one-year extension should have been contacted by the HEE Overseas Sponsorship Team. If you have not received any communication please contact tier2@hee.nhs.uk [15].


*UPDATED 15 MAY* I am currently living in the UK, but am not sponsored by HEE and would need to travel to my home country to apply for a visa. Given the pandemic, is there anything in place that would allow me to obtain a visa without travel to my home country?

During these unique circumstances you will be able to apply from the UK to switch to a long-term UK visa until 31 July, if your visa expires between 24 January and 31 July 2020. The Home Office have confirmed that a Tier 2 visa is classed as a ‘long term visa’. This includes applications where you would usually need to apply for a visa from your home country. You will need to meet the same visa requirements and pay the UK application fee.


*NEW 15 MAY* I will not be continuing in a training programme with HEE after the expiry of my current visa leave. Will the Home Office extension apply to me?

Unfortunately, the Home Office automatic extension will not apply to you if you will not be continuing in a HEE training programme.

The Home Office have confirmed they will automatically extend, without the need for an application, any visas for trainees currently sponsored by HEE, whose immigration leave is due to expire before 1 October 2020 and who HEE will continue to sponsor. Trainees who would normally be making an extension application with HEE as they are continuing in a training programme will be able to utilise this temporary concession. Where there have been delays to training end dates, such as delayed ARCPs etc, the automatic extension can also be used in these circumstances. If, however you will not be continuing in a training programme with HEE, you will not qualify for the automatic extension and would need to obtain further sponsorship with another employer by making a new application.
Where can I find further information regarding immigration queries related to Coronavirus?

UK Visas and Immigration (UKVI) have set up a Coronavirus Immigration Helpline, for immigration queries related only to Coronavirus:

Telephone: 0800 678 1767 (Monday to Friday, 9am to 5pm). Calls are free of charge.

Email: CIH@homeoffice.gov.uk [19]


What will happen to my current sponsorship if I am prevented from working due to illness of Coronavirus or cannot travel back to the UK due to restrictions?

Some Trainees may be prevented from attending employment due to illness, the need to serve a period of quarantine or the inability to travel due to travel restrictions caused by coronavirus.

The Home Office have confirmed that Sponsors do not need to withdraw sponsorship if they consider there are exceptional circumstances when:

- an employee is absent from work without pay for four weeks or more (Tier 2)
- a student will be unable to attend for more than 60 days (Tier 4)

Trainees should keep their employers up to date and fully comply with relevant Absence Policies and recorded as Coronavirus for future audit purposes. HEE is not required to report absences related to coronavirus which have been authorised.

In my training programme, an exam is required either for progression through training or CCT, however my College has cancelled all exams. What does this mean for me?

For medical specialties, the Academy of Medical Royal Colleges, the Conference of Postgraduate Medical Deans (UK) (COPMeD) and the GMC have released a joint statement detailing how progression and CCT will be managed in light of cancellation of exams due to Covid-19 and where an exam is a curriculum requirement.

This can be found on the GMC website [21].

*UPDATED 27 MAY* My immigration leave is due to expire or has expired, but I am not/have not been able to leave the UK due to self-isolation or travel restrictions. What should I do?

If you are in the UK and your leave expires between 24 January 2020 and 31 July 2020, your visa will be extended to 31 July 2020 if you cannot leave the UK because of travel restrictions or self-isolation related to coronavirus (COVID-19).

You must contact the Home Office via the Coronavirus Immigration Team (CIT) to update your records if your visa is expiring. More details can be found here: https://www.gov.uk/guidance/coronavirus-covid-19-advice-for-uk-visa-applicants-and-temporary-uk-residents
I would like to work extra hours to help during the pandemic, but I am limited by my visa restrictions. Is there anything I can do?

Yes, the Home Office announced on the on 31st March 2020 that restrictions on the amount of hours trainee doctors on visas can work in the NHS have been lifted, allowing doctors to work additional hours should they wish.


Specialty Training (Medicine, Surgery, Psychiatry etc)

*UPDATED 8 JUNE* The person specification for the specialty I have applied for states that Advanced Life Support (ALS) is a requirement, however courses have been cancelled due to Covid-19. What should I do?

NHS Employers have advised that whilst it remains the case that ALS courses have been cancelled due to social distancing requirements, doctors who would normally be required to have a valid ALS as a condition of starting in post, should be able to take up their jobs. However, organisations will need to assess the skills required and any certification held by individuals and ensure that sufficient training is provided where necessary, so that they can carry out their role safely.

I am a LTFT trainee who has changed their hours as a result of the COVID pandemic. Will I be able to return to my original working percentage during the COVID pandemic?

Yes, if your circumstances change during the current COVID pandemic and you are no longer able to work at a higher working percentage, you will be able to revert to your original working percentage during this time.

I am a LTFT trainee who has changed their hours as a result of the COVID pandemic. Will this result in an automatic calculation of my CCT date

No trainee will be disadvantaged by any changes that take place during the current COVID pandemic. No automatic recalculation will be made. Any changes to your CCT will be individualised to your experience.

I am undertaking a period of academic training as OOP(R) in another part of the UK. Can I volunteer to work in a clinical role, to support the Covid-19 response, here or do I have to return to my original region?

We appreciate that many of you will have physically relocated to undertake your PhD or MD, and also have formed clinical links nearby. You are welcome to volunteer wherever is most convenient for you and your family.
My curriculum requires that I must have 4 Multiple Consultant Reports, but with changes to my work due to COVID-19 I have not been able to get all these done ? what should I do?

Work-place-based assessments (WPBA) and Supervised Learning Events (SLEs) are required in many curricula. These are tools to formalise and give structure to feedback to trainees. They are also used to inform the writing of supervisor reports and as an indication by ARCP panels of trainee engagement. The numbers of either WPBAs or SLEs are indicative of the number considered to be useful; usually there are a range of other types of evidence that can also be used.

ARCP panels should always take a ?general approach? when reviewing a trainee?s portfolio and not focus on precise numbers of WPBA/SLEs done, providing there is reasonable evidence of trainee engagement with training and an opinion that a trainee has attained the required standard.

