The Department of Postgraduate General Practice Education,

Postgraduate Deanery for Kent Surrey and Sussex (KSS)

in partnership with

University of Kent
Faculty of Sciences
School of Sport and Exercise Sciences

Postgraduate Programme
For award of PG Certificate

Strategic Leadership and Medical Education

Course Handbook for PG Certificate
## Contents

1. Contacts ........................................................................................................................................... 4  
2. Welcome ............................................................................................................................................... 6  
3. Student (GP Educator) Handbook ........................................................................................................ 7  
4. Overview of the Roles of Postgraduate Medical Supervisors .................................................................. 8  
5. Programme Specification .......................................................................................................................... 10  
6. PG Certificate in Strategic Leadership and Medical Education ............................................................ 21  
7. Postgraduate Certificate in Strategic Leadership and Medical Education (GP Educator) Module Specifications ............................................................................................................................................. 28  
8. The GP Educator Competency Framework ............................................................................................ 37  
9. The University of Kent Credit Framework ............................................................................................... 39  
10. Preparing a submission for the award of PG Certificate ...................................................................... 44  

### Appendices

Appendix 1 Outline Academic Programme ................................................................................................. 68  
APPENDIX 2 PG Cert SEQ submission: Assessment Cover Sheet ................................................................. 78  
APPENDIX 3 AUDIT ASSESSMENT COVER SHEET ................................................................................... 789  
Appendix 4 ASSIGNMENT MARKING SHEET ........................................................................................ 81  
Appendix 5 Criteria Audit Marking Schedule ............................................................................................. 813  
Appendix 6 New Trainer SEQ & PG Cert – 1st Re-accreditation Visit with Associate Dean’s Report ........ 85  
Appendix 7 Trainer Re-Accreditation Self Evaluation Questionnaire (SEQ) .............................................. 118  
Appendix 8 Concessions Form (for consideration by exam board) ............................................................ 148  
Appendix 9 Student Appeals and Complaints Procedures for Taught Programmes .................................. 151  
Appendix 10 Intermission ........................................................................................................................ 154  


<table>
<thead>
<tr>
<th>Issuing Department</th>
<th>School of Sport and Exercise Sciences</th>
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<td>Review Date</td>
<td>Dec 2012</td>
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2. Welcome

Welcome to the academic programme for potential and existing GP trainers developed in association between KSS Deanery and the University of Kent.

The Department of Postgraduate General Practice Education is part of the KSS Postgraduate Medical & Dental Education Deanery, which is accountable to the Brighton and Sussex University Hospitals.NHS South England (East) (NHSSE) Strategic Health Authority Cluster. The KSS GP Department covers the suburban and rural coastal areas of Kent, Surrey and Sussex. It is responsible for the health of 3,200,000 people.

The main activity of KSS Deanery is the recruitment of doctors to GP Specialty training and the quality assurance of that training both in hospital rotations and general practice placements.

Kent Health at the University of Kent delivers relevant postgraduate education & training courses across Kent and North Thames Gateway. The Kent Health Department is based in the Medway Building at the Chatham Maritime campus and works in partnership with other Higher Education providers across the region. The department has expertise in supporting professionals whilst they continue to work in their own field of expertise by providing work-related programmes on which individuals can acquire postgraduate level skills and gain qualifications which further enhance professional development.

The introduction of a postgraduate qualification relevant to GP educators is timely given:

- The General Medical Council (the GMC) and the Royal College of General Practitioner (RCGP) have laid down standards for medical educators and this includes a move to increased professionalisation of the teaching role with the gaining of an academic award;
- Evaluation of the KSS GP Educator pathway has shown those who previously took up the PG Certificate found their work as a trainer was significantly enhanced;
- Revalidation processes will require enhanced reflection on our work in all spheres and the work undertaken in preparing for your PG cert and the gaining of the award will support you in this process.

This programme of study is designed to be flexible and related to the work you will either need to do to become accredited as a trainer or will enhance the work you do to be re-accredited as a trainer. The programme has been designed to be portfolio based learning which takes account of the existing work you undertake as a clinician.

The initial award is for a Postgraduate Certificate but further study can lead to a Diploma and onwards to a Masters Degree.

We hope you will find this programme of study rewarding and that it will enhance your activities as a GP Educator in KSS.

Professor A Tavabie

Postgraduate GP Dean and Deputy Dean Director
Kent, Surrey and Sussex Deanery
3. Student (GP Educator) Handbook

This handbook sets out the details of the academic programme, with details of the learning outcomes and assessment strategies by which a GP Educator demonstrates learning for the academic modules, together with guidance to academic writing.

For fuller details of the assessment and regulations that apply to all GP Trainers at the University of Kent please consult the KSS website at www.kssdeanery.org or University of Kent.

Please do give us feedback on what is or might be helpful to include or otherwise in future updates of this for GP Trainers in the future.

This guide follows RNIB’s clearprint guidelines. If you have additional accessibility needs we can provide you with the document in electronic format, please email eedjah@gpkss.ac.uk)
4. Overview of the Roles of Postgraduate Medical Supervisors

In 2005 Modernising Medical Careers changed the pathway for doctors post medical school graduation. The Foundation Programme was developed as a two year programme, designed to develop core medical skills following medical school then doctors enter specialist training. During Foundation doctors may undertake placements in General Practice. General Practice specialty training is currently a three year programme with placements in GP and hospital specialities.

The GMC has laid down the regulatory standards for training in its “Generic Standards for training” (2010). There are also standards pertaining to supervisors of doctors in training and two distinct roles have been defined:

**Clinical Supervision**
For each placement a trainee should have a named Clinical Supervisor usually a senior doctor, who is responsible for ensuring that appropriate clinical supervision of the trainee’s day-to-day clinical performance occurs at all times, Clinical Supervisors should:

- understand their responsibilities for patient safety
- offer a level of supervision necessary to the competences and experience of the trainee tailored for the individual trainee
- ensure that no trainee is required to assume responsibility for or perform clinical, operative or other techniques in which they have insufficient experience and expertise
- consider whether it is appropriate to delegate the role of clinical supervisor to another senior member of the healthcare team.
- be appropriately trained to teach, provide feedback and undertake competence assessment on trainees in the specialty
- be trained in equality and diversity and human rights best practice.

**Educational Supervision**
Educational Supervisors are responsible for overseeing training to ensure that trainees are making the necessary clinical and educational progress. Educational Supervisors should:

- be trained to offer educational supervision and undertake appraisal and feedback
- undertake training in competence assessment for specialty training
- be trained in equality and diversity
- provide regular appraisal opportunities which should take place at the beginning, middle and end of a placement
- develop a learning agreement and educational objectives with the trainee which is mutually agreed and is the point of reference for future appraisal
- be responsible for ensuring that trainees whom they supervise maintain and develop their specialty learning portfolio and participate in the specialty assessment process
- provide regular feedback to the trainee on their progress
- undertake educational appraisal of a trainee and complete structured educational reports on a trainee’s progress
- be able to advise the trainee about access to career management
Within KSS Deanery there has been developed a series of roles which allow existing independently registered GPs to become involved in education:

- Foundation Clinical Supervisor (FY2 CS)
- FY2 Educational Supervisor (FY2ES)
- Foundation Community Teacher (FY2 CT)
- GP ST1 / 2 Clinical Supervisors
- GP Trainer / Educational Supervisor
- Programme Director

**Foundation Clinical Supervisors** oversee an FY2 doctor during a placement in GP and undertake the roles and responsibilities for the doctor as described above. Doctors acting as FY2 Clinical Supervisors must work in an approved FY2 training practice.

**FY2 Education supervisors** oversee a FY2 doctor for the duration of their training in FY2. Only those who have completed all three Parts of the GP Educator pathway, or are a KSS Accredited GP trainer may undertake this role.

**Foundation Community Teachers** support FY2 doctors whilst they are in their GP attachment through a regular weekly teaching tutorial. They also support FY2CS locally by running learning sets.

**GP ST1 /2 Clinical Supervisors** undertake the roles and responsibilities of a Clinical Supervisor BUT must work in a KSS approved training practice under the supervision of a GP Trainer / Educational Supervisor. Such arrangements have to be agreed with the local Patch Associate GP Dean.

**GP Trainer/ Educational Supervisors** undertake the roles and responsibilities described above. A doctor may only be a GP Trainer / Educational Supervisor on successful completion of all three parts of the GP Educator pathway, have been approved under the KSS Framework for the accreditation of trainers and for new trainers have obtained a PG Certificate in Strategic Leadership and Medical Education.

**Programme Directors** are individuals employed by KSS GP Deanery who support the local educational network. They organise and administer the placement of FY2 and GP trainee doctors, monitor the progress and handover of trainees, facilitate learning through the VTS day release course and monitor the quality of education delivered locally.
5. Programme Specification

Please note: This specification provides a concise summary of the main features of the programme and the learning outcomes that a typical student/practitioner might reasonably be expected to achieve and demonstrate if he/she passes the programme. More detailed information on the learning outcomes, content and teaching, learning and assessment methods of each module can be found either by following the links provided or in the programme handbook. The accuracy of the information contained in this specification is reviewed by the University and may be checked by the Quality Assurance Agency for Higher Education.

<table>
<thead>
<tr>
<th>PG Cert Strategic Leadership and Medical Education</th>
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<tbody>
<tr>
<td>PG Diploma Strategic Leadership and Medical Education</td>
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<tr>
<td>MSc Strategic Leadership and Medical Education</td>
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<table>
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<tr>
<td>2. Teaching Institution</td>
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<td>4. Programme accredited by:</td>
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<td>5. Final Award</td>
<td>PG Certificate, PG Diploma, MSC.</td>
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<td>6. Programme</td>
<td>Strategic Leadership and Medical Education</td>
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<td>Hospitality, Leisure, Sport &amp; Tourism. Medicine Business and Management Health Care Programmes Phase 1 &amp; 2</td>
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<tr>
<td>10. Applicable cohort(s)</td>
<td>2011 onwards</td>
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</table>
11. **Educational Aims of the Programme**
The programme aims to:

| 1. | Foster the intellectual and professional development of experienced practitioners to extend and deepen their analytical and critical reasoning capabilities underpinning practice-based learning |
| 2. | Develop experienced practitioners competence in applying theoretical and practice skills to advance leadership and change in health care organisations. |
| 3. | Equip experienced practitioners for their role in challenging, questioning and realigning strategies relating to medical education. |
| 4. | Develop the critical and analytical capabilities of experienced practitioners in relation to project management, data analysis and interpretation of data. |
| 5. | Provide supervision for advanced practitioner centred research that builds a culture of critical evaluation and enquiry in the practice environment. |
| 6. | Contribute to the development and dissemination of evidence-based practice within professional contexts. |
| 7. | To give students the opportunity to conduct an in-depth enquiry in selected areas of interest. |
| 8. | Enhance the experienced practitioner’s programme of personal development, reflective practice and impact. |

12. **Programme Outcomes**
The programme provides opportunities for students/practitioners to develop and demonstrate knowledge and understanding, qualities, skills and other attributes in the following areas.

<table>
<thead>
<tr>
<th>Knowledge and Understanding</th>
<th>Teaching/learning and assessment methods and strategies used to enable outcomes to be achieved and demonstrated</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A. Knowledge and Understanding of:</strong></td>
<td></td>
</tr>
<tr>
<td>1. Experiential learning, theory, concepts and how they apply to practice.</td>
<td>Teaching and Learning:</td>
</tr>
<tr>
<td>2. Reflection on learning and leadership styles and approaches gained through practice.</td>
<td>Each module will be supported by:</td>
</tr>
<tr>
<td>3. The principles and practice involved in collaborative working.</td>
<td>- Lectures</td>
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<tr>
<td>4. The need to recognise ethical issues in their (and others) practice and manage any implications.</td>
<td>- Seminars.</td>
</tr>
<tr>
<td>5. Critically evaluate and synthesise theory and research within a discipline of Strategic Leadership and /or Medical Education.</td>
<td>- Blended learning approaches</td>
</tr>
<tr>
<td>6. The importance of rigour in collecting, analysing and interpreting data.</td>
<td>- Interactive problem-based scenarios</td>
</tr>
<tr>
<td></td>
<td>- Experiential learning in groups and organisations.</td>
</tr>
</tbody>
</table>
7. The value of collecting relevant data in their research/practice area and critically analysing it in relation to previously published work in the area and to an original hypothesis.

8. Qualitative and Quantitative research methodologies.

| Assessment: | 
| --- | --- |
| • Oral presentations | • Oral presentations |
| • Coursework assignments | • Coursework assignments |
| • Seminar contribution | • Seminar contribution |
| • Reflective learning logs | • Reflective learning logs |
| • Written and Portfolio assessment | • Written and Portfolio assessment |
| • Written assignment | • Written assignment |
| • KSS Self Evaluation Questionnaires (SEQs). | • KSS Self Evaluation Questionnaires (SEQs). |

**Skills and Other Attributes**

**B. Intellectual Skills:**

1. The ability to contribute to the development of healthcare through reflective practice and innovation.

2. Present critical, analytical reasoning and experiential learning into organised written and oral formats including case studies and reports.

3. Demonstrate the ability to work independently, efficiently and professionally within NHS frameworks and professional codes of practice and conduct, with recognition of moral and ethical issues whilst managing any conflicting priorities.

4. Accept responsibility for his/her own lifelong learning and continuing professional development

5. Collect and analyse qualitative or quantitative data from experiential learning to inform evidence-based enquiry.

6. Use research methodologies to collect data that can be evaluated, interpreted, integrated and disseminated into relevant formats.

7. Recognise the value of research and scholarly activity to the systematic evaluation and development of professional practice.

**Teaching and Learning:**

Students are encouraged to engage during seminar discussions.

**Assessment:**

Portfolio, presentations, written assignments, KSS SEQs and portfolios are designed to emphasise and test out concepts and methodologies learnt during individual modules.

**C. Subject-specific Skills:**

1. Demonstrate and apply an in-depth knowledge and understanding of Strategic Leadership informed by current scholarship and research, including a critical awareness of current issues and developments in the subject and their profession.

**Teaching and Learning:**

Module specific skills are taught
2. Demonstrate and apply an in-depth knowledge and understanding of Medical Education informed by current scholarship and research, including a critical awareness of current issues and developments in the subject and their profession.

3. Apply the appropriate leadership style required for different situations including whilst motivating and monitoring performance, coaching and mentoring.

4. Demonstrate the ability to use a range of techniques and research methods applicable to their professional activities as a GP Educator.

5. Critically evaluate research findings, suggest changes to practice and contribute to health care research to inform practice development.

6. Apply specialist knowledge derived from applied practice.

7. Methodologies for evaluating, analysing and appraising organisational practice.

D. Transferable Skills:

1. Prepare and communicate information on complex contemporary issues in strategic leadership and/or medical education to specialist and non-specialist audiences, to include report writing.

2. Demonstrate IT skills including the ability to search for, manage, manipulate and critically evaluate, internet-based information/resources.

3. To be an independent and autonomous learner (using learning resources, note taking, revision, time constrained techniques, reading effectively and action planning.

4. Analyse, interpret and assess the value of evidence to inform problem solving.

5. Solve problems in creative and innovative ways and communicate the outcome.

6. Demonstrate collaborative skills

7. Develop a self-reflective element to learning and evaluation.

8. Demonstrate the ability to make decisions in challenging situations.

9. Take responsibility for continuing to develop their own knowledge and skills.

10. Prioritise workload and manage time effectively.

Teaching & Learning:

Transferable skills are explicitly developed and promoted by the use of lectures, seminars, tutorials, presentations and through conducting and presenting coursework to strict deadlines.

The dissertation is also a valuable learning tool used to enhance the targeted transferable skills.

Assessment:

Transferable skills are assessed through a variety of formats. These include:

- Oral presentations
- Coursework assignments
- Seminar contribution
- Portfolio assessment
- Reflective learning logs
- Written assignments
- KSS Self Evaluation Questionnaires (SEQs).

- The majority of assessments are designed to be flexible in scope to
enable students to take responsibility for the exact nature of their own learning.

For more information on which modules provide which skills, see the module mapping.

13. Programme Structures and Requirements, Levels, Modules, Credits and Awards

PG Certificate in Strategic Leadership and Medical Education. The PG Cert in Strategic Leadership and Medical Education is part-time over one – two academic years. The programme requires the students/practitioners to undertake 3 x 20 credit taught core National Qualification Framework level M modules (60 credits in total). Each 20 credits represent approximately 200 hours of student learning endeavour and assessment. Students must gain a mark of 40% or above in every module for the PG certificate to be awarded. A board of examiners will recommend the award of PG Certificate with Distinction to a student/practitioner who has achieved modules to the value of 60 credits with an overall average of 70% or above and a PG Certificate with Merit to a student/practitioner who has achieved modules to the value of 60 credits with an overall average of 60% or above.

PG Diploma in Strategic Leadership and Medical Education. The PG Diploma in Strategic Leadership and Medical Education is part-time over two – four academic years. The programme requires the students/practitioners to undertake 6 x 20 credit taught National Qualification Framework level M modules (120 credits in total). Each 20 credits represent approximately 200 hours of student/practitioner learning endeavour and assessment. Students/practitioners must gain a mark of 40% or above in every module for the PG diploma to be awarded. A board of examiners will recommend the award of PG Diploma with Distinction to a student/practitioner who has achieved modules to the value of 120 credits with an overall average of 70% or above and a PG Certificate with Merit to a student/practitioner who has achieved modules to the value of 120 credits with an overall average of 60% or above. N.B. SS806 Research Methods provides the only opportunity for Intended Learning Outcomes: A6 (The importance of rigour in collecting, analysing and interpreting data), A8 (Qualitative and Quantitative research methodologies) and B6 (Use research methodologies to collect data that can be evaluated, interpreted, integrated and disseminated into relevant formats), to be assessed within the PG Diploma and therefore the module will not be considered for condonement or compensation.

MSc in Strategic Leadership and Medical Education. The MSc in Strategic Leadership and Medical Education is part-time over three – six academic years. The programme requires the students/practitioners to undertake 6 x 20 credit taught National Qualification Framework level M modules and a dissertation component of 60 credits (180 credits in total). Each 20 credits represent approximately 200 hours of student/practitioner learning endeavour and assessment. Students/practitioners must gain a mark of 40% or above in every module for the MSc to be awarded. A board of examiners will recommend the award of MSc with Distinction to a student/practitioner who has achieved modules to the value of 180 credits with an overall average of 70% or above and a MSc with Merit to a student/practitioner who has achieved modules to the value of 180 credits with an overall average of 60% or above. N.B. SS803 Dissertation provides the only opportunity for Intended Learning Outcome A7 (The value of collecting relevant data in their research/practice area and critically analysing it in relation to previously published work in the area and to an original hypothesis) to be assessed and therefore the module will not be considered for condonement or compensation.
The PG Certificate in Strategic Leadership provides opportunities for students/practitioners to develop and demonstrate the following programme learning outcomes:

- (section 12A) Knowledge and Understanding: A1, A2, A3, A4, A5.
- (section 12B) Intellectual Skills: B1, B2, B3, B4, B5.
- (section 12C) Subject Specific Skills: C1, C2, C3, C6, C7
- (section 12D) Transferable Skills: D1, D3, D4, D5, D6, D7, D8, D9, D10

The modules within the PG Certificate in Strategic Leadership and GP Education, offer grounding in the critical analysis of professional practice, lifelong learning and research skills. The emphasis is on planning for and reflection on the application of practice. Academic integrity of the programme will be monitored by the Programme Director and the School of Sport and Exercise Sciences Board of Studies.

The module input will be delivered by General Practitioner (GP) specialists sourced and approved by the Kent, Sussex, Surrey Deanery and appointed as Honorary Lecturers by the University of Kent, School of Sport and Exercise Sciences.

