

Targeted GP Training Scheme

A guide



Developing people
for health and
healthcare

www.hee.nhs.uk

1. Background

- 1.1 HEE consulted on proposals for Targeted GP Training (TGPT). The original proposal and the consultation outcome, together with HEEs response, can be found on the HEE [website](#). This document is the final version of the proposal and includes amendments and updates in light of the consultation and subsequent meetings with stakeholders. It also includes an implementation plan which is subject to exam rule changes and GMC approval of those changes.
- 1.2 To feed into the proposal HEE commissioned a literature review to explore the likelihood of exam success relating to re-sits timing and frequency and the patient safety implications of multiple re-sits. This literature review can be found on the HEE [website](#). The literature review made a number of recommendations, including:
- Preparedness of candidates in the first instance, particularly with regard to the level of cultural familiarity of international medical graduates (IMGs) with practice in the UK
 - Introducing 'sign off' of readiness to undertake exams
 - Further training following a number of exam failures
 - Limiting the number of additional exam attempts.
- 1.3 In parallel to the TGPT proposal, an increase to the period of extension to training for GP trainees was proposed.

The proposal was accepted and with effect from 31 January 2018 the available extension to training for GP trainees has increased from six months with an exceptional six months, to 12 months with an exceptional six months. There has been no change to the procedures around extensions with the decision being that of the Postgraduate Dean.

- 1.4 The proposal was originally aimed at three groups of doctors, but is now aimed at a single group, the re-entry doctors. The other two groups now fall into their own separate proposals, the first being doctors switching specialties and the second being overseas doctors who require 'top up' training. Details of these separate proposals can be found on the HEE [website](#).
- 1.5 Re-entry doctors are those who left training having passed a single exam - either Clinical Skills Assessment (CSA) or Applied Knowledge Test (AKT) and had satisfactory Work Place Based Assessments (WPBA) but had not passed the second exam. Further detail in paragraph 2.1.
- 1.6 As with all trainees holding an NTN, those following the TGPT scheme will:
- Follow the nationally agreed and quality assured, recruitment and selection process¹
 - Receive their training in GMC approved training locations with GMC approved trainers

¹ Managed by the GP National Recruitment Office

- Fall within the Gold Guide² rules and requirements (with a number of exceptions which are listed below paragraph 9.3).
- Follow and demonstrate achievement of the required competencies of the RCGP curriculum (including exam requirements) approved by the GMC.

1.7 The RCGP are willing to change their exam rules to enable re-entry doctors to return to GP training. The exact detail of the changes is being considered to ensure standards are maintained, fairness for existing and future trainees and that they are implementable. Any changes are subject to GMC approval (see paragraph 5).

² A reference guide for Postgraduate Specialty Training in the UK

2. Who is covered by the TGPT proposal

2.1 Eligible doctors

To be eligible for this group, the doctors must fulfil **all** of the following criteria:

- Previous GP NTN holder
- Left GP training between August 2010 and January 2018³
- Satisfactory WPBA
- Have passed one of the two exam components of the MRCGP; either AKT or CSA
- Have taken but not passed the other exam of the two

As evidenced by an ARCP outcome 4 with a U5 code (single exam failure) or U6 code (continual exam failure).

- Have current GMC registration with a licence to practice
- Have been in medical practice within the last two years

2.2 Doctors who are not eligible

For clarity the following doctors are **not** eligible:

- Passed one of the exams; not attempted the other
- Failed both exams
- Unsatisfactory WPBA

Further details of the background to the decision on eligibility can be found in the consultation outcome document on the HEE [website](#). It should be noted that a route of re-entry to specialty training exists under certain circumstances; further details can be found in the Gold Guide⁴.