Where a trainee is having difficulty acquiring the curricula required evidence they should speak directly with their ES or specialty tutor for advice. The recent statement from JRCPTB published on their website indicates a modified number of MCRs that will be required in the current highly unusual pandemic environment.

I need to get evidence for DOPS to be signed off as competent in procedures but will not be able to do this in the current situation ? what should I do?

Trainees should try to get their DOPS done if possible however, if the current situation prevents this from occurring fully, Assessment Panels will take this into account and trainees will be able to demonstrate this evidence later on in training in the following year. This also applies to those progressing to the next stage of training where ?carry-over? of the requirement will be permitted and supported.

I am in a Core training programme and require an extension to my HEE visa to move into a Higher Specialty training programme. How does this affect me?

Based on post start dates remaining unchanged, if you are currently sponsored by HEE and require an extension, you will need to submit your application to the Home Office before your current visa expires. If you do not get your new Biometric Residence Permit (BRP) back prior to your post start date, you will still be able to commence in post, however you will require some additional checks by your employing Trust.

We are liasing with the Home Office around alternatives should post start dates be delayed. Should there be any update, we will amend this FAQ.

What will happen to my current sponsorship if I am prevented from working due to illness of Coronavirus or cannot travel back to the UK due to restrictions?

Some Trainees may be prevented from attending employment due to illness, the need to serve a period of quarantine or the inability to travel due to travel restrictions caused by coronavirus.

The Home Office have confirmed that Sponsors do not need to withdraw sponsorship if they consider there are exceptional circumstances when:

- an employee is absent from work without pay for four weeks or more (Tier 2)
- a student will be unable to attend for more than 60 days (Tier 4)

Trainees should keep their employers up to date and fully comply with relevant Absence Policies and recorded as Coronavirus for future audit purposes. HEE is not required to report absences related to coronavirus which have been authorised.

Study Leave

**What is the impact of Coronavirus On Study Leave for Doctors on Training**

Trainees should endeavour to obtain a refund for any pre-booked expenses. If they unable to do so we will honour the claim, but they should provide evidence when they submit their claim that the expense was non-refundable.

All requests for study leave time not taken during the outbreak will be properly considered by the employers and Postgraduate deans and will be subject to the need to maintain NHS services, and training requirements for completion of programmes.

When organisations cancel courses and training, can the Postgraduate dean and their team please ensure that provision for essential courses such as ALS is still available to ensure patient safety remains a priority.

We are asking all parties to be flexible both during and after this difficult time.

*Updated 11 January 2021* What should be the position for trainees who were unable to undertake agreed study leave during the peak of COVID 19 but have now left training and wish to go to a rearranged course/event?

Those no longer in training should have their course reimbursement honoured if it was approved when in training. Individuals in this situation should approach the Postgraduate Dean’s team in the HEE local office they were linked to when last in training for this to be arranged no later than 31 January 2021.

Can trainees receive greater study leave time working from home, due to the ability to attend on-line courses conferences being limited on NHS sites? This may be a particular concern to those trainees who are shielding.

Whilst social distancing and restricted social and face to face activity are in place, study leave can be taken to attend courses on-line. The programme should be provided when approval is requested. If this is to attend webinars/download pre-recorded sessions these should be listed so that the appropriate time can be given from the study leave allowance.

*Updated 11 January 2021* Inability to access named mandatory courses eg ALS required for recruitment.

These will not be required on job specifications and MDRS has produced a statement on named courses in medical training programme personal specifications [22], to that effect.

Dental Specialty Recruitment and Training
*NEW 15 MAY* Given the changes to recruitment, will the recruitment process be re-opened?

The recruitment process which are currently in progress will not be re-opened and we cannot accept any new applications. Should you wish to apply to dental training, you will need to do so in a future recruitment round.

*NEW 15 MAY* How will recruitment applications to specialty training be affected going forwards?

Applicants who wish to apply to dental specialty training in a future recruitment round will be subject to the requirements of the person specification of their chosen specialty which is in place at that time. National person specifications are reviewed on an annual basis and any amendments are subject to sign off by the relevant recruitment governance structures. Please continue to monitor the national recruitment websites for updates and advice on the arrangements for specialty recruitment.

Given the Covid-19 pandemic, will medical and dental specialty recruitment interviews be cancelled?

Due to the Coronavirus (COVID-19) pandemic and recent developments regarding social distancing, as of 17th March 2020, all face to face specialty recruitment interviews (both medical and dental) have been cancelled with immediate effect. Communications have been sent to applicants and panellists to inform them of this decision, which was taken during this exceptional circumstance in view of:

- Increased demand on the time of NHS staff in response to the pandemic.
- Trusts / Health Boards across the country instructing their staff not to travel.
- The need to support more vigilant public health measures and protect applicants and recruiters who would have been coming to recruitment events.

What alternative options will be offered to candidates?

Great consideration has been given to each of the general recruitment principles, which were agreed by senior clinical representatives from across the four nations, the British Dental Association (BDA), Joint Meeting of Dental Faculties (JMDF), NHS Employers and trainee representatives, supported by the Medical and Dental Recruitment and Selection (MDRS) Team.

A letter detailing principles which have been agreed by the four nations for dental specialty recruitment as well as an amended recruitment timetable can be found here [23].

What will happen regarding Situational Judgement Tests (SJT) that are required as part of the recruitment process?

In light of guidance around social distancing, we have taken the decision to postpone SJTs at this time. Applicants should not attend an SJT centre if they have not already done so. We are aware that the majority of test centres around the world have closed due to restrictions on movement.
Where Dental Core Training have agreed as part of their contingency plans the use of an SJT, this will be delivered via an online platform. Specifics of delivery will be communicated to any affected applicants in due course. More information, including a timeline, can be found on the Lead Recruiter’s website here [24].

My exam that was scheduled has now been cancelled and this is a requirement of the person specification for the specialty I have applied for. What does this mean for me?

The Deans of the Dental Faculties have released a joint statement [25] on Dental Specialty Examinations, which is available on the Covid-19 Information Hub [26] for the Dental Faculty.

For applicants to dental specialties, where an exam is a requirement for entry to the specialty and has been cancelled by the relevant professional body due to Covid-19, start dates may be adjusted for some specialties to allow applicants to sit their exam in the autumn diet.