**PG Diploma in Strategic Leadership and Medical Education:**

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<thead>
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<th>Credits</th>
<th>Term</th>
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<tr>
<td>SS815</td>
<td>Collaborative Working</td>
<td>7 (M)</td>
<td>20</td>
<td>Autumn and/or Spring and/or Summer</td>
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<tr>
<td>SS816</td>
<td>Evidence Based Practice</td>
<td>7 (M)</td>
<td>20</td>
<td>Autumn and/or Spring and/or Summer</td>
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<td>SS813</td>
<td>Supervision in the Workplace</td>
<td>7 (M)</td>
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<td>SS803*</td>
<td>Research Methods</td>
<td>7 (M)</td>
<td>20</td>
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### Optional Modules

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<td>Injury Prevention</td>
<td>7 (M)</td>
<td>20</td>
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<tr>
<td>SS812</td>
<td>Employee Performance Management</td>
<td>7 (M)</td>
<td>20</td>
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<tr>
<td>SS814</td>
<td>Resource Management</td>
<td>7 (M)</td>
<td>20</td>
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The PG Diploma in Strategic Leadership provides opportunities for students/practitioners to develop and demonstrate the following programme learning outcomes:

**Required Modules:**

(Section 12A) Knowledge and Understanding: A1, A2, A3, A4, A5, A6, A8.

(Section 12B) Intellectual Skills: B1, B2, B3, B4, B5, B6, B7.

(Section 12C) Subject Specific Skills: C1, C2, C3, C4, C5, C6, C7

(Section 12D) Transferable Skills: D1, D2, D3, D4, D5, D6, D7, D8, D9, D10

### MSc in Strategic Leadership and Medical Education:

#### Required Modules

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<td>SS815</td>
<td>Collaborative Working</td>
<td>7 (M)</td>
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<td>Autumn and/or Spring and/or Summer</td>
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<tr>
<td>SS816</td>
<td>Evidence Based Practice</td>
<td>7 (M)</td>
<td>20</td>
<td>Autumn and/or Spring and/or Summer</td>
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<tr>
<td>SS813</td>
<td>Supervision in the Workplace</td>
<td>7 (M)</td>
<td>20</td>
<td>Autumn and/or Spring and/or Summer</td>
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<tr>
<td>SS803</td>
<td>Research Methods</td>
<td>7 (M)</td>
<td>20</td>
<td>Autumn and/or Spring and/or Summer</td>
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<tr>
<td>SS806*</td>
<td>Dissertation</td>
<td>7 (M)</td>
<td>60</td>
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#### Optional Modules

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<th>Level</th>
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16
The MSc in Strategic Leadership provides opportunities for students/practitioners to develop and demonstrate the following programme learning outcomes:

**Required Modules:**
- **Knowledge and Understanding:** A1, A2, A3, A4, A5, A6, A7, A8.
- **Intellectual Skills:** B1, B2, B3, B4, B5, B6, B7.
- **Subject Specific Skills:** C1, C2, C3, C4, C5, C6, C7.
- **Transferable Skills:** D1, D2, D3, D4, D5, D6, D7, D8, D9, D10.

### 14. Work-Based Learning

The work-based learning element of this programme is underpinned by the Code Of Practice For The Assurance Of Academic Quality And Standards In Higher Education, September 2007 Section 9.

Work-based learning is integral to the programme and emphasises widening learning opportunities, as well as integrating work related interest into postgraduate scholarship. Work-based learning provides the context for the critical appraisal and on-going development of professional practice, thus practitioners are able to engage creatively with the concerns of their organisations in a conversant and research-minded way. There are two discrete elements, the first of which is learning in one's own workplace (internal experience), the second is learning from the work experience of others (external). In order to support the work-based learning aspect, students will be encouraged to identify a work-based mentor.

The emphasis on work-based learning is about developing research mindedness and enquiry-based learning activities. As practitioner research is a central theme of the programme, it forms an integral part of the practice based enquiry. Hence students will seek out learning opportunities and test out theories which might emerge from their own enquiry based practice. Module delivery staff will encourage and facilitate the development of critical reflection, advanced level debate and the exploration of ‘real-life’ work-based problems and interests.

### 15. Support for Students/practitioners and their Learning.

Prior to commencing the course students will:

- Induction programme.
- Programme Handbook.
- Learning resources
- Access to the Programme Director – advice on programme structure, progression routes and individual progress.
- Access to support services from the University including; The Learning Resources Centre.

### 16. Entry Profile.

**Entry Route**

Kent, Sussex, Surrey Deanery will administer the initial application process in terms of the
potential applicants suitability for the programme in terms of the following criteria:

- Applicants must have MRCGP and usually have 3 years post qualification as a GP, have a substantive post in general practice and have worked for a minimum of one year in their current practice.
- The GP should be working in a GP practice which has attained high QOF achievement this is usually meant to mean over 900 points.

**Excluded combinations**

- Doctors on the GP Retainer Scheme, locum GPs.

**What does this programme have to offer?**

- The opportunity to develop high level reflection on experience gained through practice.
- The opportunity to develop knowledge and understanding of the complexities of interdisciplinary working.
- Experiential learning.
- Flexible, modular format with blended learning approaches.
- A high standard of teaching delivered by experienced academic and specialist staff.
- A programme that is recognised by national and local employers.

Additional factor relating to the MSc Strategic Leadership and Medical Education

- The opportunity to plan, design and execute an in depth dissertation on a relevant topic. Thereby enabling the student/practitioner to gain insight into a potential area for career development or further academic study

**Personal Profile.**

Students/practitioners entering the course will be expected to demonstrate the following:

- Applicants must have MRCGP and usually have 3 years post qualification as a GP, have a substantive post in general practice and have worked for a minimum of one year in their current practice.
- The applicant should be working in a GP practice which has attained high QOF achievement this is usually meant to mean over 900 points.
- An ability to study at postgraduate level.

**17. Methods for Evaluating and Enhancing the Quality and Standards of Teaching and Learning.**

**Mechanisms for review and evaluation of teaching, learning, assessment, the curriculum and outcome standards.**

- Annual reports on modules and programmes (including reviews of progression and achievement).
- Student/practitioner evaluation and feedback through module evaluation questionnaire.
- Learning and teaching committee
- Board of Studies
- Staff/student/practitioner liaison committee
- Annual staff appraisal
- Peer observation
- Continuous monitoring of student/practitioner progress and attendance.
• Double marking or moderation of a sample of all assessed work carrying more than 20% of marks.
• Periodic Programme Review.
• An External Examiner will be appointed and will conduct regular scrutiny and will provide an annual report.
• QAA Periodic Review for all Collaborative (bespoke) Partnerships with External.

Committees with responsibility for monitoring and evaluating quality and standards.

• Staff / Student/practitioner Liaison Committee
• School of Sport and Exercise Sciences Learning and Teaching Committee.
• Faculty for Sciences Learning and Teaching Committee.
• Board of Examiners
• Boards of Studies
• University Learning and Teaching Board

Mechanisms for gaining student feedback on the quality of teaching and their learning experience

• Student/practitioner module evaluation reports.
• Staff/student/practitioner liaison committee.
• Discussions with tutors
• Informal meetings and informal contact with students/practitioners.
• Channelled via a student/practitioner representative to the Board of Studies and/or the Director of Studies.
• Through student/practitioner representation on the School of Sport and Exercise Sciences Learning and Teaching Committee and/or channelled through the Director of Studies.

Staff Development priorities include:

• Attendance at subject update conferences/seminars
• Dissemination of good practice on learning and teaching methods.
• Health and Safety
• Membership of relevant professional / academic bodies.
• Programme team meetings.
• Staff development courses.
• Equal opportunities.
• Professional mentoring.
• Understand the support needs of part-time postgraduate students/practitioners.

18. Indicators of Quality and Standards.

• QAA inspection for University of Kent collaborative programmes.
• School of Sport and Exercise Sciences Programme Periodic Review (November 2007).

The following reference points were used in creating these specifications:

• QAA Subject Benchmark Statement for Hospitality, Leisure, Sport and Tourism (undergraduate level).
• QAA Subject Benchmark Statement for Medicine (UG/PG)
• QAA Subject Benchmark Statement for Business and Management at Masters level.
• QAA Health Care Programme phase 1 & 2 (Clinical Science & Physiotherapy)
The above learning outcomes from all modules are congruent with the generic principles and standards for training doctors and their supervisors as described by the General Medical Council (GMC) in The Guide to Specialty Training in the UK (Gold Guide) and with the standards for GP Specialty Training set out by COGPED and the RCGP.

5.1 Programme Design and Pathway

The programme provides a full course of study from Postgraduate Certificate, and in future through a Diploma to a Masters in Strategic Management and Medical Education. Once enrolled a GP may elect to undertake all parts of the pathway or may elect to stop at any of the levels.

The programme has been developed for both doctors wishing to become GP Trainers (section 6.1) and existing GP trainers (section 6.2). A different pathway will be followed by each group.

Below is a summary of the awards:

5.1.1 Postgraduate Certificate

Programme Title: Postgraduate Certificate in Strategic Leadership and Medical Education
Credit Value: 60 M Level Credits
Study Hours: 600 Hours

The PG Certificate consists of 3 modules each of 20 M level credits each entailing 200 hours of study:

- SS813 Supervision in the Workplace
- SS815 Collaborative Working
- SS816 Evidence Based Practice
6. PG Certificate in Strategic Leadership and Medical Education

The programme has been developed for both doctors wishing to become GP Trainers and (who will follow the course as set out in section 6.1) and existing GP trainers (who should follow the course as set out in section 7).

6.1 Pathway for Potential New Trainers

Any doctor wishing to become a GP trainer will be required to have successfully gained the PG Certificate in Strategic Leadership and Medical Education.

However, the accreditation of GP trainers is subject to a different regulatory framework which includes accreditation of both the doctor and their working environment. It is thus possible that a doctor successfully completes the PG Certificate but does not meet the standards required for accreditation as a GP trainer.

A potential trainer needs to meet a series of person specific criteria detailed in the GP Educator Competency framework; and the practice the GP works in is also required to meet a range of criteria as detailed in the COGPED Standards for GP Specialty training and the GMC Generic Standards for Training (GMC 2010).

6.1.1 Teaching and Learning Strategy

This will be through participation in the formal taught components of the modular Strategic Leadership and Medical Education pathway.

- Part 1 – Introductory Day and 3 days of study
- Part 2 – 3 days
- Part 3 – 5 days

Progression through all three parts of the formal taught programme is required to become a GP trainer and to undertake the Post Graduate Certificate.

The academic content relevant to the three academic modules (SS815, SS816, SS813) will be delivered in an integrated fashion throughout the formal teaching programme. Please see the full programme in Appendix 4.

Participants will be expected to undertake written pieces of academic work to support their progression through the programme.

The GP Educator programme is an open model of teaching and learning incorporating small and large group learning related to: adult educational theory, principles of supervision, principles of assessment, teaching of consulting skills using the ALOBA (Agenda Led Outcome Based Analysis) model, rehearsal and reflective discourse with peers.

Personal study and reflective practice are required to support the formal academic programme.

The structure of the course has been designed to ensure that potential new trainers are able to have experience of working as an educator in the Foundation Year 2 Clinical
Supervisor role, GP ST1/2 Clinical supervisor role or Foundation Year 2 Community Teacher (FY2 CT) role and reflect on this work between modules.

It is not possible to make an application to become a new trainer and submit for a PG Certificate without having practical experience of teaching.

Participants are encouraged to buddy with an experienced GP Trainer and to engage in the activity of the local GP Faculty (LFG) through participation in Trainer Group activities, and regular attendance at their LFG.

6.1.2 Progression through the PG Certificate Programme

6.1.2.1 Attendance/absence policy
For potential new GP trainers, attendance at the formal taught days is officially recorded. Participants must discuss with the leader of the learning set the reason for non-attendance so this can be authorised and agreed with the course tutors. Details of attendance are collated centrally at KSS Deanery.
Participants should notify the KSS Deanery PG Cert Med Ed Administrator for Potential New Trainers if for any reason they are unable to attend a taught day. Discussions will then take place with the senior tutor team and relevant Patch Associate GP Dean as to how the missing content will be covered. This may include attendance at the same content day on an alternative date or local arrangements may be made pending the nature of the content day missed.

6.1.2.2 Detailed Guidance on the Completion of the PG Certificate for Potential New Trainers
- Participant attends Introductory Day and Part 1
- Participant will complete academic assignments linked to the Trainer Self Evaluation Questionnaire (SEQ- Appendix 6)
- Participant makes application to become FY2CS. Or plan to supervise GPSt1 GPST2 in agreement with the Patch Associate Dean
- Where the participant is in an existing KSS approved training practice the application is reviewed by the Patch Associate GP Dean.
- Where the participant is in a non-training practice a visit by the KSS Lifelong Learning Advisor or Patch Associate GP Dean will take place.
- Accreditation for the role of FY2CS is for 1 year initially (with subsequent re-accreditation every 3 years). The FY2CS must be up to date in Equality & Diversity and successfully complete the KSS Deanery on-line training module prior to hosting an FY2.
- The participant hosts a FY2 doctor in their practice, or in agreement with the patch GP Associate GP Dean, provides clinical supervision for a GP Specialty trainee, supported by a GP trainer working in the same practice who provides educational supervision for the trainee.
- The participant begins collating their reflective portfolio of evidence which includes starting an 8 point clinical audit
- The participant attends Part 2
- The participant may continue as a FY2CS or take up the role of FY2CT or continue to undertake clinical supervision for a GP specialty trainee.
- The participant submits an audit of their clinical practice to be submitted prior to attendance at Part 3.

22
• The participant continues to develop their portfolio to include specifically, to organize, run and reflect on a multi-professional learning event and reflect on their own consulting with reference to the models of the consultation.
• The participant attends Part 3
• From completion of Part 3 a participant has 3-6 months to complete their assessment for the PG Certificate.

For potential new trainers, once enrolled onto the PG Certificate programme it is anticipated that it will take no longer than 12 months to progress through to the PG Cert award. Potential new Trainers taking over 2 years to complete the PG Certificate programme may be required to undertake further training in the light of new developments to GP specialty training.

6.1.3 Assessment Strategy
Participants will be required to:
• To develop and maintain an academic portfolio of evidence to support their development as a GP Educator. The portfolio will be assessed as part of the PG Certificate award.
• Complete an academically written and referenced Self Evaluation Questionnaire (SEQ) used by KSS Deanery as part of the trainer selection process.

6.1.4 Submission Process
The SEQ and portfolio of evidence needs to be submitted electronically via the KSS PG Cert Portal
The completed SEQ with all attendant paperwork must be submitted in its entirety. Later documents will not be accepted for consideration of the award.
Students need to complete the submission cover sheet and itemise the documents being submitted
Students can expect a receipt confirming their submission has been received

6.1.5 Performance Issues
Detailed guidance is given later in this handbook on the marking criteria for the PG certificate award and participants should refer to this.

Participants need to be aware that they also need to demonstrate they have achieved the required competences of a GP Educator in KSS through participation in the programme.

Participants are assessed prior to Part 3 on completion of their 8 point audit by accredited KSS Audit assessors. Participants are encouraged to meet the standard but it is not necessary to do so – what is expected is a reflective commentary in the SEQ of the process.

Participants will be assessed by Course Tutors on their teaching skills during Part 3 – should a participant not demonstrate the required competences for a GP educator in KSS, the participant will be required to undertake further locally arranged teaching and will not be able, at that stage, to progress towards the PG Certificate. Progress will be monitored by the local Patch Associate GP Dean. Where the Patch Associate GP Dean feels the participant has improved sufficiently enough to re-consider them as becoming a GP Trainer – the individual may then have to undertake a further Part 3 course and the PG Certificate.
6.1.6 Evaluation
Throughout the PG Certificate programme we aim to seek the views of students. The purpose of such evaluation is threefold:

- It informs the annual monitoring of courses
- Provides developmental feedback to assist the course tutors on the design of the course
- Encourages students to reflect on their own learning

Evaluation processes include:

- Questionnaire at the end of each formal taught part of the programme
- Regular opportunities to reflect on each module as to how the programme is progressing
- On Part 3 a range of evaluation methods are used including: pre-determined objectives evaluation, goal free evaluation and participatory evaluation
- Staff / Student Liaison Committee

In keeping with best practice questionnaires afford anonymity and will ask you to reflect on the course expressing your own views and ask a series of closed questions regarding the course infrastructure and delivery

The collated feedback will be shared with students at staff / student liaison committee meetings

6.1.7 Staff/Student Liaison Committee

As part of the Quality Assurance Programme and to enhance your progression through the PG Certificate regular meetings are held with students. These meetings are an opportunity to reflect on learning experiences and discuss the development of the course

Students are invited who are engaged on SS813, SS815 & SS816 Part 1, Part 2 and Part 3 of the pathway to meet with tutors three times during each year. Representatives from the different groups will be asked to canvas opinion from their current cohort and provide feedback to the rest of the group. An elected student representative will become a member of and be invited to the Board of Studies.

The Staff/Student Liaison Committee is attended by all staff and the student representatives for each year. This committee meets a minimum of once a term and reports to the Board of Studies.

6.1.8 Board of Studies

In keeping with the processes of University of Kent, a Board of Studies oversees the delivery of the PG Certificate programme. The Board has responsibility for the day to day quality management of the programme with a named Director of Studies and has a membership including tutors and student representatives. The Board of Studies in turn reports to the School of Sport and Exercise Sciences Learning and Teaching Committee. More details on the quality management process can be found on the Kent University website at: http://www.kent.ac.uk/uelt/quality/code2001/code.html

The Board meets three times a year and its function is to:

- Review the progress of students
• Consider and respond to the views of students
• Consider how the programme might be enhanced
• To receive and consider reports from the Chair of the Board of Studies which may pertain to:
  • How the delivery of the programme adheres to the programme specification
  • How teachers and students receive all appropriate information about the programme
  • Information on options available to students within the programme
• Prepare an annual report for the School of Sport and Exercise Sciences Learning and Teaching Committee. The report includes details of:
  o The content and delivery of the programme
  o The student experience including areas of good practice or concern
  o Any significant issues raised by the Board of Examiners / external examiners
  o Progression and completion rates for students
• Review the programme in relation to University of Kent’s Codes of Practice with respect to:
  o Curriculum Development and Delivery
  o Information provided for students
  o Academic support
  o Response to student evaluation

More detailed information relating to Kent University’s Codes of Practice can be found at: [http://www.kent.ac.uk/uelt/quality/code2001/index.html](http://www.kent.ac.uk/uelt/quality/code2001/index.html)

6.2 Pathway for Existing Trainers

Existing trainers will be able to use the trainer reaccreditation process together with an academic programme of study based on the three academic modules SS813, SS815 & SS816 listed above.

6.2.1 Learning and Teaching Strategies:
This will be through participation in trainer group / learning sets activities, seminars and workshops,

Personal study and reflection on experience of working as a GP Trainer will supplement the formal programme.

Trainers enrolled on the programme may be appointed a KSS Academic Mentor who will be an experienced GP Trainer with a minimum of a PG Certificate. The role of the Academic Mentor is to support and guide the trainer as they undertake preparation of their portfolio which will be submitted for assessment purposes.

6.2.2 Detailed Guidance on the Completion of the PG Certificate for existing trainers
• Participant notifies KSS Deanery PG Certificate Medical Education Administrator for existing Trainers of their intention.
• Participant attends peer learning group.
- Participant works supported by group and/or Academic Mentor to develop portfolio and SEQ (appendix 7).
- Participant undertakes 8 point audit cycle—submitted for marking to KSS audit assessors. (see comments in new trainer section about audit)

For existing trainers once enrolled onto the PG Certificate programme it is anticipated that it will take between 6-9 months and no longer than 12 months to progress through to the PG Cert award in Strategic Leadership and Medical Education.

