## Honorary Contract and Individual Educational Agreement

## Between GP specialty trainees (GPSTs), employed under the lead Single Employer Acute Trust, and GP Educational Supervisors (ES) and Clinical Supervisors (CS)

### Guidelines covering the training programme attached to:

|  |  |
| --- | --- |
| Name of Educational Supervisor or Clinical Supervisor - if different to ES |  |
| Name of GP training practice |  |
| Address of GP training practice |  |

|  |  |
| --- | --- |
| Name of GP specialty trainee |  |
| GMC registration number |  |
| GPST training grade |  |
| Name of Single Employer Acute Trust  |  |
| Dates of GP placement | From: | To: |

|  |  |
| --- | --- |
| Name of Training Programme Director |  |
| Name of Patch Associate GP Dean |  |
| Head of GP School | Dr Liz Norris |
| Primary Care Dean | Professor Chris Warwick |
| Postgraduate Medical Dean (and Responsible Office) | Professor Graeme Dewhurst |

**The terms and conditions of this honorary contract are as follows:**

1. All medical practitioners covered by this contract will be fully registered with the General Medical Council (GMC).
2. GP Educational Supervisors (ES) and Clinical Supervisors (CS) will be so recognized by HEE KSS Primary Care Department and the GMC as appropriate.
3. This contract will cover that part of GP specialty training that takes place in a GP placement in any part of a GP training programme and will regulate the General Practice component of that programme. It will form part of the supplementary regulations enabling that training period.
4. This document will act as a supplementary/honorary contract between the above parties. The GPSTs principal employment contract will be held by the Lead Single Employer at the Acute Trust.
5. The GP Practice will host the GPST for the duration of this period of training in the GP placement in accordance with and sign the Service Level Agreement with HEE KSS.

**General**

1. The ES/CS will supervise and organise the period of training within General Practice for the purpose of teaching and advising on all matters appertaining to GP training for the following period: From…….. To……….
2. The salary of the GPST will be paid by the Lead Single Employer Acute Trust at the agreed rates as determined by the DDRB.
3. Both parties will have appropriate medical indemnity.
4. Working hours:

4a. The hours worked by the GPST in the practice, within an Urgent Care setting and the regular periods of tuition and assessment will be agreed between the ES/CS and the GPST, yet must comply with COGPED guidance of 40 hours per week (of which 12 hours should be educational time). This will also incorporate any educational programme organised or advised by HEE KSS.

4b. The hours of work shall comply with the European Working Time Directive legislation, or any subsequent Working Time legislation.

1. Leave:

5a. The GPST shall be entitled to the appropriate annual leave during a 12-month period in accordance with the Trust policy (pro rata for shorter periods), and also statutory and general national holidays or days in lieu as determined and agreed by their employing Trust. However, the GPST is required to take their proportion of annual leave related to the GP placement during the GP placement (after negotiation with GP Trainer). There is no option to roll over annual leave from one placement to other one. The ES/CS will complete the absence returns for the Single Employer Acute Trust on a monthly basis.

5b. The GPST is entitled to Approved Study Leave as appropriate and agreed with their ES, Training Programme Director (TPD) and the latest [HEE guidance](https://lasepgmdesupport.hee.nhs.uk/support/home?studyleave).

5c. If the GPST is absent due to sickness, they must inform the Single Employer Acute Trust **and** the GP Practice as early as possible. Statutory documentation shall be provided to their employing Trust.

5d. Any accident or injury arising out of the GPST’s employment in the Practice must be reported to the GP Practice Manager and their ES/CS, as well as the Single Employer Acute Trust.

5e. A GPST in a GP placement who goes absent on maternity leave will comply with the terms of their Principal Contract with the Acute Trust.

1. Training:

6a. The GPST shall undertake to care for, be responsible for and if necessary, replace and return any equipment that may have been supplied by the practice at the end of the training placement.

6b. The GPST will apply himself/herself diligently to the educational programme and service commitments and other matter as directed by the ES/CS in accordance with the requirements of the Royal College of General Practitioners (RCGP) and HEE KSS GP School.

