**SCOTLAND DEANERY ARCP PROCESS – 2022**

**KEY PRINCIPLES**

1. The Scotland Deanery ARCP process 2022 is based on the recommendations of the:

- *Gold Guide (Reference Guide for Postgraduate Foundation & Specialty Training in the UK: 8th edition, 2020)*

2. The Annual Review of Competence Progression (ARCP) usually takes place once per year for all trainees (including LTFT), and with no more than a maximum interval of 15 months. The Gold Guide allows for more than one ARCP within a 12-month period if required (GG 4.39).

3. If, in view of the Covid-19 pandemic, it is not possible to convene an ARCP panel then an N13 code will be entered signifying that the ARCP could not be completed due to Covid-19. The trainee will be allowed to progress to the next stage of their training when an early ARCP will be undertaken and an Action Plan and Personal Development Plan will be put in place.

4. The ARCP process is comprised of 2 parts:

i) ARCP (Virtual Desktop review by ARCP panel, trainee not in attendance)

ii) Trainee virtual meetings (trainee in attendance by telephone or videoconference (VC)): for unsatisfactory outcomes (2, 3, 4 or LAT equivalent) and Covid outcome 10.2. It is anticipated for 2022 that meetings will continue to be virtual however if COVID restrictions allow, arrangements may be possible for face to face meetings.

5. The ARCP (virtual desktop review) is a review of the documented and submitted evidence that is presented by the trainee and as such the trainee should not attend the panel. (GG 4.81)

6. The virtual trainee meetings provide an opportunity for the panel or a small number of senior educators to meet virtually with the trainee and discuss their ARCP outcome in full and provide support and direction for the trainee going forward.

7. The Deanery has created standard emails and documentation for the ARCP process which are relevant to the specific arrangements for 2022 regarding Covid-19. There should not be any requirement for standard documentation/emails to be amended unless there are unique/exceptional circumstances beyond those related to Covid-19. Modified specialty-specific evidence requirements will be outlined by the relevant Royal Colleges/ UKFPO and links (where available) will be listed on the Scotland Deanery website. Further/different evidence requirements should not be added to standard documentation/emails.

8. All trainees are required to submit their evidence, in readiness for the virtual desktop ARCP, by a specified date (the cut-off date) which will be advised by their training programme administrator. Whilst we recognise the challenges caused by the Covid-19, we request all trainees and educational supervisors work towards and meet this submission date. If there are challenges in meeting this deadline trainees should contact their training programme administrator at the earliest opportunity for advice.

9. For 2022, and to reflect the Covid-19 pandemic, Outcomes 10.1 and 10.2 that were introduced in 2020 will remain for the 2022 ARCP's. This outcome will allow trainees to progress whilst noting requirements that still need to be fulfilled (such as attainment of a professional examination).

10. In 2022, the previous process for use of outcome 5 will be reinstated i.e. when any of the requested evidence is not submitted by the specified deadline an outcome 5 will be issued.

11. Where a single outcome 5 is issued, it is viewed as a neutral outcome, or 'holding response', it is not an unsatisfactory outcome in the same way that an outcome 2, 3 or 4 is considered; although repeated outcome 5s can point towards a lack of engagement from a trainee which should raise concern. In all cases, a follow up outcome will be issued once all evidence has been submitted/ reviewed.

12. Process documents for outcome 5 and outcome 10 should be referred to. If panels or the TM administrator is unsure how to proceed, they should consult with a senior member of TM staff. Arrangements will be in place to ensure access to a senior member of TM staff during ARCPs.

13. Trainees will have been notified of dates/times by email approximately six months prior to the intended ARCP date. Due to the Covid-19 pandemic these dates may be subject to change, and trainees may be updated with a range of dates during which ARCPs will be completed, but training programme administrators will advise a date by which all ARCP outcomes will be available or the N13 code will have been entered to indicate it was not possible to convene a panel.

14. Where it is not possible to complete all ARCPs as planned, perhaps due to lack of panel capacity arising from Covid-19, priority will be given to undertaking ARCPs for those doctors in training at a critical progression point (i.e. completion of a training programme or completion of training).

**THE PROCESS**

**ARCP Panel Membership**

15. In 2022 Foundation ARCP: panel will consist of a minimum of:

- 1 x medical educator (e.g. APGD, FPD, or another appropriate medical educator as approved by the LDD);
- Lay Representative
- TM administrator.