³ The increase in available extension to training was introduced with effect from 31 January 2018

⁴ [Gold Guide 7th edition section 3.74](#)

3. Recruitment

- 3.1 Recruitment will be open at all rounds. It was initially expected that recruitment would be via round 2 only, in order to ensure that specific training programmes (those able to provide the targeted scheme with an experienced Educational Supervisor (ES)) are advertised. Feedback during development of TGPT, has indicated that the necessary support including suitably experienced ES' is available in all locations and that there should be sufficient flexibility to adapt to individual circumstances. Information can be found on timing of recruitment rounds on the NRO [website](#), similar timeframes are likely to be in place for future recruitment rounds.
- 3.2 The first possible entry into GP training via TGPT is anticipated to be **February 2019** (following recruitment in August 2018) This is via Round 2 of 2018/2019 recruitment.
- 3.3 The last possible entry into GP training via TGPT will be **August 2021** (following recruitment in February 2021). See timeline at paragraph 12.
- 3.4 In England, all programmes are open for applications for TGPT. The other countries can choose to offer TGPT within their areas. Further details will be made available on the NRO website outlining where TGPT will be offered.
- 3.4 TGPT doctors may **NOT** defer the start of their programme see paragraph 9.2.

3.5 Expunging exam failures

Feedback after the consultation closed indicated that there was not sufficient support for changing the existing policy to include expunging exam failures. It was considered that an exam success demonstrates the attainment of knowledge / skills but these may become out of date, might not be maintained or requirements change; whilst lack of success in an exam indicates that knowledge / skills had not been demonstrated initially.

4. Recognition of competences achieved prior to entry

Re-entry doctors, due to the eligibility criteria, will have completed the full 'duration' of training given they are required to have satisfied all competences except success in one of the two exams. How much training they need to do is outlined in paragraph 6.

They will be considered to enter training at ST3 and remain at that level throughout their TGPT training.

5. Exams

The following section explores the recommendations of the literature review outlined in paragraph 1.2.

HEE has shared the research outcomes with the Academy of Medical Royal Colleges to cascade via their exams committee as it relevant to all specialties.

5.1 Readiness to sit exams

The RCGP exam regulations indicate that AKT may be taken at any point from entry to ST2 onwards and that the CSA may be taken from entry to ST3 and it is the trainee's choice when to sit and in what order and also when to resit. Trainees may choose to sit or resit when they are not fully ready or when they have not had the opportunity to reflect on feedback.

A re-entry trainee will not be permitted (as part of the TGPT scheme rules) to apply to sit an exam until they have been signed off as ready to do so and at the earliest after their first (12-month whole time equivalent) ARCP. In essence this then means the sign off would be at the advice of the ES and confirmed by the Postgraduate Dean or their representative. Any further re-sit would be again only after subsequent readiness to (re)sit has been supported.

The RCGP is modelling how readiness to sit would fit within the training scheme duration, existing exam diets, permitted number of exam attempts and available extensions to training.

Feedback in response to the proposal to introduce readiness to sit has been well received and HEE would wish to introduce it for all trainees and not just those on TGPT. The readiness being signed off with an escalation of level for the signatory i.e. ES/Training Programme Director (TPD)/ Postgraduate Dean (or nominated deputy).

There wouldn't be a mandated period between sittings as this would be covered by the implementation of readiness to sit.

HEE acknowledges that trainers have the experience to judge when a trainee is truly ready to sit, but may require support in delivering that message and guidance for consistency. Guidance to be produced with input from GP Deans.

5.2 Currency of exams

The GMC currency of exams will be used for those on the TGPT scheme, that is that an examination success remains current for a period of seven years. This may mean that a number of those on the TGPT scheme will be required to re-sit (and pass) the exam that they have passed in addition to passing the exam that they have failed. This ensures that the trainee is able to demonstrate current competence in all curriculum and MRCGP requirements (a requirement for a CCT/CEGPR application).

Example 1:

- Passes AKT in February 2011; pass remains valid until February 2018
- Left training in 2014 (with satisfactory WPBA) having not passed CSA.
- Doctor is eligible for re-entry via TGPT
- Passes GP recruitment and re-enters training in February 2019
- Trainee will be given a provisional end of training date 18 months after entering training, i.e. August 2020.
- Trainee passes CSA in March 2020.

A trainee in these circumstances **will have** to re-sit the AKT as their earlier exam pass is no longer valid.

Example 2:

- Passes AKT in April 2015; pass remains valid until April 2022.
- Left training in 2016 (with satisfactory WPBA) having not passed CSA.
- Doctor is eligible for re-entry via TGPT.
- Passes GP recruitment and re-enters training in February 2019.
- Trainee will be given a provisional end of training date 18 months after entering training, i.e. August 2020.
- Trainee passes CSA in March 2020.

