

Contents

	Page
Introduction	1
Reflection on the year (2009-2010)	2
Education in the Deanery	5
GP Specialty School Report	6
Post Certification GP School Report	17
Highlights of activities from 2009	28
Appendix 1 - Structure of GP Administrative Team	
Appendix 2 - Structure of Department of Postgraduate GP Education	
Appendix 3 - GP Department contacts	

INTRODUCTION

This document presents the last year's annual report of the Department of Postgraduate General Practice Education, Kent, and Surrey & Sussex Deanery.

This has again been a year for the continuing development of the Deanery as an organisation.

The report describes the changes in the working arrangements of the GP Department, our achievements, and some of the year's highlights. I hope you find the report interesting and informative, and we welcome your feedback.

Professor Abdol Tavabie
GP Dean
January 2010

REFLECTION ON THE YEAR (2009-2010)

The past twelve months have been very busy, enjoyable and, in many ways, have continued the process of consolidation for the Department of Postgraduate GP Education. We continue to experience growth in our agenda and activity. With this continuing rapid change, it has been very important to take stock of our processes and review how we influence recruitment and retention of GPs in the health economy and respond to changes in primary care education and development, whilst continuing to ensure that our internal organisation remains fit for purpose. Our underpinning aims are to improve health care for patients, through education and development of our workforce; in particular the training of doctors to be GPs, and the continuing professional development of GPs and their teams.

We have restructured the Department of General Practice Education to respond positively to the GP Specialty Training Programmes and the forthcoming medical revalidation through two virtual schools.

- 1. GP Specialty School:** The School has developed this in partnership with the Royal College of General Practitioners to reflect the structure required for implementing the GP Specialty Training Programmes. The School has been structured to ensure high quality GP Specialty training in line with the educational governance requirement of the RCGP and PMETB. Dr Ian Mclean has provided leadership as Head of the GP Specialty School and his report forms part of this annual report (page 5).
- 2. Post Certification GP School:** The KSS Deanery recognises the importance of working with our local PCTs to support GPs in their continuing professional development (CPD) and preparation for the revalidation process. Dr Kevin Hurrell has offered leadership as the Head of the Post Certification GP School. The Post-Certification GP School is committed to the promotion of Personal Development Plans (PDPs) linked to the annual NHS appraisal process. We believe PCT clinical governance provides a framework to monitor, review and raise the quality of care delivered by the GPs on their medical performers' list. GP appraisal lies at the educational end of the spectrum of clinical governance processes. We have developed Appraiser Development Centres to support development of GP Appraisers in their role to be able to implement the concept of the enhanced appraisal with clear judgement and a leadership role in supporting GPs. We have appointed the Work Psychology Partnership Group to evaluate our processes and their report is now available with a very positive feedback from GP Appraisers and PCTs. Dr Hurrell's report forms part of this annual report (page 16).

We believe that the NHS offers opportunities for our entire GP education network, throughout the Deanery, to work together to offer a meaningful experience for all new postgraduate doctors and

qualified GPs that enhances both their understanding of the patient journey and of the competences in managing patient care pathways.

The GP Dean has been working with all stakeholders including the Eastern and Costal Kent PCT to pilot training placements for GP trainees in the PCT, during which time they will be supervised by the Senior Management Team. This project has been evaluated externally and we have received a positive response. The evaluation report by Canterbury Christchurch University has highlighted interesting feedback by GP trainees and the PCT for the Deanery to streamline the principles of GP placement in PCTs.

The KSS Deanery has also worked with the South East Coast (SEC) Ambulance NHS Trust to place Paramedic Practitioner Students in GP Training Practices. The SEC Strategic Health Authority asked the GP Postgraduate Dean to review the education strategy and workforce planning for the SEC Ambulance NHS Trust. This was carried out and the report with all recommendations was accepted by the SHA and SEC Ambulance NHS Trust. As a result, we were asked to form a steering group of stakeholders (HEIs, SHA, PCT, SEC Ambulance Trust and the Deanery). The Steering Group has developed frameworks for the continuing development of the SEC Ambulance NHS Trust workforce planning and their education and training development. We have piloted 8 Paramedic Practitioner students' placements in general practice with interesting and positive outcomes. This has also been evaluated externally and the report is now available.

There have been some other significant achievements during 2009, for which all members of the GP education network can be justly proud. We are grateful to all the GP Trainers, GP Programme Directors, GP Tutors, and the members of the GP Dean's team, together with the core administrative staff, for their contribution to making the KSS health economy a first-class place in which to be trained. During a period of tremendous change in the NHS, the GP Department has continued, with great success, to modernise its processes and to advance GP education. It is with great pleasure and pride that I am able to describe the following areas that demonstrate the GP Department's commitment to the development of GP education.

GP Deanery Team

The GP Dean's team has taken the opportunity to develop a structure for itself which is sensitive to our work, responsive to the needs of today's general practice education, and offers the opportunity for all individuals in the team to work towards their aspirations and full potential. The Lifelong Learning Adviser is working closely with the patch Associate GP Deans and acts as a conduit between the GP Department and GP Tutors and PCTs.

The KSS Deanery has integrated its functions and transferred the employment of Deanery staff to the South East Coast SHA in April 2009.

The GP Department is committed to reviewing the role and responsibilities of each individual in the team regularly and supporting them, through their appraisal, in their personal and professional development. I am pleased to report that all team members including GP Programme Directors and GP Tutors have had their appraisal and this has allowed the Deanery to harness the skills and abilities of the team to enhance the delivery of our goals and agenda.

Our core administrative team has also been given protected learning time and has taken the opportunity to develop skills and learning through appropriate courses.

The Deanery Team as a whole has had regular protected time for team building activities, and last year we had three away days for the Dean's Team and the Administrative Staff.

Education in the Deanery

Probably the greatest asset of this Deanery is its committed workforce of GP Tutors, GP Programme Directors, GP Trainers and Associate GP Deans, without whose hard work none of our proposals and initiatives would have been achieved. Judging from the annual reports of GP Programme Directors and GP tutors from all over Kent, Surrey and Sussex, it is evident that GP Specialty Training Programmes are thriving and the number of GP Trainers is increasing. The KSS Deanery has strengthened the administrative support at the local level in order to support the effective delivery of our GP Specialty training and GP CPD.

The Higher Educational Institutes

We are fortunate to have four universities in KSS, or in close proximity to the KSS Deanery (Kent, Surrey, Brighton and London South Bank). The GP Dean has met with the Postgraduate Medical School Deans, and as a result of this our preparation course for GP Trainers has been accredited by London South Bank University. This will give greater flexibility for our GP Trainers to follow their academic aspirations in the form of further degrees, such as an MA or MSc.

We have also supported the seventh cohort of experienced educators in accrediting their prior educational experience for a Certificate of Teaching, through an APEL process, with London South Bank University. Our aim is to offer all members of our education network the opportunity to gain appropriate further academic qualifications as well as enhancing their development as teachers.

In addition, we have the agreement of Kent University to commence an academic MSc in Medical Education and Strategic Leadership for the whole GP Education network. This process commenced in September 2009 for all prospective GP trainers with a view that all new GP Trainers and Programme Directors in future will study for the Postgraduate Certificate of Education. They will have the opportunity to follow their academic ambitions to the level of Master's Degree at Kent University.

Professor Abdol Tavabie

Dean of Postgraduate GP Education

January 2010

GP Specialty School Report

This is the second annual report from the KSS GP Specialty School, for a year that represents a consolidation of the School and firming of the organisational structures that underpin the School.

The School has been able to support and incorporate national developments to ensure training within KSS is delivered in line with the guidance and educational requirements of the RCGP and PMETB, and of the Deanery's expectations, to quality-assure training and to equip GP trainees with the necessary skills to successfully progress through to a Certificate of Completion of Training (or equivalent) and to be eligible to be entered onto the GP register of the GMC.

School structure

The KSS GP School is based around the 15 GP Specialty Training Programmes, a number of which include multiple main sites or include Programme areas that are educationally linked.

Programme Areas

East Kent Patch

East Kent. This includes the main hospital sites of Ashford, Canterbury and Margate, which are all part of the same NHS Acute Hospital Trust.