The most senior NES medical educator will be the nominated deputy of the LDD and will chair the ARCP;

16. Core/Specialty ARCPs: panel will consist of a minimum of:

- A minimum of 2 medical educators (e.g. Programme Director, Educational Supervisor, APGD, Assistant GPD, or other appropriate medical educator as approved by the LDD);
- Lay Representative
- TM administrator.

The most senior NES medical educator will be the nominated deputy of the Lead Dean Director (LDD) and will chair the ARCP (GG 4.67);

All efforts will be made to seek an external representative, however if an external cannot be sourced the ARCP will proceed.

17. Where required, medical educators should also include:

- Defence Deanery representative for defence Deanery trainees;
- Academic training lead for academic trainees;
- Educator who can oversee dual/subspecialty training for dual/subspecialty trainees.

18. In the event that a panel has less than 2 medical educators (1 for Foundation), e.g. due to conflict of interest or last-minute cancellation, an appropriate senior Deanery educator (LDD or nominated deputy) should be secured to attend in their place.

19. The LDD (or their nominated deputy e.g. APGD, Assistant Director (GP), another appropriate medical educator as approved by the LDD) will be present at any panel where it is possible that a trainee could receive an unsatisfactory outcome. The Deanery recommends that an appropriate senior educator attends for all unsatisfactory outcomes (2, 3, 4), but regards this attendance as essential for outcomes 3 and 4 (GG 4.71). The educator does not need to have specific responsibility for that specialty to undertake this role. The LDD must be notified of all outcome 3 and 4 prior to issue.

**ARCP Panel Member Responsibilities**

20. Link to Roles and Responsibilities document. TM administrators will make this document available to ARCP panel members in advance of and at the ARCP itself.

21. All members of the panel must be trained for their role. This training should be kept up to date and refreshed every three years. (GG 4.65):

- All panel members must complete equality and diversity training.
- All panel members must complete relevant e-Learning for Healthcare modules on ARCP. Link to Further Information

22. Where a panel is constituted with the minimum number of medical educators, Deanery administration staff will check in advance if the educator's own trainees, or trainees known to them in a personal capacity, are being considered by the panel of which they are a member. Any conflicts of interest will be identified in advance and arrangements for an alternative panel member to cover reviews involving a conflict will be arranged to ensure the panel remains quorate i.e. minimum of 2 medical educators (1 for Foundation) (GG 4.79).

23. Where the panel has more than the minimum number of educators, members will be required to declare an interest if their own trainees are being considered by the panel. Where there are any concerns about satisfactory educational progress they should withdraw temporarily from the process whilst their trainee is being considered and the panel should be constituted such that in that situation it remains quorate i.e. minimum of 2 medical educators (1 for Foundation) (GG 4.79).

**EIGHT weeks prior to ARCP**

24. Eight weeks prior to the date of the ARCP (virtual desktop review), TM administrator will send out a standard email to trainees (and copy to educational supervisors). It will confirm their requirement to gather the appropriate evidence and submit it by a specified date prior to the date of the ARCP. If the pre-Covid19 email eight weeks prior to the date of the ARCP has been issued in advance of revised communications being agreed a supplementary communication will be issued clarifying arrangements for 2022 particularly in relation to amended requirements for satisfactory progress agreed by Royal Colleges/UKFPO.

25. If the notification/ supplementary communication is for a final ARCP, Deanery administration staff should add any College/other requirements to the email.

26. Each specialty/programme will have a required evidence list which will be available on the Royal College/ UKFPO website. Where available, links will be provided in emails and on the Deanery website. Separate regional requirements cannot be added.

27. Communications will include details of the standard mandatory requirements: request for trainees to check that their information held on TURAS is up to date; instruction to complete SOAR declaration; absence declaration; OOP form etc.

28. At least eight weeks prior to the date of the ARCP (desktop review), the Deanery team will initiate a SOAR declaration.

29. The SOAR declaration must be completed in the six-month period preceding the ARCP (excluding F1). If a trainee has more than one ARCP within a 12-month period, they may be required to complete more than one SOAR declaration. All trainees are encouraged to sign off their SOAR declaration as soon as possible to give their ES and TPD time to review and sign off.

30. The absence declaration must be completed for the time period since the last ARCP. If a trainee has more than one ARCP within a 12-month period, they will be required to complete an absence declaration each time. The trainee is responsible for uploading the absence declaration, where required, to the relevant portfolio.

