The UK Foundation Programme Office

Guide to the Foundation Annual Review of Competence Progression (ARCP) Process – 2017

Guide to the foundation ARCP processes

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Produced by:

UKFPO Clinical Advisor: Dr Clare Van Hamel.

ARCP Advisor: Mrs Angela Burton.

Introduction:

Foundation Annual Review of Competence Progression (ARCP)

Aligning to processes used within core/specialty training, the *FP Curriculum* and the *FP Reference Guide* introduced the Annual Review of Competence Progression (ARCP) process into the Foundation Programme.

ARCP processes serve to ensure there is a formal, consistent and robust mechanism for annual review of each doctor's achievement of competence and progression into the next stage of training. Approximately 7,600 F1 doctors and 7,600 F2 doctors will prepare their evidence and be subject to this annual process.

In addition, an effective ARCP process will ensure that sign-off is a transparent and fair process which will contribute to improving patient safety and the quality of care given by doctors.

Benefits to foundation doctors include identification of their learning needs, areas for development, and areas of excellence and the process should provide useful, structured feedback.

The main intended audience of this ARCP guide is the foundation school/educational faculty; although foundation doctors may also find this resource useful. This document is not exhaustive, but provides a good starting point to find out more about the ARCP process and signposts to more detailed useful resources that you may wish to consider.

In addition to this guide, the UKFPO has produced other sources of information, including:
ARCP Information sheet for panel chair
ARCP Information sheet for panel member
ARCP Information sheet for clinical supervisor
ARCP Information sheet for educational supervisor
ARCP Information sheet for e-portfolio administrator

Please visit the UKFPO's ARCP webpage for full details.

For full and complete details about the foundation ARCP processes and framework, please always refer to page 51 - 69 of the *FP Reference Guide 2016*.

We hope that you find this guide useful and welcome any feedback for improvement. Please contact: helpdesk@foundationprogramme.nhs.uk.

Overview of foundation ARCP (principles and processes)

What is ARCP?

Annual Review of Competence Progression (ARCP) is a process that provides a formal and structured review of evidence to monitor a doctor's progress throughout each stage of medical training.

It protects patients and assures foundation doctors, foundation schools, employers, and the public that doctors are receiving appropriate experience and training required to achieve competence and meet all of the required foundation professional capabilities.

ARCP review is not an additional method of assessment.

Basic constitution of foundation ARCP model

Table 1 uses the basic '5W' theory (who, what, when, where and why) to provide an overview of the ARCP constitution within foundation training.

Table 1: 5w's of foundation ARCP

Who	Key stakeholders involved in ARCP include: • The foundation doctor • Clinical and educational supervisors • ARCP Panel (FTPD/T as chair, plus two other members) • Other members within the FP educational faculty
What	To prepare and conduct a review of every foundation doctor's achievements and progression, using evidence within the e-portfolio and other resources. The review is designed to assign an ARCP outcome which either recommends to the FSD (for F1) and PG Dean/other (F2) that the doctor has/has not met the requirements for satisfactory completion of F1/F2.
Why	To align with proven processes within specialty, ARCP provides a clear, transparent, robust and fair process for sign-off.
Where	All ARCP outcomes are to be recorded in the e-portfolio. The ARCP review of e-portfolio evidence can be conducted remotely or face to face. Foundation schools will need to manage the logistics, operational detail and timetables locally. Collaborative working between foundation schools and the HEE local office/Trusts/LEPs is strongly recommended.
When	The 'A' in ARCP = Annual! A clear timetable is required to ensure that every foundation doctor is subject to ARCP towards the end of the F1 and F2 year. Reviews can be conducted more frequently if there are concerns or otherwise considered appropriate.

Principles of ARCP
All foundation schools/local education providers conducting ARCP reviews must remember and embed the following principles into working practice, thus making ARCP:

- Evidence-based
- Systematic
- Visible and open to audit
- Based upon explicit standards
- Consistent and reliable
- Credible and defendable.

How does the ARCP process work?
Every foundation doctor (regardless of training status) must be subject to an Annual Review of Competence Progression. The annual review typically takes place towards the end of the F1/F2 training year which concludes in July. Schools may have to adjust the timetable accordingly and conduct additional ARCP reviews i.e. on a pro-rata basis, for doctors who train less than full-time (LTFT); are out of phase; or are not actively in the programme at the time of the annual review (e.g. maternity leave). Please see page 17 for details on how to record these foundation doctors.

Every F2 is required to participate in the GMC revalidation process which includes submission of details of any significant events, and any health or probity concerns. The GMC also recommends (but does not mandate) the same participation and information collecting for F1s. Where possible, the UKFPO's FP Curriculum Delivery Group has embedded the GMC revalidation questions into the ARCP process to aid monitoring and reporting of data.

Foundation schools are charged with implementing and timetabling an ARCP review process for all foundation doctors. The following information is provided as an overview of the ARCP process:

- Page 7 provides a detailed text-based account of the process
- Pages 9 and 10 offer an overview of the process and outcomes using a flow diagram structures for F1 and F2.

It is important to note that this guide is not exhaustive and cannot be a substitute for reading Page 51 - 70 of the FP Reference Guide 2016 when designing local ARCP processes and timetables!

Overview of the ARCP process:

1. At the beginning of F1/F2 (and at the start of each placement), every foundation doctor, in collaboration with their supervisor, should create a PDP to identify specific placement and career objectives.

2. Throughout F1/F2: regular review of the curriculum and the requirements for satisfactory completion of F1/F2 will help to identify progress and any evidence required to meet all outcomes at year end. Gathering of evidence and utilising the e-portfolio on a continuous basis is vital to aid a smooth ARCP review. This includes timely submission of End of Placement Reports by the educational and clinical supervisors.

3. Towards the end of the F1/F2 year: The FTPD/T (acting on behalf of the foundation school) should lead the ARCP process. This includes establishing trained ARCP panels and making clear the local arrangements to review the necessary evidence from foundation doctors. A foundation school ARCP timetable should be published. The timetable must provide foundation doctor with at least six weeks' notice so they can check their e-portfolio and meet with their educational supervisors to complete the required educational supervisor's end of year report and discuss the likely ARCP outcome. Any indication that the doctor is not likely to receive a satisfactory ARCP outcome should be acknowledged during this meeting and the doctor should be notified.

4. At the end of F1/F2: An ARCP panel is convened (please see page 11 for full details of the panel). The panel may benefit from prior administrative support such as Pre ARCP 'checklists' and access to the Foundation Professional Capabilities to benchmark evidence against the requirements for satisfactory completion of F1/F2. The ARCP review is conducted and the outcome recorded by means of the FTPD/T (Chair of the panel) completing an 'F1/F2 ARCP Outcome Report Form' within the e-portfolio. (Please note: more than one ARCP review may be required, however there should only be one ARCP outcome form per ARCP review)

5. Following the ARCP review: The foundation doctor must be informed of the ARCP outcome and should electronically sign the ARCP outcome report within 10 days of the panel meeting.

6. Depending on the ARCP (please see page 16 for ARCP Outcomes) outcome assigned, different actions will be required. Foundation schools will need to consider the following scenarios/actions and account for these within the ARCP timetable:

- At least six weeks' notice must be given for the foundation doctor to finalise their e-portfolio.
- Processes and time required for FSD (for F1) and PG Dean/other authorised signatory (for F2) to review the ARCP outcomes and sign/issue the Foundation Year 1 Certificate of Completion (F1CC) or Foundation Programme Certificate of Completion (FPCC).
  IMPORTANT: There is a national timetable for the signing/issuing of the F1CC which should be considered.
- Processes and time to manage appeals against ARCP outcomes 3 and 4
- To allow sufficient time to discuss, agree and organise any extension to Foundation Programme training (Outcome 3)
- Time to report all outcome 4's to the UK medical school, the employer and the GMC.

- Scheduling of further/additional ARCP review dates. For example those doctors who presented incomplete evidence and will be subject to another review (Outcome 5)
- Further ARCP review dates for those doctors who train LTFT, are out of phase or are not actively undertaking the programme at time of the ‘annual’ ARCP review (Outcome: ‘Other’ plus explanatory N code).

Overview of F1 ARCP Process

Throughout F1

- Assessments, supervised learning events, reflections and meetings are conducted as per the FP Curriculum and Ref Guide 2016 framework.
- All evidence contemporaneously recorded within the e-portfolio.

Towards the end of F1 / preparing for ARCP

- Foundation schools to publish ARCP timetable (min. 6 weeks for F1s to finalise e-portfolio evidence) whilst also establishing members for an ARCP panel.

ARCP review

- Every F1 doctors' e-portfolio is subject to ARCP review. The panel completes an 'ARCP Outcome' form which details the review and recommends an ARCP outcome.

Outcome 1
Recommended for sign-off

(Post ARCP review)

•Foundation doctor notified of ARCP outcome and doctor signs ARCP outcome form.

•Foundation School Director to consider ARCP outcome with view of issuing the certificate of 'Attainment of F1 Competence' (AF1C).

•Please see the 2014 timetable for issuing the AF1C.

(*FP Ref Guide 2016*: 7.38 -7.40)

Outcome 3
Inadequate progress – additional training time required

(Post ARCP review)

•Foundation doctor notified of ARCP outcome and doctor signs ARCP outcome form.

•Foundation School Director to arrange remedial training (*FP Ref Guide 2016:* 7.46 – 7.49)

Appeal against an outcome 3

• Foundation doctors can only appeal if they can demonstrate that evidence confirming they had met all of the required outcomes contained in the Curriculum was available to the ARCP panel, by the specified date, and was not considered appropriately.

• Outcome 3 appeals will be heard by the responsible foundation school.

(*FP Ref Guide 2016:* 7.54 – 7.56)

Outcome 4
Released from training programme

Post ARCP review

•Foundation doctor notified of ARCP outcome and doctor signs ARCP outcome form.

•The graduating UK medical school and the foundation school must inform the GMC of an outcome 4.

•The medical school (for UK grads) or foundation school (for non-UK grads) should write to the F1 doctor setting out the process for an appeal.

•The foundation school, (in partnership with the medical school for UK grads) should offer the F1 doctor career counseling.