A trainee in these circumstances **will NOT have** to re-sit the AKT as their earlier exam pass is valid at their end of training date.

NOTE: Eligibility includes that one of the two exams has been passed; the fact that the pass is no longer current doesn't change the initial eligibility.

5.3 Number of exam attempts

- 5.3.1 In order for the group of doctors who fall into the eligibility criteria for TGPT to be able to re-enter training, a change in the exam rules is required in relation to the number of permitted exam attempts. This change then requires approval from the GMC.

- 5.3.2 The RCGP is exploring how the exam regulations could be amended to enable this group of doctors to re-enter training.
- 5.3.3 It is recognised that the number of additional sittings should be limited (as recommended by the literature review).
- 5.3.4 It is likely that the current additional 5th attempt permitted outside training would cease to be offered with any increase in exam attempts. This would also lead to the current CEGPR (AP)⁵ certification route ceasing. Doctors would not be disadvantaged, as the increase in available extension to training together with the TGPT will cover doctors who would normally fall into the category for a 5th attempt or CEGPR (AP).

⁵ Approved Programme CEGPR; further details on GMC [website](#)

6. Duration of training

6.1 Maximum period of training

The scheme length will be 18 months, whole time equivalent with a further six months exceptional training (following same rules as in Gold Guide around eligibility for exceptional 6 months).

In order to be eligible for TGPT re-entry doctors will have satisfactorily completed WPBA and have demonstrated the curriculum competences except success in one of the two exam components of the MRCGP. From the register of interest, the majority of doctors in this category have worked in another specialty and a small number have taken a sabbatical since they have left training. Given the possible gap between working as a GP and re-entering training, some of the competences they had previously demonstrated may need updating. Similarly, a previous success in an exam may no longer be current (paragraph 5.2).

Each trainee will be given an expected end of training date of 18 months after their start date.

6.2 Leaving TGPT

The ARCP process will be followed by TGPT, that is that the trainee will follow ARCP requirements and the usual outcomes as defined in the Gold guide will apply.

6.2.1 Having completed curriculum competences

Once a trainee has achieved (current) success in both exams and their ES considers that they have demonstrated (up to date) curriculum competences and complied with WPBA requirements, then they can apply for GP Registration (CCT/CEGPR). They do not have to wait for the 18-month period to have been completed.

We are working with the GMC and RCGP on the detail of the application process and the route to GP Registration. The ARCP process and the RCGP recommendation to the GMC will be followed as with all trainees (i.e. the award of an outcome 6 is required to demonstrate satisfactory completion of the programme). Every effort will be made to ensure the cost of this registration process and the administration involved will be similar to that for other trainees.

6.2.2 Receipt of Outcome 4 or removal of NTN

If a trainee has their NTN removed (see paragraph 3.63 of the Gold Guide) or they are awarded an outcome 4. They will have no further opportunities to take any of the exams and will not be able to complete GP training.

7. GP Registration, route of entry: CCT / CEGPR (CP⁶ or Full)

To be eligible for a CCT, a trainee is required to have completed **ALL** of their training in GMC approved training.

The certification route for those on TGPT is being discussed with the GMC, more detail will be provided and an individual decision will be made for each doctor so all involved parties are clear on their expected GP registration route.

For clarification, the route of entry to the GP register is not recorded in the public domain, similarly having a CCT is not a requirement for entry into a Medical Performers list or appointment to a GP post; the statutory requirement is (amongst other things) GP Registration. The standard is the same for each route and HEE, the RCGP and the GMC consider them equal.

⁶ Combined Programme CEGPR – further detail on GMC [website](#)

8. Less Than Full Time Training (LTFT)

It is essential that doctors on TGPT have sufficient continuity of training, appropriate presence in the training place and coverage of different aspects of the curriculum. It is therefore expected that re-entry doctors would not work in paid employment in addition to their training. This recognises the challenges to returning to training following either a gap in work or working in a different specialty or both and enables trainees to focus on the achievement of the GP curriculum competences in the limited period of training.