Why is recruitment still going ahead rather than being postponed for six months or a year?

Applicants are an essential part of the workforce and recruitment enables their deployment in training posts. Recruitment of trainees is therefore a priority across all four nations to ensure the continuation of training programmes as well as supporting the NHS to fill vacant roles. Contingency plans have been agreed in order to maintain September 2020 start dates.

Why has self-assessment been chosen as a method of assessment over other options such as Skype?

Currently there is significant pressure on clinical time and the ability to run Skype interviews is severely compromised. Great consideration has been given to each of the possible options and how they fitted with the general recruitment principles, including use of self-assessment, which were agreed by senior clinical representatives from across the four nations, the British Dental Association (BDA), Joint Meeting of Dental Faculties (JMDF), NHS Employers and trainee representatives, supported by the Medical and Dental Recruitment and Selection (MDRS) Team.

Although consideration was given to a number of different assessment models, the best option for a consistent process which could be delivered was self-assessment.

Self-assessment already forms part of the selection process for a number of the specialties which will be using it in the current recruitment round. This is a process which many applicants are familiar with.

We are dealing with unprecedented circumstances and have had to adjust recruitment processes accordingly in line with the resource available.

For specialties using self-assessment to appoint candidates, will there be any form of interview (eg Skype)?

Specialties using self-assessment to make offers to posts will not have any form of interview. These specialties will use validation as part of the recruitment process, however this will not involve direct communication between the applicant and a clinician and will be based on evidence upload only.
If the Covid-19 pandemic had not occurred, I would have gained additional experience (eg through a rotation, course, conference etc), which would have affected my overall score for self-assessment. How is this being taken into consideration?

Many applicants are being deployed into clinical settings which they would not have been expected to be in at this time and planned events such as courses or conferences have been cancelled. In order to make the process fair, applicants should document their expected clinical experience up until the post start date (supported by job descriptions as appropriate) rather than experience gained via redeployment. This will allow any prospective experience to be considered as if it had happened.

Please note that this applies to clinical experience only. Conferences, courses, presentations etc should only be documented and included in self-assessment if they went ahead prior to the submission of the self-assessment form.

Can I amend my self-assessment score once I have submitted my self-assessment form if I realise I have made an error?

Unfortunately, applicants are unable to amend scores and we cannot accept additional evidence once this has been submitted. Your score and ranking will be calculated using the answers you submitted when you completed your self-assessment and will be validated by a clinician using the evidence you provided by the published deadline. If the clinician feels that the evidence provided does not support the score given by the applicant on their self-assessment form, their score will be adjusted accordingly. This is to ensure that all applicants have the same opportunity to provide information, which will then be used to generate a final score and ranking.

What will the self-assessment validation process entail?

Validation of self-assessment scores will be completed by clinicians. Applicants will be requested to upload specific evidence which supports their self-assessment scores to a protected location. This evidence will be reviewed in conjunction with their self-assessment form by a clinician and scores adjusted if required in line with the scoring criteria. Each specialty will be conducting their own validation process as outlined here and there will not be independent verification of this.

Who made decisions regarding recruitment contingency plans?

All general principles supporting the appointment of dentists to specialty training programmes from September 2020 were agreed by senior clinical representatives from across the four nations, British Dental Association (BDA), Joint Meeting of Dental Faculties (JMDF), NHS Employers, trainee representatives and was supported by the Medical and Dental Recruitment and Selection (MDRS) Team.

I have concerns about the validity of appointment using self-assessment scores. How do I know this process is fair?

A number of specialties using self-assessment to appoint applicants already use self-assessment via the
application form as part of the standard selection process and this is an assessment method that applicants are familiar with.

For all dental specialties using self-assessment to appoint to specialty training programmes, scores will be validated by clinicians using evidence that applicants have submitted to ensure that applicants have scored themselves correctly in line with the scoring matrix for that specialty.

GDC Standards for the dental team holds that "all members of the dental team will be honest and act with integrity". Applicants are required as part of the specialty recruitment process, to make declarations on their application form relating to their honesty and probity. Instances of candidates trying to gain an unfair advantage by over-scoring and/or exaggerating achievements will be taken extremely seriously. This could lead to an application being deemed not appointable, or, in very serious cases, could be reported as a probity matter to the GDC.

**What assurance can be given that the amended recruitment and selection processes are as robust as they were prior to the pandemic?**

There is acknowledgement that we have no evidence that the recruitment contingency processes are as robust as the normal gold standards, however we are dealing with unprecedented circumstances and have had to adjust recruitment processes accordingly in line with the resource available.

Great consideration has been given to each of the general recruitment principles, which were agreed by senior clinical representatives from across the four nations, the British Dental Association (BDA), Joint Meeting of Dental Faculties (JMDF), NHS Employers and trainee representatives, supported by the Medical and Dental Recruitment and Selection (MDRS) Team.

**Will applicants be penalised if they choose to reapply to dental specialty training next year?**

Applicants who wish to reapply to dental specialty training in a future recruitment round will be subject to the requirements of the person specification of their chosen specialty which is in place at that time. National person specifications are reviewed on an annual basis and any amendments are subject to sign off by the relevant recruitment governance structures.

Should you take up a training post following the current recruitment round and wish to reapply to continue specialty training in the same specialty in another region, you will be required to follow guidance as published in the 2021 Dental Recruitment Applicant Handbook. You can find the 2020 Dental Recruitment Applicant Handbook in the Oriel Resource Bank [9] for reference.

**I applied for an Academic Clinical Fellow post and was due to attend recruitment interviews for benchmarking. As interviews have now been cancelled, what does this mean for me?**

It has been agreed with the National Institute for Health Research (NIHR) that contingency plans for dental specialty recruitment will be used for benchmarking of applicants who were found appointable at academic recruitment. You will be contacted by the lead recruiter for the specialty you have applied for regarding the details for that specialty.
I was found appointable in 2019 recruitment and either turned down the offer of a post or was not made an offer as there were not enough posts available. Can I be offered a post this year based on my previous appointable status?

Recruitment rounds are completely separate both from one year to the next and also within a given recruitment year. It is not possible to carry your score or appointable status forward to a different recruitment round and applications for 2020 recruitment will be considered independently of applications from previous years.