6.2.3 Assessment Strategies:
Participants will be required to:

- To develop and maintain an academic portfolio of evidence to support their development as a GP Educator. The portfolio (SEQ) will be assessed as part of the PG Certificate award;
- Complete an academically written and referenced Self Evaluation Questionnaire used by KSS Deanery as part of the trainer selection process

6.2.4 Submission Process

The SEQ and portfolio of evidence needs to be submitted via the KSS PG Cert Portal. The completed SEQ with all attendant paperwork must be submitted in its entirety. Later documents will not be accepted for consideration of the award.

Students need to complete the submission cover sheet and itemise the documents being submitted.

Students can expect a receipt confirming their submission has been received.

6.2.5 Progression through the PG Certificate Programme

6.2.5.1 Attendance/absence policy

For existing trainers attendance at the peer based learning set is officially recorded. Participants must discuss with the leader of the learning set the reason for non-attendance so this can be authorised and agreed. A record of reasons for absence will be kept. Details of attendance are collated centrally at KSS Deanery.

Where an existing GP trainer is unable to attend trainer group activities relating to the PG certificate this should be discussed with the Academic Mentor supporting the group locally to explore what arrangements can be made to allow the participant to cover the missed work.

6.2.5.2 Performance Issues

Detailed guidance is given later in this handbook on the marking criteria for the PG Certificate award and this should be referred to. However, existing GP Trainers are expected to attend their local GP workshops and the county GP Trainers Day to a minimum of 70% of all meetings annually.

6.2.5.3 Evaluation

Throughout the PG Certificate programme we aim to seek the views of students. The purpose of such evaluation is threefold:

- It informs the annual monitoring of courses
- Provides developmental feedback to assist the course tutors on the design of the course
- Encourages students to reflect on their own learning

Evaluation processes include
- Regular opportunities to reflect as to how the PG Cert is progressing in a group
- Regular opportunity to reflect with an academic mentor
- Staff / Student Liaison Committee

As part of the Quality Assurance Programme and to enhance your progression through the PG Certificate regular meetings are held with students. These meetings are an opportunity to reflect on learning experiences and discuss the development of the course.

Students on the existing trainer PG Cert pathway to meet with tutors three times during each year. Representatives from the different groups will be asked to canvas opinion from their current cohort and provide feedback to the rest of the group. Feedback from students will also be presented to the Board of Studies. An elected student representative will become a member of and be invited to the Boards of Studies.

In keeping with the processes of the University of Kent a Board of Studies oversees the delivery of the PG Certificate programme.
Credit Value: 60 M Level Credits

The academic content relevant to the three modules will be delivered in an integrated fashion throughout the formal teaching programme. Please see the full programme in Appendix 1.

Participants will be expected to undertake written pieces of academic work to support their progression through the programme which will be peer reviewed.

The modular GP Educator programme is an open model of teaching and learning incorporating small and large group learning related to: adult educational theory, principles of supervision, principles of assessment, teaching of consulting skills using the ALOBA (Agenda Led Outcome Based Analysis) model, rehearsal and reflective discourse with peers.

Personal study and reflective practice are required to support the formal academic programme.

7.1 Academic Module 1 SS813 Supervision in the Workplace (20 M credits)

Module Content:
This module will draw on the rich history of supervision across the professions. GPs will be expected to evaluate how this process of professional support as both a clinical and educational supervisor and how the nature of the supervision relationship and how it fosters the development of professional practice.

During the modules participants will gain knowledge, skills and the necessary competencies to carry out the role of clinical supervisor including: the need to maintain the safety of patients and the learner, how the learning environment supports the supervision process and the link between clinical governance processes, clinical supervision and improvements in patient care. Participants will also develop skills in tailoring educational programmes based on the needs assessment of the learner, undertake workplace based learning with the theory that underpins this and develop teaching skills with the aim of developing flexible teachers who are learner centred in approach. This will allow participants to achieve the core competencies for educational supervision determined by the General Medical Council.

Throughout the module GPs will be encouraged to reflect on their own professional development both as a clinician and a primary care educator.

Specific Learning Outcomes:
Critically reflect on how supervision can be accommodated within the context of one's individual practice environment including evidence to show how a range of learning opportunities have been provided that maximise workplace learning.
- Demonstrate an ability to critically assess the competence of learners so as to maintain the safety of patients and the learner and evaluate the learning that has taken place.
- Critically evaluate how involvement in clinical supervision supports the maintenance and improvement of quality services in primary care.
- Critically appraise models of reflective practice and how they can be used in the professional development of learners.
- Communication skills. evidenced by ability to express opinions and engage in critical thinking both in written format and verbally.
- Information Technology — through the presentation of work (Including using word processing and internet searches).
- Ability to plan and manage learning through completing the extra self-directed study necessary to successfully complete the requirements for this module, problem solving and time management.
- Interpersonal skills evidenced through working with others.
- Team building when working with peers and learners throughout the module

Assessment Strategy

Complete a portfolio demonstrating the development of practice which provides structured and systematic reflection on the relationship between professional practice and theory; to demonstrate competence and advanced level critical thinking in the light of the subject material relating to workplace supervision

This single assessment accounts for 100% of the available marks.

Specifically the portfolio should comprise of:

- A reflective and academically written and referenced Self Evaluation Questionnaire used by KSS GP Deanery as part of the trainer selection process
- AND an academic portfolio of evidence to support the SEQ.

The portfolio of evidence may include:
- Reflection on how the practice has been prepared as a learning environment;
- Reflection on the Presentation of qualitative data showing how clinical governance processes and/ or feedback has improved the quality of care in the practice;
- Reflection on how the GP has assessed the competence of a learner and gone about undertaking an educational needs assessment;
- Reflection on how the GP has used an educational or clinical supervisors report to inform and improve the practice of a learner;
- A reflection of an assessment undertaken with a learner providing evidence of developmental feedback to the learner;
• A critique of a formal teaching intervention undertaken.

The SEQ must meet both the standards of the KSS GP Deanery Trainer Selection Committee and the academic standards for the PG Certificate Award.

Reading List


7.2 Academic Module 2 (SS816) Evidence Based Practice (20 credits)

This module will focus on promoting the skills of health and social care professionals to become more effective users of research findings with a view to the enhancement of quality patient care and how to audit their clinical practice.

Content will focus on the role of evidence based practice and clinical governance initiatives. Further sessions will concentrate on the process of forming a focused question, designing a search strategy using relevant databases and gaining experience in the use of the tools and techniques available to undertake an efficient search of the literature and undertake an audit of clinical practice. Other topics covered will include developing skills to evaluate the quality and integrity of data and assess the appropriateness, and thus validity, of a range of statistical analyses. In addition to case study work a working clinical database will be used to enable participants to apply evaluative skills to

Subject specialists will use contemporary and traditional modes of course material. This module aims to provide the practitioner with a comprehensive understanding of theory and practice within evidence based practice. By developing knowledge, skills and critical understanding of key issues such as:

In order to support and organise such reflection, a portfolio will be used as the vehicle for structured and systematic reflection on the material encountered within the module. This encourages the analysis of learning experiences and the outcomes of professional assessment. On completion of the module the students will submit their portfolio of evidence, which will then be assessed according to the learning outcomes of the module; the compilation of which provides a focus point for all previously assessed professional practice and continuous personal and professional development activities.

Specific Learning Outcomes:

- Critically analyse the role of evidence based practice in the wider organisational context and the constraints to professional practice.
- Critically evaluate the literature using recognised appraisal tools to assess validity and relevance.
- Demonstrate an in depth understanding of the process of data management and be able to apply this knowledge in terms of the critical evaluation of data quality, integrity and bias.
- Critically evaluate and communicate selected statistical principles, methods and applications.
Critically reflect on the process of effective integration of individual professional expertise with reference to improved participation within professional practice.

Generic Learning Outcomes:

- Interpersonal skills - Show evidence of critical self-reflection and the ability to enhance professional competence on the basis of feedback from self and others.
- Communication skills - Communicate with clarity in both the academic and professional setting to a range of audiences and using a variety of approaches.
- Ability to plan and manage learning - Show a capacity for autonomous learning and the ability to access academic and professional resources as appropriate.
- Information Technology - Show ability to effectively manage and present complex information using a comprehensive range of learning resources and demonstrate competence in the use of a range of information technologies.

Assessment Strategy

Complete a portfolio demonstrating the development of practice which provides structured and systematic reflection on the relationship between professional practice and theory; to demonstrate competence and advanced level critical thinking in the light of the subject material relating to workplace supervision.

This single assessment accounts for 100% of the available marks.


Specifically the portfolio should comprise of:

- A reflective and academically written and referenced Self Evaluation Questionnaire used by KSS GP Deanery as part of the trainer selection process.
- AND an academic portfolio of evidence to support the SEQ.
The portfolio of evidence may include:
- An 8 point written clinical audit cycle.
- Critical reflection on evidence based practice.
- Reflection on lectures/small group/plenary work related to learning around evidence based medicine.
- Critical understanding of the impact of research on patient care.

The SEQ must meet both the standards of the KSS GP Deanery Trainer Selection Committee and the academic standards for the PG Certificate course.

Reading List

7.3 Academic Module 3 (SS815) - Collaborative Working (20 credits)

This module raises awareness of policy, theory, concepts and practice which underpin inter-disciplinary and collaborative working through the critical examination of literature and practice. The module explores the role and impact of research in and on inter-disciplinary and collaborative working. The overall module theme stresses the importance of building on experiential learning when working together with others from different disciplines whilst developing critical perspectives on project management and leadership.

Specific Learning Outcomes:

- Critically understand research, concepts and frameworks in direct relation to different leadership styles and approaches and their impact on collaborative and multidisciplinary working.
- Critically reflect on knowledge and skills related to the enhancement of professional practice through evidence led enquiry
- Demonstrate analytical understanding and application of the processes underpinning collaborative working within the professional environment.
- This includes a critical reflection on learning and teaching and the development of practice.

Generic Learning Outcomes:

Ability to plan and manage learning - Demonstrate the capacity for autonomous learning through the acquisition of skills of evaluation and enquiry that support the practitioner in making a genuine contribution to professional knowledge in their subject

Team working - Critically reflect on the dynamics that help or hinder collaborative working in a multi-disciplinary context.

Communication and interpersonal skills - Communicate with clarity in both the academic and professional setting to a range of audiences and using a variety of approaches

Information Technology - Show ability to effectively manage and present complex information using a comprehensive range of learning resources and demonstrate competence in the use of a range of information technologies.
Project Management - Demonstrate the use of project management skills to inform and enhance learning approaches in the workplace

**Assessment Strategy**
Complete a portfolio demonstrating the development of practice which provides structured and systematic reflection on the relationship between professional practice and theory; to demonstrate competence and advanced level critical thinking in the light of the subject material relating to collaborative working.

This single assessment accounts for 100% of the available marks.

Specifically the portfolio should comprise of:

- A reflective and academically written and referenced Self Evaluation Questionnaire used by KSS GP Deanery as part of the trainer selection process

- AND an academic portfolio of evidence to support the SEQ.

- The portfolio of evidence may include:
  - Reflection on designing and facilitating a seminar theme relevant to a professional interest/issue.
  - Reflection on managing a patient case involving working with others.

The SEQ must meet both the standards of the KSS GP Deanery Trainer Selection Committee and the academic standards for the PG Certificate course.

This portfolio tests the achievements of the learning outcomes 12.1, 12.2, 13.1, 13.2, 13.3, 13.4 & 13.5.

**Reading List**

8. The GP Educator Competency Framework

The GMC has been developing defined competences for GP Educators based on a report from the Academy of Medical Educators (2010)

1. Ensuring safe and effective patient care through training
2. Establishing and maintaining an environment for learning
3. Teaching and facilitating learning
4. Enhancing learning through assessment
5. Supporting and monitoring educational progress
6. Guiding personal and professional development
7. Continuing professional development as an educator

Educational Supervisors are expected to demonstrate competence across all 7 areas: Clinical Supervisors across 1,2,3,4 and 7.

KSS has expanded the above framework with some more specific descriptors based on the Dreyfus and Dreyfus (1986) model has been developed. In developing this framework guidance was taken from the GMC Generic Standards for Training (GMC 2010) and COGPED (Committee of General Practice Education Directors) Guidance for GP Specialty training.

- Maintain the safety of patients and learners.
- Demonstrate high standards of Clinical Governance within your practice and ability to reflect critically on Significant Events.
- Demonstrate effective communication skills within the consultation adopting a patient-centred style

GMC Competency 2 Establishing and maintaining an environment for learning
KSS Competency

Demonstrate ability to support multidisciplinary teaching and learning
Assist in the development of teaching skills amongst team members
GMC Competency 3 Teaching and Facilitating Learning

KSS Competency

- Demonstrate a learner–centred approach to teaching
- Use “descriptive” feedback effectively to assist trainee doctors in developing their skills

GPC Competency 5 Supporting and monitoring educational progress

KSS Competency

- Ability to liaise with other GPStR’s Clinical Supervisors within the practice and other setting to develop effective educational hand over process.
- Ability to identify Trainees in Difficulties at early stage and seeks help to support GPStRs.

GMC Competency 6 Guiding personal and professional development

KSS Competency - Demonstrate an ability to draw up and undertake learning through use of a PDP.

Detailed descriptors relating to the above competencies can be seen in the Educational Review Document.


9. The University of Kent Credit Framework

9.1. Introduction
The University uses a ‘credit framework’ for taught programmes of study, similar to the credit systems adopted by many other universities in the UK. This is intended to make it easier for students to obtain exemption from part of a University of Kent programme on the basis of study elsewhere and similarly for students to transfer credit obtained at this University to another university or college. This section of the Handbook aims to explain those aspects of the credit framework that will be of interest to postgraduate students taking taught programmes within the School of Sport and Exercise Sciences. However, it should be regarded as an informal guide only. The full Credit Framework Regulations may be found on the University web site at www.kent.ac.uk/registry/quality/credit/

9.2 Outline of Credit Framework
In order to be eligible for the award of a Certificate, Diploma or Degree by the University, you must take an approved programme of study, obtain a specified number of credits, the number required depending on the award in question, and meet such other requirements as may be specified for the programme of study in question. Each programme of study comprises a number of modules, usually at different levels and each worth a specified number of credits. In order to be awarded the credits for a module, you must normally demonstrate, via assessment, that you have achieved the learning outcomes specified for the module. Limited credit may also be awarded where assessment has been affected by illness (Condonement) or where you have demonstrated in other modules that all programme learning outcomes have been achieved (Compensation). All Masters programmes in the Centre comprise one stage. This consists of a number of taught modules amounting to Masters 180 credits, Diploma 120 credits, and a 60-credit Certificate. Postgraduate Diplomas and Masters degrees may be awarded with Merit or with Distinction.

9.3 Programmes of Study
Each programme of study comprises an approved set or sets of modules. Each module is at a specified level and successful completion of the module results in the award of a specified number of credits at that level. The University defines these terms as follows:
Credits: one credit corresponds to approximately ten hours of 'learning time' (ie including all taught or supervised classes and all private study and research).
Module: a module is a self-contained component of a programme or programmes of study with defined learning outcomes, teaching and learning methods and assessment requirements. [Each module corresponds to a multiple of 20 credits. 20 Credits = 200 hours. Dissertation = 60 Credits]

Level: All modules contributing to the Centre’s postgraduate programmes are level M (Masters). The level descriptor adopted by the University for this level may be found in Annex 2 of the Credit Framework Regulations.

Awards: In order to be eligible for the award of a Certificate, Diploma or Degree by the University, you must obtain at least the minimum number of credits specified for that award at the specified levels. These requirements are set out in Annex 4 of the Credit Framework Regulations. Individual programmes or groups of programmes will normally specify additional requirements which must be met for the award of the qualification in the subject concerned, for example by requiring specified modules to be taken and passed. The minimum requirements for the Postgraduate Diplomas and for the degree of MSc are as follows Postgraduate Diploma: 120 credits MSc: 180 credits

9.3.1 Award of Credits

Successful Completion of Module

If you successfully demonstrate via assessment that you have achieved the specified learning outcomes for a module you will be awarded the number and level of credits prescribed for the module. Assessment methods vary between modules and assessment is designed so that achievement of the pass mark or above will demonstrate achievement of learning outcomes. Module specifications will state whether the pass mark has to be achieved overall and/or in prescribed elements of assessment. In certain modules, assessment will be on a Pass/Fail basis and numerical marks will not be awarded. In all other cases, the pass mark will be 40%.

Condonement

If you fail a module or modules due to illness or other mitigating circumstances, the Board of Examiners may condone the failure and award credits for the module(s), up to a limit of 25% of each stage of a programme of study, provided that there is evidence to show that you have achieved the programme learning outcomes and provided that you have submitted written medical or other evidence to substantiate any claim of illness or other mitigating circumstances. The marks achieved for such modules will not be adjusted to take account of the mitigating circumstances but transcripts will indicate modules for which credits have been awarded via condonement. Programme specifications specify modules in which failure cannot be condoned.

Compensation

If you fail a module or modules but your marks for such modules are within 10% of the pass mark, the Board of Examiners may nevertheless award you the credits for the module(s), up to a limit of 25% of each stage of a programme of study, provided that your overall average mark for the stage is at or above the pass mark and provided that there is evidence to
show that programme learning outcomes have been achieved. The marks achieved for such modules will not be adjusted but transcripts will indicate modules for which credits have been awarded via compensation. Programme specifications specify modules in which failure cannot be compensated.

9.3.2 Failure of Modules

Referral
If you have not acquired sufficient credits to complete a programme, the Board of Examiners may permit you to undertake further assessment in failed modules. The Board of Examiners will specify which elements of assessment you are required to undertake. If you are so referred in a module you may be required to, or may elect to, repeat the module, provided that it is being taught in the year in question, or you may choose to take a different module provided that the requirements of the programme of study are still met. At most one such opportunity per module will be permitted, to be automatically permitted unless denied for disciplinary reasons. Any such repeated modules will attract a maximum grade of ‘pass’.

Deferral
If you have been unable to complete assessment requirements or your performance has been affected by circumstances such as illness, and where there is written evidence to support this, the Board of Examiners may permit you to undertake some or all of the assessment for some or all of the modules comprising at a later date and as for the first time.

9.3.3 Classification of Awards

Students who successfully complete some programmes of study leading to the award of a Postgraduate Certificate, Diploma or a Masters degree may be awarded the diploma or degree with Merit or with Distinction. The requirements for such awards are set out below:

Marks obtained for all modules taken as part of the programme of study will contribute to the classification of the award.

The purpose of classification and where such classification is determined only by the average mark obtained, modules may have different weightings as approved by Faculty Board.

Where a student is exempted from part of the programme of study on the basis of credit transfer, marks obtained for such prior learning will not be used for classification purposes except where it agreed as part of an inter-institutional agreement that they should be so used.

Where a student is awarded credit through condonement or compensation, the mark to be used for classification will be the mark awarded for the module which will not be adjusted to take account of the circumstances leading to such condonement or compensation.
Where a student fails a module at the first attempt and subsequently passes the module, or takes and passes an alternative module in place of a module which has been failed, the minimum pass mark will be used for classification.

Boards of Examiners may recommend the award of a higher classification than that indicated by the marks obtained provided that the student would have qualified for a higher classification if he/she had obtained two more marks for each module and provided that the Board of Examiners is satisfied that there is substantial evidence that the marks obtained do not fully reflect the candidate’s overall achievement. Such evidence will normally take one or more of the forms stated below. The marks obtained will not be changed.

- Documented evidence of significant medical or personal problems or of unexpected hardship.
- Evidence obtained from a viva voce examination.
- The views of an external examiner on the quality of work of the candidate.
- Significant improvement in the final stage performance. Note: This factor should not be taken into account where final stage marks are weighted more heavily than marks obtained in earlier stages.
- Performance in one module substantially below that on other modules.
- Evidence of achievement commensurate with the higher classification. Such evidence might include a significant number of answers to individual questions which are of appropriate quality or, in appropriate subjects, evidence of problem solving ability.

Board of Examiners have discretion to make recommendations notwithstanding the Conventions in exceptional cases provided that such recommendations do not lower the classification arising on the application of the Conventions.