6c. The GPST will make suitable provision for transporting themselves in order to carry out the domiciliary aspects of above duties satisfactorily. Expenses for this (car mileage expenses) will be claimed from the Single Employer Acute Trust according to the appropriate reimbursement policy after being validated and signed off by the ES/CS.

1. Any dispute between the GPST and the ES/CS should be brought to the attention of the GP TPD, and the Single Employer Acute Trust in the first instance. If necessary any unresolved dispute will be investigated through the appropriate GP School channels.
2. The terms of this contract will be subject to the terms of service for doctors as set out from time to time in the National Health Service (General Medical and Pharmaceutical Services) Regulations.

**GP specialist training educational guidelines**

**Introduction**

This guide has been written to help clarify the relationship between CSs, ESs and others involved in General Practice education and GP specialty trainees (GPST’s). It defines what is expected of a Doctor in training and what that Doctor can reasonably expect from their ES/CS, training practice and their specialty training programme.

The document is congruent with national guidance on generic standards for training as defined by GMC and The Guidance to Postgraduate Specialty Training in the UK (The Gold Guide) and as developed and administered by HEE KSS. These guidelines emphasize the importance of educational co-ordination between all those involved in the educational process.

**Overview of GP specialty training**

The training programme for a career in general practice is a minimum three years. During this time the GPST will undertake a series of hospital attachments and a period of no less than one-year in a General Practice placement. Any GP placement will be with a ES/CS (a GP accredited through processes developed by HEE KSS, in accordance with the standards for training as laid down by the GMC, to train GPSTs in general practice).

During each hospital attachment a GPST will have a Clinical Supervisor who will:

* Hold formative meetings with the GPST at the beginning, middle and end of the placement;
* oversee the day to day work of the GPST;
* offer a level of supervision necessary to the experience and competency level of the trainee;
* maintain the safety of patients and the trainee;
* undertake assessments (and liaise with others who may undertake the assessments) as part of the work place based assessment component of the MRCGP;
* complete a report on the GPST at the end of the attachment (Clinical Supervisor's Report);
* undertake three yearly equality and diversity training.

Throughout the training envelope a GPST will also have an Educational Supervisor who will:

* Oversee the progress of a GPST and advise on his or her learning needs;
* assist the GPST in developing his or her learning objectives and Personal Development Plan;
* hold a structured meeting (Educational Supervisor Review) with the GPST every six- months to review his or her progress towards the thirteen professional capability areas described by the RCGP as being essential for independent practice as a GP. The use of constructive feedback to highlight strengths and identify areas for further development;
* regularly review the shared data entered into the e-Portfolio and provide feedback to help develop the GPSTs learning
* arrange regular exposure (normally a day in every four-month hospital post) to Primary Care during the hospital placements;
* undertake three yearly equality and diversity training.

It will be usual to have the same ES throughout the GPST’s training programme. If this is not possible, the GPST may be appointed a different ES and there will be a full handover of information relating to that GPST’s progress so far.

In a General Practice post the GP ES/CS will:

* Provide the GPST with an opportunity to develop his or her skills in a safe, educationally supportive environment;
* arrange an induction programme to General Practice;
* develop an educational plan based on the GPSTs progress to date taking account of his or her preferred learning style;
* facilitate the provision of 12 hours educational time per week, within which would be an expected minimum three-hours protected education with an ES/CS (if ST1 or ST2 this may be held outside of the practice, within small groups);
* assist the GPST in arranging his or her Urgent and Unscheduled Care training and review his or her progress in obtaining capabilities in this aspect of General Practice work;
* undertake assessments (and liaise with others who may undertake the assessments) as part of the workplace-based assessment component of the MRCGP.

The GP specialty programme will be overseen locally by GP Training Programme Directors (TPDs) who are responsible for the delivery and management of the GP specialty programme.