I wish to complain about the selection processes in place. How do I make a complaint?

The MDRS complaints policy is available on the specialty training [10] and Oriel [11] websites. This has been recently amended to take into account the changes to the selection processes that have been necessitated by the Covid-19 pandemic.

The contingency selection processes differ to those originally advertised. Can I complain that the advertised process has not been followed?

No. The published selection processes are those that are in place at the time the selection takes place. Changes to the selection process necessitated by the Covid-19 pandemic have been communicated to all applicants and therefore these are now the published processes. A copy of the letter which outlines the process decisions can be found here [23].

If an applicant is unhappy about the selection processes in place and wishes to withdraw their application, they will not be detrimentally affected if they reapply in future recruitment rounds.

In my training programme, an exam is required either for progression through training or CCST, however the Colleges have cancelled all exams. What does this mean for me?

The Deans of the Dental Faculties have released a joint statement [25] on Dental Specialty Examinations, which is available on the Covid-19 Information Hub [26] for the Dental Faculty.

If you have been affected by the cancellation of exams and these are a curriculum requirement, you may require an extension to training to allow you to obtain the necessary exam in the autumn diet. This will be managed through the ARCP process. More information can be found on Royal College websites: Royal College of Surgeons [27]

I require a visa to work in the UK and face-to-face interviews have now been cancelled. What does this mean for me?

We are working with clinicians and recruiters to confirm contingency plans for their specialties and a revised timetable has been shared here [23], however we are not anticipating a change to the post start dates, with the possible exception of a small number of applicants who have been affected by the cancellation of exams.
I am currently living in the UK, but am not sponsored by HEE and would need to travel to my home country to apply for a visa. Given the pandemic, is there anything in place that would allow me to obtain a visa without travel to my home country?

During these unique circumstances you will be able to apply from the UK to switch to a long-term UK visa until 31 May. The Home Office have confirmed that a Tier 2 visa is classed as a ?long term visa?. This includes applications where you would usually need to apply for a visa from your home country. You will need to meet the same visa requirements and pay the UK application fee. More details can be found here: https://www.gov.uk/guidance/coronavirus-covid-19-advice-for-uk-visa-applicants-and-temporary-uk-residents [18].

Where can I find further information regarding immigration queries related to Coronavirus?

UK Visas and Immigration (UKVI) have set up a Coronavirus Immigration Helpline, for immigration queries related only to Coronavirus:

Telephone: 0800 678 1767 (Monday to Friday, 9am to 5pm). Calls are free of charge.

Email: CIH@homeoffice.gov.uk [19]

Website:


What will happen to my current sponsorship if I am prevented from working due to illness of Coronavirus or cannot travel back to the UK due to restrictions?

Some Trainees may be prevented from attending employment due to illness, the need to serve a period of quarantine or the inability to travel due to travel restrictions caused by coronavirus.

The Home Office have confirmed that Sponsors do not need to withdraw sponsorship if they consider there are exceptional circumstances when:

- an employee is absent from work without pay for four weeks or more (Tier 2)
- a student will be unable to attend for more than 60 days (Tier 4)

Trainees should keep their employers up to date and fully comply with relevant Absence Policies and recorded as Coronavirus for future audit purposes. HEE is not required to report absences related to coronavirus which have been authorised.

My immigration leave is due to expire or has expired, but I am not/have not been able to leave the UK due to self-isolation or travel restrictions. What should I do?

If you are in the UK and your leave expires between 24 January 2020 and 31 May 2020, your visa will be extended to 31 May 2020 if you cannot leave the UK because of travel restrictions or self-isolation related to coronavirus (COVID-19).

You must contact the Home Office via the Coronavirus Immigration Team (CIT) to update your records if
your visa is expiring. More details can be found here: https://www.gov.uk/guidance/coronavirus-covid-19-advice-for-uk-visa-applicants-and-temporary-uk-residents [18]

**I am a trainee and the course that I booked onto has been cancelled. How will funding and expenses be affected?**

Please be assured that reimbursement of any approved funding for cancelled training will be honoured for trainees who have already incurred expenses.

**I am a trainee and have seen a course advertised that I would like to book onto. Am I able to do this?**

There will not be approval for any new courses at the current time as all non-essential training has been suspended.

**I have lost clinical training time due to the pandemic. How will this affect me?**

Whilst there is likely to be loss of clinical training time, trainees should take the opportunity to engage in and to record any experience which offers transferable skills within the e-portfolio. It is expected that the situation will offer significant leadership and management opportunities. In addition, any non-clinical time should be used constructively for maintaining CPD, ongoing governance, audit and QI projects as these are curriculum requirements for FRCP. With agreement, working away from the clinical workplace at certain times may be appropriate to comply with advice regarding social distancing.

Trainees should also be mindful that non-direct clinical time accumulated during this period may be compensated for as the situation resolves in order to address the significant clinical backlog that will be accumulated.

**I am continuing to undertake clinical procedures, is there any guidance for this?**

Please follow the most up to date NHS safety guidance on Aerosol Generating Procedures within the country and Trust/Hospital where you are working.

**How will my RCP/FRCP be affected?**

It is essential to maintain contact with your Educational Supervisor (ES) and seek their support and guidance on maintaining your portfolio of evidence. Please continue to upload any evidence into your training portfolio.

Details of a modified FRCP process will be published as soon as possible. Please refer to the COPDEND website [28] for updates.

**What should I do regarding my Continuing Professional Development (CPD) during the Covid-19 outbreak?**
All UK DFTs, DTFTs and DCTs, supervisors and Deanery employees have been given free, open, access to Dentaljuce until 1st September 2020. Each HEE regional office will generate the memberships and you will receive an activation email from support@dentaljuce.com [29].

It is a GDC registration requirement that you maintain your CPD as part of your annual cycle. Further advice is available through the GDC website [30].

**Should I be in work now study days have been cancelled?**

Yes, you should attend your now designated place of work and undertake appropriate duties as determined by your clinical line manager.

**I think I should be self-isolating. What should I do?**

Please follow the advice of your employing organisation. If advised to self-isolate please inform your employer/ES and your TPD in writing. Please keep them updated about your wellbeing.