Merit and Distinction will be awarded on the basis of both the ‘average’ and the ‘preponderance’ methods.

‘Average’ Method of Classification
‘with Merit’: an average mark of 60 or above but less than 70.
‘with Distinction’: an average mark of 70 or above.

‘Preponderance’ Method of Classification
‘with Merit’: an average mark over all contributing modules of 57 or above and a mark of 60 or above for 55% or more of the credits obtained.
'with Distinction': an average mark over all contributing modules of 65 or above and a mark of 70 or above for 50% or more of the credits obtained.

'Average' and 'Preponderance' Methods of Classification
In the event of a difference in the classification derived for a particular student, the higher of the two classifications will be awarded.
10 Preparing a submission for the award of PG Certificate

The following sections give guidance on the submission of assignments and the process of academic writing and the referencing format required.

The assessment strategy has been developed to be congruent with the evidence required to support and application to be selected as a GP Trainer or to be re-accredited as a trainer.

The assessment strategy consists of completion of an academically written and referenced Trainer Self-Evaluation Questionnaire and the portfolio of evidence to support this document.

New and potential GP trainers are advised to begin preparing their submission well ahead of the intended date for Trainer selection or re-accreditation.

Keeping a reflective educational diary / log of supervision and teaching activity is an essential part of the preparation and will form the basis of several assignments.

Keeping a reflective log relating to personal development of skills, reflection on courses attended and feedback received from peers will also be required.

The production of written assignments is part of academic development below are some handy tips:

- Start writing as you begin reading.
- Make note of useful references – ideally using reference manager software.
- Get ideas on paper and start writing sooner rather than later.
- Make sure your work addresses the actual SEQ question
- Try to develop the narrative and your argument in a logical and sequential manner.
- The SEQ answer should demonstrate your knowledge and understanding of key concepts.
- The SEQ questions are reflective in nature this should include appraisal of evidence from varying perspectives related to your experience, actions and thoughts.
- Conclude with a summary of your insights and how you will use this newly acquired insight in your future development as an educator.
- Re-visit your written work to check grammar and spelling.
• Try to avoid jargon, acronyms and discriminatory language.
• Ideally ask someone else to proof read your work – does it make sense?

The completed SEQ and the portfolio should be submitted for assessment with the new trainer or trainer re-accreditation documentation to the appropriate Patch Manager.

10.1 Writing Assignments and Providing Evidence

In writing academically and providing evidence it is important that you are able to demonstrate all of the learning outcomes for the relevant module. These are an important checklist to use to evaluate your own work before submitting it. If there is no evidence of a learning outcome you are restricting the marks that are available to you.

The SEQ questions will require you to answer in an academic style that is reference to the relevant educational theory and literature. We recognise that this may be a new skill for many GP trainers and the Deanery will therefore be providing support for you to develop this skill through your learning sets.

10.2 Plagiarism

Plagiarism is passing off the work of others as your own. This constitutes academic theft and is a serious matter which is penalised in assignment marking.

Examples of plagiarism are:
• the verbatim copying of another person’s work without acknowledgement;
• the close paraphrasing of another person’s work by simply changing a few words or altering the order of presentation without acknowledgement;
• the unacknowledged quotation of phrases from another person’s work and/or the presentation of another person’s idea(s) as one’s own.

For more details visit http://www.kent.ac.uk/UELT/AI/STUDENTS/WHATISPLAGIARISM.HTML

10.3 Format for Academic Assignment Submissions

The Harvard system of referencing should be used.
The KSS Trainer Self Evaluation Questionnaire (SEQ) forms the basis of the submission.

The SEQ should be completed in the academic reflective style and referenced appropriately.

Specific examples relating to a learner should link practical experience of teaching / assessing to academic perspectives and personal reflection.

The entry in the SEQ should be supported by further evidence – which should also show evidence of reflection.

The production of the portfolio is part of academic development below are some handy tips:

- Read through the SEQ well ahead of preparing your submission
  - Link the sections in the SEQ to the learning outcomes in the PG Cert modules
  - Decide on the types of evidence you will need to collect to support your written statements for example:
    - Records showing how you have assessed the trainee’s competence such as rating tools, records of joint surgeries.
    - Record of your initial educational assessment.
    - Record of assessments undertaken.
    - Personal reflections and trainee evaluation of tutorial teaching.
    - Feedback from trainees and your reflections on these.
    - Significant events involving a learner and your reflections on this.
    - Case studies of patients showing your working with others.
    - Record of learning with others in practice – including your reflections.
    - Educational appraisals undertaken.
    - Reflection on observed teaching – self and peers (the video of teaching).
    - Reflections and feedback on teaching you have undertaken.
    - Reflections on your Practice performance including QOF and PSQ
    - Documents which support best practice from your own practice.
    - Work smart – much of the above is evidence also used for NHS appraisal and can support both processes.
    - Record specific examples relevant to SEQ sections as you come across them.
    - Link your practical experience to your past experience as an educator.
• Link your practical experience to academic theories.

10.4 Examples of portfolio Evidence for Academic Module 1 (SS813)

(i) An inventory on how the practice has been prepared as a learning environment;
(evidence such as timetables, induction timetable, check lists for induction, excerpts from your induction pack for trainees, absence cover plan, record of any learning events you have done with the practice)

(ii) Application of a tool to show how the GP has assessed the competence and professionalism of a learner;
(confidence rating scales, with your reflections, OOH emergency questionnaire, excerpts from your educational log, timetables, summary of CS reports you may have done for ST1 ST2 4/12 placements)

(iii) Presentation of qualitative data showing how clinical governance processes have improved the quality of care in the practice;
(Similar evidence as for evidence based practice – records of CG meetings, practice audits, QOF points, complaints procedures, copies of appropriate practice based policies)

10.5 Harvard Referencing

Referencing of academic writing is necessary to clearly identify the work of the GP from the work of others and allows the reader the possibility of finding the original material for themselves.

Why do I need to reference?

There are several reasons why you need to reference your work.

1. References are used to demonstrate the depth and breadth of your reading and you can use references to support your analysis and argument. Using referencing in your work is therefore a way in which you can enhance your grade.
2. Referencing is the way that you acknowledge other people’s work within your own coursework. If you do not use referencing or use it incorrectly it could potentially be viewed as plagiarism (copying someone’s work without acknowledgement). There can also be copyright issues associated with using other people’s work without acknowledgement.
3. Allows other people to identify the source of the information that you have used.
Referencing is not difficult as it is all about following the instructions. The most important things to remember are to be organised and be consistent.

You should use referencing within any piece of your work where you are using sources of information that are not your own. This includes essays, case studies, presentations, leaflets and written exams. All sources of information that you use should be included within your work in two places:

1. In the text - this is called a citation.
2. At the end in the references list.

The Harvard system is the most straightforward referencing convention and below are, we hope some easily followed rules:

**Citations:**

There are two main ways that you can use citations in your work. You can either use a citation within e.g. your sentence e.g. (this is called author prominent) or at the end of the sentence (this is called information prominent). Here are some examples:

**Author prominent**

A study by Smith (2007) found that goalkeepers sustain more head injuries than strikers.

**Information prominent**

Goalkeepers have been found to sustain more head injuries than strikers (Smith, 2007).

There are a few rules regarding the number of authors of a reference source as follows:

1 or 2 authors - you always write in full Smith (1985) or (Brown & Green, 1996).

3 to 5 authors – the first time you use the reference in your work you should give ALL the authors. Then when you cite that source again you give the first author followed by et al. (White et al., 2009).

6 or more authors – you can use the first author only followed by et al. straight away.
10.6 Compiling a Reference List

The reference list enables the reader to trace and source the references. In the case of the formal assignments the list should be placed at the end of the assignment and does not contribute to the word count.

For formal assignments references should be listed in alphabetical order in the reference list at the end of the assignment.

When referencing work in the SEQ these should appear in alphabetical order at the end of the written statements in the respective boxed section to which they relate.

The Harvard convention lays down rules for how a reference list should be completed.

**Book References:**

**Single Author**


*Extras to note*

*Author*: Surname with capital first letter and followed by a comma.

*Initials*: In capitals with full-stop after each and comma after full-stop of last initial.

*Year*: Publication year (not printing or impression) followed by full-stop.

*Title*: Full title of book/thesis/dissertation in italics with capitalization of first word and proper nouns only. Followed by full-stop unless there is a sub-title.

*Sub-title*: Follows a colon at end of full title, no capitalization unless proper nouns. Follow by full-stop.

*Edition*: Only include this if not first edition use number followed by abbreviation ed. Include full-stop.

*Place of publication*: Town or city and country if there may be confusion with UK place names. Follow by colon.

*Publisher*: Company name followed by full-stop.

**Multiple authors**

For books with two, three or four authors of equal status the names should all be included in the order they appear in the document. Use an ampersand, not ‘and’ to link the last two multiple authors.

The required elements for a reference are:

Authors, Initials., Year. *Title of book*. Edition. (only include this if not the first edition) Place: Publisher.
For books where there are more than four authors, use the first author only with surname and initials followed by “et al”.
The required elements for a reference are:
Author, Initials., Year. *Title of book*. Edition. (only include this if not the first edition) Place: Publisher.

**Books which are edited**
For books which are edited and but give editor(s) surname(s) and initials, followed by ed. or eds. Please note that ed. is the abbreviation for both editor and edition.
The required elements for a reference are:
Author, Initials., Year. *Title of book*. Edition. (only include this if not the first edition) Place: Publisher.

**Chapters of edited books**
For chapters of edited books the required elements for a reference are:
Chapter author(s) surname(s) and initials. Year. Title of chapter followed by ‘In’
Book editor(s) initials and surnames with ed. or eds. after the last name.
*Title of book*. Place of publication: Publisher. Chapter number or first and last page numbers followed by full-stop.

**Journal articles:**
For journal articles the required elements for references are:
Author, Initials., Year. Title of article. *Full Title of Journal*, Volume number (Issue/Part number), Page numbers.

*Extras to note:*
Author: Surname with capital first letter and followed by comma.
Initials: In capitals with full-stop after each and comma after full-stop of last initial.
Year: Publication year followed by full-stop.
Title: Full title of article NOT in italics with capitalization of first word and proper nouns only. Followed by full-stop unless there is a sub-title.
Sub-title: Follows a colon at end of full title, no capitalization unless proper nouns.
Followed by full-stop.
Journal title: Full title of journal, in italics, with capitalization of key words.
Followed by comma.
Volume number:
Issue/Part number: In brackets, followed by comma.
Page numbers: Preceded by p and full-stop then first and last page numbers, linked by a hyphen. Followed by full-stop.
Journal articles from an electronic source:
For journal articles from an electronic source the required elements for a reference are:
Author, Initials., Year. Title of article. Full Title of Journal, [type of medium] Volume number (Issue/Part number), Page numbers if available.
Available at: include web site address/URL (Uniform Resource Locator) and additional details of access, such as the routing from the home page of the source. N.B. the URL should be underlined [Accessed date].

Internet:
For websites found on the internet the required elements for a reference are:
Author, Initials., Year. Title of document or page, [type of medium].
Available at: include web site address/URL (Uniform Resource Locator) and additional details of access, such as the routing from the home page of the source.
N.B. the URL should be underlined [Accessed date].

Acts of Parliament:
The required elements are:
Short title with Key words capitalized, which includes the year followed by the chapter number in brackets. Key words of titles are capitalized. Place of publication: Publisher.

Other official publications:
The required elements for a reference are:
Authorship, which may be part of the title. Year. Title, in italics if a separate element, Command number as it is on the document, within brackets, Place of publication: Publisher.

Informal or in-house publications
For leaflets hand-outs provide what details you can citing the title of the hand-out the date you received it, the title, type of publication and the institution.

Acknowledgements
More detailed guidance on referencing can be found through University guides to referencing. The compilers of this guide would like to acknowledge Anglia Ruskin University for its guide:
Marking
To succeed, each assessment must achieve a pass grade of 40%.

Distinction standard = marking range 100-70%
   Shows originality or exceptional thoroughness in critical analysis which shows how the topic is located in a broad theoretical framework. Excellent communication skills.

Merit standard = marking range 69-60%
   Evidence of critical analysis which draws on a range of perspectives and theoretical work. Student communicates effectively

Pass standard = marking range 59-40%
   Shows familiarity with the theoretical frameworks with some evidence of critical reflection

Fail = < 40%
   Work shows no critical analysis or failure to understand central ideas or no use of any theoretical framework or poor standard of communication.

1. Reading and Knowledge
   80 – 100 Will indicate an exceptional level of reading and comprehensive knowledge.
   70 – 79 A wide range of reading and good knowledge
   60 – 69 A good range of reading with adequate knowledge
   50 – 59 An adequate range of reading and reasonable knowledge.
   40 – 49 A limited range of reading and incomplete knowledge.
   30 – 39 A minimal range of reading and very limited knowledge.
   0 – 29 Poor reading and knowledge.
2. Understanding and Analysis
80 – 100 Original and critical work indicating exceptional synthesis and application of ideas.
70 – 79 Original and critical work indicating excellent synthesis and application of ideas.
60 – 69 Original and critical work indicating good synthesis and application of ideas.
50 – 59 A clear grasp of the main issues with adequate application of ideas.
40 – 49 A limited understanding of the main issues with fair application of ideas.
30 – 39 Insufficient understanding of the main issues with poor application of ideas.
0 – 29 Very limited understanding or application of the main issues.

3. Argument
80 – 100 Exceptionally clear evidence of independent critical and independent thought with the ability to defend a position logically and convincingly.
70 – 79 Excellent evidence of independent critical and independent thought with the ability to defend a position logically and convincingly.
60 – 69 Very clear evidence of critical thought with a well-developed argument.
50 – 59 Clear evidence of critical thought with an attempt at an argument.
40 – 49 Some evidence of critical thought, with some attempt at an argument.
30 – 39 Poor evidence of critical thought, meagre argument.
0 – 29 No evidence of critical thought.

4. Organisation and Presentation
80 – 100 Exceptional thought has been given to the outstanding arrangement and development of material and argument. Excellent English, spelling, structure and grammar.
70 – 79 Very good arrangement and development of material and argument. Excellent English, spelling, structure and grammar.
60 – 69 Good arrangement and development of material and argument. Good spelling, structure and grammar.
50 – 59 Adequate effort to organise the material and argument. Adequate spelling, structure and grammar.
40 – 49 Some effort to organise the material and argument. Weaknesses in spelling, structure and grammar.
30 – 39 Very limited effort to organise the material and argument. Weaknesses in spelling, structure and grammar.
0 – 29 Little effort to organise the material and argument. Weaknesses in spelling, structure and grammar.

5. Referencing
80 – 100 Exceptionally comprehensive range of literature fully referenced including a range of sources. Consistently conforming to Harvard alphabetical format.
70 – 79 Comprehensive range of literature fully referenced including a range of sources. Consistently conforming to Harvard alphabetical format.
60 – 69 Good range of literature well referenced including a range of sources. Consistent conforming to Harvard alphabetical format.
50 – 59 Adequate range of literature referenced from different sources. Fair attempt has been made to reference using Harvard alphabetical format.
40 – 49 Limited range of literature has been used from few sources. Limited use of Harvard alphabetical format.
30 – 39 Very limited range of literature has been used. Limited use of Harvard format.
0 – 29 Little or no referencing

GPs are normally allowed to resubmit a failed assignment on one further occasion only subject to Exam Board approval, although the Exam Board is not obliged to allow a resubmission of a failed assignment and GPs have no right to demand this. Re-submissions of failed assignments can only carry a minimum pass mark of 40%.

A proportion of submitted assignments are shown to the External Examiners. The task of the external examiners is to ensure fairness and consistency of marking between tutors. External examiners do not generally alter marks, although they may suggest to the Exam Board that some marks are moderated.

All marks are subject to confirmation by University of Kent School of Sport and Exercise Sciences Examination Board.

10.8 Concessions, Applications and Appeals against Recommendations of the Board of Examiners

Whilst KSS Deanery and University of Kent recognise that students enrolled on the PG Certificate programme are working as health care professionals delivering care to patients in the NHS students do have a responsibility to manage their learning and assessment activities throughout the duration of the programme and not leave academic work until too late.

Illness and difficulties in professional and personal lives are not normally accepted in mitigation for failure to submit the SEQ. Evidence of illness or other misfortune, such as to cause exceptional interference with academic performance over and above the normal difficulties experienced in life, will be considered by Boards of Examiners if submitted at the earliest opportunity to the Senior Tutors and appropriate patch GP Associate Dean.

10.8.1 Concessions

The term concession is used to describe action taken by Schools and Boards of Examiners in recognition of events which cause exceptional interference with academic performance and which are beyond the normal difficulties experienced in life.
This includes circumstances such as sudden, severe illness (confirmed by medical certificate) adversely affecting performance or preventing work from being submitted by the deadline set.

The University will not consider concessionary evidence in cases where the student was directly responsible for the circumstances or where a student could reasonably have avoided the situation or acted to limit the impact of the circumstances. The following are examples of circumstances which would not be considered relevant for concessionary treatment (the list is not exhaustive):

- Completing work too late and missing deadlines because of computer or transport difficulties.
- Losing work not backed up on computer disk.
- Normal employment commitments.
- Failure to manage learning appropriately.
- Students have been affected by long-standing, controlled conditions for which they may be expected to have sought and received appropriate support.
- Students have been directly responsible for the circumstances put forward in mitigation.

### 10.8.2 Extensions to the deadline for SEQ submission

Coursework submitted after the applicable deadline is not accepted except in concessionary circumstances.

Students requesting an extension in the deadline for SEQ submission must be submitted in writing using the relevant Concessions Application Form to the PG Certificate Administrators at KSS Deanery for consideration. Any approval will be communicated in writing with a new submission date.

### 10.8.3 Failure to submit the SEQ / Impaired Performance during preparing for the SEQ submission

Concessions applications to the Board of Examiners will be considered only if submitted:

- by means of the Concessions Application Form designed for the purpose, available from the KSS PG Certificate Administrators.
- with a clear and concise account of the concessionary circumstances and the impact on studies;
- with all necessary documentary evidence.
- within the applicable deadline, i.e. within **five working days** of the event to which the concessions application pertains, where the circumstances were not anticipated.
In the case of students who are aware, they are unable to submit their SEQ; they are required to notify the KSS PG Certificate Administrators of their difficulties prior to the relevant deadline. They must request permission for the absence or non-submission by means of submitting the Concessions Application Form immediately if possible, or by immediately notifying the Deanery of their difficulties and then submitting this Form and supporting evidence as soon as possible thereafter. **Failure to do this may result in students being awarded no further opportunity to pass the module.**

NB. Legitimate concessionary reasons include incapacitating medical problems or exceptional misfortune and do not include holiday plans. Any medical documentation submitted to support concessions applications must be specific, relate to the dates and duration of illness be presented in English.

### 10.8.4 Considerations of Concessions

Concessions applications relating to non-submission of coursework, absence from examination/s, and to impaired performance in coursework or examination are normally considered by Concessions Panels on behalf of Boards of Examiners. The Panels make recommendations to the relevant Board of Examiners.

Where a student's concessionary submission indicates that s/he will be unable to submit the SEQ by the published deadline, the Concessionary panel, where it sees appropriate, will advise the Examination Board.

### 10.8.5 Appeals - Application

Students may not appeal against the academic judgement of the examiners. The submission of an appeal is no guarantee of its successful outcome.

Appeals from students taking taught programmes of study against recommendations of Boards of Examiners will be considered in the following circumstances only:

- where there is reasonable ground supported by objective evidence to believe that there has been administrative, procedural or clerical error.
- where there is evidence of illness or other misfortune such as to cause exceptional interference with academic performance and which the student was, for good reason, unable to submit by the published deadline; or where evidence relating to illness or other misfortune submitted under concessions procedures within the prescribed time limit was not properly considered by the Board of Examiners.
Appeals that are based on concessionary circumstances which, without good reason, were not brought to the attention of the Board of Examiners through concessions procedures at the appropriate time will not be considered.