The TPD will:

* Assist the GPST in the induction process to the Trust and to GP specialist training;
* appoint an ES to each GPST;
* assist the GPSTs in developing peer support learning sets whilst they work in hospital;
* arrange study days in General Practice and HEE KSS supported study days with topics relevant to a career in GP;
* coordinate and facilitate the delivery of a structured educational programme when the GPST is in a General Practice placement;
* The **Primary Care Dean and Head of GP School** will be responsible for ensuring that the educational personnel and educational activities described above are provided.

**Problems arising during training**

All processes in the GP specialty training programme should, in accordance with guidance from the GMC be open, transparent and accountable.

GPSTs and their supervisors (both Clinical and Educational) are expected to discuss any problems that may occur during training and work together to resolve any difficulties.

Where problems cannot be resolved both parties should seek guidance promptly from the TPDs and the responsible Patch Associate GP Dean (PAD) if appropriate. Both the PAD and TPDs will explore the problem and seek to resolve this according to the appropriate educational guidelines as determined by the Gold Guide and HEE KSS “Trainee Support for GP Specialty”.

**Changes in circumstances**

There are occasions when it is deemed necessary by the GP School for a GPST to move location or they are eligible to change from full time to part time working. The relevant CS/ES or Human Resources Department of an employing Trust will discuss with the TPD who will then involve the appropriate members of the GP School to work with the GPST to manage any potential changes. Those involved directly with the GPST will continue to support the GPST to ensure their educational progress is maintained during this period of change.

Note: a different nationally agreed process applies to GPSTs who wish to transfer between Deaneries for personal reasons.

**Professional duties**

As a Doctor the GPST must have at the forefront of his or her professional practice the principles of Good Medical Practice for the benefit of safe patient care. GPSTs should be aware that Good Medical Practice (2013) requires doctors to keep their knowledge and skills up to date throughout their working lives.

As a Doctor the GPST should ensure that they will give care to patients responsive to their needs, that is equitable, respects human rights, challenges discrimination, promotes equality and maintains the dignity of patients and carers.

The GPST should acknowledge that as an employee within a health care organisation he or she accepts the responsibility to work effectively as an employee for that organisation. This includes honoring contractual obligations as defined in the contract of employment, by participating in work place based assessment (and appraisal) and by agreeing to the need to share information about his or her performance as a doctor in training with other employers involved in his or her training and with the Postgraduate Dean of HEE KSS.

The GPST must support the development and evaluation of their training programme by actively participating in the national annual GMC trainee survey and HEE KSS GP School’s evaluative processes.

**Supervision of training in General Practice**

The ES/CS or a named deputy (another GP) will normally be available on site during the time the GPST is consulting with patients and be available by phone when the GPST is seeing patients at home or at other out-of-practice locations during the working day. The degree of closeness of support will normally be related to the GPST’s level of experience and will be negotiated and agreed by the ES/CS and GPST. Clear information on how the GPST can access this support must be made available.

The GPST should recognise and work within his or her level of competence. The GPST should seek further help and support for the appropriate clinical management of patients when he or she deems this appropriate, and particularly if there are any concerns relating to patient safety.

**Educational planning and provision**

Throughout the training programme the GPST will be working towards the learning outcomes defined in the [GP curriculum](https://www.rcgp.org.uk/training-exams/training/gp-curriculum-overview.aspx). This curriculum has been developed by the Royal College of General Practitioners (RCGP) – it is a national curriculum designed to address the wide-ranging knowledge, capabilities, clinical and professional attitudes considered appropriate for a doctor intending to undertake practice in the contemporary NHS. The framework draws on the European definition of general practice and is mapped to the guidelines in the GMC’s “Good Medical Practice”.

**Responsibilities of the GPST**

The GP specialty training programme is designed to be learner led. Responsibility for progression is in part the responsibility of the GPST. GPSTs need to use the training resources available optimally in order to develop the capabilities required of a general practitioner to the standards set by the RCGP as contained in the GP curriculum. Failure to do so may have an impact on planned progression through the programme for the GPST.