In addition use the 111 online coronavirus service for specific advice: https://111.nhs.uk/covid-19/ [31]

For updated information: https://www.nhs.uk/conditions/coronavirus-covid-19/ [32]

Specific guidance for health professionals is being regularly updated at: https://www.gov.uk/government/organisations/department-of-health-and-social-care [33]

If you are self-isolating due to contact with someone symptomatic, you can continue to work remotely. The expectation is that in your down-time from NHS work, you should continue to maintain your portfolio, undertake self-directed learning or any specific other/additional tasks or projects in line with your curriculum.

As trainees, you will all continue to be remunerated and it is important to use this time wisely and respectfully. The requirement to demonstrate that you are acquiring the necessary professional / clinical skills and knowledge can continue when practicable and can be submitted for consideration as evidence at FRCP.

**If I am pregnant, should I carry on treating patients as normal?**

Please follow the published RCOG guidance and BDA guidance:

https://www.rcog.org.uk/coronavirus-pregnancy [34]

ii. https://www.bda.org/advice/Coronavirus/Pages/faqs.aspx [35]

It is essential you contact your local Occupational Health and have a full risk assessment carried out, with the consideration that dental professionals have a slightly higher risk of catching airborne viruses due to certain dental procedures.
**Will I be redeployed during the pandemic?**

Consideration of redeployment of trainees is appropriate in exceptional circumstances such as this. Training has been suspended and we have moved into a period of generic healthcare.

You continue to be an employee of your employing organisation. As such you may be requested to redeploy to meet the needs of patients.

If the situation changes and a call is made for all healthcare workers to be mobilised to work in different acute settings, then all salaried NHS employees who are risk free, including trainees, will be expected to engage accordingly.

**Who can I speak to for support?**

Pastoral care is vital during this difficult time.

This should be through your CS, ES and TPD. It should also be available at your Trust through the Department of Postgraduate Medical Education and if this is not possible, through the HEE Professional Support & Wellbeing service (PSW) or your responsible Associate Dental Dean.

**What should I do now study days have been cancelled?**

In time, if appropriate, you will be set specific and individually tailored learning requirements by your ES/TPD that will need to be met. We will also try to offer virtual alternatives via access to webinars, virtual study sessions etc.

Please take ownership of the requirement to demonstrate that you are acquiring the necessary profession/c clinical skills and knowledge as set out in the DCT curriculum.

The following sites may be helpful and should be visited by all DCTs:


https://www.e-lfh.org.uk/programmes/dentistry/ [37]

FAQs for Pre-registration Pharmacy Trainees and Tutors

These FAQs were developed during the COVID-19 pandemic to support trainees and tutors with their training programmes. The information will still be relevant for trainees who are within their training year. If you are looking for information about provisional registration please see the General Pharmaceutical Council (GPhC) [38] website.

These FAQs are grouped into questions related to the pre-registration pharmacist registration assessment; FAQs for pre-registration pharmacy technicians and FAQs for all pre-registration pharmacy trainees (pre-registration pharmacists and pre-registration trainee pharmacy technicians), including guidance principles for all pre-registration pharmacy trainees.

We encourage you to use the Health Education England (HEE) Pre-registration Pharmacy Questions Portal [39] to anonymously submit any questions and concerns that you have. We will use this portal to understand the concerns of our trainees and we will aim to update this Frequently Asked Questions (FAQs) resource.
Pre-registration pharmacist assessment FAQs

On 21 May 2020, the General Pharmaceutical Council (GPhC) agreed a policy for registering pharmacists on a provisional basis [40] as part of the regulator’s response to the pandemic.

We understand that pre-registration pharmacists and tutors will continue to have many queries and encourage them to read Professor Wendy Reid’s message from HEE [41].

Your main point of contact for support and queries will be your regional Pre-registration Pharmacist Lead. We also encourage you to use the Health Education England Pre-registration Pharmacy Questions Portal [39] to anonymously submit any questions and concerns that you have. We will use this portal to understand the concerns of our trainees and we will aim to update this Frequently Asked Questions (FAQs) resource.

Please be aware that the full details of the amended registration process, are still being explored and developed by the GPhC. As such, we will not have all the answers at this time.

The GPhC [42] has also produced an FAQs resource, available on their website.

*NEW 6 May* We are worried about the postponement of the registration assessment. When will the new registration assessment take place and when will we find out about it?

We have received and recognise the many questions shared about the registration assessment. We will ensure that the concerns that have been raised with us are forwarded to the GPhC.

The GPhC are working to develop plans for the period between now and the rescheduled assessments and will communicate this to trainees as soon as they can.

Please ensure that you are also regularly checking the GPhC Q&A: Coronavirus [42] page for any updates.

*UPDATED 20 May* As an employer/supervisor how do I support trainees at this time?

We are aware of the significant pressure pharmacy teams are under and the difficulty this creates for supporting trainees. We know that you have had to rearrange services rapidly in different ways to deal with these unprecedented pressures. For many of you this will have meant having to suspend study leave and other educational activities.

Trainees are now in the final quarter of their training year. While it may not be possible for trainees to follow the training plan set out for them at the start of the year, it is important to take steps to support your trainees to meet the mandatory requirements of the training year, namely the successful demonstration of all performance standards.

The GPhC have stated that they expect progress reviews to occur as expected. However, they have clarified that if you complete these appraisals later than planned, it will not automatically affect the eligibility of trainees to sit the registration assessment.

If progress reviews occur differently to planned, we recommend the following to support your trainees:

Ask your trainees to review their progress with the performance standards and consider how outstanding standards can be met in the current climate.

Remind your trainees that they can access support from their peers, other pharmacy staff, their training providers or local HEE teams if needed at this time.

Please bear in mind that planned training programmes often offer many training opportunities over and above the minimum requirement needed for registration with the GPhC. In these unprecedented times it will...
be important to identify the core and mandatory elements of training that trainees need to access.

Unavoidable changes (such as cancellation of cross-sector experience or other rotations) may mean there is a need to identify alternative approaches for demonstrating competence of some of the performance standards.