Appeals will be considered only if submitted:

- by means of the Appeals Form designed for this purpose, available from the KSS PG Certificate Administrators or the Sciences Faculty Office at University of Kent.
- accompanied by a letter explaining in full the grounds for the appeal and the remedial action sought from the Board of Examiners;
- providing all necessary documentary evidence substantiating the grounds of the appeal.
- within the applicable deadline, i.e. 21 days of the publication of the result.

In all cases, appeals applications should be submitted to the Sciences Faculty Office. If the appeal meets the technical conditions as detailed above, it will be considered by the Dean who will determine whether a prima facie case exists. If he does not consider that there is a prima facie case, the student will be so informed. If he considers that there is a prima facie case, the appeal will be referred to the Chair of the Board of Examiners.

**Appeals Procedures**

Appeals procedures can be found as an annex to the credit framework assessment conventions at:


**Correspondence**

It is a student’s responsibility to ensure that the Student Records Office and KSS Deanery have current contact details. If it has not, all correspondence will be sent to a student’s home address, which may result in a delay in the processing of an appeal.

The appeals process can involve detailed scrutiny of the case by a number of people. We will inform students of the outcome as soon as we are able. Students should refrain from contacting the Faculty Office for a progress report on an appeal sooner than three weeks after an appeal has been submitted.
Under the Data Protection Act 1998, the University is not permitted to discuss any student matters with third parties. You may complete the Data Protection Form at: http://www.kent.ac.uk/registry/censec/guidelines.pdf which enables the appellant to give approval for us to discuss personal issues with third parties.

10.8.6 Appeals – Process

On receipt of an appeal a decision shall be made as to whether it meets the criteria. If it does not, the student shall be so informed. If it does, the appeal shall be submitted for consideration by the Dean.

In the case of a possible administrative error: the Faculty Officer will investigate whether there has been such error and, where this is the case, arrange for such error to be rectified where this is possible. The Faculty Officer will inform the student of the outcome of these enquiries.

In the case of illness / misfortune where the student was unable to submit by the published deadline or that there is evidence relating to illness or other misfortune submitted under the concessions procedures within the prescribed time limit which was not properly considered by the Board of Examiners, the Dean shall determine whether a prima facie cases exists.

Where the Dean determines that there is a *prima facie* case: The Faculty Officer will forward the evidence to the Chair of the Board of Examiners to ask whether, in the light of the evidence, the Board would wish to reconsider its original recommendation. In considering such a request, the Chair of the Board will consult such other members of the Board of Examiners as deemed necessary in the circumstances. Where the Dean does not consider that there is a prima facie case, the student shall be so informed.

Students may be required to attend a Faculty Review Panel. A student may be accompanied. A student who not take up the opportunity of a Review Panel hearing will foregoes his/her right to such a hearing and will have no further right of redress within the appeals procedures. Where non-attendance is thought to be for reasons beyond the student’s control, the Chair of the Review Panel will have discretion to proceed with the hearing in the student’s absence or to reconvene the Review Panel at a later date. The Review Panel will meet privately to reach a decision. A written record of the hearing will be prepared and this will be approved by the Chair of the Faculty Review Panel. The Review Panel shall be authorised to confirm or to vary the original recommendation of the Board of Examiners and will vary the recommendation only if it is satisfied:

- that one or more of the grounds for appeal has been demonstrated; and
where appropriate, that the Board of Examiners (or the Chair of the Board of Examiners acting on behalf of the Board of Examiners) did not act reasonably in exercising its discretionary powers in its consideration of evidence relating to illness or other misfortune submitted within the concessions and/or appeals proceedings.

10.8.7 Further Right of Appeal

Where an appeal against a recommendation of a Board of Examiners is considered by a Faculty Officer not to meet the technical conditions outlined or where it is rejected by a Dean, a Chair of a Board of Examiners or a Review Panel, the student shall have a further right of appeal to the Senate Academic Review Committee, which will consider only whether the original appeal was considered properly and fairly.

The schedule outlined below is to act as a guide only and does not constitute a definite time-frame by which an appeal will be processed.

Day 1-2: On receipt of an appeal the student to be given/sent a appeal receipt with an official date stamp on it.

Day 3: The appeal should then be sent to the Faculty Officer/Administrative Assistant in order that a summary of the appeal can be compiled for the Dean.

Day 5: The appeal should be submitted to the Dean for him to determine whether or not a prima fascia case exists.

Day 7: If no, letter to student on day 7.
If yes, memo to Chief Examiner, cc School Administrator, by day 7. Deadline for receipt of response within five working days.

Day 12: If BoE recommendation meets the remedial action sought by the student, letter to be sent within three days. SDS to be updated and closed.

Day 15: If BoE recommendation does not meet the remedial action sought by the student, the Faculty Officer/Administrative Assistant to compile a revised summary for the Dean and the appeal, together with the BoE recommendation, to be passed to the Dean within two days for him to determine whether or not to uphold the decision of the BoE or to set-up a Review Panel Hearing to consider the case.
Day 18: Student to be notified within two days of Dean’s decision being received by the Faculty Office.

These guidelines supplement the University’s procedures for concessions and appeals, available from Annexes 9 and 10 of the credit framework; http://www.kent.ac.uk/uelt/quality/credit/creditinfoannex9.html, and http://www.kent.ac.uk/uelt/quality/credit/creditinfoannex10.html and must be read in conjunction with those procedure.

10.9 e-learning and Moodle

Moodle

The University Virtual Learning Environment, known as ‘Moodle@Kent’, is available to all students using their normal Kent log-in. It can be accessed via the student portal or direct at: https://moodle.kent.ac.uk/moodle/login/index.php.

Online training guides for Moodle and general information regarding e-learning are available from the ‘Student Support’ section of the e-learning website at:

http://www.kent.ac.uk/elearning/documentation.html

Any technical problems with your Moodle modules should be directed to the IS helpdesk at: http://www.kent.ac.uk/itservices/help/. Information on how the Moodle module will be used on your course will be given to you by your lecturer at the start of term.

KSS e-learning modules

KSS e-learning modules are available through the KSS PG Cert portal – contact the KSS PG Cert Administrator:

Critical reading, Academic Writing, Assessment of Learners and Audit

10.10 Internal Mail/Electronic Mail/Web & Student Portal

Please note that you are responsible for collecting University communications via your internal mail and on the web. It is your responsibility to check all these areas regularly and failure to collect such mail will not be accepted as an extenuating
The Student Data System is available through the student portal on the web and gives you information about your module registration, your module marks, your attendance and your timetable. Other information is available on the web including Computing Service, Library, E-mail addresses and your Department’s website.

10.11 Academic Integrity and Honesty at University

What is academic integrity?

While you are a University of Kent student, you are expected and required to act honestly regarding the work you submit for assessment in your courses. General Regulation V.3: Academic Discipline states that:

**Students are required to act with honesty and integrity in fulfilling requirements in relation to assessment of their academic progress.**

General Regulation V.3 specifies that any attempts to:

- cheat,
- plagiarise,
- improperly influence your lecturer's view of your grades,
- copy other assignments (your own or somebody else’s) or
- falsify research data will be viewed as a breach of this regulation.

The full details of this regulation including disciplinary procedures and penalties are available at:

http://www.kent.ac.uk/registry/quality/credit/creditinfoannex10.html

Most students do not have any problems understanding the rules and expectations about acting honestly at university, although some are not familiar with academic expectations and plagiarism.
10.12 University Counseling Service
The Counselling Service is an integral part of the Welfare Services offered on campus free of charge to part-time and full-time students. Counselling is valuable if you are feeling that your life, at work or at home, has become out of balance in some particular way. For example it may that you are experiencing the aftermath of a bereavement, difficulty in managing change, conflicts in relationships at work or at home, stress or burn out, difficulty with concentration, low self esteem or low self confidence, depression or anxiety, the after effects of childhood trauma or a recent crisis of some kind. It can really help to talk things over with a counsellor.

Contact in confidence:

Counseling Service
Ground Floor, Gillingham Building
University of Kent
Medway

Tel. 01634 888801 or 01634 888875

Email: Counselling@kent.ac.uk

http://www.kent.ac.uk/counselling

The office is open in term time from: Monday, Tuesday & Friday from 10am to 4pm.

10.13 The Disability and Dyslexia Support Service
The service offers support to students with disabilities, specific learning difficulties and medical conditions during their time at the University and can assist with the following:

- applying for funding to pay for specialist equipment (e.g. software programs) and helpers (note takers);
- arranging support from specialist staff, according to individual needs;
- helping you find out if you have dyslexia;
- talking to your lecturers about particular help you may need in lectures and seminars
- discussing any special arrangements you need for exams
• contacting other departments about specific assistance you may require.

Students who require additional support must make contact with the DDSS and complete the registration form.

Contact Details:
Disability & Dyslexia Support Service, Gillingham Building, University of Kent, Chatham Maritime, Kent ME4 4AG
Open Monday-Friday 9.00am – 5.00pm
Phone: 01634 888969
Email: medwaystudentservices@kent.ac.uk
DDSS WEBSITE: www.kent.ac.uk/ddss

Dyslexia Tutor: Sylvia Ratcliffe email S.M.Ratcliffe@kent.ac.uk

10.14 Student Representation
Providing outstanding student representation is integral to Kent Union’s existence. There is student representation at all levels of University life. Every student will have a course representative who is elected to listen to the views of course mates and discuss them with staff at Department consultative meetings. There are elected student representatives who sit on Faculty and University wide committees as well as full time Sabbatical Officers who represent students’ needs on issues such as academic, welfare and social matters at University, local and national level. All representatives are elected in elections so you can decide who represents your needs! For more information on student representation and how to get involved visit www.kentunion.co.uk/representation or email Rachel Evans (Representation and Democracy Manager) at R.Evans@kent.ac.uk

10.15 Chaplaincy
Revd. Alan Le Grys is the Chaplaincy representative at the Medway Campus of the University of Kent. He is an Anglican priest currently working part-time for the University of Kent as Humanities Programme Manager at Medway.

The Medway branch of the Chaplaincy works closely not only with colleagues in Canterbury, but also with the Canterbury Christ Church and the Greenwich Chaplains for Medway. As at Canterbury, the Chaplaincy in Medway is entirely ecumenical and multi-faith.

- email: A.Legrays@kent.ac.uk
- Office: Room G0-06 in the Gillingham Building
- Internal phone at office: 8959 or (01634) 88 8959
- Mobile phone (for emergencies only): 07940 925903
- Chaplaincy office hours: Thursday mornings 9–11am

For further information about Christian churches and groups in the Medway area please contact:
‘Inn Christian Ministries’
Tel: 01634 300325 and ask for Ann Hubbard
E-mail: ann@inn.org.uk
Web: www.inn.org.uk

**Jewish faith contact:**
Mr Gabriel Lancaster
Tel: 01634 842893

**Muslim faith contact:**
Mr Shaffiq Din
Tel: 07774622902
e-mail: shaffiqdin@hotmail.com

**Hindu faith contacts:**
Mr Vijay Dhanecha
Tel: 01634 811712
Mr Anil Patel
e-mail: anil100650@fsmail.net
Sikh faith contact:
Mr Rai Singh
The Secretary
The Sikh Gurdwara
Cossack Street
Rochester, ME1 2EF
Tel: 01634 849782

10.16 Library Information

Opening Hours can be found on the website

Library Counter 01634 88 3278

Address
Drill Hall
North Library
Chatham Road
ME4 4TB Maritime

For information on the whole range of services provided please see

http://campus.medway.ac.uk/library/

10.17 Dignity at Work and Study Policy

The University of Kent is committed to developing a working and learning environment in which all have the right to be treated – and the responsibility to treat others – with dignity, courtesy, respect and consideration.

We aim to develop a culture that

• Values diversity
• Fosters respect for everyone
• Does not tolerate prejudice

• Is free from harassment and bullying

Personal harassment and bullying in all its forms, is unacceptable, therefore staff and students should ensure that they are familiar with the University Policy Document:

*Dignity at Work and Study: Policy and Procedures*

The full policy and procedure document is available to all staff on request from the Equality and Diversity Office, Human Resources, the Registry, who can supply alternative formats in large print if required.

It is also available on the web at

[www.kent.ac.uk/hr-equalityanddiversity/pol-pro-guides/dignity.html](http://www.kent.ac.uk/hr-equalityanddiversity/pol-pro-guides/dignity.html)
10.18 University Support Services
In addition to departmental support, the University has a wide range of support services. These include:

Admissions and Partnership Services
www.kent.ac.uk/aps/

Alumni Relations (Communications and Development Office)
www.kent.ac.uk/alumni/

Careers Advisory Service
www.kent.ac.uk/careers/

Chaplaincy
www.kent.ac.uk/chaplaincy/

College Masters’ Offices
www.kent.ac.uk/guidance/masters_offices.htm#Masters

Counselling Service
www.kent.ac.uk/counselling/

Disability and Dyslexia Support Service
www.kent.ac.uk/guidance/disabilityanddyslexiasupport.htm

English Language Unit
www.kent.ac.uk/secl/elu/

Equality and Diversity Manager
www.kent.ac.uk/guidance/equalopp.htm

European Office
www.kent.ac.uk/european-office/

Information Services (Computing and Library)
www.kent.ac.uk/is/

International Office
www.kent.ac.uk/international/immigration_support/

Kent Law Clinic
www.kent.ac.uk/law/clinic/
Appendix 1 Outline Academic Programme

The Postgraduate GP Deanery for Kent Surrey and Sussex (KSS) in partnership with University of Kent

PG Certificate Strategic Leadership and Medical Education
<table>
<thead>
<tr>
<th>Part</th>
<th>Teaching Day</th>
<th>Academic Programme</th>
<th>Module Guide</th>
</tr>
</thead>
<tbody>
<tr>
<td>Part 1</td>
<td>Introductory Day</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Homework prior to Introductory day</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Look at GMC website “The doctor as teacher”</td>
<td></td>
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<tr>
<td></td>
<td>Look at the KSS GP Educator Review and Appraisal Document – reflect on where you feel you and your practice are in relation to competency areas 5, 6 and 7. Read AMEE Guide 27 Effective Educational and Clinical Supervision</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9.00am-4.30pm</td>
<td>Meet Members of the Educational network</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Setting the Learning Climate</td>
<td>SS813 Part 1 Clinical and Educational Supervision in the workplace</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Overview of the Academic Pathway</td>
<td>SS816 Part 2 Evidence Based Practice</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Overview of the FY2 CS and Trainer Accreditation Process</td>
<td>SS815 Part 3 Collaborative Working</td>
<td></td>
</tr>
<tr>
<td></td>
<td>The Self Evaluation Questionnaire</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Introduction to Reflective Practice – Models of Reflective Practice</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Developing academic writing skills (1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Homework prior to Module 1</td>
<td>Read the PG Certificate Course Guide</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Visit the GMC website and look at the Interactive Case studies</td>
<td>Visit the GMC website and look at the Interactive Case studies</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Read BMJ Article Educational Environment L Hutchinson</td>
<td>Read BMJ Article Educational Environment L Hutchinson</td>
<td></td>
</tr>
</tbody>
</table>

SS813Part 1 Clinical Supervision

Day 1 Academic Reflective Practice
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Modules</th>
</tr>
</thead>
</table>
| 9.00am-4.30pm| Setting the Learning Climate 1  
The Practice as a learning environment  
Collaborative working and learning  
Supervision in Practice  
Professionalism – Good Medical Practice  
Assessing your learner  
   How do we assess our learners:  
      Their competence and professionalism?  
      Their medical and cultural backgrounds  
Induction Processes  
Evaluation of the Educational process                                                                 | SS816, SS815  
SS815  
SS813  
SS813, SS816  
SS813  
SS813  
SS813, SS816  
SS815Part 1,3  
Part 3  
Part 1  
Part 1,2  
Part 1  
Part 1  
Part 1  
Part 1 2 3 |
| Assignment   | Complete section 6.13 of the SEQ  
"Critically reflect on the opportunities that are available within your practice for team members to meet and learn together?" and bring to Day 2 for peer review |                                                                                        |
| Homework     | Develop an Induction timetable for a FY2 / GP trainee  
Bring to day 2                                                                 |                                                                                        |
| Day 2 | Academic Reflective Practice  
Academic Writing Skills – Referencing  
Developing Practice Through Audit  
Developing skills in constructive feedback (1)  
Multi Source Feedback | SS813, SS816 & SS815  
SS816 & SS815  
SS813, SS816 & SS815  
SS813, SS816 & SS815Part 1,2,3  
Part 2,3  
Part 1,2,3 |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Assignment</td>
<td>Prepare an outline 8 point audit including finding the evidence to support the selection of criterion and standard</td>
</tr>
</tbody>
</table>
| Homework Tasks | Undertake the Foundation E learning Modules on WPBA  
Read Norcini,J 2003 Work based assessment *BMJ* 326 753-5  
Bring the printout of a case to discuss in CBD |
| Day 3 9.00am-4.30pm | Academic Reflective Practice  
Principles of Assessment  
Tools to support learning – e portfolio  
Practical Application of Assessment tools for Foundation  
Academic Writing (2)  
Audit preparation  
Becoming a FY2 Clinical Supervisor | SS813, SS816 & SS815  
SS813 & SS816  
SS813 & SS816  
SS813 & SS816  
SS813, SS816 & SS815  
Part 1,2,3  
Part 1 Part 2  
Part 1,2,  
Part 1,2,
<table>
<thead>
<tr>
<th>SS816Part 2 Developing Teaching Skills</th>
</tr>
</thead>
</table>
| **Homework prior to SS816** | Begin 8 point audit for submission before attending Module 3  
Write up section 1.2 and 1.2 of the SEQ  
“Critically reflect on how you assess a learner’s level of competence and professionalism?”  
Write up section 1.6 of the SEQ  
“Critically appraise the processes your practice utilises to ensure continuity of patient care”  
“Reflect on the processes your practice uses to ensure patient records facilitate the handover of up to date clinical information, including for home visits” |

| **Day 4**  
9.00am-4.30pm | Academic Reflective Practice  
Principles of Adult Education  
Working and learning in groups  
Multidisciplinary working and learning  
Appraising evidence | SS813, SS816 & SS815  
SS813, SS816 & SS815  
SS815  
SS816  
Part 1, 2, 3  
Part 1, 2, 3  
Part 3  
Part 2 |

| **Assignment** | Write up Section 2.3 of SEQ  
“Critically reflect on what QOF, appraisal and other quality assurance processes told you about the strengths of your personal and your practice’s achievements?” |
| Homework Tasks                                                                 | Undertake Critical appraisal training modules  
|                                                                             | Read Section …. In Chambers R Wall D *Teaching Made Easy*  
|                                                                             | Prepare a 15 min teaching intervention  
|                                                                             | Download your PDP from 2 years ago and the review of your PDP from your last appraisal to bring to next teaching day |

| **Day 5**  
9.00am-4.30pm | Academic Reflective Practice  
|                 | Learning Styles  
|                 | Developing a PDP / Educational Needs Planning  
|                 | Practical teaching | SS813, SS816 & SS815  
|                 |                    | SS813 & SS815  
|                 |                    | SS813 & SS816  
|                 |                    | SS813, SS816 & SS815Part 1, 2, 3,  
|                 |                    | Part 1,3  
|                 |                    | Part 1, 2,  
|                 |                    | Part 1, 2, 3  

| Assignment | Prepare a precise of a given consultation model |

| **Day 6**  
9.00am-4.30pm | Academic Reflective Practice  
|                 | Patient centred medicine  
|                 | Developing skills in constructive feedback (2)  
|                 | Models of the Consultation | SS813, SS816 & SS815,  
|                 |                          | SS813, SS816 & SS815  
|                 |                          | SS813 & SS815  
|                 |                          | SS813, SS816 & SS815Parts 1, 2, 3,  
|                 |                          | Part 1,2,3  
|                 |                          | Part 1,3  
|                 |                          | Part 1, 2, 3  

| SS815 Part 3 The role of the GP Trainer/Educational Supervision | Preparation Before Module 3  
|                                                             | Read Section on Clinical and Educational Supervision I the Gold Guide  
<p>|                                                             | Look at the Resources on KSS website for GP |</p>
<table>
<thead>
<tr>
<th>Day 7</th>
<th>9.00am-4.30pm</th>
<th>Academic Reflective Practice</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Overview of GP Specialty training Role of Trainer ES and CS role</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Overview on GP Specialty training assessment</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Teaching Interventions (Teaching styles and 6 Category Intervention)</td>
</tr>
<tr>
<td>Assignment</td>
<td>Write up a personal significant event using a model of reflective practice</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Write up Section 6.12(b) of the SEQ</td>
<td></td>
</tr>
<tr>
<td></td>
<td>“Reflect on how you have supported a learner in learning from a significant event”</td>
<td></td>
</tr>
<tr>
<td>Homework</td>
<td>Visit the GP curriculum on the RCGP website</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Read the Section “Being a GP”</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Look out for a case to use as a hot topic for a peer tutorial</td>
<td></td>
</tr>
</tbody>
</table>
| **Day 8**  
9.00am-4.30pm | Academic Reflective Practice  
Structuring Tutorial Teaching  
Delivering the GP Curriculum  
Learning from Significant Events  
Practical Teaching | SS813, SS816 & SS815,  
SS813 & SS815  
SS813 & SS816  
SS813 & SS816  
SS813, SS816 & SS815 Parts 1,2,3,  
Parts 1,3  
Part 1,2  
Part 1,2  
Part 1,2,3 |
| Assignment | Write up Sections 5.2, 5.3 & 5.4 of the SEQ  
“Reflect on how will you ensure that your registrar will have sufficient opportunities to acquire the competencies set out in the GP curriculum?” | |
The participant will need to prepare a recorded consultation of themselves consulting with a patient for the day “Teaching from the Consultation” | |
| **Day 9**  
9.00am-4.30pm | Academic Reflective Practice  
Teaching from the Consultation  
Experiential Workshops  
Look at the RCGP Website – MRCGP section “GP training information” at: [http://www.rcgp-curriculum.org.uk/info_resources.aspx](http://www.rcgp-curriculum.org.uk/info_resources.aspx) | SS813, SS816 & SS815  
SS813  
Parts 1,2,3  
Part 1 |
### Homework