31. Trainees must submit both the SOAR declaration and absence declaration. Failure to do so by the advised submission date will result in an Outcome 5 and the trainee will be asked to provide the information within a 2-week period which will facilitate a revised ARCP Outcome. If the SOAR declaration +/- the absence declaration is not submitted in the required timescale following issue of an Outcome 5 this will be escalated as outlined in the outcome 5 flowchart.

32. The Educational Supervisor (ES) is required to complete an ES Report as part of the trainee's evidence submission. If there are concerns about a trainee's performance (based on the available evidence), the trainee must be made aware of these concerns and they should be documented in their educational portfolio. The ES should discuss the ES report with the trainee prior to submission. The report and any discussion that takes place following its compilation must be evidence-based, timely, open and honest. If such a discussion cannot take place, it is the duty of the ES to report the reasons to the ARCP panel in advance of the desktop review.

**TWO weeks prior to ARCP**

33. The TPD, or another appropriate educator, is required to advise the Deanery team, as early as possible, if an unsatisfactory outcome is anticipated. The Deanery team will ensure that an appropriate senior educator is available to attend the desktop review (and if appropriate, trainee meetings) for outcomes 3 and 4. Where possible they will attend for outcome 2s.

34. Where it has been indicated that there may be an unsatisfactory outcome through the ARCP process, the trainee should normally be informed of the possible outcome prior to the panel meeting. (GG 4.83).

35. For foundation programmes, TM administrators will add panel details to TURAS to provide link to e-portfolio and allow pre-population of ARCP forms.

**ARCP (Desk-top Review)**

36. The objectives of the desk-top review are as follows:

37. Systematically consider the evidence as presented for a trainee against the UKFPO/ Royal College revised requirements for 2022 Foundation, specialty or sub-specialty curriculum,

assessment framework and Good Medical Practice and make a judgement based upon it so that one of the outcomes is agreed.

38. Consider and approve the adequacy of the evidence and documentation provided by the trainee, which at a minimum must consist of:

- review of the trainee's educational portfolio including a structured report from the educational supervisor(s)
- documented assessments (as required by GMC approved foundation/core/specialty curriculum);
- SOAR declaration (excluding F1);
- Deanery absence form;
- other achievements as appropriate.

39. Review details of placements, training modules etc. completed which must be recorded on the portfolio/ ARCP form, including where trainees continue to hold a training number but are out of programme.

40. Consider time out of training during the assessment period and from entry to the programme, in order to determine whether the training duration needs to be extended.

41. At the ARCP, the training programme end date or the provisional CCT/CESR(CP)/ CEGPR(CP) date should be reviewed and adjusted if necessary, taking into account the following factors (GG4.85):

- statutory leave or other absence of more than 20 (normal working) days in any year for foundation doctors – this should trigger a review by a senior medical educator to determine if trainee can progress or not. *UKFPO 2021 ARCP Guidance*
- clinical statutory leave, sickness or other absence of more than 14 (normal working) days in any year for core and specialty trainees prior agreement with the Lead Dean Director for training time to be paused.
- a change to or from LTFT training (a change to or from LTFT training during the Covid19 pandemic will not be expected to cause a change to trainee CCT date. However, opportunities for experiential learning and attainment of competencies will be considered as part of ARCP for trainee progression).
- time out of programme for experience (OOPE), time out of programme for research (OOPR), time out of programme for a career break (OOPC) or time out of programme for training (OOPT).
- rate of acquisition of competences/capabilities that might bring forwards the CCT/CESR(CP)/CEGPR(CP) date 70 | Version: GG8 incorporating the Purple Guide, 31 March 2020.
- for dual trainees or trainees undertaking sub-specialty training alongside main specialty training, whether both should continue to be pursued.
- the academic component of joint clinical/academic core or specialty programmes.
- failure to demonstrate achievement of competences/capabilities (Outcome 3) as set out in the GMC-approved curriculum and unrelated to COVID-19.
- where there have been significant deficits in the training environment beyond the control of the trainee which have impacted on the ability of the trainee to achieve anticipated competences (e.g. redeployment or service reconfiguration related to COVID-19).
- where a change in the curriculum results in a trainee requiring additional training time to complete a programme.

The adjusted date should be entered on the ARCP Outcome Form. TURAS is updated with the new date and the reason for the change.

42. Make a judgement about whether the trainee's progress has been satisfactory, and they can progress to the next level of training. This may include scenarios where a trainee is able to progress but still needs to complete activity delayed as a result of the Covid-19 pandemic (outcome 10). In such scenarios the panel must capture in an action plan/ personal development plan what the required capabilities will be that are expected to be evidenced at the next scheduled ARCP. Where applicable, record the date of progression to the next stage of training (GMC requirement).