(*FP Ref Guide 2016:* 7.41 – 7.75)

Appeal against ARCP an outcome 4

•Foundation doctors can only appeal against the processes that lead to the recommendation to end F1 training, not the educational decision itself.

•For UK graduates, the appeal will normally be heard by the university of graduation.

•Non-UK graduates will have their appeal heard by their responsible foundation school.

(*FP Ref Guide 2016:* 7.67 -7.71)

Outcome 5
Incomplete evidence presented – additional training may be required

Post ARCP review

•Foundation doctor notified of ARCP outcome and doctors sign ARCP outcome form.

•A further ARCP review is scheduled.

•Foundation doctor updates e-portfolio with adequate evidence and explains (in writing) the reasons for the deficiencies to the panel.

(*FP Ref Guide 2016*: 7.31)

Other
(E.g. doctor training less than full time, on long term sick etc.)

Post ARCP review

•Foundation doctor notified of ARCP outcome and doctors sign ARCP outcome form.

•A further ARCP review is scheduled.

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INFO

Please refer to the FP Reference Guide 2016 for full details of the ARCP process.

Overview of F2 ARCP Process

Throughout F2

- Assessments, supervised learning events, reflections and meetings are conducted as per the FP Curriculum and Ref Guide 2016 framework.
- All evidence contemporaneously recorded within the e-portfolio.

Towards the end of F2 / preparing for ARCP

- Foundation schools to publish ARCP timetable (min. 6 weeks for F2s to finalise e-portfolio evidence) whilst also establishing members of the ARCP panels.

ARCP review

Every F2 doctors' e-portfolio is subject ARCP review. The panel completes an 'ARCP Outcome' form which details the review and recommends an ARCP outcome .

Outcome 3

Inadequate progress – additional training time required

Post ARCP review

•Foundation doctor notified of ARCP outcome and doctor signs ARCP outcome form.

•FSD to arrange remedial training

(*FP Ref Guide 2016:* 7.28 & 7.115 – 7.123)

Outcome 4

Released from training programme

Post ARCP review

•Foundation doctor notified of ARCP outcome and doctor signs ARCP outcome form.

•The foundation school must inform the GMC of an outcome 4.

•The foundation school should write to the foundation doctor setting out the process for an appeal.

(*FP Ref Guide 2016:* 7.1115 – 7.142)

Outcome 5

Incomplete evidence presented – additional training may be required

Post ARCP review

•Foundation doctor notified of ARCP outcome and doctors sign ARCP outcome form.

•A further ARCP review is scheduled.

•Foundation doctor updates e-portfolio with adequate evidence and explains (in writing) the reasons for the deficiencies to the panel.

(*FP Ref Guide 2016:* 7.31)

Outcome 6

Recommended for sign-off

Post ARCP review

•Foundation doctor notified of ARCP outcome and doctor signs ARCP outcome form.

•PG Dean or authorised deputy (typically FSD) to consider ARCP review outcome and issue the 'Foundation Achievement of Competence Document'.

(*FP Ref Guide 2016:* 7.113 – 7.114)

Other

(E.g. doctor training less than full time, on long term sick etc.)

Post ARCP review

•Foundation doctor notified of ARCP outcome and doctors sign ARCP outcome form.

•A further ARCP review is scheduled.

Appeal against an outcome 3 or 4

•Foundation doctors can only appeal if they can demonstrate that evidence confirming they had met all of the required outcomes contained in the Curriculum was available to the ARCP panel, by the specified date, and was not considered appropriately.

•The appeal should be addressed to the Postgraduate Dean and must specify the grounds for the appeal.

•An appeal will only be heard if the Postgraduate Dean (or nominated representative) considers there to be sufficient grounds for an appeal.

(*FP Ref Guide 2016:* 7.125 – 7.136)

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Please refer to the FP Reference Guide 2016 for full details of the ARCP process.

The foundation ARCP Panel

The ARCP panel has an important role which its composition should reflect.
The panel should consist of at least three panel members; one of whom should be a registered and licensed medical practitioner on the specialist or GP register.

The panel typically comprises of the FTPD/T (Chair of the panel) and two other members. Additional /other members could include:

- a postgraduate centre manager/other senior administrator
- specialty training doctor (ST4 or above)
- clinical supervisor (not directly involved in supervision of the F1/F2 being reviewed)
- educational supervisor (not directly involved in supervision of the F1/F2 being reviewed)
- lay representative
- external trainer
- employer representative
- external foundation school representative.

Where it is likely that a foundation doctor may be assigned an outcome indicating insufficient progress, the panel should typically include at least one external member e.g. lay representative, external trainer/ foundation school representative. The foundation doctor should be invited to attend a post-ARCP outcome discussion meeting.

Key facts about the panel:

- Minimum of three panel members (FTPD/T and two others)
- Not all ARCP panel members necessarily need to review each e-portfolio
- FTPD/T should typically chair the panel
- One of the members reviewing evidence/e-portfolio must be a registered and licensed medical practitioner on the specialist or GP register
- All members must be trained in equality and diversity (up-to-date training, refreshed every three years)
- All members must have training in ARCP process (familiar with FP curriculum, e-portfolio navigation etc.)
- Members should not include anyone who has been directly involved in the supervision of the doctor under consideration
- ARCP panel members will require access to the e-portfolio
- Panel to be fully accountable for decisions and all proceedings recorded within the e-portfolio (audit trail)

Top tip for ARCP panel membership:

Having educational supervisors (ES) and clinical supervisors (CS) as panel members offers substantial benefit to the ARCP process. Benefits include not only the knowledge and expertise of foundation training being brought to the panel, but more strategically, supervisors being exposed to the ARCP process will acquire a deeper understanding of how integral their roles are throughout the foundation year. For example, ARCP panellists need to review every ES and CS End of Placement reports to make an informed judgement.
Greater ES and CS engagement with the assessment process and e-portfolio recording throughout the year may be enhanced as a result.

(Remember that supervisors cannot participate in the ARCP review panel of doctors under their own supervision)

Useful resources:

ARCP Information Sheet for Panel Chair
ARCP Information Sheet for Panel Member

The foundation ARCP review

Having issued an ARCP timetable, notified foundation doctors of the pending ARCP review dates and established the ARCP panel (including the organisation of appropriate access to the e-portfolio), the ARCP review is ready to commence.

Minimum requirements for satisfactory completion of F1 and F2
To ensure that the ARCP process is consistent, reliable and based upon explicit standards, every panel member must be fully aware of the mandatory, minimum requirements for satisfactory completion of F1 and F2 respectively.

The FP Reference Guide 2016 provides comprehensive tables of all the requirements for satisfactory completion of F1 and F2 (Please see Page 49 (F1) and Page 60 (F2)). The FP curriculum 2016 specifies the expected outcomes and foundation professional capabilities for both F1 and F2 doctors.

An overview of the requirements/evidence required for satisfactory completion of F1 and F2 (and the difference between each training year) is provided in table 2 below. These standards should be used as the minimum benchmark when reviewing evidence for the purpose of ARCP.

Table 2: Overview of the requirements/evidence required for satisfactory completion of F1 and F2

F1	F2
• **Provisional** GMC registration	• **Full** GMC Registration
• Completion of 12 months training	• Completion of 12 months training
• * Coverage of Foundation Professional Capabilities	• * Coverage of Foundation Professional Capabilities
• Satisfactory ES End of Year Report	• Satisfactory ES End of Year Report
• ES End of Placement Reports x 2	• ES End of Placement Reports x 2
• CS End of Placement Reports x3	• CS End of Placement Reports x3
• Completion of the required assessments (**TAB** (minimum x 1) **& core procedures x 15**)	• Completion of the required assessments (**TAB**) (minimum x 1)
• Passed Prescribing Safety Assessment (PSA)	
• Valid **Immediate Life Support** certificate or equivalent	• Valid **Advanced Life Support** certificate or equivalent
• **Participation** in QIP & national surveys	• The curriculum requires that the F2 doctor demonstrates significant personal contribution to a quality improvement project. F2 doctors are also required to complete the national GMC trainee survey and any end of placement surveys.
• Completion of required minimum number of SLEs	• Completion of the required minimum number of SLEs
• Acceptable attendance at teaching sessions (typically 70%)	• Acceptable attendance at teaching sessions (typically 70%)
• Signed probity & health	• Signed probity & health

* The FP curriculum 2016 is outcome based. ARCP panel members must therefore be aware of the FP curriculum content and requirements for sign off. The panel need to review the foundation doctors evidence to be assured that the foundation doctor has met or exceeded the requirements of the FP Curriculum 2016, 20 Foundation Professional Capabilities (outcomes). Please refer to the FP Curriculum 2016 (pages 51 - 77).

Review of ARCP evidence

The majority of evidence required to make an informed ARCP judgement should be available within the e-portfolio. There may also be other additional local requirements and other sources that need to be collected locally; these can be recorded on the 'Review of ARCP evidence form'.

All ARCP panel members must be familiar with the requirements of satisfactory completion of F1 and F2 in order to identify and consider appropriate evidence as part of the actual review.

There are ARCP tools and checklists that can be used to support and aid the review of evidence. These tools are explored within the next chapter 'ARCP resources'.

It should be noted that when reviewing ARCP evidence, additional reports from the FTPD/T (for example a report detailing events that led to a negative assessment by the foundation doctor's educational supervisor) may need to be reviewed and considered by the panel.

The foundation doctor may also submit a report to the panel, in response to the educational supervisor's end of year report or to any other element of the assessment process. Please refer to paragraphs 7.22–7.23 (F1) and paragraphs 7.99–7.100 (F2) of the FP Reference Guide 2016 for full details of how to manage such reports.

TIP / IMPORTANT NOTE WHEN REVIEWING EVIDENCE:

ARCP panel members should be mindful of any evidence added to the e-portfolio after the notified submission date. Foundation schools may want to consider employing a virtual 'e-portfolio lockdown' as such, and panel members should be aware of the date of evidence provided.

The ARCP panel should review evidence first and then create/complete the ARCP Outcome Report form. If the panel create the ARCP Outcome Report form first, by the time the review and agreed conclusion is made, it is likely that the e-portfolio will have 'timed-out'. (NES functionality: When completing a form, you have unlimited time to complete the form as long as you are actively typing. Once you stop typing, you will be logged out after 60 minutes; a pop-up message informs you of this).