Look at the RCGP Website – MRCGP section “GP training information” at: [http://www.rcgp-curriculum.org.uk/info_resources.aspx](http://www.rcgp-curriculum.org.uk/info_resources.aspx)


### Day 10

**9.00am-4.30pm**

**Academic Reflective Practice**

- Resources to support professional practice – the e portfolio
- Practical Application of Assessment tools for GP Specialty training
- Report writing

<table>
<thead>
<tr>
<th>Part 1,2,3</th>
<th>SS813, SS816 &amp; SS815</th>
</tr>
</thead>
<tbody>
<tr>
<td>SS813, SS816 &amp; SS815</td>
<td></td>
</tr>
</tbody>
</table>

### Day 11

**9.00am-4.30pm**

**Theory into Practice – experiential teaching workshop**

- Managing poor performance
- Practical aspects of being a GP trainer
- Pulling the threads together – the academic SEQ

<table>
<thead>
<tr>
<th>SS816</th>
</tr>
</thead>
<tbody>
<tr>
<td>SS813, SS816 &amp; SS815</td>
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<tr>
<td>SS813, SS816 &amp; SS815</td>
</tr>
<tr>
<td>SS813, SS816 &amp; SS815</td>
</tr>
<tr>
<td>SS813, SS816 &amp; SS815Part 2</td>
</tr>
</tbody>
</table>
|   |   |   | Part 1,2,3  
|---|---|---|---
|   |   |   | Part 1,2,3,  
|   |   |   | Part 1,2,3  

APPENDIX 2 PG Cert SEQ submission: Assessment
Cover Sheet

Student Family Name:  
Student First Name:  
Student ID number:  
Module Title:  
Module Code(s)  
New Trainer or Existing Trainer  
Date submitted:  

I am submitting my work for consideration of the award PG certificate in Medical Education and Strategic Leadership.

Please ensure you include the mandatory evidence in your submission (see below). You may elect to submit a range of other evidence to support your academic submission and need to clearly indicate which pieces of work you wish to contribute to your application for the PG cert on the form below.

SEQs are also used to support your trainer accreditation and some of the portfolio you provide for this may not be relevant to the PG certificate and may not need to be listed (for example practice policy documents)

PLEASE NOTE if your SEQ has comments from your Patch Associate Dean made as part of your trainer accreditation these should be removed prior to submission.

Check list:

<table>
<thead>
<tr>
<th>Modules:</th>
<th>Mandatory Evidence</th>
<th>Please tick</th>
</tr>
</thead>
</table>
| Module 1 Supervision in the Workplace SS813  
Module 2 Evidence Based Practice SS816  
Module 3 Collaborative Working SS815 | Self-Evaluation Questionnaire |  |
| Module 2 Evidence Based Practice SS816 | 8 point audit with reflection |  |

<table>
<thead>
<tr>
<th>Modules:</th>
<th>Other academic evidence (non – mandatory)</th>
</tr>
</thead>
</table>
| Example only:  
Module 1 Supervision in the workplace SS813  
Module 3 Collaborative Working SS815 | Reflective critique on tutorial teaching (with peer review)  
Reflection on multidisciplinary learning event |
### 8 CRITERIA AUDIT MARKING SCHEDULE

<table>
<thead>
<tr>
<th>CRITERION</th>
<th>CRITERION PRESENT</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Reason for choice of audit</td>
<td>Potential for change</td>
<td>Yes / No</td>
</tr>
<tr>
<td></td>
<td>Relevant to the practice</td>
<td>Yes / No</td>
</tr>
<tr>
<td>Criterion/Criteria Chosen</td>
<td>Relevant to audit subject and justifiable, e.g. Current literature</td>
<td>Yes / No</td>
</tr>
<tr>
<td>Standards set</td>
<td>Targets towards a standard with a suitable timescale</td>
<td>Yes / No</td>
</tr>
<tr>
<td>Preparation and Planning</td>
<td>Evidence of teamwork and adequate discussion where appropriate</td>
<td>Yes / No</td>
</tr>
<tr>
<td>Data Collection (1)</td>
<td>Results compared against standard</td>
<td>Yes / No</td>
</tr>
<tr>
<td>Change(s) to be evaluated</td>
<td>Actual example described</td>
<td>Yes / No</td>
</tr>
<tr>
<td>Data Collection (2)</td>
<td>Comparison with Data collection (1) and standard</td>
<td>Yes / No</td>
</tr>
<tr>
<td>Conclusions</td>
<td>Summary of main issues learned</td>
<td>Yes / No</td>
</tr>
</tbody>
</table>

A satisfactory audit should include all 8 criteria to be assessed as “Does meet criteria”

This audit has been assessed as:  

- Does meet criteria*  
- Does not meet criteria*  

*Please delete as appropriate
**Assessor Comments that will be used for feedback:**

**Areas of note:**

**Points for reflection:**

<table>
<thead>
<tr>
<th>Assessor’s Signature:</th>
<th>Date:</th>
</tr>
</thead>
</table>
# Appendix 4 ASSIGNMENT MARKING SHEET

University of Kent and Postgraduate GP Education Deanery of Kent, 
Surrey and Sussex    Postgraduate Certificate in Strategic Leadership 
and Medical Education

<table>
<thead>
<tr>
<th>NAME</th>
<th>Unit:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assignment:</td>
<td>Marker:</td>
</tr>
<tr>
<td>Submission date:</td>
<td>Date received:</td>
</tr>
</tbody>
</table>

| 1. Reading and Knowledge | 100-80% 79-70% 69-60% 59-50% 49-40% 39-30% 29-0% |
| Comment | |

| 2. Understanding and Analysis | 100-80% 79-70% 69-60% 59-50% 49-40% 39-30% 29-0% |
| Comment | |

| 3. Argument | 100-80% 79-70% 69-60% 59-50% 49-40% 39-30% 29-0% |
| Comment | |

| 4. Organisation and Presentation | 100-80% 79-70% 69-60% 59-50% 49-40% 39-30% 29-0% |
| Comment | |

| 5. Referencing | 100-80% 79-70% 69-60% 59-50% 49-40% 39-30% 29-0% |
| Comment | |
Summary:

Strengths demonstrated in the work

Areas that would benefit from development for future submissions

Signed…………………………………………………

Date………………
Appendix 5 Criteria Audit Marking Schedule
PG CERTIFICATE IN STRATEGIC LEADERSHIP AND MEDICAL EDUCATION

ADMINISTRATOR TO COMPLETE:

<table>
<thead>
<tr>
<th>Assessor's Name:</th>
<th>Date Sent for marking:</th>
<th>Date to be returned by assessor:</th>
</tr>
</thead>
<tbody>
<tr>
<td>PG Certificate Student’s Number:</td>
<td>Submission Date:</td>
<td></td>
</tr>
</tbody>
</table>

ASSESSOR TO COMPLETE:

<table>
<thead>
<tr>
<th>CRITERION</th>
<th>CRITERION PRESENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reason for choice of audit</td>
<td></td>
</tr>
<tr>
<td>Potential for change</td>
<td></td>
</tr>
<tr>
<td>Relevant to the practice</td>
<td>□</td>
</tr>
<tr>
<td>Criterion/Criteria Chosen</td>
<td></td>
</tr>
<tr>
<td>Relevant to audit subject and justifiable, e.g. Current literature</td>
<td>□</td>
</tr>
<tr>
<td>Standards set</td>
<td></td>
</tr>
<tr>
<td>Targets towards a standard with a suitable timescale</td>
<td>□</td>
</tr>
<tr>
<td>Preparation and Planning</td>
<td></td>
</tr>
<tr>
<td>Evidence of teamwork and adequate discussion where appropriate</td>
<td>□</td>
</tr>
<tr>
<td>Data Collection (1)</td>
<td></td>
</tr>
<tr>
<td>Results compared against standard</td>
<td>□</td>
</tr>
<tr>
<td>Change(s) to be evaluated</td>
<td></td>
</tr>
<tr>
<td>Actual example described</td>
<td>□</td>
</tr>
<tr>
<td>Data Collection (2)</td>
<td></td>
</tr>
<tr>
<td>Comparison with Data collection (1) and standard</td>
<td>□</td>
</tr>
<tr>
<td>Conclusions</td>
<td></td>
</tr>
<tr>
<td>Summary of main issues learned</td>
<td>□</td>
</tr>
</tbody>
</table>

A satisfactory audit should include all 8 criteria to be assessed as “Does meet criteria”

This audit has been assessed as: □ Does meet criteria* □ Does not meet criteria*

*Please tick one box

Assessor Comments that will be used for feedback:

Assessor’s Signature: Date:
### Recommendations for Continuing Improvement – 1\textsuperscript{st} Re-accreditation

**Associate Dean to complete this page**

1. Good things about the Trainer and the Practice:

2. Areas where development could take place:

3. Areas where development \textbf{must} take place

<table>
<thead>
<tr>
<th>Section Reference</th>
<th>Mandatory Requirements</th>
<th>Target Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Section Reference</th>
<th>Additional Requirements</th>
<th>Target Date</th>
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</tbody>
</table>

**TSC Approval:**
- 5 years
- Other

Please state:
## Purpose of the visit

- To ensure GMC standards for the delivery of postgraduate medical education are being met
- To improve the quality of education and training
- To check and improve the quality of deanery quality control
- To identify common issues and good practice

<table>
<thead>
<tr>
<th>SEQ Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>GP Associate Dean</td>
</tr>
<tr>
<td>Date of Visit:</td>
</tr>
</tbody>
</table>
**Section 1 General information**

*Trainer - please answer ALL questions as fully as possible*

<table>
<thead>
<tr>
<th>Visiting Team:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Associate Dean/Lead</td>
</tr>
<tr>
<td>• Practice Manager</td>
</tr>
</tbody>
</table>

*Date of Birth

1st Re-accreditation report due:

Application Dated

---

**PLEASE NOTE:**

- Return completed document to your Manager via [email] only
<table>
<thead>
<tr>
<th>Surgery Telephone 1</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgery Telephone 2</td>
<td></td>
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<tr>
<td>Surgery Telephone 3</td>
<td></td>
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<tr>
<td>Fax</td>
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<td>Surgery e-mail</td>
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<td>Surgery website</td>
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<td>Trainer home phone</td>
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<tr>
<td>Trainer mobile phone</td>
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<tr>
<td>Trainer e-mail 1</td>
<td></td>
</tr>
<tr>
<td>Trainer e-mail 2</td>
<td></td>
</tr>
<tr>
<td>Practice Manager Name</td>
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<td>Practice Manager Direct Dial</td>
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<tr>
<td>Practice Manager email</td>
<td></td>
</tr>
<tr>
<td>Strategic Health Authority</td>
<td></td>
</tr>
<tr>
<td>PCT</td>
<td>Trainer Group</td>
</tr>
<tr>
<td>---------------------</td>
<td>---------------</td>
</tr>
<tr>
<td><strong>Practice Type</strong></td>
<td>(Choose from Urban / Rural / Mixed)</td>
</tr>
<tr>
<td><strong>Practice status</strong></td>
<td>(Choose from GMS / PMS / Other)</td>
</tr>
<tr>
<td><strong>Number of patients</strong></td>
<td>(Please quote in Thousands)</td>
</tr>
<tr>
<td><strong>Are there any special characteristics of the practice?</strong></td>
<td>If yes, please describe.</td>
</tr>
<tr>
<td><strong>Are there any planned changes to the <strong>premises</strong> taking place shortly?</strong></td>
<td>If yes, please describe</td>
</tr>
<tr>
<td><strong>Have there been any changes taken place since last visit?</strong></td>
<td></td>
</tr>
<tr>
<td>Name of Doctor</td>
<td>Role</td>
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</table>

If more than 12 other GPs, please describe

Do any of the GPs have any other roles outside the practice? If so, please describe.

Have there been any changes to the GPs listed above?
## Administrative Team

Please confirm job role from the following choices:
Management, Staff with special areas of responsibility, General Admin, Secretarial, Receptionists, Other (if other, please describe)

<table>
<thead>
<tr>
<th>No of Staff</th>
<th>Job Role</th>
<th>Number of sessions</th>
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</table>

## Practice Professional Staff

Please confirm job role from the following choices:
Practice Nurse, Nurse Practitioner, Health Care Assistant, Phlebotomist, Counsellor, Other (if other, please describe)

<table>
<thead>
<tr>
<th>No of Staff</th>
<th>Job Role</th>
<th>Number of sessions</th>
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</tbody>
</table>

## Attached Professional Staff

Please confirm job role from the following choices:
District Nurse, Midwife, Health Visitor, CPN, Social Worker, Other (if other, please describe)

<table>
<thead>
<tr>
<th>No of Staff</th>
<th>Job Role</th>
<th>Number of sessions</th>
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<tbody>
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</tbody>
</table>

Are there any planned changes to the doctor’s partnership or team structure, taking place shortly? If yes, please describe

<table>
<thead>
<tr>
<th>What do you think are the best aspects of your Practice?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>In what areas do you think the Practice needs development?</th>
</tr>
</thead>
<tbody>
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<td></td>
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</tbody>
</table>
As a new applicant you are requested to send in the evidence, as suggested below, in order to support your answer

<table>
<thead>
<tr>
<th>Domain 1</th>
<th>Patient Safety</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Standard:</strong> The duties, working hours and supervision of trainees must be consistent with the delivery of high quality safe patient care</td>
<td></td>
</tr>
</tbody>
</table>

**Mandatory Standard:** Trainees must make the needs of patients their first concern. GPStRs must undertake only those procedures they are trained for and confirmed competent to perform

### Evidence
- Record of teaching and learning to date with other learners
- Induction timetable and working week timetable for a GPStr

Confidence ratings, MCQs & Canbury questionnaires, use of clinical supervisor reports, use of foundation assessment data, use of foundation portfolio

Timetables for Foundation / medical students, shared surgery log, record of teaching and learning you have undertaken with Foundation doctors, medical students or other learners etc.

Feedback from learners

### Evidence for 1st Re-accreditation visit
- Excerpts from trainer educational log and any significant event involving GP trainee

**Question**

<table>
<thead>
<tr>
<th><strong>Answer</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Example Answer:</strong> My last foundation doctor rated himself as quite confident about gynaecological problems using confidence rating scales but I noted that he did not appear fluent in taking a gynaecological history and examination. I directly observed the doctor on a number of occasions and reviewed any gynaecology patient he saw subsequently. I also asked the staff to let me know of any comments made by patients about him.</td>
</tr>
</tbody>
</table>

**Question**

1.1 & 1.2
Critically reflect on how you assess a learner's level of competence and professionalism?

Please give an example using a recent Foundation doctor / Medical student or other learner

*Answer relates to PG Certificate Module 1 Supervision in the Workplace*

**Answer:**

**Question**

1.1(b)
Critically appraise how have you prepared members of your practice to understand the role of the GPStr?

*Answer relates to PG Certificate Module 1 Supervision in the workplace*
## Associate Dean comments
**Met / Partially met / Not met**

*Decision relates to KSS Trainer Accreditation process*
*See Kent University / KSS mark sheet for PG certificate submissions*

---

### Trainer please answer based on new experience gained with GP trainees

---

### Associate Dean comments re 1st Re-accreditation visit
**Met / Partially met / Not met**

---

### Mandatory Standard:
*Those supervising the clinical care provided by trainees must be clearly identified, competent to do so, accessible and approachable by day and by night, with time for these responsibilities clearly identified within their job plan*

#### Evidence
- Absence cover plan, induction timetable and working week timetable for a GPSiR

#### 1.4
*Reflect on the processes you have adopted to ensure adequate handover of clinical supervision at times when you are not available within the practice?*

*Answer relates to PG Certificate Module 1 Supervision in the Workplace*

---

### Associate Dean comments
**Met / Partially met / Not met**

*Decision relates to KSS Trainer Accreditation process*
*See Kent University / KSS mark sheet for PG certificate submissions*

---

### Trainer please answer based on new experience gained with GP trainees (including OOH)

---

### Associate Dean comments re 1st Re-accreditation visit
**Met / Partially met / Not met**

---

### Mandatory Standard:
*Well-organised handover arrangements ensuring continuity of patient care must be in place in all placements*
### Evidence

QOF summary of achievement (points)
Practice protocol for note summarising, PCT approval for going paper-lite, home visit printout.

### Evidence for 1st Re-accreditation visit

Any new QOF data since last visit

<table>
<thead>
<tr>
<th>1.6</th>
<th>Critically appraise the processes your practice utilises to ensure continuity of patient care.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Reflect on the processes your practice uses to ensure patient records facilitate the handover of up to date clinical information, including for home visits</td>
</tr>
<tr>
<td></td>
<td><strong>Answer relates to PG Certificate Module 2 Evidence Based Practice</strong></td>
</tr>
</tbody>
</table>

### Associate Dean comments

Met / Partially met / Not met
Decision relates to KSS Trainer Accreditation process
See Kent University / KSS mark sheet for PG certificate submissions

### Associate Dean comments re 1st Re-accreditation visit

*Based on trainees experience of using clinical records*
Met / Partially met / Not met

### (B) How will you inform patients that this is a training practice?

### Associate Dean comments

Met / Partially met / Not met
Decision relates to KSS Trainer Accreditation process
See Kent University / KSS mark sheet for PG certificate submissions

### Associate Dean comments re 1st Re-accreditation visit

Met / Partially met / Not met
### Domain 2

**Quality Assurance review and evaluation**

**Standard: Postgraduate training must be quality controlled locally by deaneries working with others as appropriate.**

**Mandatory Standard:** Deaneries working with others as appropriate must have processes for local quality control of all postgraduate posts and programmes designed to ensure that the requirements of GMC’s standards for training, assessment and curricula are met.