Medway. For organisational purposes, this is supported by the Patch Associate GP Dean for East Kent.

West Kent Patch

Maidstone and Tunbridge Wells are separate training programmes that share a common NHS Trust and close working.

Dartford training programme is linked to the Darent Valley NHS Acute Trust.

East Sussex Patch

Hastings and Eastbourne are separate training programmes that are linked educationally and to a common NHS Trust

Brighton and Mid-Sussex. This training programme area is based on two main hospitals, one in Brighton and the other in Haywards Heath, and both are covered by the same NHS Acute Hospital Trust.

West Sussex Patch

Worthing and Chichester are separate programme areas with close educational links and the hospitals in both sites are now part of the same NHS Acute Trust.

East Surrey Patch

Crawley and East Surrey is one training programme. The CRESH programme links to East Surrey Hospital. Epsom (hospital posts at Epsom are linked to the Epsom and St. Helier NHS Trust which forms part of the London Deanery area).

West Surrey Patch

Frimley is a training programme linked with the NHS Foundation Trust.

Guildford and Chertsey are two training programmes that have had close educational and administrative links but are in separate NHS Acute Hospital Trusts.

Each Patch is supported by a Patch Associate GP Dean, who is a member of the KSS Deanery, Department of Postgraduate GP Education.

During this year the Local Faculty Groups (LFG) have consolidated their working and all groups now provide minutes of all their meetings and an annual report to their Local Academic Board (LAB). This has been very useful as a source of information for the Deanery Quality Management visits.

The KSS GP School uses a large number of Local Education Providers (LEPs), much larger than any other specialty, which brings with it more complexities for educational governance, in particular for ensuring that the learning outcomes of the GP curriculum and the associated workplace-based assessments are being appropriately carried out and delivered in all places. They include all the Acute NHS Trusts with their associated hospital sites, NHS Community and Psychiatric Trusts, NHS Clinics (such as Genito Urinary Medicine Clinics), Hospices, GP Out of Hours provider sites, and of course, all the approved GP Training Practices; nearly 300 locations.

Deanery Team members supporting the GP Specialty School

Title	Forename	Surname	Role	Contracted Sessions
Prof	Abdol	Tavabie	GP Dean	10
Dr	Ian	McLean	Deputy GP Dean & Head of School (HOS)	10
Dr	Susan	Bodgener	Associate GP Dean for Assessment	3
Dr	Chris	Warwick	Associate GP Dean (East Surrey & Crawley)	3
Dr	Mary	Davis	Associate GP Dean	2
Dr	Hilary	Diack	Associate GP Dean (West Surrey)	4
Dr	(Lindsay Mary-Rose)	Hadley Shears	Associate GP Dean (to July 2009) Interim Associate GP Dean (East Sussex) (from August 2009)	4) 3
Dr	Kim	Stillman	Associate GP Dean (East Kent)	4
Dr	Debbie	Taylor	Associate GP Dean (West Kent & Medway)	4
Dr	Glyn	Williams	Associate GP Dean (West Sussex)	4
Mr	Steve	Scudder	Lifelong Learning Adviser	WTE

Office staff supporting the GP Specialty School

Forename	Surname	Role	WTE
David	Buckle	GP Training Administrator	Full
Julie	Coulson	Kent Patch Manager	Full
Sandra	Forster	GP Office Manager	32 hrs pw
Lisa	Jones	GP Trainer Co-ordinator & PA	Full
Elena	Gonzalez	GP Training Recruitment Manager	Full
Sharon	Norton	GP Patch Administrator	24 hrs pw
Sultana	Parvez	GP Training Recruitment Officer	Full
Adam	Pearson	GP Projects Officer	Full
Georgina	Price	Surrey Patch Manager	Full
Sue	Smith	Deputy Office Manager & Sussex Patch Manager	Full
Nina	Tafa	GP Training Manager	Full
Lesley	Woodman	Interim GP Training Manager (commenced Dec 09)	Full
Keisha	Van Kleef-Bolton	GP Payments & Office Administrator (Resigned August 2009)*	Full

- Adam Pearson supported the interim GP Payments Administrator role. Sandra Hunter commences in post January 2010

GP Specialty Programme Directors

Kent	No. of Sessions	Surrey	No. Sessions	Sussex	No. Sessions
Eastern & Coastal Kent (Ashford & Dover, Canterbury & Thanet)	13	Crawley	4	Brighton	6
Medway	6	East Surrey	6	Eastbourne	5
Dartford	5	Epsom	6	Hastings	5
Maidstone	6	Chertsey	5	Mid Sussex	6
Tunbridge Wells	6	Frimley	6	Chichester	6
		Guildford	6	Worthing	6
		West Surrey	1		

Local Education Providers

No.	Specialty	Programme	Unit
1	GP	ST1/ST2	Ashford and St. Peters Hospitals NHS Trust:
2	GP	ST1/ST2	Brighton & Sussex University Hospitals NHS Trust:
3	GP	ST1/ST2	Dartford and Gravesham NHS Trust:
4	GP	ST1/ST2	East Kent Hospitals University NHS Trust:
5	GP	ST1/ST2	East Sussex Hospitals NHS Trust:
6	GP	ST1/ST2	Epsom & St. Helier University Hospitals NHS Trust:
7	GP	ST1/ST2	Frimley Park Hospital NHS Foundation Trust:
8	GP	ST1/ST2	Maidstone & Tunbridge Wells NHS Trust:
9	GP	ST1/ST2	Medway NHS Trust:

10	GP	ST1/ST2	Surrey and Sussex Healthcare NHS Trust:
11	GP	ST1/ST2	The Royal Surrey County Hospital NHS Trust:
13	GP	ST1/ST2	Western Sussex NHS Trust
15	GP	ST1/ST2	Kent and Medway NHS and Social Care Partnership Trust
16	GP	ST1/ST2	Surrey & Borders Partnership NHS Foundation Trust
17	GP	ST1/ST2	Sussex Partnership NHS Foundation Trust

GP Specialty Programme Director appointments

GP Specialty Programme Director appointments are made through a GP Deanery appointments panel that is chaired by a lay representative and with supportive input from the Deanery Human Resources department. Reports and the decisions of this committee are:

Programme Directors		
2009	Resigned 09	Started 09
East Kent & Medway	1	0
West Kent	1	0
East Surrey	4	4
West Surrey	1	2
East Sussex	1	2*
West Sussex	2	3**

*Including one interim PD

**Including one new session in Chichester

During this year the School has been sorry to say goodbye to Liz Thorpe, Anne Wheeler, Andrew Pullen, Mithun Bhartia, Chris Warwick, Nick Barrie, Richard Wright, Alex Watson and Richard Claxton.

We are, however, very pleased to welcome Mayur Vibhuti in Medway, Saba Khan in Chertsey, Mark Halloran and Terri McGlone in Epsom, Martin Brunet in Guildford and Pippa Woolner in East Surrey, Claire Ilsley in Hastings, Liz Norris in Mid Sussex and James Bramall in Chichester. Heinrich Van Wyk has also joined us as an interim Programme Director in Eastbourne. The KSS GP School is very fortunate to have a group of enthusiastic GPs recently trained who are putting themselves forward in this way to continue the support of GP training in KSS.

GP School Board

The School is supported by a Board which meets every three months to agree strategic and planning functions, make operational decisions and to ensure the smooth running of training in KSS. The Board has representation from the KSS Postgraduate Dean Director, GP Dean, Head of the GP School, the Patch Associate GP Deans, GP Programme Directors, GP Trainers, GP trainees, KSS Clinical Tutors and Directors of Medical Education, the Strategic Health Authority, the

RCGP, Local Medical Committees and Higher Education Institutes and Universities within the South East Coast Health Economy.

The GP School Board has met on four occasions this year, and has further established its role in continuing to support both the GP School and GP Dean in providing direction and educational governance for the GP School and to ensure that the quality of education and training meets the standards set by the PMETB, the Royal College of General Practitioners, and the KSS Deanery and South East Coast Strategic Health Authority's aims and goals for the delivery of effective health care in the health economy. The School is grateful for the support rendered by Board members, particularly colleagues from the RCGP and Higher Education Institutes. The GP School Board has close links with the Committees of those specialties that host GP trainees in hospital posts, with input to our Board meetings by the Deputy Postgraduate Dean, who provides input to the GP Board on behalf of all the other specialties.