Where the evidence submitted is incomplete or otherwise inadequate, the panel should not take a decision about the performance or progress of the foundation doctor. The failure to produce timely, adequate evidence for the panel will result in an Incomplete Evidence Presented outcome (Outcome 5) and will require the foundation doctor to explain to the panel, in writing, the reasons for the deficiencies in the documentation.

Foundation ARCP resources

To assist the review of ARCP evidence within the e-portfolio, there are a number of tools developed by the UKFPO FP Curriculum Delivery Group which are designed to quickly identify relevant ARCP evidence and support an efficient ARCP review.

Optional supporting tools:
Schools may wish to use any of the e-portfolio tools (as explained below) and/or continue to use their local 'checklists of evidence' to be reviewed and benchmarked when conducting the ARCP review.

Both the Horus and the NES e-portfolio products offer the following ARCP resources:

Resource	*Sample	Mandatory / optional	Purpose / notes
F1 ARCP outcome form	Page 24	Mandatory	This is the mandatory ARCP outcome report form to be completed by the FTPD/T (Chair of the ARCP panel) to record the ARCP outcome. Only 1 per review should be completed.
F2 ARCP outcome form	Page 26	Mandatory	(As above but with relevance to F2)
Curriculum Overview page (NES e-portfolio sample shown)	Page 28	Optional	The curriculum overview page offers a Red-Amber-Green facility allowing the foundation doctor and educational supervisor to rate if the required outcomes of each curriculum syllabus heading have been met. If supervisors are engaged and utilise this functionality, it is a much more efficient way for the panel to make a judgement about curriculum coverage and achievement.
F1/F2 Summary of evidence page	Page 29 (F1) Page 31 (F2)	Optional	This resource acts as a central portal of 'quick links' to the specific and relevant evidence, plus it automatically counts the number of forms completed, in accordance with the core requirements for satisfactory completion of F1/F2 (*FP Reference Guide 2016*) and any local/additional requirements as set by the school. Remember: Doctors with evidence of completing all Core Procedures during F1 do not need to be repeated in F2.
F1/F2 ARCP Supporting evidence form	Page 33 (F1) Page 34 (F2)	Optional	In response to foundation school requests, this form was introduced to support the ARCP round 2013-2014. The form allows the recording of evidence which is either not held in the e-portfolio (i.e. not automatically generated as per the 'Summary

			page' as detailed above) and allows up to five additional requirements as set by the school to be recorded. This form feeds into the 'Summary of evidence page' and should negate the need for local paper based checklists.
Automatic generation of the 'Foundation Year 1 Certificate of Completion' (F1CC)	Page 39	Automatic	If an ARCP Outcome form with an Outcome 1 is completed (complete with signatures from both the panel chair and the foundation doctor) – an F1CC certificate will be auto-generated ready for schools to quality check and release.
Automatic generation of 'Foundation Programme Certificate of Completion' (FPCC)	Page 40	Automatic	If an ARCP Outcome form with an Outcome 6 is completed (complete with signatures from both the panel chair and the foundation doctor) – a FPCC certificate will be auto-generated ready for schools to quality check and release.

(* As these samples are in paper format, the electronic functionality cannot be fully demonstrated e.g. use of drop-down menus/branching of information etc.)

IMPORTANT: An ARCP outcome form should be completed for every ARCP review:

- There should NOT be an outcome form saved within the e-portfolio by multiple ARCP panel members for the same review;
- Any subsequent ARCP reviews must be documented on a new ARCP form i.e. do not update and or amend ORIGINAL REVIEW DOCUMENTATION – as this is required as an audit trail; and equally
- There should NOT be an ARCP review without a form being completed.

FOR EVERY ARCP REVIEW THERE MUST BE AN ARCP OUTCOME FORM RECORDED.

Foundation ARCP outcomes

The FP Reference Guide 2016 mandates use of the following foundation ARCP outcome codes:

Outcome Code	Description	Notes
1	**Satisfactory completion of F1**	The F1 ARCP panel should only use this outcome for foundation doctors who meet the requirements for satisfactory completion of F1
3	**Inadequate progress – additional training time required**	(Applicable to both F1 and F2) This outcome should be used when the ARCP panel has identified that an additional period of training is required which will extend the duration of training. The panel must make clear recommendations about what additional training is required and the circumstances under which it should be delivered (e.g. concerning the level of supervision). It will, however, be a matter for the deanery/foundation school to determine the details of the additional training within the context of the panel's recommendations, since this will depend on local circumstances and resources. The overall duration of the extension to training should normally be for a maximum of one year. The panel should consider the outcome of the remedial programme as soon as practicable after its completion. The deanery/foundation school should inform the employer and training placement provider if this outcome is assigned.
4	**Released from training programme**	(Applicable to both F1 and F2) If the panel decides that the foundation doctor should be released from the training programme, the deanery/foundation school should discuss with the GMC as there may be fitness to practise concerns. The panel should seek to have employer representation.
5	**Incomplete evidence presented – additional training time may be required**	(Applicable to both F1 and F2) The panel can make no statement about progress or otherwise since the foundation doctor has supplied either no information or incomplete information to the panel. If this occurs, the foundation doctor may require additional time to complete F1/F2. The panel will set a revised deadline for completion of the e-portfolio and associated evidence. Once the required documentation has been received, the panel should consider it. The panel does not have to meet with the foundation doctor and the review may be done "virtually" and issue an alternative outcome.
6	**Recommendation for the award of the Foundation Achievement of Competence Document**	The F2 ARCP panel should only use this outcome for F2 doctors who meet the requirements for satisfactory completion of the Foundation Programme.
8	**Time out of Foundation Programme**	(F2 only) It is unusual for foundation doctors to take such a career break. However, the panel should receive documentation from the foundation doctor indicating what they are doing out of programme and their expected date of return.

Please note that outcomes 2 and 7 (as used in specialty training) are not used/transferable to foundation training.

Use of explanatory/supplementary codes within foundation ARCP
To help support the foundation schools with capturing appropriate ARCP data for those doctors who:

- train less than full-time (LTFT)
- are out of phase
- are on statutory leave or other at the time of the annual review (e.g. towards July); or
- who are assigned an unsatisfactory outcome (3, 4 or 5).

It has been agreed that the foundation ARCP process will adopt many of the specific, explanatory/supplementary codes as used within specialty training.

Explanatory/supplementary codes are different to, and used in conjunction with the recognised ARCP outcome codes as numbered 1 – 8. These codes are a requirement of the GMC Annual Dean's Report dataset. Such explanatory/supplementary codes are coined as 'N' and 'U' codes:

- N codes = Give the reason for **N**o outcome code being assigned
- U codes = Give the reason(s) for an **U**nsatisfactory outcome being assigned.

These codes will be familiar to colleagues with knowledge of specialty training and aim to essentially remove data duplication for schools when having to re-interpret/code ARCP data for the purpose the GMC Annual Dean's Report and UKFPO FP Annual Report.
Using these codes should also benefit the school/panel members in applying a consistent approach to identify and record the reason(s) for either a **N**o outcome code being assigned or an **U**nsatisfactory outcome being granted.

What is an 'N' code and when does it apply?
When annual ARCPs are conducted (e.g. May-July), if a doctor is LTFT, out of phase, not actively in the programme or other, which means that they are not due a summative ARCP review, an explanatory '**N**ot reviewed' code (i.e. 'N code') is required.

When completing the ARCP outcome report form, the option of 'Other' should be selected (outcomes 1, 3, 4, 5 and 6 will not apply). Having selected 'Other', the e-portfolio form will present a drop-down list of reasons to explain why this option has been chosen. The list of options presented contains the explanatory 'N' codes of which more than one may apply. Please see page 35 for the list of 'N' codes.

What is a 'U' code and when does it apply?
In the event of an unsatisfactory ARCP outcome code being assigned (outcome 3, 4 or 5); an explanatory **U**nsatisfactory reason (i.e. a 'U code') is required.

When completing the ARCP outcome report form, if outcome 3, 4 or 5 is selected, the e-portfolio form will present a list of reasons to explain why this option has been chosen. The list of options presented contains the explanatory 'U' codes of which more than one may be apply. Please see page 37 for the list of U codes.

Flow diagrams to demonstrate how these codes will be presented within the electronic format (i.e. once in the e-portfolio) are provided as per pages 36 and 38.

Managing the ARCP outcomes and providing feedback post-ARCP review

As progression is monitored robustly throughout the year, ARCP reviews are not expected to present any surprises or dispute.

All foundation doctors must be informed of their ARCP outcome and should sign the ARCP outcome report form within 10 days of the panel meeting. (Electronic signature via the e-portfolio is accepted). Discussion points about targeted learning, areas for improvement and/or areas of demonstrated excellence as noted within the review should also be shared with the doctor when providing feedback.

In some cases, it may be necessary to invite the doctor to attend a meeting immediately following the panel's ARCP review (e.g. where it is expected that a non-satisfactory outcome would be assigned) to provide feedback and discuss the particulars of supporting the doctor or possibly the exiting process, depending on which outcome is assigned.

In reality, there may be a very small number of doctors who do not agree with the outcome and may even wish to appeal. In either case it is important (for the purpose of audit) that the ARCP report form is signed and acknowledged by the foundation doctor. To help schools address this issue, please note the statement at the bottom of the 'ARCP Outcome form' which states that "the doctor may not accept or agree with the panel's decision".