**Evidence**

- QOF summary of points, your patient satisfaction questionnaires and significant event analysis
- Form 4 / PDP of your NHS Appraisal
- Practice review visits, audits

**Evidence for 1st Re-accreditation visit**

- Any new QOF data since last visit

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.3 Critically reflect on what QOF, appraisal and other quality assurance processes told you about the strengths of your personal and your practice’s achievements?</td>
<td>Answer relates to PG Certificate Module 2 Evidence Based Practice</td>
</tr>
</tbody>
</table>

| 2.3(a) Critically reflect on the areas highlighted for improvement within the practice and how are you and the practice team are addressing these? | Answer relates to PG Certificate Module 3 Collaborative Working          |

**Associate Dean comments**

- Met / Partially met / Not met

Decision relates to KSS Trainer Accreditation process

See Kent University / KSS mark sheet for PG certificate submissions

**Associate Dean comments re 1st Re-accreditation visit**

- Met / Partially met / Not met

**Mandatory standard:** The findings of GMC trainee and trainer surveys must inform quality management of training programmes

<table>
<thead>
<tr>
<th>2.3 / 7.11 Reflect on your knowledge of a Local Faculty Group and how this has helped you develop your understanding of quality control</th>
</tr>
</thead>
<tbody>
<tr>
<td>processes?</td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>Reflect on how you have you liaised with other clinical supervisors for a learner under your care?</td>
</tr>
<tr>
<td>Answer relates to PG Certificate Module 1 Supervision in the Workplace</td>
</tr>
</tbody>
</table>

**Evidence** ~ QOF visit report, Patient questionnaires, significant event analysis Form 4 / PDP from your NHS Appraisal and an audit

**Associate Dean comments**

**Met / Partially met / Not met**

Decision relates to KSS Trainer Accreditation process See Kent University / KSS mark sheet for PG certificate submissions

**Trainer please answer based on new experience gained with GP trainee**

**Associate Dean comments re 1st Re-accreditation visit**

**Met / Partially met / Not met**

**Mandatory standard: All placements must comply with the EWTD**

**Evidence**

Timetable normal working week for GPStR

<table>
<thead>
<tr>
<th>2.7</th>
<th>How will you ensure your timetable for a GPStR is compliant with national guidelines?</th>
</tr>
</thead>
</table>

**Associate Dean comments**

**Met / Partially met / Not met**

Decision relates to KSS Trainer Accreditation process See Kent University / KSS mark sheet for PG certificate submissions

**Trainer please comment if significant changes to timetable submitted at 1st visit**

**Associate Dean comments re 1st Re-accreditation visit**

*based on trainees experience*

**Met / Partially met / Not met**
# Domain 3
## Equality, Diversity and Opportunity

**Standard: Postgraduate training must be fair and based on principles of equality**

**Mandatory standard:** At all stages training programmes must comply with employment law, the Disability Discrimination Act, Race Relations (Amendment) Act, Sex Discrimination Act, Equal Pay Acts, the Human Rights Act and other equal opportunity legislation that may be enacted in the future, and be working towards best practice. This will include compliance with any public duties to promote equality.

**Evidence**

Evidence of your own training in EO & D

EO and D policy/practice handbook, GPR induction manual – where applicable evidence of how you have accommodated practice staff / previous learners disabilities

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1 Reflect on how you promote equal opportunity and diversity within your practice and how have you approached DDA?</td>
<td>Answer relates to PG Certificate Module 3 Collaborative Working</td>
</tr>
<tr>
<td>3.1(b) When did you last undertake Equal Opportunities and Diversity training?</td>
<td></td>
</tr>
<tr>
<td>3.3, 3.4 How will you make them aware of health and safety policies and occupational health services?</td>
<td></td>
</tr>
</tbody>
</table>

**Associate Dean comments**

Met / Partially met / Not met

Decision relates to KSS Trainer Accreditation process

See Kent University / KSS mark sheet for PG certificate submissions

**Trainer please comment if any changes**

**Associate Dean comments re 1st Re-accreditation visit**

Met / Partially met / Not met
Domain 4
Recruitment, selection and appointment

**Standard:** Processes for recruitment, selection and appointment must be open, fair and effective

**Mandatory Standard:** Candidates will be eligible for consideration for entry into a specialist training programme if they are a fully registered medical practitioner or hold limited registration with the General Medical Council or are eligible for any such registration, and are fit to practice.

**Evidence**
Registrar check list, copies of educational contract / GP & GPR contract

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1 Reflect on your processes for undertaking pre-employment checks including GMC and CRB</td>
<td>Answer relates to PG Certificate Module 1 Supervision in the workplace</td>
</tr>
<tr>
<td>4.1 (a) Will Deanery approved contracts be in place?</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**Associate Dean comments**
Met / Partially met / Not met
Decision relates to KSS Trainer Accreditation process
See Kent University / KSS mark sheet for PG certificate submissions

**Trainer please comment if any changed**

**Associate Dean comments re 1st Re-accreditation visit**
Based on review of processes and contracts
Met / Partially met / Not met

**Mandatory Standard:** All those involved in selection must be trained in competency based assessment and equal opportunities.

**Evidence**
Summary of discussions with programme Directors / local trainers / attendance at trainer groups

<table>
<thead>
<tr>
<th>4.4 How have you familiarised yourself with the selection criteria used in the recruitment process?</th>
<th>Associate Dean comments</th>
<th>Met / Partially met / Not met</th>
</tr>
</thead>
</table>

Decision relates to KSS Trainer Accreditation process
See Kent University / KSS mark sheet for PG certificate submissions
<table>
<thead>
<tr>
<th>Trainer please comment on use of feedback</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Associate Dean comments re 1\textsuperscript{st} Re-accreditation visit</strong></td>
</tr>
<tr>
<td>Met / Partially met / Not met</td>
</tr>
</tbody>
</table>
### Domain 5
Delivery of the curriculum including assessment

**Standard:** The requirements set out in the curriculum must be delivered and assessed

**Mandatory Standard:** The placements within a training programme, combined with a range of other learning opportunities must, together, provide GPStRs with exposure to a range of patients, clinical problems, training environments and training opportunities sufficient to deliver the GP curriculum and so equip them for a career in independent practice.

### Evidence
- Timetables, learning logs from previous learners
- Foundation Clinical Supervisor reports you have completed

**Evidence for 1st Re-accreditation visit**
- Excerpts from trainer educational log

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.2, 5.3 &amp; 5.4 Reflect on how will you ensure that your registrar will have sufficient opportunities to acquire the competencies set out in the GP curriculum?</td>
<td>Answer relates to PG Certificate Module 2 Evidence Based Medicine</td>
</tr>
<tr>
<td>5.2(a) How did you assist previous learners in achieving their competencies / objectives?</td>
<td></td>
</tr>
</tbody>
</table>

**Evidence**
- Plans for supporting GPStR in OOH work

**Associate Dean comments**
- Met / Partially met / Not met
  - Decision relates to KSS Trainer Accreditation process
  - See Kent University / KSS mark sheet for PG certificate submissions

**Associate Dean comments re 1st Re-accreditation visit**
- Met / Partially met / Not met

<p>| 5.1, 5.2, 5.4 How will you make provision to expose your trainee to preventative care including child surveillance and child protection and CPR training updates. | How will you make provision for your trainee to develop their skills in minor surgery? |</p>
<table>
<thead>
<tr>
<th>Answer relates to PG Certificate Module 2 Evidence Based Medicine</th>
</tr>
</thead>
</table>
| **Associate Dean comments**  
**Met / Partially met / Not met**  
*Decision relates to KSS Trainer Accreditation process*  
*See Kent University / KSS mark sheet for PG certificate submissions* |

**Trainer please comment if any changes to plan proposed at first visit**

**Associate Dean comments re 1st Re-accreditation visit**  
**Met / Partially met / Not met**

---

**Mandatory Standard: GPSTRs must not be asked to undertake routine or repeated activities of no educational value or relevance to the GP curriculum**

| 5.1, 5.2, 5.3  
Critically evaluate the processes you use to ensure the trainee is exposed to graded experience of the full range of work a GP would be expected to undertake including administrative tasks such as signing prescriptions, practice management as well as the clinical work?  
*Answer relates to PG Certificate Module 3 Collaborative Working* |

**Associate Dean comments**  
**Met / Partially met / Not met**  
*Decision relates to KSS Trainer Accreditation process*  
*See Kent University / KSS mark sheet for PG certificate submissions* |

**Trainer please comment if any changes to plan proposed at first visit**

**Associate Dean comments re 1st Re-accreditation visit**  
**Met / Partially met / Not met**

---

| 5.1 & 5.2  
Reflect on how you will follow up on out-of-hours sessions and make decisions as to the trainee’s development in this area?  
*Answer relates to PG Certificate Module 1 Supervision in the workplace* |

---
**Evidence ~ Entries in GPR’s learning log/PDP**

<table>
<thead>
<tr>
<th><strong>Associate Dean comments</strong></th>
<th><strong>Met / Partially met / Not met</strong></th>
</tr>
</thead>
<tbody>
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</tr>
</thead>
</table>

**Mandatory Standard:** Educational supervisors must be familiar with MRCGP guidance and regulations.

GPSTRs must be provided with information on the MRCGP and on how to register for the assessments.

| **Evidence** | Reflection on Module 3 teaching on nMRCGP / records of involvement in assessments of other learners / reflection on observation of peers undertaking assessments on GPSTRs / reflection on calibration exercises in trainer group / evidence to support preparation of practice – teaching plan |
|-----------------------------|

| **5.6** | Critically Reflect on how you have developed your own understanding of the MRCGP registration process for trainees, the assessment process and the ePortfolio. |
|-----------------------------|**Answer relates to PG Certificate Module 2 Evidence Based Practice**|

| **5.6(a)** | Reflect on how have you prepared other members of your team to support you and your trainee in undertaking assessments? |
|-----------------------------|**Answer relates to PG Certificate Module 3 Collaborative Working**|

<table>
<thead>
<tr>
<th><strong>Associate Dean comments</strong></th>
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<table>
<thead>
<tr>
<th><strong>Trainer please answer based on new experience gained with GP trainee</strong></th>
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<tr>
<th><strong>Associate Dean comments re 1st Re-accreditation visit</strong></th>
<th><strong>Met / Partially met / Not met</strong></th>
</tr>
</thead>
</table>
Mandatory Standard: GPSTRs must be supported in preparing for all components of the MRCGP and provided with the necessary facilities, assessments, support and feedback in all primary and secondary care placements. GPSTRs must have regular, formal appraisals in accordance with the requirements of the Gold Guide and The GMC

**Evidence**
Form 4 / PDP of your NHS Appraisal

**Evidence for 1st Re-accreditation visit**
Evidence of own involvement in NHS Appraisal Form 4 and PSQ

| **5.8(a) 6.9** | How have you used feedback and drawn up and adapted individual learning plans for your learners in the light of assessments and other sources of information in order to meet outstanding learning needs |
| **5.9** | Reflect on your processes for supporting the development of your trainees as autonomous learners |

How will you undertake a formal appraisal with your GPST3 after the ARCP process?

**Answer relates to PG Certificate Module 1Supervision in the workplace**

---

**Associate Dean comments**
Met / Partially met / Not met

*Decision relates to KSS Trainer Accreditation process*

*See Kent University / KSS mark sheet for PG certificate submissions*

---

**Trainer please answer based on new experience gained with GP trainee**

**Associate Dean comments re 1st Re-accreditation visit**
Met / Partially met / Not met
### Domain 6
Support and development of trainees and trainers and the local faculty

**Standard:** Trainees must be supported to acquire the necessary skills and experience through induction, effective educational supervision, an appropriate workload, personal support and time to learn.

**Mandatory Standard:** GPStRs starting new placements must receive induction that will enable them to practice and learn safely, under supervision, in the placements.

GPStRs must use the RCGP's ePortfolio which they must discuss with the educational and/or clinical supervisor for the placement at the start of each placement.

GPStRs must have further meetings with their educational and/or clinical supervisor at least once every three months to discuss progress, outstanding learning needs and how to meet those needs.

### Evidence
- Induction timetable, GPStR timetable
- Induction pack, educational and employment contract and Learning plan

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.1 Critically Reflect on your personal and practice processes for inducting a learner.</td>
<td>Answer relates to PG Certificate Module 3 Collaborative Working</td>
</tr>
<tr>
<td>6.8 Is the KSS Deanery educational contract in place?</td>
<td>YES</td>
</tr>
<tr>
<td>Reflect on the process of discussing the educational contract with your learner</td>
<td>NO</td>
</tr>
<tr>
<td>Answer relates to Module 1 Supervision in the Workplace</td>
<td></td>
</tr>
</tbody>
</table>

**Associate Dean comments**

Met / Partially met / Not met

Decision relates to KSS Trainer Accreditation process

See Kent University / KSS mark sheet for PG certificate submissions

**Trainer please answer based on new experience gained with GP trainee**

**Associate Dean comments re 1st Re-accreditation visit**

Review of contracts / trainee experience

Met / Partially met / Not met

**Mandatory Standard:** GPStRs must be supported to acquire generic professional skills at all stages of training. This will include training in the use of significant event analysis
### Evidence
Significant event involving a learner and your role in this
Own audits, own significant event analysis

### Evidence for 1st Re-accreditation visit
A significant event involving a learner *(if applicable)*

<table>
<thead>
<tr>
<th>6.12</th>
<th>Critically reflect on how you will support your registrar to engage in, and learn from the audit process?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Answer relates to PG Certificate Module 2 Evidence Based Practice</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6.12(a)</th>
<th>Please give an example of an audit you have recently carried out yourself - reflect on the process and how it benefited patient care?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Answer relates to PG Certificate Module 2 Evidence Based Practice</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6.12(b)</th>
<th>Reflect on how you have supported a learner in learning from a significant event.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Answer relates to PG Certificate Module 3 Collaborative Working</td>
</tr>
</tbody>
</table>

### Associate Dean comments

<table>
<thead>
<tr>
<th>Met / Partially met / Not met</th>
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</thead>
</table>

*Decision relates to KSS Trainer Accreditation process*
*See Kent University / KSS mark sheet for PG certificate submissions*

### Mandatory Standard: In both primary care and secondary care settings systems must be in place to enable GPSiRs to learn from and with other healthcare professionals

### Evidence
Tutorial topics / timetables / summary of multidisciplinary learning events in the practice

<table>
<thead>
<tr>
<th>6.13</th>
<th>Critically reflect on the opportunities that are available within your practice for team members to meet and learn together?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Answer relates to PG Certificate Module 3 Collaborative Working</td>
</tr>
</tbody>
</table>
6.13(a)  
Give examples of how the team has supported individual learners  

*Answer relates to PG Certificate Module 3 Collaborative Working*

<table>
<thead>
<tr>
<th><strong>Associate Dean comments</strong></th>
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**Trainer please answer based on new experience gained with GP trainee**

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<tr>
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</tr>
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</table>

**Mandatory Standard:** GPSIRs must be provided with guidance on how to raise concerns about their training and offer views on their training. It should be possible for concerns to be raised and received in confidence.

| **Evidence** |  
Exit Interview, Feedback from on line surveys, educational log |

6.14  
Critically reflect on how you encourage a learner to give feedback about your and their training programme?  

Critically reflect on how feedback from learners has helped you to improve their experience of training?  

*Answer relates to PG Certificate Module 1 Supervision in the Workplace and Module 2 Evidence Based Practice*

<table>
<thead>
<tr>
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<td></td>
<td><em>See Kent University / KSS mark sheet for PG certificate submissions</em></td>
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</tbody>
</table>

**Trainer please answer based on new experience gained with GP trainee**

<p>| <strong>Associate Dean comments re 1st Re-accreditation visit</strong> | <strong>Met / Partially met / Not met</strong> |</p>
<table>
<thead>
<tr>
<th><strong>Mandatory Standard: There must be ready access to career advice</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>6.15</strong> How will you guide your registrar in obtaining career advice?</td>
</tr>
<tr>
<td>Answer relates to PG Certificate Module1 Supervision in the workplace</td>
</tr>
<tr>
<td><strong>Trainer please answer based on new experience gained with GP trainee</strong></td>
</tr>
<tr>
<td><strong>Associate Dean comments re 1st Re-accreditation visit</strong></td>
</tr>
<tr>
<td>Met / Partially met / Not met</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Mandatory Standard: GPSIRs must not be subject to, or subject others to behaviour that undermines their professional confidence or self-esteem</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>6.15(a)</strong> Can you confirm that your learners have not been bullied nor have they bullied others</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td><strong>Trainer please answer based on new experience gained with GP trainee</strong></td>
</tr>
<tr>
<td><strong>Associate Dean comments re 1st Re-accreditation visit</strong></td>
</tr>
<tr>
<td>Based on trainee experience Met / Partially met / Not met</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Mandatory Standard: GPSIRs must be provided with information on how to apply for study leave, what courses are appropriate for them and what funding is available</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Evidence</strong></td>
</tr>
<tr>
<td>Record of courses attended with learning achieved, confidence ratings, PEP CDs, foundation portfolio / medical school placement documentation</td>
</tr>
<tr>
<td><strong>6.18</strong> How will you ensure that your registrar has adequate time for attending relevant courses including regular contact with the programme director?</td>
</tr>
</tbody>
</table>

| **6.18(a)** Reflect on your processes of educational needs planning – will you ensure that courses that the registrar undertakes are relevant to his or her learning needs? |
| **Give examples from previous learner** |
| Answer relates to PG Certificate Module1 Supervision in the workplace |
**Mandatory Standard:** GPSTRs should be exposed during their training to the academic opportunities available in their specialty. They must be given formal confirmation of how much an academic training programme will contribute towards a CCT.

<table>
<thead>
<tr>
<th>6.21, 6.22</th>
<th>How will you encourage your registrar to look at further academic opportunities?</th>
</tr>
</thead>
</table>

**Associate Dean comments**

Met / Partially met / Not met

*Decision relates to KSS Trainer Accreditation process*
*See Kent University / KSS mark sheet for PG certificate submissions*

**Trainer please answer based on new experience gained with GP trainee**

**Associate Dean comments re 1st Re-accreditation visit**

Met / Partially met / Not met

**Mandatory Standard:** GP Trainers must be trained and selected in accordance with GMC requirements and the general and Specialist Medical Practice (Education, Training and Qualifications) Order 2003. An educational supervisor must demonstrate that they are involved in educational activities within and/or out-with the practice.

<table>
<thead>
<tr>
<th>6.23</th>
<th>Reflect on how you have kept up to date with the requirements of the regulations that support training in the UK such COGPED and the RCGP guidance for specialty training?</th>
</tr>
</thead>
</table>

*Answer relates to PG Certificate Module2 Evidence Based Practice*

**Mandatory Standard:** Educational Supervisors must demonstrate an understanding of the professional guidance contained in GMC guidance “Good medical Practice”, “Maintaining Good Medical Practice”, “Good Medical Practice for GPs” and “The Doctor as Teacher”. They must demonstrate an enthusiasm for general practice and inform their director of postgraduate GP education (or nominated deputy) of concerns over, or restrictions on, their fitness to practice.