I would like to thank the work of the GP Registrar committee, under its chair Dr. Mark Halloran for the enormous amount of help and support that it has given to the GP School, not only at the regular meetings, but on a continuous basis. The School is now delighted to have Dr. Dan Hancock to continue this role, and wishes Dr. Halloran all success in his career as a GP and as a Programme Director.

Outcomes of GP Training and Annual Review of Competency Progression (ARCP)

We have now completed the certification process for all trainees still providing evidence under the old processes of the COGPED Summative Assessment (the transition process). All GPStRs in the GP School now use the ePortfolio to enter their Work Placed Based Assessments (WPBA) as part of the evidence required to be submitted for the ARCP process.

The GP School has continued to support both the GPStRs and the GP educators (GP Trainers and Programme Directors) with a programme of workshops and learning events, hosted both at the local and the Deanery level. Patch Trainer days have been held in each patch to allow our GP Trainers to continue to develop their understanding and skills related to the WPBA tools. The Deanery has also continued to support the twice-yearly workshops for GP Trainers and the feedback from these courses has been very positive.

The School has run regular induction days for GP Trainees to introduce them to the GP Curriculum and the ePortfolio. This also allows them to understand what their role and responsibilities are for various aspects of the assessments.

The School is pleased to report that the failure rate from training continues to remain low. This emphasises the value of a continually monitored educational progression for GP trainees that allows the important formative feedback from assessments, that we have always valued, to be maintained. The vast majority of GP trainees who have been identified as having a need for more

focused and targeted educational input have used this effectively (with an extension to training if required) in order to successfully complete their period of training. Unfortunately, the GP School has needed to discharge three GP trainees from training without the achievement of all the competencies needed (an ARCP outcome 4). We are pleased that this is such a small number, which reflects positively on the quality of our GP educators. The outcomes from the ARCP panels are shown below.

The performance of GP trainees in the KSS School as measured in the AKT and CSA continues to be very good and this again demonstrates the value of the information, briefing and skills training that the School provides for our Programme Directors, GP Trainers, and the GPStRs. Our induction for the ST3 year for GPStRs continues to receive very positive feedback and the CSA training days that are held at the Croydon centre are enormously valued and have also been given high praise by observers from other Deaneries.

The RCGP has again visited our ARCP process for quality management and reported very favourably on our processes. They have also, in addition, undertaken a national process of auditing the quality of the evidence submitted by Educational Supervisors to the Portfolios of their GPStRs. This has identified a developmental need for our Educational Supervisors, as in many other GP Schools, to enhance the content and reflective quality of their reports, and to ensure that they are submitted in time to support the ARCP panel members in their decision making. We have subsequently provided appropriate further information to our GP Trainers with guidance and models, both electronically and through local Trainer workshops, Deanery Trainer Days and Programme Director workshops. Our GP Trainers have warmly welcomed this information and have affirmed how useful this has been, and this has been reflected in the enhanced quality of reports submitted to GPStR's portfolios.

MRCGP assessments, and Annual Review of Competency Progression (ARCP) outcomes

CLINICAL SKILLS ASSESSMENT

	JAN 09	MAY 09	SEPT 09	NOV 09
Total number of trainees who took the CSA	117	88	25	13
Passes	90	70	16	9
Fails	27	18	9	4

APPLIED KNOWLEDGE TEST

	JAN 2009	APRIL 2009	OCT 2009
Total number of trainees who took the AKT	77	56	150
Passes	65	49	128
Fails	12	7	22

ARCP Outcomes (August 08 to July 09)

ARCP		OUTCOMES					
		1	2	3	4	6	8
Total number of trainees	772	491	3	20	3	213	42

Key:

Outcome 1 (satisfactory – to continue to next training year)

Outcome 2 (unsatisfactory – no additional training time required)

Outcome 3 (Unsatisfactory - additional training time required)

Outcome 4 (released from Programme)

Outcome 6 (Proceed to CCT)

Outcome 8 (Out of Programme)

Quality Management of GP Training

This year has consolidated and developed the Deanery process for Quality Management of postgraduate medical education and training, and the GP School has continued to actively support that process with a visit to each of our GP training programme areas.

This year has also seen a formal inspection visit to the KSS Deanery by PMETB which was carried out in May. This visit was done as part of the PMETB's three-yearly cycle of visiting Deaneries. The visit was to assess the quality of the Deanery management of education and postgraduate training, and in KSS the PMETB inspected three specialties (Orthopaedics and Trauma Surgery, Paediatrics and General Practice) and visited these in three areas (Medway, Tunbridge Wells and Chichester). I am very pleased to say that the visitors were pleased with what they saw for GP training, and had no particular areas for development to report.

PMETB also visited, at the specific request of the KSS Deanery, the A&E Department at Tunbridge Wells. This trigger visit was to help the Deanery and the Trust resolve a long-standing problem with a difficulty in finding appropriate clinical supervision for the core trainees overnight in the department (predominantly GP trainees in their ST1 and ST2 year, and ACCS trainees). This post offered GP trainees very good experience during the rest of the day. The visit was helpful to both the Deanery and the Trust in finding ways to resolve this issue, and as a result no core level trainees are required to work overnight now. Feedback from the trainees is now very positive about the post.

GP Faculty and LEP visits completed in 2009

No.	Trust	Site Visited	Dates	Speciality
1	Frimley Park Hospital NHS Foundation Trust	Frimley Park Hospital	3 & 4 September	O & G, GP
2	Ashford & St Peter's Hospital NHS Trust	St Peter's Hospital Chertsey	15 & 28 September	O & G, GP
3	East Kent Hospitals University NHS Trust	Kent & Canterbury Hospital	23 & 25 September	Medicine, GP
4	Dartford & Gravesham NHS Trust	Darent Valley Hospital Dartford	1 & 2 October	O & G, GP
5	Maidstone & Tunbridge Wells NHS Trust	Maidstone Hospital	8 & 9 October	ENT, GP
6	Surrey & Sussex Healthcare NHS Trust	East Surrey Hospital Redhill	15 & 16 October	Medicine, Paeds, GP
7	Royal Surrey County NHS Trust	Royal Surrey County Hospital Guildford	22 & 23 October	Surgery, Paeds, GP
8	Sussex Partnership	Swandean Worthing	4 November	Psychiatry
9	Western Sussex Hospitals	Worthing Hospital	3 & 10 November	Paeds, GP
10	Western Sussex Hospitals	St Richard's Hospital Chichester	5 & 6 November	Medicine, O & G, GP
11	East Sussex Hospitals Trust	Conquest Hospital Hastings	11 & 17 November	Paeds, GP
12	Brighton & Sussex University Hospitals Trust	Princess Royal Hospital	19 & 20 November	Medicine, GP
13	Medway NHS Trust	Medway Maritime Hospital Gillingham	26 & 27 November	Medicine, GP

Out of Hours (OOH) placements for GP trainees

The GP School continues to meet with representatives from the OOH providers in the South East Coast Health area to ensure that the placements for GPStRs in the OOH settings are working as smoothly as possible. This is particularly important as the providers continue to change in this area.

The School has again provided training in OOH and telephone consulting skills for our GPStRs in their final year of training. Both the Dean and Head of School continue to work with COGPED to develop the national guidance for training for GPStRs in OOH.

Website

The GP Department website has undergone significant change and redesign this year, and is now a part of the overall KSS Deanery website. This has allowed us to present a fresh and exciting interface, to improve our site search facilities, and to incorporate new technologies. Examples of this are the new process for reading online booklets and its first streaming video.