In terms of the action to be taken in accordance with each outcome assigned, you may find the F1 and F2 ARCP flow charts useful as a quick reference:

F1 ARCP Outcomes and overview of process:

Outcome 1
Recommended for sign-off

Post ARCP review

- Foundation doctor notified of ARCP outcome and doctor signs ARCP outcome form.
- FSD to consider ARCP review outcome and issue certificate of 'Attainment of F1 Competence' (AF1C).
- Please see the 2014 timetable for issuing the AF1C.
- (See: 7.38 – 7.40, *FP Ref Guide 2016*)

Outcome 3
Inadequate progress – additional training time required

Post ARCP review

- Foundation doctor notified of ARCP outcome and doctor signs ARCP outcome form.
- FSD to arrange remedial training (See 7.46 – 7.50 of the *FP Ref Guide 2016*)

Appeal against an outcome 3

- Foundation doctors can only appeal if they can demonstrate that evidence confirming they had met all of the required outcomes contained in the Curriculum was available to the ARCP panel, by the specified date, and was not considered appropriately.
- Appeals will be heard by the responsible foundation school.
- (See: 7.54 – 7.66, *FP Ref Guide 2016*)

Outcome 4
Released from training programme

Post ARCP review

- Foundation doctor notified of ARCP outcome and doctor signs ARCP outcome form.
- The graduating UK medical school and the foundation school must inform the GMC of an outcome 4.
- The medical school (for UK grads) or foundation school (for non-UK grads) should write to the F1 doctor setting out the process for an appeal.
- The foundation school, (in partnership with the medical school for UK grads) should offer the F1 doctor career counseling.
- (See 7.41 – 7.45 *FP Ref Guide 2016*)

Appeal against ARCP an outcome 4

- Foundation doctors can only appeal against the processes that lead to the recommendation to end F1 training, not the educational decision itself.
- For UK graduates, the appeal will normally be heard by the university of graduation.
- Non-UK graduates will have their appeal heard by their responsible foundation school.
- (See 7.41 – 7.45 *FP Ref Guide 2016*)

Outcome 5
Incomplete evidence presented – additional training may be required

Post ARCP review

- Foundation doctor notified of ARCP outcome and doctors sign ARCP outcome form.
- A further ARCP review is scheduled.
- Foundation doctor updates e-portfolio with adequate evidence and explains (in writing) the reasons for the deficiencies to the panel.
- (See: 7.108, *FP Ref Guide 2016*)

Other
(E.g. doctor training less than full time, on long term sick etc.)

Post ARCP review

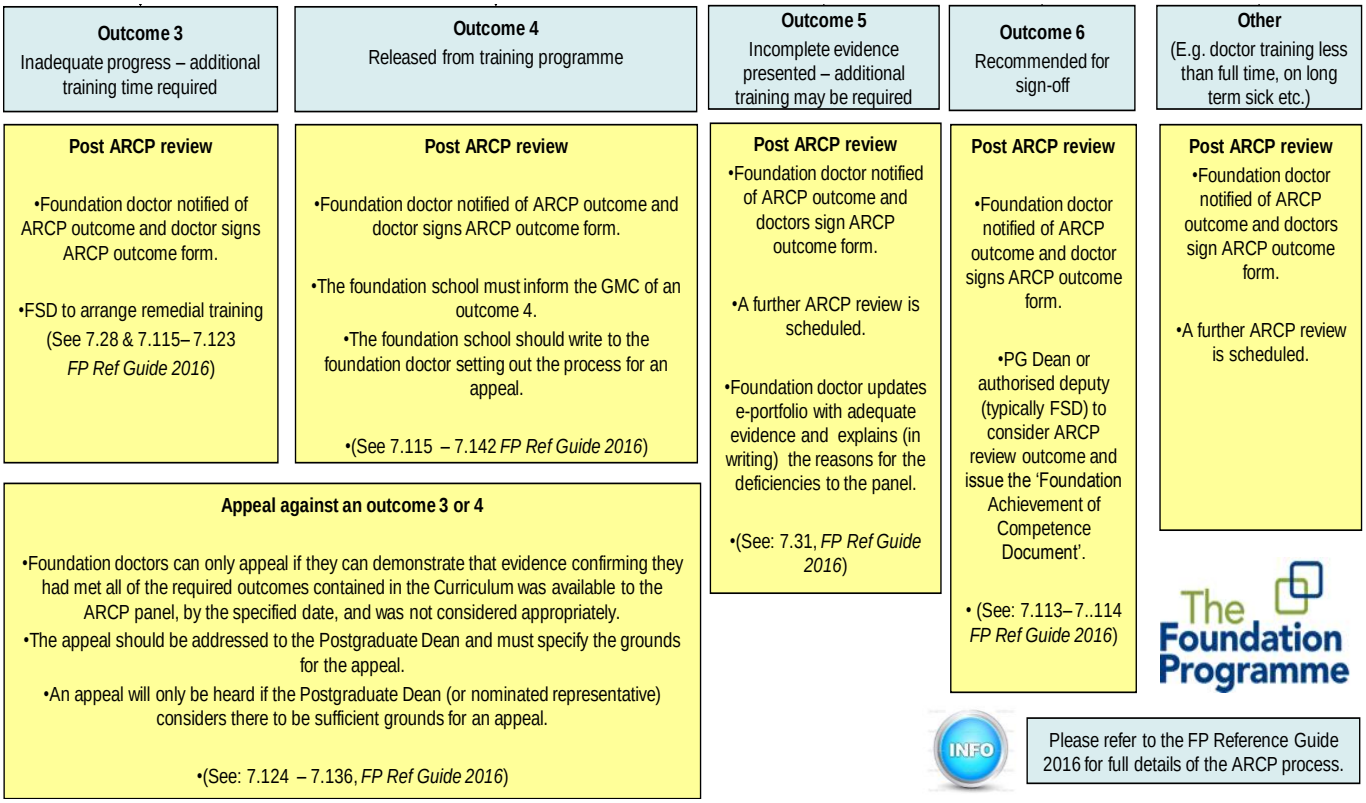
- Foundation doctor notified of ARCP outcome and doctors sign ARCP outcome form.
- A further ARCP review is scheduled.

The Foundation Programme

INFO

Please refer to the FP Reference Guide 2016 for full details of the ARCP process.

F2 ARCP Outcomes and overview of process:



Whilst the flowcharts provide an overview, the FP Reference Guide 2016 offers in-depth detail as to the correct management of appeals and those outcomes which require further management:

- Managing **F1** ARCP outcomes: Chapter 7 (FP Reference Guide 2016)
- Managing **F2** ARCP outcomes: Chapter 7 (FP Reference Guide 2016)

For information: schools will need to schedule a further ARCP review for those doctors assigned an outcome 5 (Incomplete evidence presented). The FP Reference Guide does not stipulate the time period that should be given to the doctor to complete the evidence. Speciality trainees are typically given two weeks to provide the required evidence.

Remember:

All **foundation doctors** must be informed of their ARCP outcome and **should sign** the ARCP Outcome report form **within 10 days** of the panel meeting.

The UK medical school of graduation must be notified of ARCP outcomes for all F1 doctors.

The foundation school (and the UK medical school if referring to a UK graduate) must inform the GMC of any ARCP Outcome 4s.

The UK medical school of graduation should manage Outcome 4 appeals (F1 only).

A valued ARCP experience

ARCP has proven to be a valued process, not only based on evidence within specialty training, but as experienced by foundation schools already operating under the ARCP framework.

The Northern Foundation School (as part of Health Education North East, formerly known as Northern Deanery) has over seven years' experience of operating ARCP within the foundation training model. A complete guide on ARCP processes from the Northern Foundation School can be accessed here:
http://madeinheene.hee.nhs.uk/Portals/0/Policies/Foundation%20Specific/Foundation%20ARCP/2017%20ARCP%20policy%20V5%20Final.pdf.

Comments from foundation doctors and other colleagues at the Northern Foundation School are shared here for your information:

What foundation doctors value about the ARCP process:

"Working to achieve a satisfactory ARCP outcome indirectly meant I was preparing for my specialty application form and interview. You will appreciate that when you realise you have it all sorted on your e-portfolio! If it wasn't for all the competences, reflections and positive feedback I wouldn't have scored so high to get into the specialty I wanted!!"

"It is good to have feedback from impartial sources about how they rate your own personal strengths and weaknesses."

"I think at the end of the day it also ensures that you achieve the outcomes when ARCP is looming at the end!"

"I have to say at times, though it felt like hoops to jump through, having an ARCP in foundation gave me focus in terms of a date and a structure to guide my professional development."

"I think that ARCP in foundation gave us a taster of what is to come for the rest of our careers. It gave us a goal to work towards."

"Best thing about ARCP in foundation: it is well supported and gives you practice before you have to start doing it much more on your own like CMT/CST."

"The thing I valued most about the ARCP deadlines looming ahead was that it encouraged you to focus and actively seek out assessments that actually improved us as doctors, whether it was learning a new skill via DOPS or learning more about a topic in order to have a semi-intelligent conversation with a consultant via CBD that demonstrated my understanding, knowledge and application of medicine. You definitely don't appreciate it at the time but these experiences help you in becoming a safe and competent doctor."

"Remember to think of the ARCP not just as a tick box exercise to pass the year. Like most areas of medicine, when broken down into small goals and approached in a calm and organised manner anything is achievable. Embrace the process as a valuable learning and reflective tool and it will be used to your advantage, not just for the ARCP but to organise your achievements for future job applications."

Comments from the ARCP Panel Chair

Challenges
I don't know the trainee personally and have to make a value judgement on "the evidence".

Resources

1. Assessments:
The immediate resources I seek to review include quality CS and ES reports and MSF. TABs are fundamental to assessing a doctor. The free text comments are the most revealing. "The most important piece of evidence for me is the multisource feedback".

2. E-portfolio
A portfolio tells me a lot about the individual and whether or not they have engaged with the educational process. It is possible to "tick the boxes" however it is often the way in which these boxes are ticked that gives the game away e.g minimum requirements met just prior to ARCP / excessive linkage to cover deficiencies / over-reliance on 1 or 2 pieces of weak evidence / over-reliance on e-learning / inappropriate WPBA mandatory requirements missing etc. This is the realm of the ES and ARCP panel chair.

However there is an art to completing a portfolio and trainees can be taught how to produce a good portfolio to demonstrate achievement of their competence and clinical progression.

Recommended approach to ARCP review:

When reviewing ARCP evidence, I ask myself two simple questions:

- **Is this doctor making satisfactory progress?**
- **Can they progress or are there significant issues that must be addressed at this current time?**

I can only answer these questions if the agreed educational standards have been met (e-portfolio) and colleagues have written quality feedback (CS reports, ES reports and MSF). Engagement from all faculty colleagues is therefore fundamental to the success of this ARCP process and needs to be fully agreed and understood from the word go!

Comments from ES & CS after their experience as ARCP assessors

"Has made me aware of the need for well-structured and plentiful documentary evidence."

"Learnt the e-Portfolio!!"

