

<b>Name of Document</b>	<b>Principles for Training of ARCP and ARCP Appeals Panel Members and Chairs</b>
<b>Category</b>	Standard Operating Procedure (SOP) - Trainee Management
<b>Purpose</b>	<p>This document is one of a suite of Standard Operating Procedures to support the management of doctors in training across England. This SOP is aligned to the principles of 'A Reference Guide for Postgraduate Specialty Training in the UK' (The Gold Guide). This SOP does not apply to Foundation and Dentistry trainees who are managed under separate Guides ('The Foundation Programme Reference Guide' and 'A Guide to Postgraduate Dental Specialty Training in the UK').</p> <p>Within the SOP, whenever reference is made to the Postgraduate Dean, it refers to the Dean or their nominated representative who will be responsible for managing the process on their behalf.</p> <p>This SOP is intended to be a guide to encourage consistency of practice across England. Due to the complex nature of Postgraduate Medical Training, there will be occasions where local PG Deans will apply their discretion in enacting this SOP to take account of individual circumstances and varying local structures (e.g. Lead Employer).</p> <p>This suite of SOPs will be screened against relevant Equality and Diversity documentation.</p>
<b>Authorised by</b>	Health Education England Deans (HEEDs)
<b>Date Authorised</b>	27/06/2017
<b>Next Review Date</b>	SOP to be reviewed in line with any future Gold Guide revisions, or every 12 months, whichever comes first
<b>Document Author</b>	HEEDs

<b>Version</b>	<b>Date</b>	<b>Author</b>	<b>Notes</b> Reason for Change, what has changed, etc
1	27/06/2017	HEEDs	Document sign off at HEED

Related Documents

Gold Guide Version 6 <https://www.copmed.org.uk/publications/the-gold-guide>

Standard Operating Procedure – ARCP Appeals, Standard Operating Procedure – ARCP

[https://healtheducationengland-my.sharepoint.com/personal/kate\\_evans\\_hee\\_nhs\\_uk/\\_layouts/15/guestaccess.aspx?folderid=1b9902b00f7bf44e59842fcb28c1ef8ea&authkey=AU58\\_M0I3fn0qrhKz8ykeQk](https://healtheducationengland-my.sharepoint.com/personal/kate_evans_hee_nhs_uk/_layouts/15/guestaccess.aspx?folderid=1b9902b00f7bf44e59842fcb28c1ef8ea&authkey=AU58_M0I3fn0qrhKz8ykeQk)

## **Introduction**

Health Education England Postgraduate Deans (HEEDs) endeavour to achieve consistency of decision-making in order that the outcome of Annual Review of Competence Progression (ARCP) and ARCP Appeals are as consistent as possible on a like for like basis.

This Standard Operating Procedure (SOP) details the principles for training requirements for individuals fulfilling the roles of ARCP Panel Member, ARCP Appeal Panel Member, ARCP Panel Chair and ARCP Appeals Panel Chair.

This document contains the SOP that all HEE Postgraduate Deans should follow. The SOP is aligned to the principles outlined within the “A Reference Guide for Postgraduate Specialty Training in the UK” (The Gold Guide). ARCP for Foundation trainees is out of scope of this SOP, being aligned to the “UK Reference Guide”.

### **1. National context to training requirements**

The ARCP provides a formal process which uses the evidence gathered by the trainee, relating to his/her progress in the training programme. It enables the trainee, the PG Dean and faculty of trainers to document that the competences required are being gained at an appropriate rate and through appropriate experience.

The PG Dean has the responsibility for ensuring appropriate management and administration of all ARCP systems, and for demonstrating that such systems meet the standards required of an effective assessment process. All involved must commit to supporting high quality ARCP processes with:

- effective systems and documentation
- written guidance containing requirements and recommendations in relation to the trainee
- clear responsibility and accountability
- support for faculty development

Training for panel members and chairs is a key method in delivering all of these functions.

### **2. ARCP Panel Member and ARCP Appeals Panel Member Training**

#### **Minimum Training Requirements**

Where possible, a panel should be observed by an individual prior to participating as a full member.

#### **Knowledge:**

All panel members must have knowledge of the ARCP principles contained within

- GMC Promoting excellence: Standards for medical education and training The ‘Gold Guide’
- HEE SOPs for ARCP, Appeals and Revalidation
- Content of this document

#### **Equality and Diversity:**

All panel members must be trained appropriately in equality and diversity and this training must be refreshed every three years.

#### **Clinical members of the ARCP panel:**

At least one clinical member of the ARCP panel must have a detailed knowledge of the relevant curriculum and the required level of competence for trainees.

### **3. ARCP Panel Chair and ARCP Appeals Panel Chair Training**

The role of the chair is vital; overseeing the conduct of the panel and the actions before and after. Each PG Dean must ensure training for chairs is provided locally.

In addition to the specific chair training, where possible, an ARCP panel/Appeal panel should be observed by an individual prior to Chairing for the first time.

### Minimum Training Requirements

Chairs must acquire the knowledge and complete appropriate Equality and Diversity training as described above for panel members.

Chair Training delivered locally should cover, as a minimum, the following responsibilities of the role:

*Note the responsibilities are expanded upon in more detail within the HEE ARCP and Appeals SOPs.*

#### Before the Panel:

- Ensure appropriate panel membership
- Ensuring availability of all relevant information
- Ensuring there is access to the relevant electronic trainee portfolio (print outs of ePortfolios should not be requested)

#### During the Panel:

- Ensuring the panel delivers its requirements within the SOP
- Holding all panel members to account throughout the process
- Ensuring that the conduct of all panel members is professional at all times and aligns to the principles of the NHS constitution. *If the conduct of any individual is inappropriate then the proceedings may need to be paused and it is in the gift of any individual present in the room to raise the issue with the Chair. If the behaviour of the Chair is in question, any senior clinician on the panel should be approached.*
- Time keeping
- Ensuring that the proceedings are documented appropriately
- Ensuring the outcome awarded is appropriate

#### After the Panel:

- Ensure that any action plans have been produced with 'SMART' objectives
- Ensure that the output of the process is recorded and communicated to all parties appropriately and within required time lines as per SOP requirements