Like all staff, trainees will be working in different ways. However, it is important that trainees spend some of their time undertaking tasks that will help them to demonstrate competence against their outstanding performance standards and efforts should be made to allow them some time to reflect and create their records of evidence.

Please contact your regional training team or HEE team if you need any additional support at these challenging times

*NEW 6 May* Why can’t pre-registration pharmacists be fast-tracked into their professions like trainee doctors and nurses?

We recognise that some trainees feel overlooked as healthcare professionals, because the process of achieving registration is taking time to become clear. Pharmacists are a valued and essential part of the healthcare workforce in dealing with the impact of COVID-19 and providing patient care and we appreciate where pre-registration pharmacists have provided support outside of their scheduled training pathways and contracted duties.

There are key aspects of the registration as a pharmacist which are unique. These include the registration being dependent on the combination of tutor sign-off of performance standards and successful completion of a high-stakes registration assessment held on one date. This contrasts with the co-terminus registration of other healthcare professions, where graduation and professional registration align.

Within our remit and as the circumstances allow, we are reviewing the situation and working with the GPhC to ensure that whichever interim measure is in place, it supports trainees and protect patients.

*NEW 6 May* When will pre-registration pharmacist trainees and tutors be provided with further information about the postponed registration assessments?

We appreciate that you have many concerns on how the proposed registration assessment and registration changes will affect your current training. Please be assured that we are continuously working closely with the GPhC and other key partners to share your concerns and provide some clarity for pre-registration pharmacists. As soon as we have any further or new information, we will share this with you.

We know how worrying this is for you and we want to help you as much as we can. Please continue to use the portal and encourage your fellow pre-registration pharmacist trainees to use it. This will help us understand how better we can support you all. We anticipate sharing further information, which will detail some of this support.

What should pharmacist trainees do now they have been told that the GPhC registration assessments are postponed?

The GPhC is currently considering the implications of the COVID-19 pandemic on pre-registration training and assessment.

We recognise that there may be circumstances when trainees may be required to help or support outside of their scheduled training pathways and contracted duties. Trainees may also be temporarily re-directed to duties where they have already demonstrated competency to help with service provision. In these circumstances, it is essential that systems are in place to support trainees and keep patients safe. Trainee wellbeing must be protected, and processes must be in place to ensure they are not exposed to risks through their work or training. As such, we have set out some guiding principles for trainees [43] with a summary listed at the end of these FAQs.

Will I be at a disadvantage compared to prior years because my mock exams have been cancelled?
Health Education England (HEE) are working with key partners such as regulators and professional bodies to support our pre-registration pharmacist trainees in these unprecedented times. The disruption due to COVID-19 has impacted pharmacy trainees, trainees in other health professions, registered professionals and the general population in multiple ways.

We recognise that HEE and other providers have cancelled the scheduled mock examinations. The timing and format of re-arranging these will be dependent on decisions made by the GPhC on the registration assessment, as well as government guidelines on social distancing.

**Should I still be receiving my study time?**
We appreciate that trainees are working hard to support the NHS and pharmacy staff at this difficult time and will have had to be flexible to ensure patients receive high-quality care.

In normal circumstances, trainees will acquire study time that are either formally agreed or given on an ad-hoc basis. Given the current health emergency and government guidelines for social distancing, trainees and supervisors will be experiencing an unprecedented workload. We anticipate the current situation is likely to continue, which will mean trainees may not be able to access their usual study leave on an on-going basis.

As trainees, you will still have many opportunities to learn, reflect and develop, although they may be different from your planned learning. We encourage you to use these to demonstrate competence against the GPhC performance standards and support your preparation to practice.

**My training programme has changed significantly and I am worried how this will impact on my ability to demonstrate competence or pass the registration assessment.**

The mandatory requirements of the pre-registration pharmacist training year are for all trainees to demonstrate competence, through the GPhC’s performance standards and registration assessment.

Considering this, there is a variety of structure and opportunities given to pre-registration pharmacists as part of their training.

It is unfortunate that elements of training have had to be altered or postponed, such as study days, cross-sector placements and specialist rotations. But these changes are necessary to manage workload and protect the safety of trainees, patients and the public.

Despite the changes to training programmes, we encourage trainees to continue to work with their tutors to demonstrate competencies and prepare for the registration assessment.

This includes trainee to discuss options with tutors (and other available support networks such the regional training team) and:
- Review progress with performance standards.
- Identify performance standards that may need additional evidence.
- Seek opportunities and activities to demonstrate competencies.

More FAQs for pre-registration pharmacists can be found on the GPhC website [42].

*UPDATED - 29 APRIL* My visa expires at the end of my pre-registration contract, what will happen?

The Home Office has announced today that frontline workers, including pharmacists, midwives, radiographers and social workers, with visas due to expire before 1 October 2020 will receive an automatic one-year extension.

The extension to Tier 2 visa arrangements will be expanded to cover all health and care regulated professions, in both the NHS and independent sector and include their family members.
More information on Home Secretary announces visa extensions for frontline health and care workers [44].

The Royal Pharmaceutical Society (RPS) and British Pharmaceutical Students association (BPSA) wrote to the home office to obtain clarification on this issue, read the response [45].

FAQs for pre-registration pharmacy technician trainees (PTPTs)

*NEW 20 MAY* If there is a delay in my training and I am unable to complete as planned, what support will I be given?

We recognise the impact this pandemic will have on your studies and on your planned completion date.

Our regional pharmacy teams have been working closely with education providers and NVQ providers to ensure that you are supported during this period.

Most providers have put in place provisions to continue with education and training, so that you can meet your initial completion date. This includes extra support and flexibility with deadlines, as well as more digital provision to support learning. Please speak with your teacher/tutor or assessor about specific concerns, so, they can offer targeted, personalised support.

If you still have concerns about meeting your initial completion date, you should discuss them with your educational supervisor, who will escalate to your provider or employer as necessary.

*NEW 20 MAY* Am I still entitled to my full study time?

During this unprecedented time, we recognise that your study time may be affected. However, it is expected that your employer should still support you, to ensure you have enough time and resources to complete the requirements of your qualifications.

If you have any concerns, please speak with your educational supervisor.