"Better insight to Multi-Disciplinary Team view of ARCP"

"More insight to ARCP process from another angle as an assessor"

"More aware of expectations of ARCP panel such that I will be a more effective ES"

"Thank you - the ARCP training prepared me well for the real panel. This has been very good for my own personal development"

"It's a pleasure to be involved with the FY programme and the ARCPs – thank you."

"Having assessed at my first ARCP panel I have a much better understanding of the curriculum and e-portfolio, how to complete it and do assessment in a planned way for my trainees"

"Train & value your assessors and they will value and engage in the process"

Foundation School Manager comments on ARCP

"As a Foundation School Manager, I have found the ARCP process incredibly reassuring when managing the sign-off process each year for our FP doctors. Knowing that every single one of our FP doctors has been through a rigorous ARCP panel before they progress through training builds confidence into what is such a critical part of the School's job. Ultimately, ARCP gives our trainees, our faculty and our patients the peace of mind that only trainees who are competent to move on in their training do so."

Mrs Gemma Crackett, Business Manager, Northern Foundation School.

Appendices:

F1

F1 ARCP Outcome Form

Foundation doctor	
Trainee Forename:	
Trainee Surname:	
Trainee GMC No:	
Medical School:	
Foundation School:	

Foundation Training						
Specialty	**Grade**	**Clinical Supervisor**	**Local Education Provider**	**Date From**	**Date To**	**FT/PT**

Name and role of all foundation ARCP Panel members (FTPD/T and two others)					
1. Name:		Panel Role:	Panel chair	Job Role:	
2. Name:		Panel Role:		Job Role:	
3. Name:		Panel Role:		Job Role:	
Other(s) Name:		Panel Role:		Job Role:	

Date of Review:			
Period covered from:		Period covered to:	
No. of days of Time out of Training since last ARCP/Appraisal / starting F1 (from Form R):			

Evidence considered (please list as many as appropriate)			
1. Educational supervisor's end of year report	☐	4.	☐
2. ePortfolio Review of evidence (as recorded within the ePortfolio) is an integral stage of ARCP review. An informed ARCP judgement cannot be made without review of such evidence.	☐	5.	☐
3. Foundation Form R / Equivalent	☐	6.	☐

F1 ARCP review panel outcome	
Recommended for sign off	
Outcome 1: Satisfactory completion of F1	☐
Not recommended for sign off	
Outcome 3. Inadequate progress – additional training time required	☐
Outcome 4. Released from training programme	☐
Outcome 5. Incomplete evidence presented – additional training time may be required	☐
No ARCP review/outcome	
Other *(e.g. working LTFT, on sick leave, missed review etc.)*	☐

Transfer of information between F1 and F2 (Information is available in the trainee's Form R, in the employer's Exit Report (and the Exception Exit Report when there is a concern) and in the clinical supervisor report and educational supervisor report).		
Documentation considered: (select at least ONE)	□ Exit Report □ Exception Report □ Form R □ Supervisors' Reports □ Other	
Are there any current known unresolved causes of concern?	□ Yes	□ No
If yes, please give a brief summary of the concern:		

Comments and recommended action(s): *(Include areas of excellence, areas for targeted training, level of supervision, any additional training time and the action plan etc.)*

Post-ARCP Discussion Please indicate if the foundation doctor is expected to attend a post-ARCP outcome decision meeting		
No – attendance not required	☐	Only doctors with an expected unsatisfactory outcome should be invited to attend a post-ARCP meeting.
No – declined invitation to attend	☐	
Yes – doctor expected to attend	☐	

Signed by chair of panel (FTPD/T or deputy)		
Name	Signature	Date
Additional comments		

Signed by foundation doctor**	
Signature	Date
Foundation Doctor Name	

** By signing the form, the foundation doctor acknowledges receipt of this information and understands the recommendations arising from the review. It does not imply that the doctor accepts or agrees with the panel's decision. The foundation doctor may make an appeal as described in *Foundation Programme Reference Guide 2016*.

F2

F2 ARCP outcome form

Foundation doctor	
Trainee Forename:	
Trainee Surname:	
Trainee GMC No:	
Medical School:	
Foundation School:	

Foundation Training						
Specialty	**Grade**	**Clinical Supervisor**	**Local Education Provider**	**Date From**	**Date To**	**FT/PT**

Name and role of all foundation ARCP Panel members (FTPD/T and two others)					
1. Name:		Panel Role:	Panel chair	Job Role:	
2. Name:		Panel Role:		Job Role:	
3. Name:		Panel Role:		Job Role:	
Other(s) Name:		Panel Role:		Job Role:	

Date of Review:			
Period covered from:		Period covered to:	
No. of days of Time out of Training since last ARCP/Appraisal (from Form R):			

Evidence considered (please list as many as appropriate)			
Educational supervisor's end of year report	☐		☐
E-portfolio	☐		☐
Foundation Form R / Equivalent	☐		☐

F2 ARCP review panel outcome (please select only one):	
Recommended for sign off	
Outcome 6. Satisfactory completion of F2 - Recommendation for the award of the Foundation Programme Certificate of Completion (FPCC)	☐
Not recommended for sign off	
Outcome 3. Inadequate progress – additional training time required	☐
Outcome 4. Released from training programme	☐
Outcome 5. Incomplete evidence presented – additional training time may be required	☐
No ARCP review/outcome	
Outcome 8. Time out of foundation programme (up to 12 month career	☐

break/research)	
Other *(e.g. working LTFT, on sick leave, missed review etc.)*	☐

Revalidation: *(Information is available in the trainee's Form R, in the employer's Exit Report (and the Exception Exit Report when there is a concern) and in the clinical supervisor report and educational supervisor report).*	
Documentation considered: (select at least ONE)	☐ Exit Report ☐ Exception Report ☐ Form R ☐ Supervisors' Reports ☐ Other
Are there any current known unresolved causes of concern?	☐ Yes ☐ No
If yes, please give a brief summary of the concern:	

Post-ARCP Discussion Please indicate if the foundation doctor is expected to attend a post-ARCP outcome decision meeting		
No – attendance not required	☐	Only doctors with an expected unsatisfactory outcome should be invited to attend a post-ARCP meeting.
No – declined invitation to attend	☐	
Yes – doctor expected to attend	☐	

Signed by chair of panel (FTPD/T or deputy)		
Name	Signature	Date
Additional comments		

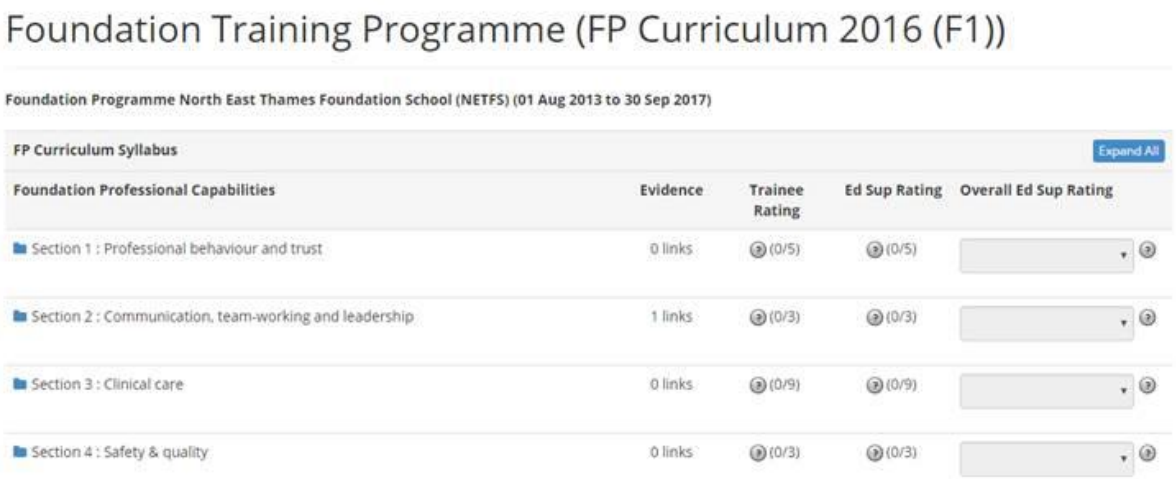
Signed by foundation doctor**	
Signature	Date
Foundation Doctor Name	

** By signing the form, the foundation doctor acknowledges receipt of this information and understands the recommendations arising from the review. It does not imply that the doctor accepts or agrees with the panel's decision. The foundation doctor may make an appeal as described in *Foundation Programme Reference Guide 2016*.

Curriculum Overview page (NES V2 sample shown)

The curriculum overview page contains a number of indicators to monitor and rate progress as mapped to the FP curriculum 2016 syllabus headings.

The rating system translates the syllabus sub-heading ratings into a red-amber-green coloured indicator. Whilst not a mandatory requirement it is a useful monitoring tool. The indicators will reflect the number of ratings made by both the foundation doctor ('trainee') and the educational supervisor. There is also a 'manual' overall educational supervisor rating that can be set from their account. This may help the ARCP review panel at year-end, especially when considering the doctor's engagement and reviewing the educational supervisor's engagement and opinion of curriculum coverage.



The indicator key is as per the table below:

Status type	Status	Consideration
Evidence	Number	Number of evidence items
Trainee rating	Grey	No Trainee rating
	Red	Trainee has self-rated some items 'not met'
	Amber	Trainee has self-rated some items 'some experience'
	Green	Trainee has self-rated some items 'F1/F2 level competent'
Educational supervisor assessment of individual competences	Grey	No supervisor rating
	Red	Supervisor has self-rated some items 'not met'
	Amber	Supervisor has self-rated some items 'some experience'
	Green	Supervisor has self-rated some items 'F1/F2 level competent'
Educational supervisor assessment of trainees achievement of the desired outcome (Overall Ed Sup Rating)		This should be manually set based upon the supervisors judgment of the overall evidence presented
	Grey	No selection made
	Red	Manual selection of 'Not been met'
	Amber	Manual selection of 'Partially met'
	Green	Manual selection of 'Fully met'

Important: The lowest rating (a red indicator) of any area will be displayed as the main/overview indicator i.e. if 19 sub-items are green and 1 is red, it is the red indicator that will be displayed.

Please contact your local e-portfolio administrator/foundation school if you wish to receive further guidance on using this functionality.