Recruitment and selection of doctors for GP training

Recruitment to GP training in 2009 was more challenging nationally than in previous years, as there was a reduction in the total number of applicants to GP. KSS fared better than some Deaneries overall. We had around 285 individual programmes, which needed about 280 new accepted offers (the rest being filled by doctors who had deferred from the year before). Although we managed to fill all our programmes eventually, unfortunately about five candidates subsequently dropped out for a variety of reasons and there were not enough successful applicants either in our or the national reserve to fill those. A number of other Deaneries had to take part in an unprecedented second round of selecting, and even after that there were many posts unfilled nationally.

The GP School was very pleased to create its first formal prospectus, as both a booklet and in an electronic form. This was received very well by applicants and provides a continuing source of information, and will be updated each year. The School is grateful to the many individuals who submitted photographs representing GP training in their area, or of local features, as many of these were used in the prospectus.

Number of applications to KSS as first-choice Deanery 389

Number shortlisted for the Selection Assessment Centre 456 (includes applicants putting KSS first and second choice)

Number of offers accepted 350

PMETB approved GP training posts in the KSS GP School

The PMETB continues to be the competent authority to approve all postgraduate medical training posts in the UK. Although GP training is at present for only three years, the data that the GP School needs to collect is far more complex than that for other specialty trainees. This is largely because of the range of specialty posts used in individual rotations and the much greater number of different training locations. The GP School and the GP Deanery administrative staff have undertaken extensive work on the Deanery database system to ensure that the data that we and the Deanery holds is congruent and fit for providing information for the many requests for different sorts of data from a wide variety of different bodies.

Numbers of trainees

In August 2007 the GP School took on its first intake of trainees to the GP Specialty Training Programme. The table below shows the number of trainees in post during 2009/10:

GP StR numbers	ST1	ST2	ST3	TOTAL
In training Aug 2009	285	285	231	801

GP Trainers

The KSS GP Trainer Selection committee, which is a subcommittee of the GP Board and reports to it, met four times during this year. KSS continues to expand the number of GP Trainers, and this has been a busy year for this committee.

The GP School has been pleased to develop and introduce a new process for Trainer approval and re-approval which will be integral to the developing process of academic accreditation for our GP Educators. This process places the emphasis on each GP Trainer collating and submitting evidence which is congruent with both the present domains of the PMETB criteria for the delivery of Postgraduate Medical Education, and the RCGP. This has been, and remains, a substantial ongoing piece of work. In order to support this change for GP Trainers from 'being inspected' to providing reflective evidence, the School has facilitated training at our local and Deanery-wide meetings for GP Trainers, and also provided expert resources from senior GP educators for our individual GP Trainers undertaking this process. Evidence presented in this way demonstrates a richness of learning and experience and will be submitted by all GPs now training on our modular educators' course as part of their course work.

All GPs undertaking the educational course to become a GP Trainer will, from August 2009, be doing this as an integrated process to achieve a Postgraduate Certificate of Education, and the School is working with Kent University, amongst others, to offer this academic accreditation to our established GP Trainers, using their previous learning and educational experience.

Approved GP Training Practices in KSS = 224

Approved GP Trainers in KSS as of December 2009					
East Kent	45	Hastings	10	East Surrey	44
Maidstone	14	Eastbourne	10	Epsom	21
Medway	17	Brighton & Mid-Sussex	45	Frimley	29
Tunbridge Wells	24	Worthing	25	Guildford	25
Dartford	14	Chichester	28	Chertsey	23
TOTAL	117		118		142
OVERALL TOTAL			377		

KSS GP Trainer Selection 2008-2009	New appointments	Re-approvals	Resignations
East Kent	8	24	5
West Kent	4	20	0
East Sussex	4	5	2
West Sussex	11	16	3
East Surrey	6	23	2
West Surrey	7	24	8
TOTAL	40	112	20

Meetings

The GP School consists of all the GPStRs in training, all the GP Trainers and the GP Programme Directors, the Patch Associate GP Deans, other Associate GP Deans, the Head of the School, the GP Dean, and all those members of the team in the GP Department of the KSS office. In addition the School values enormously the work done by the Medical Education Managers and the GP Training Practice Managers. The School provides a comprehensive series of workshops, training days and conferences for all members of the GP education network and support staff. A full list of these can be found on our web site diary; these have included:

GP Dean Team and staff meetings including away days

Trainer days, Patch and Deanery wide

Programme Director Conferences

GPStR meetings, Induction Days, CSA training, OOH training

Training Practice Managers meetings

Medical Education Managers' meetings

Information in the School

The GP School continues to send a regular e-mail Bulletin to Programme Directors with briefings and information updates related to all aspects of GP training. In addition, the GP Deanery sends out an electronic Newsletter to all those involved with GP education, to inform all stakeholders of changes and updates locally and nationally for GP education.

An archive of these is available on the GP Deanery website.

Dr Ian Mclean

Head of GP Specialty School

Post-Certification GP School Report

The Post-Certification GP School is an innovative response from KSS Deanery in anticipation of Revalidation and provides a structure for the promotion and development of Continuing Professional Development (CPD) for all GPs in Kent, Surrey and Sussex.

Although KSS Deanery has always promoted good quality CPD (continuing professional development) for GPs in Kent, Surrey and Sussex, the arrival of Revalidation has made us even more aware of the need to support all GPs and to improve the quality of the current GP appraisal system. The Post-Certification GP School has provided the Deanery with a structure that promotes a collaborative approach to the provision of high-quality appraisal and CPD for GPs through working partnerships with allied organisations, including our Primary Care Trusts (PCTs), our Local Medical Committees (LMCs) and our College faculties.

Continuing Professional Development – CPD

The Post-Certification GP School is committed to the promotion of Personal Development Plans (PDPs) linked to the annual NHS appraisal process. We believe PCT clinical governance systems provide a framework to monitor, review and raise the quality of care delivered by the GPs on their medical performers list. GP appraisal lies at the educational end of the spectrum of clinical governance processes. The appraisal process contributes to the overall clinical governance framework as it provides assurances that GPs are planning and reviewing their CPD in a structured way. GPs can include in their appraisal folder reflections on their clinical governance-related activities. PCTs can also inform the appraisal process by providing, where appropriate, information to GPs which can inform their own needs assessment and also their personal and practice development planning.

Appraisal and CPD are closely linked. Appraisal provides doctors with an opportunity to demonstrate the CPD they have undertaken, reflect on what they have learned from it, and plan their CPD for the following year. The learning needs identified by GPs in their personal development plans (PDPs) as part of their appraisals should inform the education and support that is available and accessible to them. Re-licensing and re-certification are being developed by the GMC and The Royal College of General Practitioners to produce the unified process of revalidation, with enhanced appraisal at its core.

Deanery staff working on behalf of the Post Certification GP School

Deanery Team

Title	Forename	Surname	Role	Contracted Sessions
Prof	Abdol	Tavabie	GP Dean	10
Dr	Kevin	Hurrell	Head of Post-Certification GP School	6
Dr	Hilary	Diack	Lead Associate GP Dean for Induction & Refresher, Retainer	2
Dr	Mary	Davis	Lead Associate GP Dean for Simulation	1
Dr	Nathan	Nathan	Associate GP Dean for Underperforming Doctors	3
Mr	Steve	Scudder	Lifelong Learning Adviser	Full

Office staff

Forename	Surname	Role	WTE
Sandra	Forster	GP Office Manager	32 hours pw
Gill	Carter	CPD Manager	Full
Leah-Marie	Harvey	CPD Administrator	Full

GP Tutors

Kent	No. of Sessions	Surrey	No. Sessions	Sussex	No. Sessions
Eastern & Coastal Kent (Ashford & Dover, Canterbury & Thanet)	6	Crawley	1	Brighton	2
Medway	2	East Surrey	1	Eastbourne	2
Dartford	2	Epsom	1	Hastings	2
Maidstone	2	Chertsey	2	Mid Sussex	1
Tunbridge Wells	2	Frimley	2	Chichester	1
		Guildford	2	Worthing	2
		Ashford	2	Horsham & Chanctonbury	1

The Post-Certification GP School provides the following services:

- Enhanced appraisal service. Working in partnership with our PCTs, the School has developed Appraiser Development Centres (ADCs) which provide training and updating for new and existing appraisers and PCT personnel, preparing them for the changes required for Revalidation.
- Support for appraisers. In addition to the Appraiser Development Centres, the School uses the GP Tutor network to provide learning sets for the appraiser network and trains lead appraisers to support their colleagues.
- GP Tutors also help their PCTs organise protected learning time for GPs and practice staff and ensure GPs in their area are fully informed about the Revalidation process. They continue to act as a focus for educational activity and support in their localities, including support for local commissioning initiatives.