LTFT for statutory reasons such as those defined in category 1 within the Gold Guide paragraph 3.90 continue to be available.

9. Content of targeted training and training support

9.1 Support - general

HEE consider that the support available today is comprehensive with trainers and ES having become increasingly better at providing this support and that there is continuous improvement in this area. The RCGP has also introduced a significant number of initiatives and examples of these together with support initiatives within HEE local area teams are detailed in section 3.8 of the consultation [outcome document](#).

The intention is that existing support initiatives are utilised along with the other proposals in this document, i.e. readiness to sit exam sign off for each sitting.

The trainer(s) and ES will be experienced in working with trainees with differential attainment needs and/or require support.

It is expected that the training will **ALL** be in General Practice. Should it be considered the trainee requires a period of hospital based training then this needs to be justified to the GP Dean by the TPD or ES. If time is spent in hospital based training:

- this would come out of the 6 months exceptional training and would NOT reduce the 18 month GP training period
- the restriction of not being permitted to sit the exam(s) until having completed 12 months training is not affected by this, but is covered by readiness to sit requirement.

9.2 Support – person specific

The specific support/ training for an individual will be determined locally by the ES and TPD with input from the GP Dean where appropriate. The use of experience gained by supporting trainees such as that delivered via Professional Support Unit (PSU) should be utilised.

A personal development plan will be designed taking the following into consideration

- Learning needs assessment
- What they have been doing since they left GP training and what (if any) refresher training is needed
- Feedback from exam attempts
- Support in relation to the challenges of taking exams including reviewing previous experiences and reactions to those experiences
- Exam preparation and preparedness support
- Specific interventions to address issues of differential attainment support needs
- Possible dyslexia assessment
- Previous training (ARCP data and e-portfolio)

The training and support would be in addition to the normal access to study leave, online learning, attendance at General Practice Specialty Training Programmes with other trainees, leadership and development training etc.

The emphasis of the scheme is teaching and support rather than frequent monitoring and it is expected that the PDP will be adapted as the trainee is in post, with regular reports/discussions between trainee and TPD (frequency of this would be as required to identify the trainees learning needs and then monitor progress)

HEE consider that the important element is the time before a trainee is permitted to sit the exam for the first time. The TGPT scheme requires that they will have a full year of support, assistance and training targeted to their individual needs **before** they are permitted to apply to sit the exam. They will also need to be signed off as ready to sit.

9.3 Elements of 'Gold Guide' not open to TGPT scheme

Due to the special nature of the scheme and the fact that trainees will already have exhausted the full training programme and the opportunities included within that programme, the following elements of the Gold Guide will **not** be allowable under normal circumstances for those on the TGPT scheme:

- The scheme length will be 18 months, whole time equivalent with a further six months exceptional training. Any further extensions will not be permitted. This does not include extensions for statutory reasons such as sickness or maternity leave.
- Trainees will not be permitted to work LTFT except for statutory reasons (see paragraph 8).
- To enable the trainee to focus on achieving the curriculum competences, trainees will not be permitted to apply for out of programme.
- Inter-deanery transfer (IDT) is not open to TGPT trainees given the short duration of the scheme, the time taken to develop the PDP and the eligibility requirements⁷.
- [Step on step off](#) is not open to TGPT trainees i.e. there is no deferring starting the training programme. Doctors will have a 30-month period from August 2018 to February 2021 in which to apply.

⁷ A trainee must, amongst other criteria, [have completed 9 months of training and have 12 months left](#)

10. Revalidation

Any individual participating in TGPT will be in formal training with an NTN (for a fixed programme of no more than 24 months) and as such their Responsible Officer (RO) would be the Postgraduate Dean.

As outlined in paragraph 8, a trainee on the TGPT scheme would not be expected to undertake any other work outside the targeted training scheme. As such there would be no other work outside training to be fed into the ARCP process and revalidation.