NES V3 - There is no "sign-off" curriculum functionality within Turas Portfolio (v3). The supervisor can see a summary of the trainees curriculum coverage as part of their overall progress and as part of signing them off at ARCP.

F1

F1 ARCP Summary of evidence for satisfactory completion

Name of foundation doctor		GMC number	

Listed below are the national minimum requirements for satisfactory completion of the F1 year as laid down by the GMC and set out in the *foundation programme curriculum* and the *Foundation Programme Reference Guide.* Your foundation school may have additional requirements that have to be met; some of these may be listed within the 'Supporting evidence' section of this form. Please check with you foundation school for full details.

IMPORTANT: Evidence listed below does NOT indicate that the evidence provided is satisfactory or that the requirement has been met. The table acts as a central portal from where evidence can be easily viewed in accordance with the set national requirements.

Requirement	Notes	View evidence
Provisional registration and a licence to practise with the GMC	To undertake the first year of the Foundation Programme, doctors must be provisionally registered with the GMC and hold a licence to practise. In exceptional circumstances (e.g. refugees), a fully registered doctor with a license to practise may be appointed to the first year of a foundation programme.	(Auto-populated GMC number)
Completion of 12 months F1 training (taking account of allowable absence)	The maximum permitted absence from training, other than annual leave, during the F1 year is four weeks (see GMC guidance on sick leave for provisionally registered doctors).	(Auto-populated 'Yes' or 'No' from supporting form)
A satisfactory educational supervisor's end of year report	The report should draw upon all required evidence listed below.	(Auto-populated link to report)
Satisfactory educational supervisor's end of placement reports	If the F1 doctor has not satisfactorily completed one placement but has been making good progress in other respects, it may still be appropriate to confirm that the F1 doctor has met the requirements for satisfactory completion of F1. An educational supervisor's end of placement report is not required for the last F1 placement; the educational supervisor's end of year report replaces this.	(Auto-populated link to each report)
A satisfactory clinical supervisor's end of placement report for each placement	If the F1 doctor has not satisfactorily completed one placement but has been making good progress in other respects, it may still be appropriate to confirm that the F1 doctor has met the requirements for satisfactory completion of F1. The last end of placement review must be satisfactory.	(Auto-populated link to each report)
Satisfactory completion of all FP Curriculum outcomes	The F1 doctor should provide evidence that they have met the foundation professional capabilities, recorded in the eportfolio	

Satisfactory completion of the required number of assessments The minimum requirements are set out in the curriculum. The deanery/foundation school may set additional requirements.	Team assessment of behaviour (TAB) (Minimum of one per year)	(Auto-populated link to TAB assessment)
	Core procedures (all 15 GMC mandated procedures)	(Auto-populated number to show: Completed __/15)
A valid Immediate Life Support (or equivalent) certificate	If the certificate has expired, it may be appropriate to accept evidence that the doctor has booked to attend a refresher course.	(Auto-populate date re when ALS certificate was verified)
Successful Completion of the Prescribing Safety Assessment (PSA)	The F1 doctor must provide evidence that they have passed the PSA within the last two years.	
Evidence of participation in systems of quality assurance and quality improvement projects	Foundation doctors should take part in systems of quality assurance and quality improvement in their clinical work and training.	(Auto-populated 'Yes' or 'No' from supporting form)
	Completion of GMC national trainee survey.	(Auto-populated 'Yes' or 'No' from supporting form)
Completion of the required number of Supervised Learning Events The minimum requirements are set out in the curriculum. The deanery/foundation school may set additional requirements.	Direct observation of doctor/patient interaction: • Mini CEX • DOPS *(minimum of 9 observations per year; at least 6 must be mini-CEX)*	(Auto-populated number to show: __ MiniCEX __ DOPS)
	Case-based discussion (CBD) *(minimum of 6 per year / 2 per placement)*	__ CBD
	Developing the clinical teacher (DCT) *(minimum of 1 per year)*	__ DCT
An acceptable attendance record at generic foundation teaching sessions	It is recommended that postgraduate centres (or equivalent) provide a record of attendance for each F1 doctor. It has been agreed that an acceptable attendance record should typically be 70%. However, if the F1 doctor has not attended 70% of teaching sessions for good reasons, it may still be appropriate to confirm that the F1 doctor has met the required standard. If there are concerns regarding engagement or if attendance is below 50%, the FTPD/T should discuss this with the FSD.	(Auto-populated % from supporting form)
Signed probity and health declarations	Separate forms must be signed for each year of foundation training (F1 and F2). This is in addition to the Declaration of Fitness to Practise required by the GMC when applying for full registration.	(Auto-populated link/ magnifying glass to the declaration)
Supporting evidence	Any evidence/information relevant to satisfactory completion of F1, which is either not recorded in the e-portfolio and/or any additional requirements as set by the school are recorded here.	(Auto-populated link/ magnifying glass to supporting evidence form)

F2

F2 ARCP Summary of evidence for satisfactory completion

Name of foundation doctor		GMC number	

Listed below are the national minimum requirements for satisfactory completion of the F2 year as laid down by the GMC and set out in the *foundation programme curriculum* and the *foundation programme reference guide 2016.* Your foundation school may have additional requirements that have to be met; some of these may be listed within the 'Supporting evidence' section of this form. Please check with you foundation school for full details.

IMPORTANT: Evidence listed below does NOT indicate that the evidence provided is satisfactory or that the requirement has been met. The table acts as a central portal from where evidence can be easily viewed in accordance with the set national requirements.

Requirement	Notes	View evidence
Full registration and a licence to practise with the GMC	To undertake the second year of the foundation programme, doctors must be fully registered with the GMC and hold a licence to practise.	(Auto-populated GMC number)
Completion of 12 months F2 training (taking account of allowable absence)	The maximum permitted absence from training (other than annual leave) during F2 is four weeks (i.e. the same as F1).	(Auto-populated 'Yes' or 'No' from supporting form)
A satisfactory educational supervisor's end of year report	The report should draw upon all required evidence listed below.	(Auto-populated link to report)
Satisfactory educational supervisor's end of placement reports	If the F2 doctor has not satisfactorily completed one placement but has been making good progress in other respects, it may still be appropriate to confirm that the F2 doctor has met the requirements for satisfactory completion of F2. An educational supervisor's end of placement report is not required for the last F2 placement; the educational supervisor's end of year report replaces this.	(Auto-populated link to each report)
A satisfactory clinical supervisor's end of placement report for each placement	If the F2 doctor has not satisfactorily completed one placement but has been making good progress in other respects, it may still be appropriate to confirm that the F2 doctor has met the requirements for completion of F2. The last end of placement review must be satisfactory.	(Auto-populated link to each report)
Satisfactory completion of all FP curriculum outcomes	The F2 doctor should provide evidence that they have met the expected foundation professional capabilities recorded in the eportfolio	
Satisfactory completion of the required number of assessments	Team assessment of behaviour (TAB) (Minimum of one per year)	(Auto-populated link to TAB assessment)

The minimum requirements are set out in the curriculum. The deanery/foundation school may set additional requirements.	Evidence that the foundation doctor can carry out the procedures required by the GMC	(Auto-populated number to show: Completed __/15)
A valid Advanced Life Support (or equivalent) certificate	If the certificate has expired, it may be appropriate to accept evidence that the doctor has booked to attend a refresher course.	(Auto-populate date re when ALS certificate was verified)
Evidence of participation in systems of quality assurance and quality improvement projects	The curriculum requires that the F2 doctor demonstrates significant personal contribution to a quality improvement project. F2 doctors are also required to complete the national trainee survey and any end of placement surveys	(Auto-populated 'Yes' or 'No' from supporting form)
Completion of the required number of Supervised Learning Events The minimum requirements are set out in the curriculum. The deanery/foundation school may set additional requirements.	Direct observation of doctor/patient interaction: • Mini CEX • DOPS *(minimum of 9 observations per year; at least 6 must be mini-CEX)*	(Auto-populated number to show: __ miniCEX __ DOPS)
	Case-based discussion (CBD) *(minimum of 6 per year / 2 per placement)*	__ CBD
	Developing the clinical teacher *(minimum of 1 per year)*	__ DCT
An acceptable attendance record at foundation teaching sessions	It is recommended that postgraduate centres (or equivalent) provide a record of attendance for each F2 doctor. It has been agreed that an acceptable attendance record should typically be 70%. However, if the F2 doctor has not attended 70% of teaching sessions for good reasons, it may still be appropriate to confirm that the F2 doctor has met the required standard. If there are concerns regarding engagement or if attendance is below 50%, the FTPD/T should discuss this with the FSD.	(Auto-populated % from supporting form)
Signed probity and health declarations	A separate form should be signed for F2. This is in addition to the Declaration of Fitness to Practise required by the GMC when applying for full registration.	(Auto-populated link/ magnifying glass to the declaration)
Supporting evidence	Any evidence/information relevant to satisfactory completion of F2, which is either not recorded in the e-portfolio and/or any additional requirements as set by the school are recorded here.	(Auto-populated link/ magnifying glass to supporting evidence form)

F1

F1 ARCP Supporting evidence

Name of foundation doctor	(Auto-populated)	GMC number	(Auto-populated)

In addition to the national minimum requirements for satisfactory completion of the F1 year as laid down by the GMC and set out in the *foundation programme curriculum* and the *foundation programme reference guide;* foundation schools have requested a form to gather evidence not stored within the e-portfolio and the option to list any local requirements ready for the ARCP panel to review.

IMPORTANT: Evidence listed below does NOT necessarily indicate that the evidence provided is satisfactory or that the requirement has been met. The table acts as central portal from where evidence can be easily viewed and accessible for the ARCP panel.