- The School is also collaborating with PCTs and local College Faculties on the development of local support and performance-improvement training for GPs identified through the appraisal system as needing local remediation or rehabilitation.
- The School is also responsible for the further development of the KSS Mentoring programme which offers additional support for GPs through a one to one, confidential relationship with a respected GP peer. This service is available to all GPs in KSS and can help with career planning and personal development as well as supporting GPs with individual or practice-based concerns.
- The School supports GP Refreshers (those returning to general practice after a career break), and supports GPs through the transition from trainee to independent GP by encouraging learning sets for salaried doctors.

The GP Post-Certification School is responsible to the CPD Board which has representation from a wide range of stakeholders, including PCTs, Tutors and Mentors, LMCs, RCGP Faculties, Lay Representation and Deanery members.

This innovative and unique development helps ensure that GPs in KSS experience high quality appraisals, relevant to their needs, and the needs of their patients and their locality. It will prepare them for Revalidation and will support them if difficulties emerge.

The Post-Certification GP School has inherited the responsibility for a number of services that have run successfully throughout KSS for some time:

GP Tutor Network:

GP education over the past few years has seen a number of changes, with the GP Tutors responding to this in a number of different ways. Within KSS we have retained the GP Tutor role when many were shedding them and we have built upon their experience, skills and local knowledge to take education for GPs forward for a new era.

GP Tutors are important members of the Post-Certification GP School workforce and facilitate the Continuing Professional Development (CPD) of all GPs working in their area.

They work closely with their local PCTs to facilitate appropriate learning activity that answers the needs of the local GPs as identified by the appraisal process and by the collation of clinical governance data.

They are developing relationships with local Practice-based Commissioning Groups, helping them identify the professional learning needs generated by new services arising in their localities and responding to those needs appropriately.

In many areas these needs are being answered by events supported by PCTs through Protected Learning Time arrangements, either as local educational meetings or as multi-professional learning events in individual practices.

GP Tutors also have a vital role in preparing GPs for Revalidation. They usually act as leaders of their local Appraiser Learning Sets and also help raise awareness of the requirements for revalidation amongst the local GP workforce.

They act as local resource directories for individual GPs looking for primary care knowledge and skills training and work closely with the staff in local Postgraduate Medical Education Centres.

The role of the GP Tutor has developed significantly over the last year or two, reflecting changes to GP appraisal and in anticipation of Revalidation. Their present job description includes the following list of roles and responsibilities:

1. To facilitate educational activity for all GPs, enabling them to fulfil the requirements of appraisal, re-licensing and re-certification and promoting the relevance of such activity for individual personal and professional development, and to enhance patient care and service provision. This includes the support of individual GPs who require some intervention to maintain or achieve good performance, directing individuals toward appropriate resources such as mentoring and careers advice.
2. To work with the PCT to lead the development of practice-based, locality-based and PCT-wide educational activities for GPs and Primary Care Teams, promoting inter-disciplinary and multi-professional learning and development. This should include locating, co-ordinating and signposting educational resources within the local area to underpin and encourage the development of patient services.
3. To accredit such educational activity if required by Primary Care Trust (PCT), Deanery, Royal College of General Practitioners (RCGP) or other relevant authority to fulfil the requirements of appraisal, re-licensing and re-certification and with a view to improving patient care and health service delivery.
4. To have a key role in working with PCTs to ensure that Annual Appraisal of all GPs is appropriately managed, including the production of individual Personal Development Plans (PDPs). This includes educational leadership of the local GP Appraiser network, working with PCTs and in agreement with deanery policy, leading locality-based learning sets and establishing and promoting the identified learning needs of that group.

5. To contribute to the quality assurance of the appraisal process within their local area, working closely with the relevant PCT Officer(s) to ensure the appropriate levels of support, supervision, recruitment and ongoing education and training of all involved in the GP Appraisal process.

6. To inspect practices as required by the Deanery, ensuring appropriate standards are met for education, training and support for established doctors.

7. To collaborate with other colleagues involved locally in Primary Care education, including other Tutors, Programme Directors, Clinical Governance and Education leads, RCGP Faculty representatives, other Primary Care, Hospital-based, and Undergraduate teachers and local Postgraduate Medical Education Centre (PGMEC) staff to lead on the promotion of lifelong learning and continuing professional development from certification to retirement that focuses on patient care and service delivery.

8. To liaise with the Deanery management team, the Lifelong Learning Adviser, the "Patch" Associate GP Dean, the relevant Deanery Lead for CPD, the Deputy GP Dean and Postgraduate GP Dean, as required and as relevant.

9. To attend and support Deanery educational events organised for GP Tutors, whether Deanery-wide or county based, and other educational or development activities based on individual PDP needs identified through the annual Deanery appraisal system.

10. To promote and contribute to the promotion of Deanery policy and the quality assurance of CPD locally and throughout KSS as a representative of the GP Dean and to provide written reports on their activities as requested by the GP Dean, conforming to the approved reporting model.

We currently have 24 GP Tutor posts across KSS and this year have welcomed Karen Finlay and Nicholas Cheales to the Tutor role in West Kent and have seen Heidi Fahy unite the tutor post in Crawley with Redhill with the two localities sharing the same Postgraduate Education Centre.

All of the GP Tutors have had their annual appraisals and produced PDPs as a result and are working towards achieving their goals. They now provide quarterly reports on activities in their localities which together with 6 monthly appraisal review, help maintain focus and check on progress, as well as recognising changes in priorities that may have occurred.

Aside from a common perception that GP Tutors put on educational events at lunch time in the local postgraduate centre the GP Tutors in KSS are much more involved in CPD for the GPs in their locality. Their role encompasses aspects of managing appraisal and its educational outcomes, in particular the Appraiser Learning Sets. Future links to revalidation and managing the educational needs that emerge will further develop their role and their responsibilities. They are major players with recruiting and promoting participation in CPD pilots and in particular the RCGP CPD Credit

pilot which was completed this year, and act as ambassadors of both the Deanery and General Practice in the PCT, representing the General Practitioners “at the coal face”. The Deanery is currently working with the GP Tutors on a series of focused educational work streams under one SLA to ensure inclusion at all levels which in turn will lead to better patient care. These include:

- Protected Learning Time initiatives. GP Tutors manage the protected learning time provided by PCTs to help GPs, and their staff, answer their collective developmental needs and so improve patient services.
- The CPD Credit pilot and revalidation. GP Tutors have encouraged appraisers and appraisees to participate in the RCGP CPD Credit Pilot and will help spread awareness of other pilots as they emerge.
- Appraiser learning sets. GP Tutors are responsible for the ongoing peer support for appraisers available through the local appraiser learning sets. These bring together all appraisers in one locality to help PCTs quality manage the appraisal system.
- Enhanced appraisal. Appraisal will be right at the heart of revalidation but will need to be “enhanced” to answer all the needs of relicensing and re-certification. GP Tutors will ensure local learning sets are able to respond to the new requirements.
- Practice-Based Commissioning. GP Tutors are encouraged to raise awareness of PBC in their localities and help the local healthcare economy recognise and respond to the new learning needs of GPs and GP staff as new patient services and new care pathways emerge.
- Leadership skills. The Deanery organises regular residential and day conferences and workshops for GP Tutors and this year we have particularly focussed on leadership skills, including skills required to support their developing relationships with PCTs and Commissioning Groups such as negotiating skills, chairing meetings and facilitating small groups.