43. WPBA requirements have been reduced/amended by the Royal Colleges and Faculties. ARCP panels should use the decision aids to make an informed judgement on what competencies/ capabilities that a trainee must acquire in their next placement. For the majority of trainees this should be manageable. However, if the panel concludes on the evidence available that the burden of required assessments/examinations would be so onerous that it would put the trainee's mental/physical health at risk they may award an outcome 10.1 and advise an early ARCP to review the trainee's wellbeing and progress.

44. Provide comment and feedback where applicable on the quality of the structured educational supervisor's report.

45.The Deanery administration team will provide panel members with reference documents: outcome descriptions, options for extensions, roles and responsibilities.

46. The panel makes its recommendation of an outcome to the responsible LDD. The LDD can intervene if appropriate.

47. TM administrator supports desk-top review by taking notes on the panel discussion in relation to unsuccessful outcomes; and recording all outcomes on TURAS, where possible during, or following the desktop review. [Bulk uploads to TURAS can aid this process]. Foundation outcomes will be recorded on e-portfolio as opposed to TURAS.

48. The ARCP Outcome Form will be completed at the desk-top review on e-portfolio or in paper format. Administrators and TPDs will have agreed arrangements for who will complete the *Supplementary documentation* section of the form – agreement is based on most suitable method for that ARCP and specialty. Paper forms can be completed by hand.

49. In the *Discussion with trainee* section, the TPD (or other medical educator if TPD is unavailable) or TM administrator should record 'trainee meeting not required' or note the date when the trainee virtual meeting (outcomes 2, 3 & 4 only) will take place. The headings underneath should be completed in relation to the panel's discussion at desk-top review.

50. Dual or subspecialties: trainees will receive two separate outcomes. Both will be recorded on TURAS.

51. TM administrators should always have access to a senior member of TM staff during ARCPs, who can be called upon to provide support as required. TM administrators will have access to a rota detailing the relevant contact for each ARCP with contact details.

**Following Desk-top Review**

52. If those in attendance have concerns about the outcomes decided upon by the panel, these will be raised, in writing, with the LDD for further consideration. The Dean may decide to establish a different panel to consider further the evidence that has been presented and the outcomes recommended (GG 4.76). On completion of any investigation, the information will be shared with QIM/QL for that specialty, who could discuss this through SQMG.

53. Trainees will be advised of their outcome through TURAS. The date when outcomes will be available will be advised to trainees by their training programme administrator.

54. Trainees will receive an automated email via TURAS detailing their outcome and notifying whether a trainee virtual meeting will be required.

55. Following the automated email, if applicable, the TM administrator will contact the trainee to inform them of arrangements for the virtual meeting and/or follow-up requirements.

56. The automated email asks the trainee to sign the ARCP outcome form (GG 4.116). The trainee is signing to demonstrate that they have been informed of the outcome, not that they agree with the outcome and this will not change the trainee's right to request a review/appeal. Trainees are required to acknowledge receipt of their outcome through training management (TPM). Trainees will be unable to access other areas of Turas until the ARCP outcome has been acknowledged.

57. The trainee will be asked to sign off the ARCP outcome form on e-portfolio; or if not available on e-portfolio, trainee will be sent a copy (paper or electronic) and asked to sign and return it (digital signatures are acceptable).

58. It is the trainee's responsibility to sign off their ARCP outcome. However, TM administrators should check that all trainees in receipt of an unsatisfactory outcome have completed the sign-off. If such a trainee has not signed off their outcome, the TM administrator should send out a reminder email. If there is no response, TM administrator should escalate to TPD (or other senior educator if the TPD is unavailable) who will then escalate to APGD/ LDD if not resolved within 2 weeks of the reminder email.

59. All trainees receiving an outcome 10.2 will have a further review/ARCP to monitor progress against the action plan which is put in place at the time the 10.2 outcome is awarded.

60. <u>Outcome 10.1 at a critical progression point</u>
At the end of core training a trainee may be awarded an outcome 10.1 if they have not acquired a mandatory requirement that has been derogated (eg exam/course). If this outcome is given the TM administrator will contact the trainee and ask if they are

1. Progressing to a higher training programme
2. Leaving the programme and will acquire missing capabilities outside of training
3. Stay in the core programme and use additional training time to acquire the missing capabilities.