GPSTs need to be open to receiving constructive feedback about their performance and practice and be able to understand and use a range of learning styles. The training programme is not one of didactic teaching, but one of active facilitated learning.

GPSTs need to maintain regular contact with the ES, TPD and the GP School by responding promptly to communications from them, usually through email correspondence.

**Out of Programme Experience (OOPE)**

If developmental areas are identified in the GPST’s knowledge and skills that might best be addressed by attending hospital out-patient sessions or through other experiences, then the ES will help facilitate this and release the GPST to attend these sessions. Use of the personal educational time would be appropriate for such experiential learning. The ES will monitor the learning gained and the continuing appropriateness of the sessions.

These sessions are distinct from an Integrated Training Placement (ITP) where the GPST is hosted in a GP practice but will spend (normally) four to six sessions working in a hospital department or community post linked to the GP Curriculum.

**Study leave**

GPSTs are entitled to 30 days study leave per year when in full time employment. The arrangement of this is described in the HEE KSS document ‘Guidance to Study Leave for Specialty Trainees’.

**Out of Hours (OOH) / Urgent and Unscheduled Care (UUSC)**

GPSTs are required to undertake work in Urgent and Unscheduled Care settings, often, but not confined to within the service of an OOH provider organisation. These placements need to provide sufficient experience for the GPST to develop capabilities to enable them to work independently in UUSC settings once they have completed their training. Please see the COGPED document [‘Supporting the Educational Attainment of Urgent and Unscheduled Care Capabilities in General Practice Specialty Training](https://www.rcgp.org.uk/training-exams/training/mrcgp-workplace-based-assessment-wpba/urgent-and-unscheduled-care.aspx)’ for further details.

Responsibilities of GPST:

* To organise the sessions and work in the an UUSC setting under supervision. This work in acquiring UUSC capabilities is part of the normal contract of employment;
* to maintain the portfolio of evidence (using the e-Portfolio and a UUSC passport) including their reflection on clinical encounters, professional conversations with their UUSC supervisors, relevant courses or reading and any other naturally occurring evidence.

Role of the Educational Supervisor:

* The ES will help a GPST prepare for working in the UUSC environment;
* the ES will debrief the GPST following their OOH sessions and review the record of training entered in the e portfolio to identify the learning made, areas for further development and will monitor the quality of the experience;
* the ES will review regularly the level of supervision the GPST requires by the UUSC Clinical Supervisor and advise the trainee of the level of supervision required;
* the ES will evaluate the evidence from the e-Portfolio and will confirm when he/she is satisfied the specific capabilities have been achieved. This needs to be declared at the final ESR prior to achieving CCT.

**Successful completion of GP training**

A GPST will need to undertake and pass all components of the MRCGP before they can apply for a Certificate of Completion of Training (CCT) from the GMC or a Statement of Eligibility for the GP Register (CEGPR or Article 11 application).

The components of the MRCGP are:

* The Applied Knowledge Test (AKT) administered by the RCGP and undertaken in the final GP placement;
* the Clinical Skills Assessment (CSA) administered by the RCGP and undertaken in the final GP placement;
* [Work Place-Based Assessment (WPBA)](https://www.rcgp.org.uk/training-exams/training/mrcgp-workplace-based-assessment-wpba.aspx) – a process managed by the GP School which is undertaken throughout the whole training programme, consisting of formative assessments including case based discussion (CbD) observation of consultations (MiniCex/COT), multi-source feedback and patient satisfaction questionnaire.

Responsibilities of the GPST:

* To be responsible for his or her learning and managing the process of working towards his or her PDP;
* to ensure sufficient assessments are completed in time for the six monthly reviews with the ES and to satisfy the requirements of the MRCGP;
* to participate actively in the appraisal and assessment process;
* to ensure that up to date records of learning are kept though the e-Portfolio, which underpins the training process;
* to ensure that the AKT and CSA are planned in advance and taken at appropriate times in relation to stage of training and progress in discussion with their ES;
* to reflect critically on his or her own performance and to alert their ES/TPD of any problems that might adversely affect their performance e.g. illness or other significant life events
* to ensure that the GP School receives a completed Form R and self-declaration form prior to the Annual Review of Competency Progression (ARCP).