Appraiser Network:

In addition to the support available to appraisers through the learning sets described under the GP Tutor section, both the GP Dean and Head of School have visited a number of PCT-organised Appraisal events to prepare them for the changes to the appraisal system required by Revalidation. The previous system for training new appraisers, organised by the Deanery, has now changed to an innovative and exciting new process of **Appraiser Development Centres (ADCs), which form an important part of the Appraisal Support Programme, a service provided by the Deanery to many of the PCTs within the SEC Area.**

Potential new appraisers are able to attend an “Awareness ADC” which provides a structured programme that takes participants through awareness of the appraisal process and the competencies required of an appraiser on to an experiential learning session with detailed feedback from trained observers and simulators. Participants will be able to produce a detailed learning log and subsequent PDP which they can present to their PCT at the time of their application and selection. They also have an opportunity to explore their own emotional intelligence and realise how awareness of their own emotional intelligence dimensions can improve their competency as an appraiser.

If these potential new appraisers are appointed by their PCT they can return to the ADC for an initial training session before embarking on their first few appraisals (with heightened supervision initially provided by more experienced lead appraisers within their PCT).

Existing appraisers are able to attend the “Leadership ADC” where once again they examine ideas concerning emotional intelligence and receive detailed feedback on their own emotional intelligence dimensions before they participate in experiential workshops that include simulated appraisal scenarios and skilled feedback from trained observers.

Lead Appraisers are also able to attend their own ADC and have an opportunity to further develop their ideas of heightened appraisal and explore the additional responsibilities inherent within the lead appraiser role.

The Work Psychology Group have helped us develop our ADC programme and are now acting as external evaluators of the Appraiser Development Centres. Over 100 appraisers have attended the ADC and have provided detailed evaluation of their experience at the ADC, and have also provided the evaluators with continuing feedback on their performance as appraisers subsequently. We are delighted that this feedback has been extremely positive, with appraisers applauding the ADC programme and reporting upon positive changes to their subsequent activities as an appraiser.

Collaboration with Primary Care Trusts:

The work described above on Appraiser Development Centres is an example of the collaborative work undertaken between the Post-Certification School and the KSS PCTs in preparation for Revalidation. The **Quality Assurance of Appraisal Working Group** (QAWG) meets quarterly to share best practice and to develop a robust system of quality management and quality control for the appraisal system in KSS. Representatives from all KSS PCTs are joined by RCGP Faculty Members, LMC Representatives and GP Tutor Representatives and work with the Post-Certification School to develop sound processes for appraisal that meet the criteria and standards emerging from our regulatory bodies. As Head of Post-Certification GP School I have been able to visit PCTs throughout the year to support the work undertaken by QAWG and to help PCTs with their preparations for revalidation. The Revalidation Support Team distributed a detailed document to all

PCTs (Assuring the Quality of Medical Appraisal for Revalidation, AQMAR) which included self-assessed reporting templates for appraisal management and clinical governance processes within each PCT and this has been used as a useful checklist for us to work through and to learn from each others' experience.

Supporting GPs in Kent, Surrey and Sussex:

The Post-Certification GP School needs to support the enormously diverse range of GPs in our three counties and ensure that they are all prepared for Revalidation and, if possible, are aware of the support systems in place to help them successfully through their careers in general practice.

The School already hosts a number of support services for our GPs:

➤ **Learning Sets for Sessional GPs:** Sessional GP is the term applied to those general practitioners who work as salaried doctors, clinical assistants, locums, retainer doctors and (previously) Flexible Career Scheme doctors. This includes both full and part-time employment. We are concerned that individual doctors working as Sessional GPs are disadvantaged for several reasons:

- Sessional GPs can work in isolation, particularly those working as locums.
- They may not be part of any established primary health care team and may work transiently in practices.
- They may be geographically mobile and thus do not build up a local support network with peers nor can they easily access the local educational network for general practitioners.
- The nature of their status as an employee may mean that their personal and professional development may be subjugated to the demands, objectives and goals of the employing Practice.
- They may have difficulty in auditing their work or in accessing constructive feedback from patients, GP colleagues or other members of the primary care team.
- This group of GPs may have difficulty in obtaining meaningful information for their annual appraisal.
- There has been no history of financial support for Sessional GPs to undertake continuing professional development.

Learning Sets have run successfully for the last few years and are supported by funds from the School. They are local groups that meet regularly to give peer support and guidance to their members and will help individuals with such matters as career advice, obtaining CPD and preparing for appraisal and do help answer many of the concerns listed above. Each group is given financial support to help in the administration of the

group and provide educational resources. Each group is led by one of the membership and the Deanery organises an annual meeting of the group leaders which allows the groups to share expertise and good practice.

To date we have 20 groups across KSS supporting 301 Sessional doctors.

- **Support for “Refreshers”:** The GP Returner scheme was introduced in 2002 to support doctors in returning to general practice. The Scheme has now been widened in scope to become the Induction and Refresher Scheme (I & R Scheme). The scheme is open to UK-trained GPs who have been absent from general practice for more than two years and to EU-trained GPs. KSS has been working in collaboration with other Deaneries to develop a series of standards for recruitment to the scheme and assessment during the scheme.

We have been working on an initiative with East Kent Coastal Primary Care Trust to support the Trust with local recruitment by using the I & R scheme. KSS Deanery provides the educational input in terms of selection, placement and assessment and financial support for applicants is provided by the PCT. Over the past twelve months a number of GPs have returned to work in East Kent using the joint scheme.

Doctors wishing to be considered for the I & R Scheme are required to undertake a test of their clinical knowledge and professional decision-making and reach a required standard. Doctors then undertake a simulated surgery and again are required to meet an entry standard. Placements on the scheme are in GP training practices for between 3 and 6 months. Assessments during the scheme are co-ordinated using a nationally agreed log book and evidence is gathered by the trainer from observation of practice, case based discussion, patient satisfaction questionnaires and multi-source feedback.

Nine doctors have been appointed to the I & R scheme during 2009.

- **Local Procedures for GPs with Performance Concerns :**

The School supports the National Clinical Advisory Service (NCAS) in the assessment of those GPs considered to be in need of help, and facilitates their developmental training in general practice. We have established a robust assessment and training tool kit, and have also trained 10 experienced trainers for this end. With the recognition that doctors who may be underperforming are still a valuable resource to the healthcare economy, we need to support their return to useful working. We realise that there are increasing demands on the time and skills of our GP educators, so this group of Trainers receive a retainer fee in order to allow them to be called upon when needed to support underperforming doctors, as recognition of the commitment this will require.

- **Local remedial work and rehabilitation:** The enhanced appraisal system may identify more GPs with performance problems. These will often be below the threshold of concern that would involve NCAS or GMC but would still require some local response. The School is building upon its current experience with underperformance to work in partnership with PCTs to provide support and specific training for such doctors. The School will actively support the Responsible Officer and performance advisory group in each PCT and will use its experienced training network to provide this service locally. We are collaborating with our two local RCGP Faculties to develop a “buddy-type” system of support whereby an experienced empathic GP with some educational or support experience can assist GPs with low level performance concerns. We hope to pilot such a system in 2010, perhaps in conjunction with piloting multi-source feedback for appraisees. We would also ensure that such GPs were fully aware of the KSS Mentoring service.

Mentoring for GPs: The KSS Mentoring Scheme has run for the last 15 years and offers non-judgemental, confidential peer-led support for all GPs in KSS. Mentors help both established and new GPs to reflect upon their current professional practice and help them develop professionally. This may help mentees resolve issues within their practice or help them manage change or take a new career pathway.

The mentoring relationship is a confidential and supportive dialogue between the mentee and the mentor which can last anything between a single meeting and a year or more. KSS Deanery believes that many more GPs could be supported through mentoring but fail to come forward due to a lack of knowledge about the service offered. We do have a mentee information pack accessible through the website and indeed have a mentor pack too which may also be of interest. Everyone within the KSS Educational network should be aware of the mentoring scheme and be able to promote it to the wider GP grass roots.

Currently we have approximately 50 Mentors and at the time of the Annual Conference in October they were involved with just over 100 Mentees. Mentors are themselves supported through their own local learning sets as well as being able to attend workshops and the annual conference. Our Mentor Group Convenors facilitate the process of peer appraisal of our mentors in order to maintain the quality of the network and the service offered. We hold an annual Autumn Conference and a Spring workshop with Abdol Tavabie, GP Dean, attending the conference this year and running a very successful session on emotional intelligence.