The LDD or the LDD delegate will contact the trainees in category 3 and discuss if additional training time is appropriate. The options available to trainees in category 3 will vary across the Deanery and as such may not be in their current training location.

**Trainee Virtual Meetings**

61. Trainee virtual meetings (trainee in attendance) will take place **only for unsatisfactory outcomes (2, 3, 4 or LAT equivalent) and Covid outcome 10.2 in 2022**. Please refer to point 4 (ii).

62. TM administrator will support trainee virtual meetings by taking notes of discussion. Meeting notes will be signed off by the educator conducting the meeting and trainee following the meeting. If there is a disagreement regarding the discussion notes this will be escalated by the educator to the APGD (in the event that the educator is not the ARCP panel chair the panel chair will also be informed).

63. At the conclusion of the virtual meeting, TM administrators will provide, via email, standard information sheets which advise the trainee of their options following this outcome.

64. If non-educational issues are raised at the virtual meeting, for example a poor learning environment or intimidation / bullying then the educator conducting the meeting will formally write to the relevant LDD.

65. TPD's/Panels may wish to meet with other trainees but this will not form part of the ARCP process.

Appendix 1

# ARCP (Desktop Review)

Has trainee submitted all required evidence within required timescale (2 weeks before ARCP date)?

- Yes.
  - Panel reviews evidence.
  - Panel issues outcome.
  - On receipt of result, panel chair issues previously agreed follow-up outcome.
- Yes except for exam / module result.
  - Panel reviews evidence and issues outcome 5.
  - Panel records date when result will be available and proposes follow-up outcome (depending on
  - On receipt of result, panel chair issues previously agreed follow-up outcome.
- Yes except for SOAR declaration.
  - Panel reviews evidence, issues outcome 5, and agrees follow-up outcome.
  - Trainee is notified of their requirement to submit SOAR declaration within two weeks by deanery admin.
  - Is SOAR declaration completed within required timescale?
    - Yes.
      - On receipt of SOAR declaration, panel chair issues previously agreed follow-up outcome.
    - No.
      - Trainee will be invited to attend a support meeting with PG Dean or nominated deputy.
      - Panel chair will select from the following options:
      - Option 1: first time that trainee has not completed SOAR, outcome 2, 3 or 4 will be issued (according to training progression). Outcome 1 or 6 is not awarded, even if there are no progression concerns.
      - Option 2: trainee has not completed SOAR declaration on a previous occasion(s). Begin process of referral to GMC for non-engagement with revalidation.
- No. Although all evidence was submitted before the date of ARCP. This is a late submission.
  - Panel reviews evidence.
  - Is progress satisfactory?
    - Yes.
      - Panel issues outcome 5 and agrees follow-up outcome.
      - Outcome 5 is recorded on portfolio and Turas.
      - Follow-up outcome is recorded on portfolio and Turas on the next available date.
      - [This is an IT requirement: it is not possible to record two outcomes on the
    - No.
      - Panel issues ARCP outcome 2, 3 or 4.
      - Face-to-face meeting is arranged as per standard ARCP process.
      - [There is no need for an outcome 5 if the panel has evidence of
- No.
  - Can panel make a prospective decision on ARCP outcome? (based on available evidence)
    - Yes, and panel decision is that progress is not satisfactory.
      - or
      - There is no evidence - trainee has not engaged in process.
      - Panel issues ARCP outcome 2, 3 or 4.
      - Face-to-face meeting is arranged as per standard ARCP process.
    - Yes, assuming that required evidence will be submitted on time, progress will be satisfactory.
      - Panel issues outcome 5 and agrees what outstanding evidence is required from trainee and the timescale in which it must be provided (normally two weeks, but can be up to eight weeks in exceptional circumstances).
      - Trainee will be notified that failure to produce evidence within the agreed timescale will result in issue of an
      - Is outstanding evidence received within required timescale?
        - Yes.
          - Panel chair issues satisfactory outcome.
        - No.
          - Panel will reconvene (could be virtually). Follow-up outcome 2, 3 or 4 will be issued.
          - Face-to-face meeting is arranged as per standard ARCP process.
    - No [this situation should be rare]. Panel cannot make a statement on progress due to the nature of the incomplete evidence.
      - Panel issues outcome 5 and agrees what outstanding evidence is required from trainee and the timescale in which it must be provided (normally two weeks, but can be up to eight weeks in exceptional circumstances).
      - Trainee will be notified that failure to produce evidence within the agreed timescale will result in
      - Is outstanding evidence received within required timescale?
        - No.
          - Panel will reconvene (could be virtually). Follow-up outcome 2, 3 or 4 will be issued.
          - Face-to-face meeting is arranged as per standard ARCP process.
        - Yes.
          - Panel will reconvene (could be virtually). Follow-up outcome will be issued.
          - Face-to-face meeting is arranged if required as per standard ARCP process.