*NEW 20 MAY* Will I be disadvantaged by a reduction in face-to-face time with my tutor/teacher?

We recognise that the pandemic has affected the traditional provision of education and training. Our regional pharmacy teams have been working closely with education providers and NVQ providers to ensure that you are supported during this period. More content and support are being delivered online to support learning, including online tutorials or virtual conversations. Your tutor/teacher or assessor wants you to do well, so if you have any concerns about the support you are receiving, please speak with them first. If your concerns are not addressed, please escalate them to your educational supervisor, who can escalate further as needed.

For apprenticeships, where it is not possible for apprentices to undertake face to face study days, or their assessors cannot visit them in practice due to COVID-19 restrictions, your provider will make alternative arrangements, such as e-learning or virtual conversations.

*NEW 20 MAY* My training contract is coming to an end. I?m concerned that employers may pause recruitment due to the pandemic.

Many employers are continuing to recruit as planned during the pandemic. If your training contract is coming to an end, please speak with your current employer about new job opportunities. Other NHS job opportunities will be listed on NHS Jobs. https://www.jobs.nhs.uk/ [46]

*NEW 20 MAY* I am on an apprenticeship programme. How do I demonstrate the required 20% off-the-job-training now that training days and college days have been suspended temporarily?

During the coronavirus pandemic, apprentices need to continue to fulfil their 20% off-the-job training
requirements. This can be demonstrated in several ways including through remote observations, new training in the workplace, or e-learning whilst at work. Please speak with your provider for further guidance and to explore alternative options for how you can achieve your training requirements.

FAQs for all pre-registration pharmacy trainees

How can the health of myself and my family be protected at this time?
We advise you to follow all government guidance [47] relating to social distancing and vulnerable people.

Guidance for pregnant individuals has been published by the Royal College of Obstetricians and Gynaecologists, Royal College of Midwives, Royal College of Paediatrics and Child Health, Public Health England and Health Protection Scotland. This can be accessed here [48].

If as a result of this guidance, you are in a vulnerable group (or live with those in vulnerable groups) and need to take time away from your training, the GPhC has provided guidance around 40-day absence [49] in their most recent FAQs.

Your local HEE Pharmacy team can support discussions about how to manage time away from your training site and help you to return when the current situation improves.

I have concerns about personal protective equipment, what is the current advice?
Public Health England has provided a standard operating procedure for community pharmacy during COVID-19:


Individuals working in a hospital setting and who may have concerns, please discuss this with your employer.

I feel my mental health is being affected by the current situation, what support can I access?
We encourage you to seek support from your tutor/educational supervisor, your regional training provider and local HEE pharmacy teams.

The following resources are also available to support pharmacists and pre-registration trainees during this challenging time.

The NHS has launched a mental health hotline [51] for staff tackling COVID-19. This is part of the extensive work the NHS is doing to help provide expert care to both patients and health and care staff during the Covid-19 pandemic. Find out more here [52].
- Centre for Pharmacy Postgraduate Education online guides: https://www.cppe.ac.uk/#pw_6 [53]
- Pharmacist Support ? an independent charity, providing a range of free and confidential services to pharmacists and their families, pre-registration trainees and pharmacy students. https://pharmacistsupport.org/ [54]

My childcare options have been affected due to COVID-19, what options do I have?
The Royal Pharmaceutical Society has provided an open letter to headteachers to outline pharmacists and support staff are critical to the COVID-19 response and key workers in the health service. The letter can be accessed here. [55]

If you are still experiencing challenges, despite access to a school or nursery place, you may choose to discuss options with your employer.

Guidance principles for all pre-registration pharmacy trainees
Trainees should:

- Only complete activities in the workplace that they have demonstrated competence in or are in the process of developing competence in, under supervision. Trainees should continue to ask for help and guidance when needed.
- Continue to have regular check-ins with their tutor. The tutor is key for supervision and to the support structure of a trainee. It is important to have regular communication and share any concerns.
- Continue to gather evidence of their competence against the GPhC performance standards.
- Continue to plan for their next review and should assume this is still the next milestone for their training. If this cannot be completed as scheduled, it should be rescheduled to the next available date. Trainee and supervisors should work together to demonstrate competence for each outstanding performance standard, this could be through direct observation or written evidence. We recognise some flexibility may be needed in these challenging circumstances.
- Look after their own wellbeing and support their colleagues and teams. We advise trainees to share concerns and anxieties with their tutors and supervisors where necessary.

More FAQs for pre-registration pharmacists can be found on the GPhC website [42].

General FAQs

*NEW 24 April* Is there any national guidance on deployment of medical staff?

NHS England has recently published guidance entitled *Redeploying your secondary care medical workforce safely?* which can be accessed through this link [56]

The guidance supports trusts to safely redeploy their secondary care medical workforce during the prolonged major incident caused by the coronavirus pandemic and is applicable only in exceptional circumstances.

It sets out the level of supervision staff may need if they are redeployed, to ensure they still work within their competency. It should be read in conjunction with guidance issued by Health Education England: https://www.hee.nhs.uk/coronavirusinformation-trainees [57]

Detailed guidelines have been issued by the Royal Colleges and these should be reviewed in conjunction with this document.

NHS England will also be publishing separate summary guidance for deploying all staff safely shortly. This will highlight the key considerations in the safe redeployment of staff and deployment of those joining the NHS in temporary support of our existing workforce and signpost more specific resources where these are available.

*NEW 24 April* Is there any specific guidance on redeployment of trainee doctors?

The Academy of Medical Royal Colleges Trainee Doctors? Group has published a position statement and guidance outlining considerations when determining the best use of the trainee doctor workforce. This can be accessed here [58]

HEE is committed to supporting doctors in training and worked with the three nations to publish a set of agreed principles for deployment of all trainees across all four UK nations. These principles can be accessed here [59]
**NEW 24 April** Has the General Medical Council provided guidance on doctors working outside their field of practice during the COVID-19 pandemic?

The General Medical Council is finalising a competence statement setting out the considerations doctors should take when working to treat and manage critically ill patients during the COVID-19 pandemic.