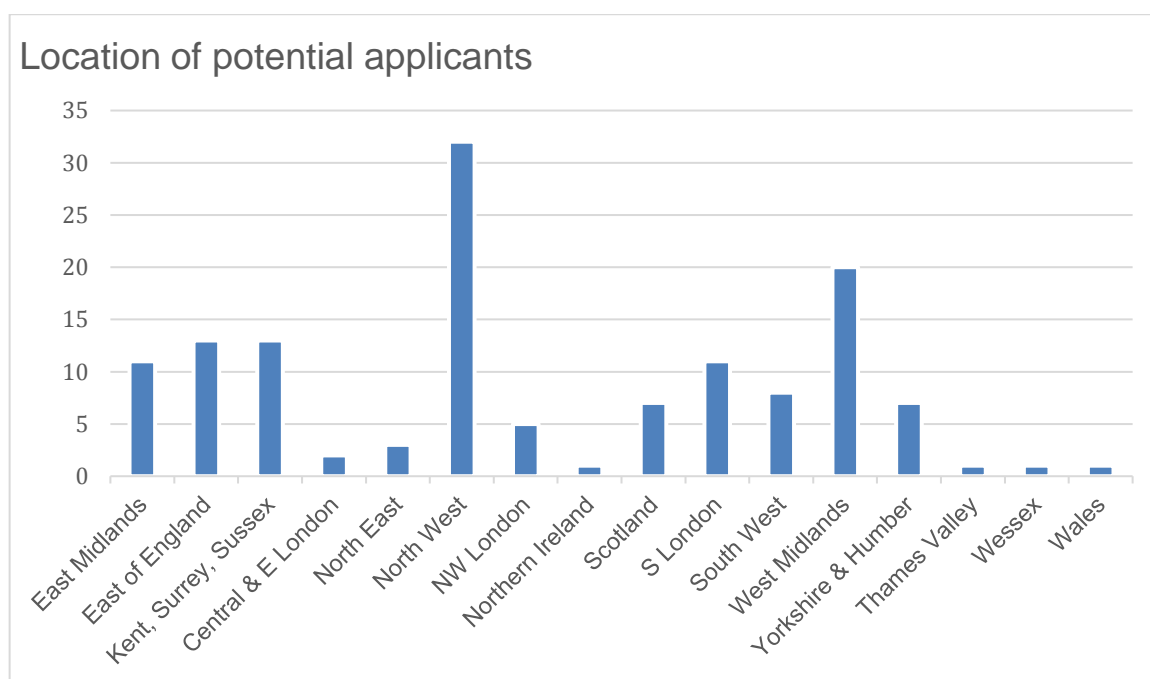
11. Data

11.1 Data access

By applying for a TGPT scheme the doctor is agreeing that ALL data relating to their previous training and examination results including feedback will be made available to the receiving HEE Local team/Deanery. This will support the development of the person specific PDP.

11.2 Numbers of eligible / interested doctors⁸

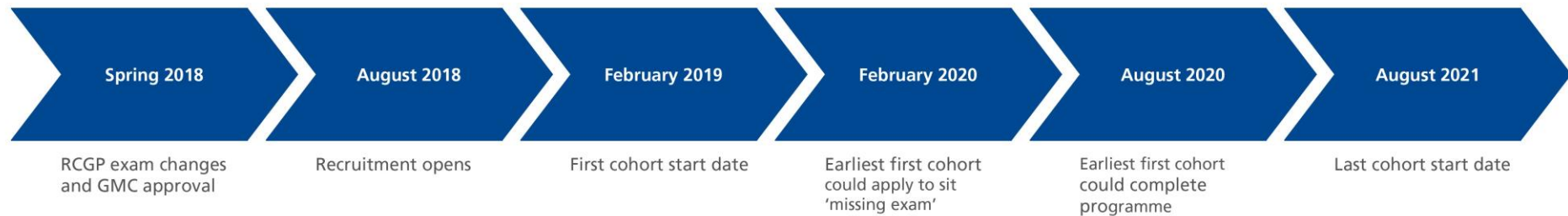
HEE has set up a register of interest which is available on the HEE [website](#). The register seeks information on which group the doctor falls into i.e. either re-entry, switching specialty or overseas trained doctor requiring top up training.



⁸ Data from Register of Interest on 24 January 2018

12. Implementation timeline

The timeline below indicates the exam change consideration and approval step together with the recruitment and exam sitting timeframes.



Targeted GP training scheme : timeline

(Subject to approval of exam changes)

March 2018