Appendix 2

**Outcome 10 flowchart**
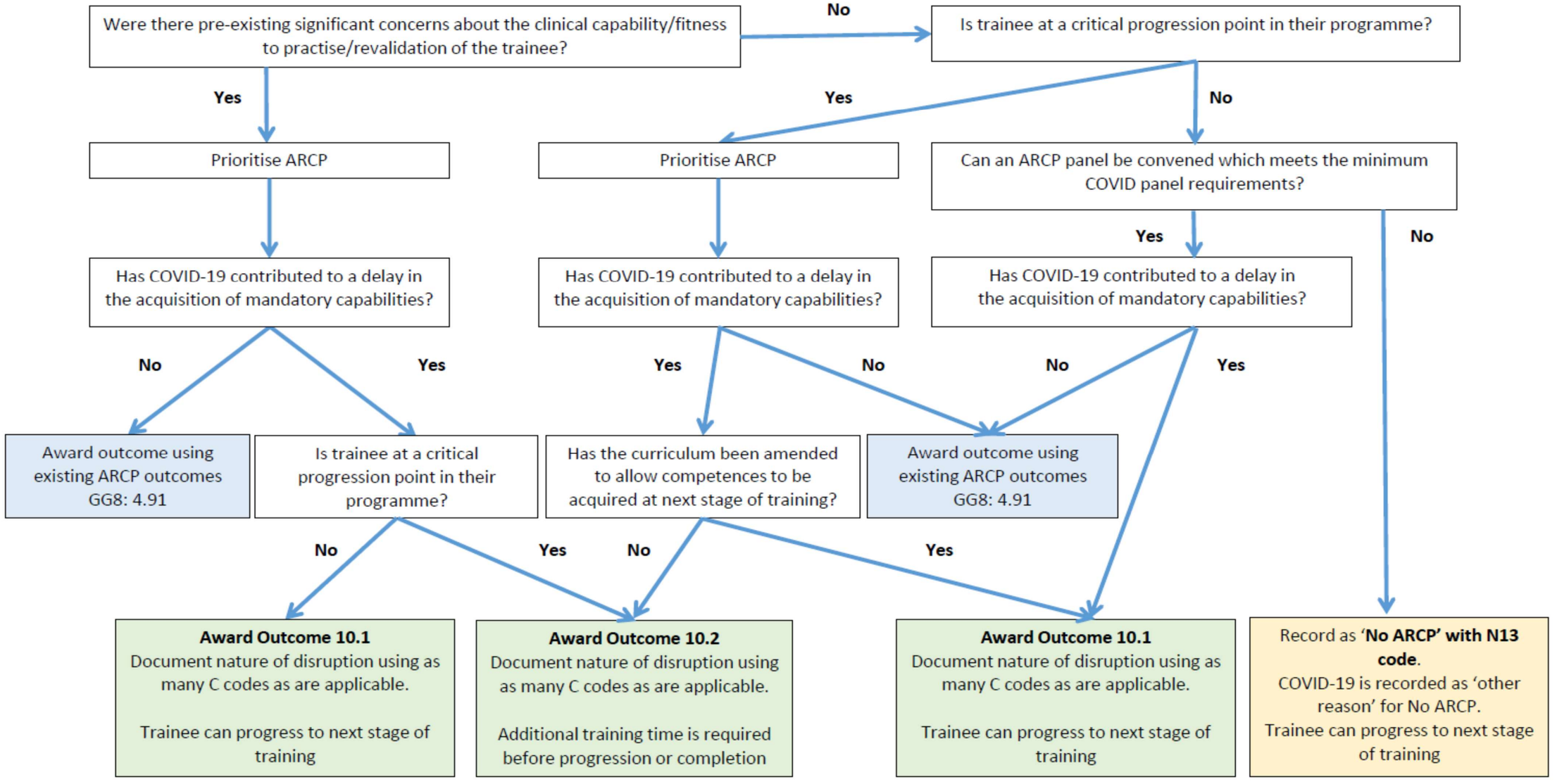
Figure 1