National minimum requirements not evidenced within the e-portfolio:

Requirement	**Achieved**		**Evidence**	**Notes**	**Name**	**Date:**
Completion of 12 months F1 training (taking account of allowable absence)	Y or N		(any text/symbols)	(any text/symbols)	(Signature control)	(auto-populated)
Evidence of participation in systems of quality assurance and quality improvement projects	Y or N		(any text/symbols)	(any text/symbols)	(Signature control)	(auto-populated)
Completion of GMC national trainee survey	Y or N		(any text/symbols)	(any text/symbols)	(Signature control)	(auto-populated)
An acceptable attendance record at generic foundation teaching sessions	Y or N	%	(any text/symbols)	(any text/symbols)	(Signature control)	(auto-populated)

Other/Local requirements and supporting evidence:
Are there any other/additional requirements that you would like to record? Yes / No

Requirement	**Achieved**	**Evidence**	**Notes**	**Name**	**Date:**
(any free text)	Y or N	(any text/symbols)	(any text/symbols)	(Signature control)	(auto-populated)
(any free text)	Y or N	(any text/symbols)	(any text/symbols)	(Signature control)	(auto-populated)
(any free text)	Y or N	(any text/symbols)	(any text/symbols)	(Signature control)	(auto-populated)
(any free text)	Y or N	(any text/symbols)	(any text/symbols)	(Signature control)	(auto-populated)
(any free text)	Y or N	(any text/symbols)	(any text/symbols)	(Signature control)	(auto-populated)

F2

F2 ARCP supporting evidence

Name of foundation doctor	(Auto-populated)	GMC number	(Auto-populated)

In addition to the national minimum requirements for satisfactory completion of the F2 year as laid down by the GMC and set out in the *foundation programme curriculum* and the *foundation programme reference guide;* foundation schools have requested a form to gather evidence not stored within the e-portfolio and the option to list any local requirements ready for the ARCP panel to review.

IMPORTANT: Evidence listed below does NOT necessarily indicate that the evidence provided is satisfactory or that the requirement has been met. The table acts as central portal from where evidence can be easily viewed and accessible for the ARCP panel.

National minimum requirements not evidenced within the e-portfolio:

Requirement	**Achieved**		**Evidence**	**Notes**	**Name**	**Date:**
Completion of 12 months F2 training (taking account of allowable absence)	Y or N		(any text/symbols)	(any text/symbols)	(Signature control)	(auto-populated)
Evidence of participation in systems of quality assurance and quality improvement projects	Y or N		(any text/symbols)	(any text/symbols)	(Signature control)	(auto-populated)
Completion of GMC national trainee survey	Y or N		(any text/symbols)	(any text/symbols)	(Signature control)	(auto-populated)
An acceptable attendance record at generic foundation teaching sessions	Y or N	%	(any text/symbols)	(any text/symbols)	(Signature control)	(auto-populated)

Other/Local requirements and supporting evidence:

Are there any other/additional requirements that you would like to record? Yes / No

Requirement	**Achieved**	**Evidence**	**Notes**	**Name**	**Date:**
(any free text)	Y or N	(any text/symbols)	(any text/symbols)	(Signature control)	(auto-populated)
(any free text)	Y or N	(any text/symbols)	(any text/symbols)	(Signature control)	(auto-populated)
(any free text)	Y or N	(any text/symbols)	(any text/symbols)	(Signature control)	(auto-populated)
(any free text)	Y or N	(any text/symbols)	(any text/symbols)	(Signature control)	(auto-populated)
(any free text)	Y or N	(any text/symbols)	(any text/symbols)	(Signature control)	(auto-populated)

Reasons for doctors not assigned a satisfactory/unsatisfactory outcome (list of 'N' codes)

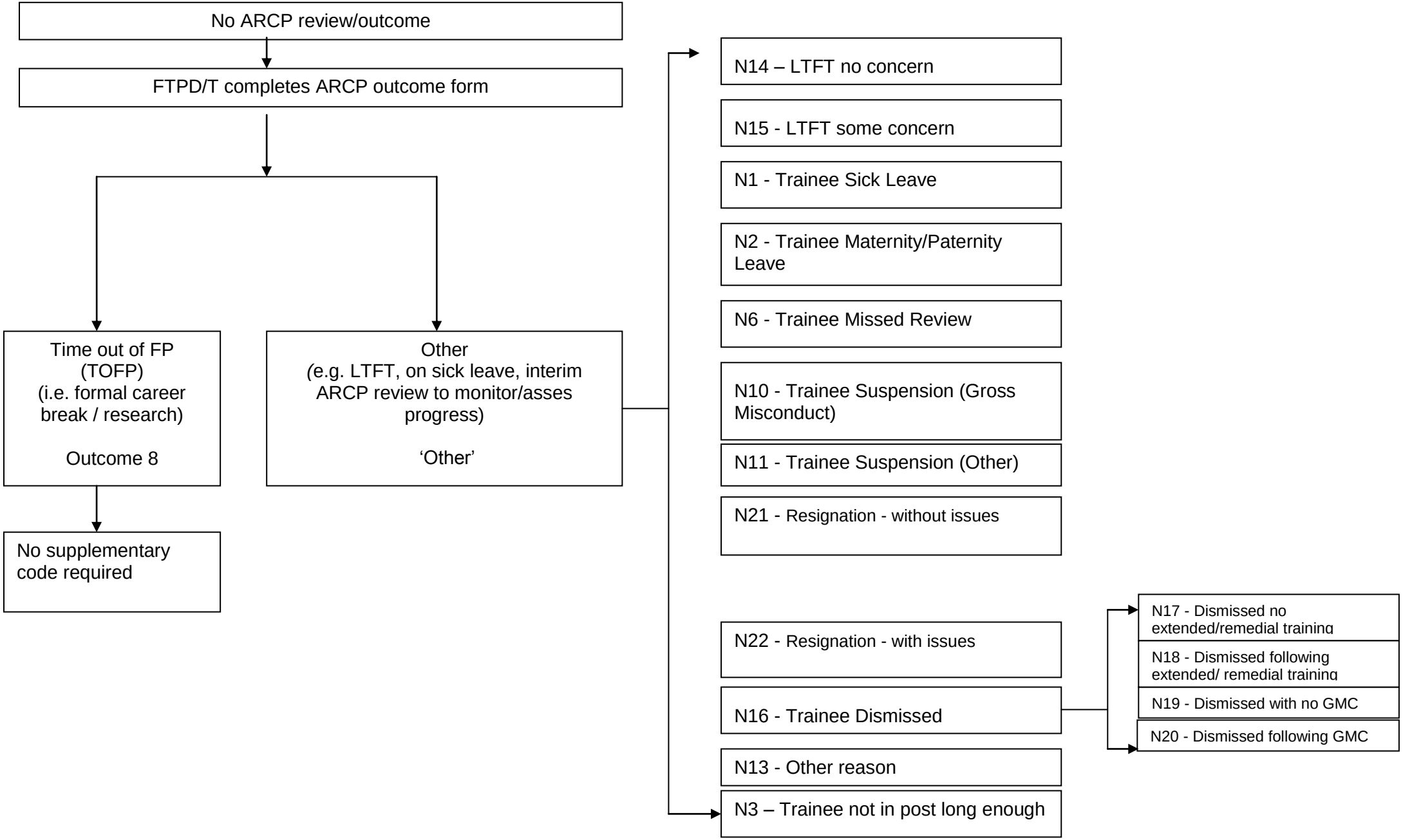
More than one reason may be selected.

Remember: Most important is recording accurate reason(s) and not learning the codes!

Reason	Explanatory Notes	'N' code	Used in ST.
Less than full-time (LTFT) / out of phase – no concern	Achieving progress and the development of outcomes at the expected rate.	N14	☒
Less than full-time (LTFT) / out of phase – some concern	May not be achieving progress or development of outcomes at the expected rate.	N15	☒
Trainee Sick Leave	Trainee on long-term sickness or other health issues have impacted on ability to complete the year of training being reviewed.	N1	☑
Trainee Maternity/ Paternity Leave	Trainee cannot be reviewed whilst on maternity leave	N2	☑
Trainee not In Post Long Enough	Too soon to complete a meaningful annual review within the ARCP reporting period.	N3	☑
Trainee Missed Review	Trainee did not attend the review when required.I.e. Analysis from Deaneries is that where a review panel was not arranged until July at end of reporting year and trainee could not attend for last minute family reasons; transport problems etc. Panel had to be rearranged in early August but outside of GMC reporting period.	N6	☑
Trainee on suspension for Gross Misconduct	Trainee currently suspended from training either as a result of GMC Suspension or local Trust or other local disciplinary proceedings due to gross misconduct.	N10	☑
Trainee on suspension - other reason	Trainee currently suspended for reasons other than gross misconduct.	N11	☑
Resignation - without training issues	Resignation no remedial training undertaken or offered	N21	☑
Resignation – with training issues	Resignation received trainee would have been offered or trainee undertook remedial training.	N22	☑
Trainee dismissed	The trainee was dismissed prior to programme completion. Please specify if • Dismissed: no remedial training undertaken • Dismissed: received remedial training Also whether: • Dismissed: no GMC referral • Dismissed: following GMC referral	N16 N17 N18 N19 N20	☒ ☒ ☒ ☒ ☒
Other reason	(Please specify)	N13	☑

(Codes N4-N5 and N7-N9 are intentionally not included as they are not transferable to foundation)

Supplementary codes for foundation doctors not subject to ARCP review (e.g. less than fulltime (LTFT) / out of phase)



Reasons for doctors not recommended for sign-off (list of 'U' codes)