We have five new Mentors completing our New Mentor Training Programme, a three day experiential training course, and hope to repeat the course early next year.

We expect the enhanced appraisal process, the core component of Revalidation, to encourage ever more GPs to reflect upon their performance and their careers, and need more Mentors to be prepared for this growing demand.

The Mentors and Mentees are constantly changing but at present there are currently in KSS the following active mentors:

East Kent – 4 mentors with 7 mentees

West & Mid Kent – 7 mentors with 8 mentees

East Sussex – 8 mentors with 11 mentees

West Sussex – 5 mentors with 9 mentees

Surrey – 12 mentors with 15 mentees

- **Prolonged Study Leave:** The School is responsible for assessing the educational content of applications for prolonged study leave and we were able to support one GP's application earlier this year. Many GPs are unaware that prolonged study leave may still be available through their PCT, and it is worth GPs making enquiries through their PCT if they are planning prolonged absence from their general practice work for academic work and/or skills development.

Dr Kevin Hurrell

Head of Post Certification GP School

Department of Postgraduate GP Education

Highlights of activities from 2009

Whilst recognising that some of these have been mentioned above, I make no apologies for re-emphasising them, as I feel that it is important to recognise the energy of our team and scope of our work.

1. The GP Deanery Team.

We have held successful team away-days, which have been not only very helpful in developing our goals and objectives for the next year, but also in bringing the new team together in their new roles and responsibilities

2. Communication and IT developments.

The KSS Deanery has invested significant resources in developing an effective IT infrastructure. We have been able to access the network from the office and remotely. This has allowed the continued improvement of communication with our education network. The development of the website has allowed our educators to access information and many useful documents whenever they choose. Our e-newsletter has been issued every 8 weeks and the GP Specialty e-Bulletin has become essential for the Deanery to keep the GP Programme Directors and their local network up to date with issues related to the RCGP e-Portfolio and GP Specialty Training. This started as a bi-weekly communication.

3. GP placement in Foundation Programme

We are pleased that we have placed approximately 50% of all FY2 trainees in the 19 Acute Trusts, in general practice placements, and experience has shown that these postgraduate doctors have learnt, and demonstrated, the required foundation competences in the general practice setting.

4. Recruitment of GP Trainers

The KSS GP Department has continued to increase the number of doctors in training for general practice. We have met the national target level of increase and have now recruited 280 GPStRs. Overall this will result in a 120% increase in the numbers of doctors trained in the KSS health economy over a four year period.

We have reviewed the training pathway and after consultation with stakeholders, we have developed a flexible, competency-based educational pathway to prepare GPs to act as Clinical Teachers in a different setting as follows:

The Foundation Clinical Supervisor in a general practice setting incorporates overseeing the clinical activity of the trainee Foundation doctor, ensuring that they only perform tasks they are competent to do. The Clinical Supervisor needs to ensure patient and trainee safety. This requires the ability to recognise at what level the trainee doctors is performing and to arrange structured experiences which help further develop his or her skills. The role of a GP trainer also

incorporates this essential aspect of supervision, but GP trainers support their GP trainee through the three years' training envelope, undertaking formative reviews, planning educational programmes to meet educational needs and facilitating learning in a tutorial setting. GP trainers also undertake assessments that form an essential component of a doctor's Certificate of Completion of Training.

Aims for the GP Educator Programme

- a) To introduce GP educators to the principles that underpin hosting a learner in a primary care setting
- b) To assist GP educators in developing their own self directed learning through reflective practice
- c) To introduce GP educators to key adult educational principles which facilitate learning
- d) To help GP educators plan, organise and manage educational processes to support the learner in meeting their individual learning outcomes
- e) To assist GP educators in developing skills in giving constructive feedback using observational techniques
- f) To assist GP educators in developing a flexible approach to teaching utilising a range of appropriate teaching interventions
- g) To introduce GP educators to the principles of assessment and use of the nationally developed assessment tools used by doctors in the Foundation Programme and in general practice training
- h) To work toward an academic pathway to obtain a Postgraduate Certificate of Teaching.

Learning outcomes for a GP Educator in KSS GP Deanery

- a) Maintain the safety of patients and the trainee doctor
- b) Demonstrate an ability to draw up and undertake learning through use of a PDP
- c) Demonstrate a learner-centred approach to teaching FY2 doctors
- d) Use "descriptive" feedback effectively to assist the trainee doctor in developing their skills within the prescribed competency areas
- e) Create a learning environment within the Practice. This incorporates developing and supporting multi-disciplinary teaching and learning as well as assisting in the development of teaching skills amongst team members
- f) Demonstrate effective communications skills within the consultation adopting a patient-centred style
- g) Demonstrate high standards of Clinical Governance within their practice and reflect critically on Significant Events
- h) Demonstrate proficiency at undertaking national assessment tools

Brief summary of the GP educator pathway:

- Foundation Clinical Supervisors host Foundation Year 2 (FY2) doctors during a 4 month GP attachment. In order to become a FY2 Clinical Supervisor (CS) GPs need to undertake

a 3 day teaching module (Module 1) and their Practice needs to be assessed as suitable by a member of the KSS Deanery team (if it is not already approved as a Training Practice). GPs thus approved can continue as a Foundation Clinical Supervisor but they may wish to further develop their teaching role. GPs who would like to progress further as a GP educator will need to have MRCGP.

- Foundation Community Educational Supervisors (CES) undertake tutorial teaching for small groups of FY2 doctors and support other FY2 Foundation Clinical Supervisors. Training for this role takes place on a 2 day module (We have now increased the duration of the Module 2 from two days to three days based on participants' feedback providing these doctors have successfully completed Module 1.)
- GP trainers: GPs will need to have MRCGP and have completed module 1 and 2. They will also have to have had real experience of teaching as a FY2 CES and ideally also hosted an FY2 doctor in their Practice. The practice will also need to be accredited as a Training Practice by a member of the KSS GP Deanery team and they will need to show how they have begun to develop their skills and competencies as a GP educator through the development of a portfolio of teaching and learning support. There are Deanery Criteria for Trainers and their Practices.

5. GP Specialty Training Programmes:

The new GP Specialty training programme is structured within a three year programme and GP Specialty training Registrars (GPStRs) are using the RCGP e-Portfolio for Workplace-Based Assessment which is an essential part of the MRCGP as the award for the Certificate of Completion of Training (CCT). The other two components of MRCGP are the Applied Knowledge Test (AKT) and the Clinical Skills Assessment (CSA), which will normally be taken by GPStRs in their last year of training. All GPStRs have a designated GP Educational Supervisor throughout the three year GP Specialty training programme to support them and Clinical Supervisors (Hospital Consultants) in achieving the required competencies in their posts.

6. GPStRs' Study Leave Arrangements:

We have surveyed GPStRs, GP Trainers, and Clinical Tutors to seek the view of all stakeholders. This external evaluation audit was carried out by London South Bank University and it seems that the majority of GPStRs are valuing the GP placements while they are in the hospital posts. We have revised the study leave policy to strengthen a number of areas that have been highlighted through this evaluation.

7. Learning Sets for GP Trainers and Hospital Consultants:

We recognised that the GP Curriculum and its assessment tools (MRCGP) have created new demands on our hospital colleagues. We have invited each GP Specialty Training Programme to organise learning sets to bring GP Trainers and Consultants together, to give them an opportunity to discuss individual GP trainees and the GP Curriculum to ensure that GPStRs are

receiving appropriate supervision in their placements. This has been created to allow hospital colleagues greater working and learning relationships with GP Trainers and thus to improve patient care. A mapping exercise has been carried out to reflect the GP Curriculum learning outcomes in hospital placements with GPStRs' self-assessment of their learning needs.

8. Medical Education Managers' Conference

The GP department holds an annual conference for the MEMs and GP Faculty Administrators. We believe the MEMs have a vital role in coordination of GP Specialty training programmes and delivery of GPs' CPD locally. The conference gives an opportunity for the exchange of ideas to improve delivery of GP education.