Role of the Educational Supervisor:

* To liaise with and involve all appropriate support for a GPST in situations where the educational progress of the GPST gives cause for concern using the HE EKSS Policy Guidelines – The Trainee in Difficulty;
* to ensure that all required WPBA is in place and, for final ESR in preparation of CCT, ensure that the trainee has reached all required capabilities and graded them as Competent for Licensing if felt appropriate to do so.

Role of the Training Programme Director/GP School:

* To provide an induction to WPBA for GPSTs;
* to ensure CS/ES receive training in the use of the assessment tools;
* to support GPSTs in both the understanding and preparation of the requirements of the CSA and facilitate the GPST when organising the time out required to sit the assessments;
* to review the progress of each GPST annually through the ARCP process and support the process of making a decision on the continuation of planned training based on the evidence offered as to whether a GPST has attained capability in all the appropriate areas.

**Revalidation**

Doctors in training will be revalidated by the GMC at five year after full registration with the GMC or at CCT whichever is the soonest (however, where a trainee is revalidated at five years, they will be revalidated again at CCT).

Trainees need to be engaged in and meeting the assessments and curriculum requirements of the training programme and will be in regular discussion with the ES about progress and outstanding learning needs. These discussions should include summarising and reflecting on strengths and weaknesses and significant achievements or difficulties, which will usually encompass information on significant events, and complaints and compliments.

This national process requires the HEE KSS GP School to collect data from the trainee, the employer(s) and ES in order to inform the revalidation process through the ARCP. This information will be provided under three headings:

* Conduct/capability investigation;
* serious untoward incident (SUI);
* complaints.

Responsibilities of the GPST:

* To fully engage in meeting the assessments and curriculum requirements;
* to reflect on strengths and weaknesses and significant events, complaints or compliments in the e-Portfolio;
* to complete the Enhanced Form R and submit this annually prior to the ARCP to the GP School.

Responsibilities of the Educational Supervisor:

* To provide feedback to the trainee on their strengths and weaknesses;
* to report any SUIs to the PAD;
* to complete the Revalidation section of the ES Review and report on fitness to practice issues and any known unresolved concerns.

**Practice meetings**

The ES/CS is expected to allow GPSTs access to clinical and appropriate business meetings within the practice as part of the educational process.

The GPST is expected to attend all relevant practice based clinical meetings as agreed with the ES/CS. GPSTs will ensure that all information covered in these meetings will be treated confidentially, both in relation to information relating to the practice and its staff and patients.

**Resources for learning**

The ES/CS and the training practice will provide the necessary equipment needed for the GPST to carry out his or her clinical work effectively and appropriately.

The practice will provide effective and easy access to the internet and appropriate written materials to support the educational process and meet the needs of the GPST. The ES/CS should be aware of other resources that can be accessed by the GPST and the processes required to utilize the service.

The GPST will respect the property provided by the practice, suggest how the provision of resources may be improved, and ensure the safe return of all equipment and other materials.

The Trust educational facilities also provide access to a range of online and textbook facilities which are open to use by GPSTs.

**Career guidance**

The ES/CS will assist the GPST, where appropriate with issues relating to career guidance and support and involve the TPDs where appropriate.

The TPDs will also assist in giving career advice and ensure that those giving this advice are fully familiar with the career options in General Practice, and are able to provide up to date information regarding these or identify other individuals within HEE KSS who can provide appropriate advice.

We have read and understand the terms of this honorary contract and we the undersigned agree to do our best to fulfill the commitments as outlined in these educational guidelines.

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| --- | --- | --- |
| Name of GPST |  |  |
| Signature |  | Date: |
| Name of Educational Supervisor |  |  |
| Signature |  | Date: |