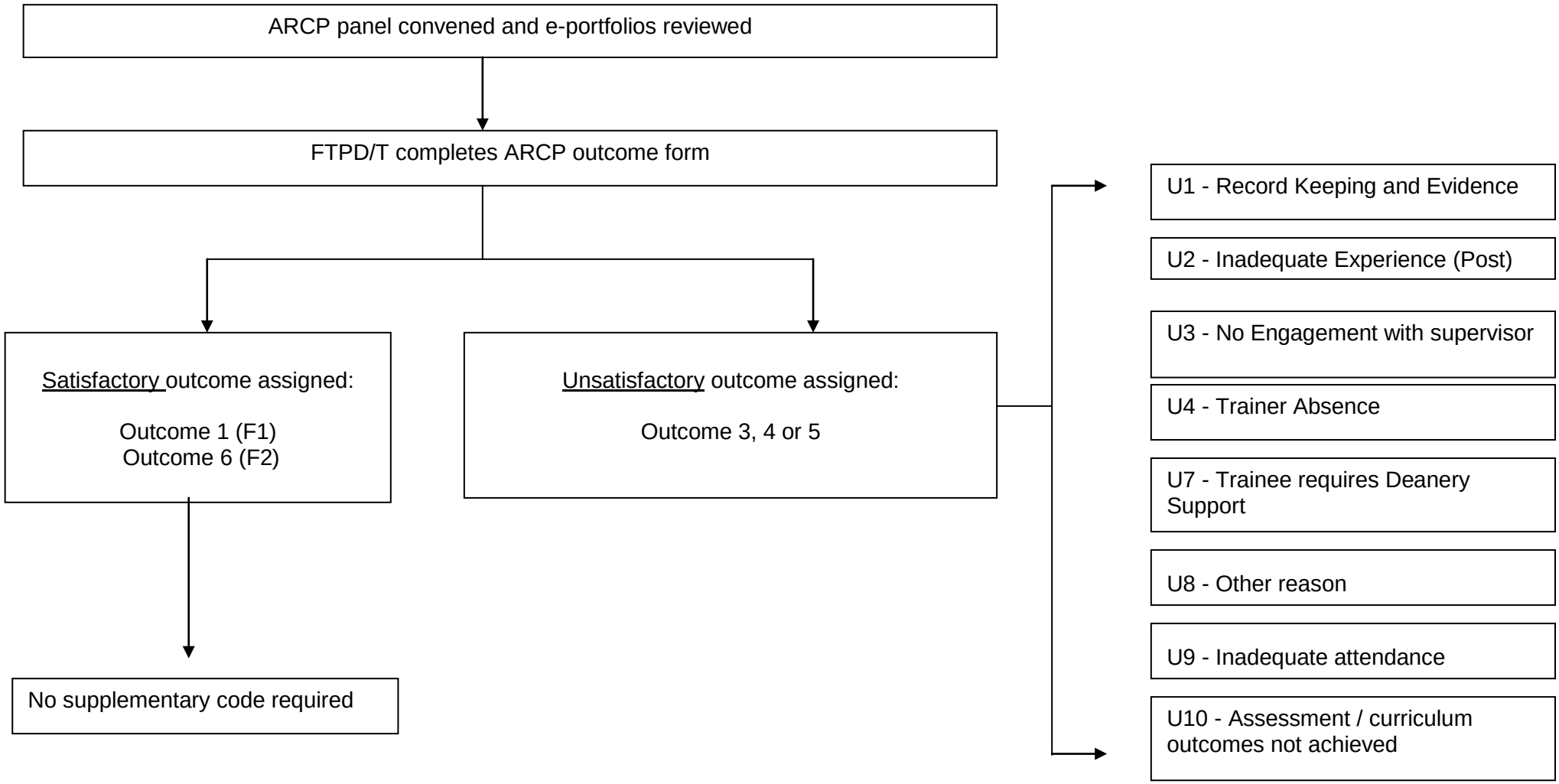
More than one reason may be selected.

Remember: Most important is recording accurate reason(s) and not learning the codes!

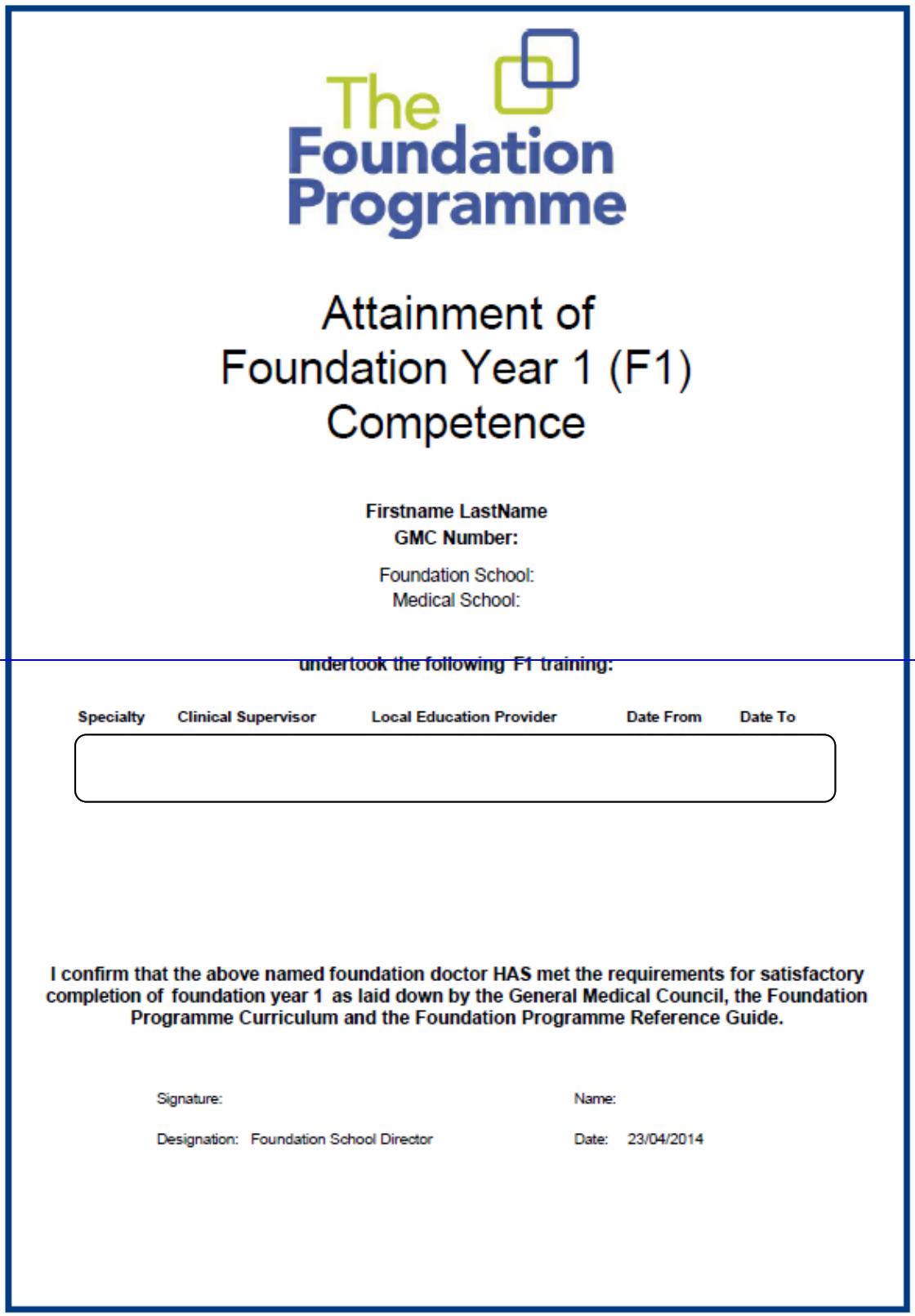
Reason	Explanatory Notes	'U' code	Used in ST
Record Keeping and Evidence	Trainee failed to satisfactorily maintain their Royal College/ Faculty/ foundation e-portfolio including completing the recommended number of Workplace-Based Reviews; Supervised Learning Events, Audits; Research; structured education supervisors report; in accordance with recommendations for that particular Year of Training in line with the Royal College/Faculty/foundation curriculum requirements.	U1	☑
Inadequate Experience	Training post (s) did not provide the appropriate experience for the year of training being assessed in order to progress. As a result the trainee was unable to satisfy the Royal College/Faculty/foundation curriculum requirements for the year of training.	U2	☑
No Engagement with Supervisor	Trainee failed to engage with the assigned educational supervisor or the training curriculum in accordance with the Royal College/Faculty/Foundation requirements for that particular year.	U3	☑
Trainer Absence	Nominated educational supervisor or trainer did not provide the appropriate training and support to the Trainee because of their absence on a sabbatical; through illness or other reasons; and no nominated educational supervisor deputy took over to ensure that an appropriate level of training was maintained. As a result the trainee was unable to satisfy the Royal College/ Faculty/ foundation curriculum requirements for the year of training.	U4	☑
Trainee requires Deanery Support	Trainee has issues to do with their professional personal skills for example: - behaviour / conduct / attitude / confidence / time keeping / communications skills etc. and requires the support of the Deanery Performance Team.	U7	☑
Other reason	This may include the trainee having failed to participate in systems of quality assurances and quality improvement projects. (Please specify)	U8	☑
Inadequate attendance	Trainee exceeded the maximum permitted absence of four weeks from training (other than annual leave) and/or has unsatisfactory attendance at formal teaching sessions. *This code should NOT be used to describe a less than full-time (LTFT) foundation doctors who has satisfactorily attended their pro-rata FP/formal teaching sessions.	U9	☒
Assessment / Curriculum outcomes not achieved	Trainee has failed to meet the outcomes of the FP curriculum and/or pass the assessments required for satisfactory completion of F1/F2. Formal assessments include: • Core procedures for F1 • TAB • Clinical supervisor end of placement reports • Educational supervisor end of placement reports; and • Educational supervisor's end of year reports.	U10	☒

(Codes U5 and U6 are intentionally not included. These codes are not transferable to foundation)

Supplementary codes for foundation doctors with an unsatisfactory ARCP outcome



F1CC



The Foundation Programme

Attainment of Foundation Year 1 (F1) Competence

Firstname LastName
GMC Number:

Foundation School:
Medical School:

undertook the following F1 training:

Specialty	Clinical Supervisor	Local Education Provider	Date From	Date To

I confirm that the above named foundation doctor HAS met the requirements for satisfactory completion of foundation year 1 as laid down by the General Medical Council, the Foundation Programme Curriculum and the Foundation Programme Reference Guide.

Signature: Name:

Designation: Foundation School Director Date: 23/04/2014

Foundation Programme Certificate of Completion

Dr Preview Foundation_Trainee_FY2_
GMC Number:

Foundation School:
Medical School:

undertook the following F2 training:

Specialty	Clinical Supervisor	Local Education Provider	UK APS*	Date From	Date To

*UK APS = Approved practice setting in the United Kingdom. UK APS is an organisation approved by the GMC as suitable for doctors new to full registration, or returning to the medical register after prolonged absence from UK practice. See GMC for more details.

I confirm that the above named foundation doctor HAS met the requirements for satisfactory completion of the foundation programme as laid down by the General Medical Council, the Foundation Programme Curriculum and the Foundation Programme Reference Guide.

Signature: John Smith

Name: Preview foundation_School_Manager

Designation: Post Graduate Dean/other authorised signature

Date: 15/04/2014