9. Practice Managers Conference

The GP Deanery has recognised and acknowledged the valuable contribution of GP Practice Managers in the training of future GPs and we held our fourth annual conference of Practice Managers in November, at which over 50 Practice Managers attended. The Department has produced a hand book for Practice Managers and has agreed to organise the county based conferences for practice managers once a year.

10. Simulated Patient Surgery

We have established the KSS GP Deanery Simulated Patient Scheme. The patient simulators have been involved with the new Selection Assessment Centre for GPStR recruitment and have been working with the GP Specialty Training Programme to prepare GPStRs in their communication skills and particularly in appreciation of the MRCGP video criteria. In addition, our Simulated Patients are supporting the GP Appraisers in their new role through Appraisal Development Centres.

11. National Role and Responsibilities

The GP Dean has several national roles including the Vice-Chair of COGPED (Committee of General Practice Education Directors), the Lead on behalf of the national GP Deans, membership of the RCGP assessment board, delivery of Out of Hours Training for GPStRs and assessment and support for under-performing GPRs and GPs.

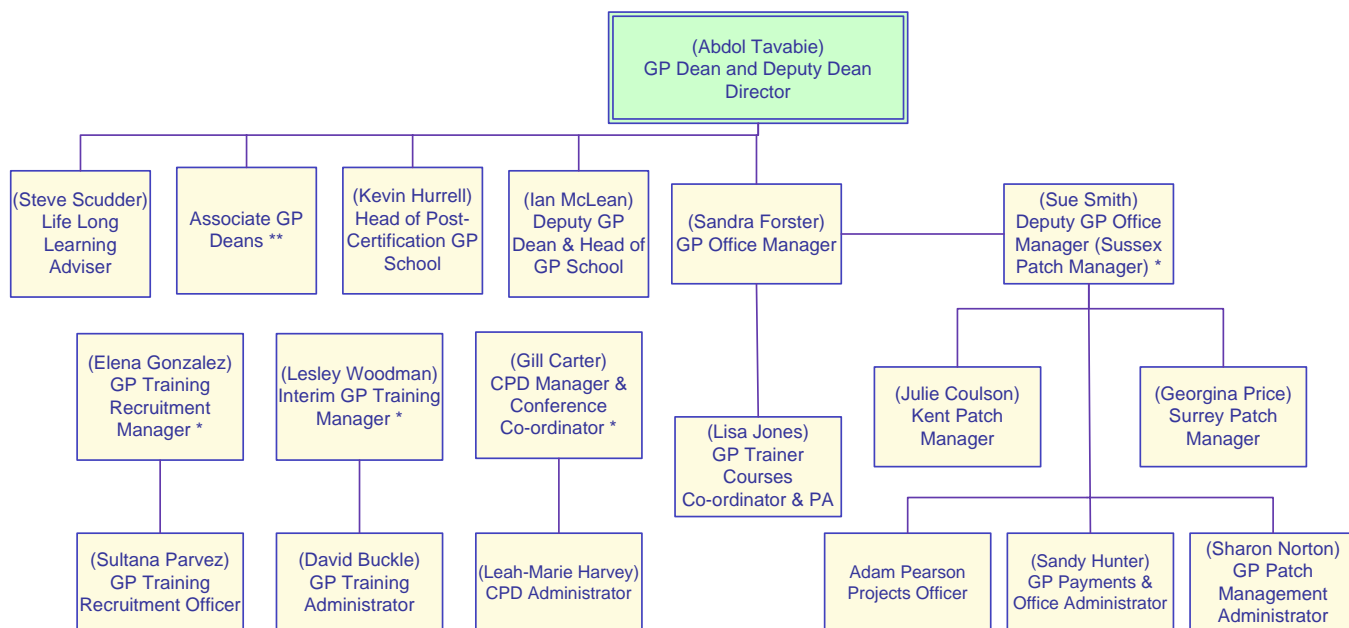
Dr Ian McLean is a member of the Executive Committee of the UK Conference of Postgraduate Education Advisers in General Practice (UKCEA). Ian is also part of the National GP Recruitment Stage 2 assessment item writing team, the exercise creating team, and is part of the Research and Evaluation group of the National Recruitment Office.

Professor Abdol Tavabie

Dean of Postgraduate GP Education

January 2010

Postgraduate Deanery for Kent, Surrey and Sussex General Practice Department



* These staff members are also GP Team Leaders

** Susan Bodgener, Mary Davis, Hilary Diack, Nathan Nathan, Mary Rose Shears, Kim Stillman, Debbie Taylor, Chris Warwick & Glyn Williams

HOW TO CONTACT THE DEANERY TEAM MEMBERS

Name	Title	Email Address	Direct Line
Deanery Team			
Prof Abdol Tavabie	GP Dean	atavabie@gpkss.ac.uk	0207 415 3435
Dr Ian McLean	Head of GP School & Deputy GP Dean	imclean@gpkss.ac.uk	0207 415 3437
Dr Susan Bodgener	Associate Dean for Assessment	sbodgener@gpkss.ac.uk	0207 415 3439
Dr Mary Davis	Associate GP Dean Simulated Patient Project	mdavis@gpkss.ac.uk	0207 415 3439
Dr Chris Warwick	Associate GP Dean East Surrey & Crawley	cwarwick@gpkss.ac.uk	0207 415 3631
Dr Hilary Diack	Associate GP Dean West Surrey & Associate Dean for Programme Director Development	hdiack@gpkss.ac.uk	0207 415 3631
Dr Mary-Rose Shears	Interim Associate GP Dean East Sussex	mshears@gpkss.ac.uk	0207 415 3630
Dr Kevin Hurrell	Head of School for CPD	khurrell@gpkss.ac.uk	0207 415 3447
Dr Nathan Nathan	Associate GP Dean Underperforming Doctors	nnathan@gpkss.ac.uk	0207 415 3437
Mr Steve Scudder	Lifelong Learning Adviser	sscudder@gpkss.ac.uk	0784 308 9870
Dr Kim Stillman	Associate GP Dean East Kent	kstillman@gpkss.ac.uk	0207 415 3437
Dr Deborah Taylor	Associate GP Dean West Kent	nnathan@gpkss.ac.uk	0207 415 3437
Dr Glyn Williams	Associate GP Dean West Sussex	gwilliams@gpkss.ac.uk	0207 415 3630
Administrative Team			
Mrs Sandra Forster	GP Office Manager*	sforster@gpkss.ac.uk	0207 415 3484
Mr David Buckle	GP Training Administrator	dbuckle@gpkss.ac.uk	0207 415 3634
Mrs Gill Carter	CPD Manager *	gcarter@gpkss.ac.uk	0207 415 3447
Mrs Julie Coulson	Kent Patch Manager	jcoulson@gpkss.ac.uk	0207 415 3437
Ms Leah-Marie Harvey	CPD Administrator	lharvet@gpkss.ac.uk	0207 415 3458
Ms Sandy Hunter	GP Payments and Office Administrator	shunter@gpkss.ac.uk	0207 415 3486
Ms Elena Gonzalez	GP Training Recruitment Manager*	egonzalez@gpkss.ac.uk	0207 415 3487
Ms Lisa Jones	GP Courses Co-Ordinator	ljones@gpkss.ac.uk	0207 415 3435
Mrs Gaynor Nesbitt	Interim Personal Assistant	gnesbitt@gpkss.ac.uk	0207 415 3673
Mrs Sharon Norton	GP Patch Management Administrator	snorton@gpkss.ac.uk	0207 415 3437
Ms Sultana Parvez	GP Training Recruitment Officer	sparvez@gpkss.ac.uk	0207 415 3418
Mr Adam Pearson	GP Projects Officer	apearson@gpkss.ac.uk	0207 415 3446
Ms Georgina Price	Surrey Patch Manager	gprice@gpkss.ac.uk	0207 415 3631
Mrs Sue Smith	Deputy GP Office Manager & Sussex Patch Manager *	ssmith@gpkss.ac.uk	0207 415 3630
Ms Lesley Woodman	Interim GP Training Manager*	lwoodman@gpkss.ac.uk	0207 415 3439

KSS, Department of Postgraduate GP Education addresses:

7 Bermondsey Street
London
SE1 2DD
www.gpkss.ac.uk

* Team Leaders