**NEW 24 April** What general guidance is there for NHS workforce leaders to manage workforce issues?

The Department of Health and Social Care (DHSC), NHS England and NHS Improvement, Public Health England (PHE), Health Education England and NHS Employers have collated the latest workforce advice into one central resource for workforce leaders in the NHS. This can be accessed through this link [60]

The guidance should be applied in all NHS organisations in England. To help human resource directors and workforce leaders across the health system with plans to respond to COVID-19, the resources collated in the guidance deal with the workforce issues that are likely to arise during the current pandemic. This guidance is intended as an additional resource to supplement local or organisational plans and to help leaders to deliver them.

**NEW 24 April** Can Consultants employed in the independent sector be granted practising privileges to treat NHS patients in response to the COVID-19 pandemic?

Those consultants employed by Independent Sector (IS) providers included in the NHS COVID-19 collaboration contract will be granted interim practising privileges by the CQC through a fast track process so consultants can start work immediately in hospitals where they do not have practising privileges already.

The interim CQC process requires consultants to give the registered manager of the independent sector hospital a declaration that gives assurance on key points. Any other consultants employed by IS providers outside of the NHS COVID-19 contract must follow the usual CQC process for granting practising privileges. Further guidance can be accessed through this link [61]

**NEW 24 April** Is there guidance setting out how COVID-19 at risk groups of patients will be identified and shielded?

The Academy of Medical Royal Colleges is supporting NHS England to identify and shield at risk and vulnerable patients. NHSE has categorised at risk patients into four groups and set out the process for contacting each group as follows:

Group 1 are to be identified and contacted by NHS England using national databases. They have sent out approximately 900,000 letters and Trusts and GPs have been informed about these patients. This leaves about 600,000 patients who might be fall into the extremely high risk groups but have not been identified through central mechanisms. These may include: recent cancer diagnoses; some immunosuppressed groups, those with susceptible rare disease etc. NHSE central data is not able to identify all high risk patients and set out 3 other routes to identify patients as below.

Group 2 are be identified and contacted by specific medical specialist societies which have been coordinated by the Royal College of Physicians (RCP). The specialist societies representing dermatology, gastroenterology and hepatology, neurology, respiratory, renal and rheumatology have all been working with
RCP in order to draw up some guidance for these specialties regarding (mainly) immunosuppression advice and how to ensure how these identified patient details are appropriately shared. They are asking their specialist members to additionally identify at risk patients not covered by the central initiative.

Group 3 are to be identified and contacted by all other relevant specialties (i.e. those not in the 6 specialties in Group 2). There will be patients who are considered to be at the highest risk of death or severe morbidity, but have not been identified within groups 1 and 2 and for whom offering complete social isolation at home for 12 weeks is a proportionate response to that risk. Medical Colleges and specialist societies, as proposed by the Colleges, are being asked to identify additional patients and to contact them directly. The relevant College will contact the patient?s GP to let them know they have been included in the vulnerable group so that they can be coded as COVID-19 at risk.

Group 4 are to be identified and contacted by primary care. There will be vulnerable patients who are well known to primary care, particularly the frail elderly with multi-morbidity, who may not be known to secondary care. GPs will be asked to identify such patients from their own lists and to include them in the vulnerable group for shielding. The AoMRC understands that general practice colleagues are being contacted directly to carry out this work.

NHS England has also published the letter to all Nursing and Medical Directors in NHS Trusts on caring for high risk patients. This can be accessed through this link [62]

*NEW 24 April* Can medical trainees who are immunocompromised treat NHS patients?

All immunocompromised trainees must seek advice from Occupational Health (OH) and a risk assessment should be conducted locally to determine appropriate deployment, proportionate to the level of risk of exposure to COVID-19.

Trainees should ensure that their clinical lead is aware of their underlying condition(s), medication and scope of practice. Trainees should not be compelled to work beyond the advice of OH or their personal physicians and it is recommended efforts are made to support home working subject to Occupational Health assessment, safety of the home environment and provision of safe and secure technology.

*NEW 24 April* Can HEE waive the 10 day Keep InTouch (KIT) limit for those trainees on maternity leave to give them flexibility to come to work if they are able?

An employee may work for up to a maximum of ten keeping in touch (KIT) days without bringing her maternity leave to an end. Staff on shared parental leave can work up to 20 shared parental leave in touch (SPLiT) days without ending their shared parental leave. This means that many employees will have access to up to 30 days where they can work, without bringing their paid family-related leave entitlements to an end. Can do fewer

There is now a provision available to allow line managers to consider further flexible options where staff do not lose out on their contractual entitlements, should they be able to return earlier than planned to assist in the pandemic. The terms and conditions can be found here https://www.nhsemployers.org/covid19/staff-terms-and-conditions/returning-to-work-in-the-nhs [63]

Trainees should contact their line manager and HR team to discuss local arrangements. Where trainees do return, they should be offered occupational health risk assessments to determine appropriate deployment alongside induction and supervision.

National guidance on COVID-19 in pregnancy is provided by the Royal College of Obstetricians and
Gynaecologists (RCOG). In order to ensure the most up to date guidance is followed the link is provided here: https://www.rcog.org.uk/globalassets/documents/guidelines/coronavirus-covid-19-infection-in-pregnancy-v3-20-03-18.pdf [64]

To support staff health and wellbeing during the pandemic, HEE, NHS England and Improvement have produced online resources which can be accessed here: https://people.nhs.uk/about/ [65]

What’s the guidance for pregnant women trainees?

New advice for pregnant women who are working in the NHS and other work settings has been published by the Royal College of Obstetrics and Gynaecologists [66].

Does the 7 and 14 day isolation guidance apply to trainees?

Yes, the guidance issued by Public Health England applies to everyone including medical and dental trainees. The guidance can be found on the government website [67].


Links
[5] https://www.hee.nhs.uk/about
[8] https://www.hee.nhs.uk/We%20are%20currently%20revising%20all%20the%20recruitment%20processes%20to%20ensure%20selection%20criteria%20have%20been%20agreed%20by%20the%20four%20nations%20for%20medical%20specialty%20recruitment%20can%20be%20found%20here.
[10] https://specialtytraining.hee.nhs.uk/
[15] mailto:tier2@hee.nhs.uk
[19] mailto:CIH@homeoffice.gov.uk