<table>
<thead>
<tr>
<th>6.25(i)</th>
<th>How can you demonstrate your own commitment to the GMC Guidance contained in the documents listed above?</th>
</tr>
</thead>
</table>

*Reflect on how you have made trainees aware of the GMC Guidance?*

*Answer relates to PG Certificate Module2 Evidence Based Practice*
<table>
<thead>
<tr>
<th>6.25(ii)</th>
<th>I understand the need for a GP Trainer to inform the director of GP Education of concerns over or restrictions on fitness to practice</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Have you had any complaints not resolved by the in-house complaints process since your last accreditation?</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td></td>
<td>If so please give details.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Answer relates to PG Certificate Module2 Evidence Based Practice</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Mandatory Standard:</strong> Educational supervisors must be members or fellows in good standing of the RCGP or be able to demonstrate their commitment to the maintenance of high standards and the discipline of general practice in other ways</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.26</td>
<td>I am a member or fellow of the RCGP in ‘good standing’</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td></td>
<td>Answer relates to PG Certificate Module2 Evidence Based Practice</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Mandatory Standard:</strong> Educational Supervisors must relate well to GPStRs, colleagues and patients both face to face, on the telephone and in writing. They must communicate effectively within their clinical practice and help GPStRs develop effective communication skills.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.27</td>
<td>I understand the need to communicate effectively and efficiently with the GP Educational network</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| **Associate Dean comments**
| Met / Partially met / Not met |
| 
| Trainer please comment if any changes |
| 
| **Associate Dean comments re 1st Re-accreditation visit**
<p>| Met / Partially met / Not met |
|
| <strong>Mandatory Standard:</strong> Educational Supervisors must have an up to date personal development plan derived through annual appraisal for their work as an educator, be willing to undergo performance review and be familiar with current medical literature and its implications for both general practice and general practice teaching. |
| 6.28 | Reflect on how clinical and educational activities you have |
|
|</p>
<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>undertaken this year influenced your teaching?</td>
<td>Answer relates to PG Certificate Module 2 Evidence Based Practice</td>
</tr>
<tr>
<td><strong>Associate Dean comments</strong></td>
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<tr>
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</tr>
<tr>
<td><strong>Trainer please answer based on new experience gained with GP trainee</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Associate Dean comments re 1st Re-accreditation visit</strong></td>
<td>Met / Partially met / Not met</td>
</tr>
<tr>
<td><strong>6.28(a)</strong></td>
<td>Critically appraise your development against the KSS educator competency framework</td>
</tr>
<tr>
<td><strong>Evidence</strong></td>
<td>Form 4 / PDP of your NHS appraisal, reflections on courses attended</td>
</tr>
<tr>
<td><strong>Evidence for 1st Re-accreditation visit</strong></td>
<td>GP Educator Review &amp; Appraisal Document drawn up at first visit and newly completed GP Educator Review &amp; Appraisal Document form</td>
</tr>
<tr>
<td><strong>Associate Dean comments</strong></td>
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</tr>
<tr>
<td>Decision relates to KSS Trainer Accreditation process</td>
<td>See Kent University / KSS mark sheet for PG certificate submissions</td>
</tr>
<tr>
<td><strong>Trainer please summarize briefly your reflections based on the completion of the Educator Review &amp; Appraisal Document</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Associate Dean comments re 1st Re-accreditation visit</strong></td>
<td>Met / Partially met / Not met</td>
</tr>
<tr>
<td><strong>6.29</strong></td>
<td>Reflect on how you have used feedback from peers involved in GP education to improve your teaching skills with previous learners</td>
</tr>
<tr>
<td>Answer relates to PG Certificate Module 3 Collaborative working</td>
<td></td>
</tr>
<tr>
<td><strong>6.29(a)</strong></td>
<td>Reflect on your use of the KSS video log and peer feedback to review a recent videoed teaching event</td>
</tr>
<tr>
<td>-------------</td>
<td>--------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Answer relates to PG Certificate Module 3 Collaborative working</strong></td>
<td></td>
</tr>
</tbody>
</table>

| **Evidence** |
| Video log and reflections including peer review if obtained |

**Evidence for 1st Re-accreditation visit**
Video log and reflections on peer review

| **Associate Dean comments** |
| Met / Partially met / Not met |
| *Decision relates to KSS Trainer Accreditation process* |
| *See Kent University / KSS mark sheet for PG certificate submissions* |

**Trainer please summarize your reflections**

| **Associate Dean comments re 1st Re-accreditation visit** |
| Met / Partially met / Not met |
Domain 7
Management of Education and Training

**Standard:** Education and training must be planned and maintained through transparent processes which show who is responsible at each stage

**Mandatory standard:** Educational supervisors, through training programme Director, must involve the deanery as soon as it is clear that a GPStr is in difficulty, there are concerns about performance or the GPStr has been absent from a placement for more than two weeks

**Evidence**
Educational supervisors reports

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>7.11 Do you understand the process for identifying, supporting and managing GPStrs whose conduct, health progress and performance causes concern?</td>
<td>YES</td>
</tr>
<tr>
<td>7.12 Reflect on any experience of dealing with any conduct, health, progress or performance issues with learners</td>
<td>NO</td>
</tr>
</tbody>
</table>

**Associate Dean comments**
Met / Partially met / Not met

*Decision relates to KSS Trainer Accreditation process*
*See Kent University / KSS mark sheet for PG certificate submissions*

**Trainer** please comment based on new experience gained with GP trainee (if no issues leave blank)

**Associate Dean comments re 1st Re-accreditation visit**
Met / Partially met / Not met
### Domain 8
**Educational resources and capacity**

**Standard:** the educational facilities, infrastructure and leadership must be adequate to deliver the curriculum

**Mandatory Standard:** The overall educational capacity of the institution and any unit offering training placements within it must be adequate to accommodate the practical experiences required by the GP curriculum, along with the educational requirements of all healthcare professionals in the unit.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.1, 8.3 How long have you set aside each week for protected teaching time with your registrar?</td>
<td></td>
</tr>
<tr>
<td>Reflect on how your practice has supported your work as an educator</td>
<td></td>
</tr>
<tr>
<td><strong>Answer relates to PG Certificate Module 3 Collaborative Working</strong></td>
<td></td>
</tr>
<tr>
<td>8.1 What equipment do you provide for use by the trainee?</td>
<td></td>
</tr>
<tr>
<td>Can the registrar access drugs equipment and a doctor’s bag for the appropriate care of patients?</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Associate Dean comments</strong></td>
<td>Met / Partially met / Not met</td>
</tr>
<tr>
<td>Met / Partially met / Not met</td>
<td></td>
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<tr>
<td><strong>Associate Dean comments re 1st Re-accreditation visit</strong></td>
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</tr>
<tr>
<td>Based on trainee experience</td>
<td></td>
</tr>
<tr>
<td><strong>Met / Partially met / Not met</strong></td>
<td></td>
</tr>
</tbody>
</table>

| 8.1(a) Describe the provision of a consulting room for your trainee – (sole use / shared / hot desking) | |
| Is there lockable storage space? | Yes | No |
| **8.1(b) If you have a number of learners – how have you made sure that there is adequate capacity for them to learn satisfactorily?** | |
| **Associate Dean comments** | Met / Partially met / Not met |
| **Decision relates to KSS Trainer Accreditation process** | |
### Trainer please comment if any changes

### Associate Dean comments re 1st Re-accreditation visit
Met / Partially met / Not met

**Mandatory Standard:** There must be access to evidence base and decision support information in all workplaces of a standard sufficient to enable GPSTRs to achieve the outcomes of the programme as specified in the curriculum. Relevant specialty specific educational resources must be available and accessible where these are stipulated in the GP Curriculum.

<table>
<thead>
<tr>
<th>8.2, 8.3</th>
<th>Reflect on the paper and electronic resources you have within the practice to support learning?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>How do you ensure that these meet the needs of the learners?</td>
</tr>
<tr>
<td></td>
<td>Answer relates to PG Certificate Module2 Evidence Based Practice</td>
</tr>
</tbody>
</table>

### Associate Dean comments
Met / Partially met / Not met
Decision relates to KSS Trainer Accreditation process
See Kent University / KSS mark sheet for PG certificate submissions

### Associate Dean comments re 1st Re-accreditation visit
Met / Partially met / Not met

**Evidence**
Library catalogues, library updating policies, e-learning resources

(C) How do you ensure there is appropriate IT provision for the registrar to undertake private study?

### Associate Dean comments
Met / Partially met / Not met
Decision relates to KSS Trainer Accreditation process
See Kent University / KSS mark sheet for PG certificate submissions

### Associate Dean comments re 1st Re-accreditation visit
based on trainee experience
Met / Partially met / Not met
<table>
<thead>
<tr>
<th>(d) Can you confirm there adequate audio visual equipment available to record patient consultations?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

**Associate Dean comments**

**Met / Partially met / Not met**

*Decision relates to KSS Trainer Accreditation process*

*See Kent University / KSS mark sheet for PG certificate submissions*

**Associate Dean comments re 1st Re-accreditation visit**

*Based on trainee experience*

**Met / Partially met / Not met**
## Domain 9 Outcomes
The impact of the standards must be tracked against GPStr outcomes and clear linkages should be reflected in developing standards

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have learners you have worked with been successful in achieving the career progression that they wished for?</td>
<td>Answer relates to PG Certificate Module1 Supervision in the workplace</td>
</tr>
</tbody>
</table>

### Associate Dean comments
Met / Partially met / Not met
Decision relates to KSS Trainer Accreditation process
See Kent University / KSS mark sheet for PG certificate submissions

### Trainer please comment if any new evidence

### Associate Dean comments re 1st Re-accreditation visit
Met / Partially met / Not met

Please indicate how you have addressed the issues raised at your initial accreditation:

I confirm that the submitted form and the attached supporting evidence is a true and accurate account of my activities and development as a trainer within a training practice.

INSERT NAME:
### Recommendations for Continuing Improvement – 1st Accreditation

**Associate Dean to complete this page**

1. Good things about the Trainer and the Practice:

2. Areas where development could take place:

3. Areas where development must take place:

<table>
<thead>
<tr>
<th>Section Reference</th>
<th>Mandatory Requirements</th>
<th>Target Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Section Reference</th>
<th>Additional Requirements</th>
<th>Target Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**TSC Approval:**
- 2 years
- Other

Please state:

**Conclusion – PG Cert Process**

For PG Certificate – please see attached KSS / Kent University Mark Sheet

Via email only - return completed document to your Patch Manager
<table>
<thead>
<tr>
<th>Feedback on Submission of SEQ for academic award</th>
</tr>
</thead>
<tbody>
<tr>
<td>Associate Dean’s comments:</td>
</tr>
<tr>
<td><em>(To be read in association with University Kent / KSS Mark Sheet for PG Certificate)</em></td>
</tr>
<tr>
<td>Comments on Evidence Presented for:</td>
</tr>
<tr>
<td>Module 1 Supervision in the Workplace:</td>
</tr>
<tr>
<td>Module 2 Evidence Based Practice</td>
</tr>
<tr>
<td>Module 3 Collaborative Working</td>
</tr>
</tbody>
</table>

*Note: The feedback is intended to be read in association with the University Kent/KSS Mark Sheet for the PG Certificate.*
### Appendix 7 Trainer Re-Accreditation Self Evaluation Questionnaire (SEQ)

<table>
<thead>
<tr>
<th>Please indicate as appropriate</th>
<th>Please provide details</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am applying for Trainer re-accreditation only</td>
<td>Tick</td>
</tr>
</tbody>
</table>

**Purpose of SEQ:**
- To ensure GMC standards for the delivery of postgraduate medical education are being met
- To improve the quality of education and training
- To check and improve the quality of deanery quality control
- To identify common issues and good practice
**Section 1 General information**

<table>
<thead>
<tr>
<th>Trainer Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Birth</td>
</tr>
<tr>
<td>Application Dated</td>
</tr>
<tr>
<td>GMC no.</td>
</tr>
<tr>
<td>Defence organisation</td>
</tr>
<tr>
<td>Home Address</td>
</tr>
</tbody>
</table>

- EQ Date:
- GP Associate Dean
- GP Training Practice:
- GP Trainer being accredited:
- Date of Visit if applicable
- Visiting Team if applicable:
  - Associate Dean/Lead
  - 

- The Evidence highlighted in RED identifies the required mandatory documents to be submitted with this completed form where appropriate.
- Mandatory Evidence must be submitted electronically.
- Additional evidence may be supplied as suggested to support the application.
- Other supporting evidence where possible should also be submitted electronically.
<table>
<thead>
<tr>
<th>Practice Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of years at Practice</td>
</tr>
<tr>
<td>Number of clinical sessions</td>
</tr>
<tr>
<td>Do you have any other job roles outside the Practice? If so, state no of sessions and clarify the role.</td>
</tr>
<tr>
<td>Do you have any other qualifications?</td>
</tr>
<tr>
<td>If yes, please describe</td>
</tr>
<tr>
<td><strong>Surgery Telephone 1</strong></td>
</tr>
<tr>
<td><strong>Surgery Telephone 2</strong></td>
</tr>
<tr>
<td><strong>Surgery Telephone 3</strong></td>
</tr>
<tr>
<td><strong>Fax</strong></td>
</tr>
<tr>
<td><strong>Surgery e-mail</strong></td>
</tr>
<tr>
<td><strong>Surgery website</strong></td>
</tr>
<tr>
<td><strong>Trainer home phone</strong></td>
</tr>
<tr>
<td><strong>Trainer mobile phone</strong></td>
</tr>
<tr>
<td><strong>Trainer e-mail 1</strong></td>
</tr>
<tr>
<td><strong>Trainer e-mail 2</strong></td>
</tr>
<tr>
<td><strong>Practice Manager Name</strong></td>
</tr>
<tr>
<td><strong>Practice Manager Direct Dial</strong></td>
</tr>
<tr>
<td><strong>Practice Manager email</strong></td>
</tr>
<tr>
<td><strong>Strategic Health Authority</strong></td>
</tr>
<tr>
<td><strong>PCT</strong></td>
</tr>
<tr>
<td><strong>Trainer Group</strong></td>
</tr>
<tr>
<td><strong>Practice Type</strong></td>
</tr>
<tr>
<td><strong>Practice status</strong></td>
</tr>
<tr>
<td><strong>Number of patients</strong></td>
</tr>
<tr>
<td><strong>Are there any special characteristics of the practice?</strong></td>
</tr>
<tr>
<td><strong>Are there any planned changes to the premises taking place shortly?</strong></td>
</tr>
<tr>
<td>Name of Doctor</td>
</tr>
<tr>
<td>----------------</td>
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</tbody>
</table>

If more than 12 other GPs, please describe

Do any of the GPs have any other roles outside the practice? If so, please describe.

Do any of the GPs have any educational roles (medical student/FY2 supervisor/trainer/programme director/other)?
### Administrative Team

Please confirm job role from the following choices: Management, Staff with special areas of responsibility, General Admin, Secretarial, Receptionists, Other (if other, please describe)

<table>
<thead>
<tr>
<th>No of Staff</th>
<th>Job Role</th>
<th>Number of sessions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

### Practice Professional Staff

Please confirm job role from the following choices: Practice Nurse, Nurse Practitioner, Health Care Assistant, Phlebotomist, Counsellor, Other (if other, please describe)

<table>
<thead>
<tr>
<th>No of Staff</th>
<th>Job Role</th>
<th>Number of sessions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

### Attached Professional Staff

Please confirm job role from the following choices: District Nurse, Midwife, Health Visitor, CPN, Social Worker, Other (if other, please describe)

<table>
<thead>
<tr>
<th>No of Staff</th>
<th>Job Role</th>
<th>Number of sessions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<td></td>
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</tr>
</tbody>
</table>

Are there any planned changes to the doctor's partnership or team structure, taking place shortly?

If yes, please describe

What do you think are the best aspects of your Practice?

In what areas do you think the Practice needs development?
Trainers are requested to attach evidence as suggested in order to support your answer

<table>
<thead>
<tr>
<th>Domain 1</th>
<th>Patient Safety</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Standard</strong>: The duties, working hours and supervision of trainees must be consistent with the delivery of high quality safe patient care</td>
<td></td>
</tr>
</tbody>
</table>

**Mandatory Standard**: Trainees must make the needs of patients their first concern. GPSiRs must undertake only those procedures they are trained for and confirmed competent to perform.

Trainees must be appropriately supervised according to their experience and competence

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Example Answer:</strong> My last registrar rated himself as quite confident about gynaecological problems using confidence rating scales but I noted that he did not score very well in this area on the PEP CD, MCQs. There was also a comment from a foundation clinical supervisor regarding a minor complaint that a female patient had made about him using insensitive language. After an initial period of shared surgeries when I was reassured about his attitudes in general, I asked him to let me know when he had patients presenting with gynae problems and I observed him on a number of occasions. I also asked the staff to let me know of any comments made by patients about him.</td>
<td></td>
</tr>
</tbody>
</table>

**Evidence**: Confidence ratings, PEP CDs, Canbury questionnaires, clinical supervisor records, Foundation portfolio, MSF

<table>
<thead>
<tr>
<th>1.1 &amp; 1.2</th>
<th>Critically reflect on how you assess your Registrar’s level of competence and professionalism and provide appropriate supervision?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Please give examples from your recent experience</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Answer relates to PG Certificate Module 1 Supervision in the Workplace</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Evidence**: Normal working timetable for the Registrar and record of teaching and learning etc. Shared surgery log

**Associate Dean comments**
- **Met / Partially met / Not met**
  - Decision relates to KSS Trainer Accreditation process
  - See Kent University / KSS mark sheet for PG certificate submissions

**Mandatory Standard**: Those supervising the clinical care provided by trainees must be clearly identified, competent to do so, accessible and approachable by day and by night, with time for these responsibilities clearly identified within their job plan

| 1.4 | Reflect on the processes you have adopted to ensure adequate hand over |
of clinical supervision at times when you are not available within the practice?

Answer relates to PG Certificate Module 1 Supervision in the Workplace

<table>
<thead>
<tr>
<th>Evidence ~ Absence cover plan, timetables</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Associate Dean comments</strong></td>
</tr>
<tr>
<td>Met / Partially met / Not met</td>
</tr>
<tr>
<td>Decision relates to KSS Trainer Accreditation process</td>
</tr>
<tr>
<td>See Kent University / KSS mark sheet for PG certificate submissions</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Mandatory Standard: Well organised handover arrangements ensuring continuity of patient care must be in place in all placements</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.6 Critically appraise the processes your practice utilises to ensure continuity of patient care.</td>
</tr>
<tr>
<td>Reflect on the processes your practice uses to ensure patient records facilitate the handover of up to date clinical information, including for home visits.</td>
</tr>
<tr>
<td>Answer relates to PG Certificate Module 2 Evidence Based Practice</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Evidence ~ QOF administration point</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Associate Dean comments</strong></td>
</tr>
<tr>
<td>Met / Partially met / Not met</td>
</tr>
<tr>
<td>Decision relates to KSS Trainer Accreditation process</td>
</tr>
<tr>
<td>See Kent University / KSS mark sheet for PG certificate submissions</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1.1 How do you inform patients that this is a training practice?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Associate Dean comments</strong></td>
</tr>
<tr>
<td>Met / Partially met / Not met</td>
</tr>
<tr>
<td>Decision relates to KSS Trainer Accreditation process</td>
</tr>
<tr>
<td>See Kent University / KSS mark sheet for PG certificate submissions</td>
</tr>
</tbody>
</table>
| Domain 2  
| Quality Assurance review and evaluation  
| **Standard:** Postgraduate training must be quality controlled locally by deaneries working with others as appropriate.  
|  
| **Mandatory Standard:** Deaneries working with others as appropriate must have processes for local quality control of all postgraduate posts and programmes designed to ensure that the requirements of GMC’s standards for training, assessment and curricula are met.  
<p>|</p>
<table>
<thead>
<tr>
<th><strong>Question</strong></th>
<th><strong>Answer</strong></th>
</tr>
</thead>
</table>
| 2.3 i  
Critically reflect on what QOF, appraisal and other quality assurance processes told you about the strengths of your personal and your practice’s achievements?  
*Answer relates to PG Certificate Module 2 Evidence Based Practice* |  
| 2.3ii  
Critically reflect on the areas highlighted for improvement within the practice and how are you and the practice team are addressing these?  
*Answer relates to PG Certificate Module 3 Collaborative Working* |  
| 2.3 / 7.11  
Reflect on your involvement in the Local Faculty Group and how this has helped you develop your understanding of quality control processes?  
How have you liaised with clinical supervisors in secondary care throughout your GPSTRs programme?  
*Answer relates to PG Certificate Module 1 Supervision in the Workplace* |  
| **Evidence** ~ QOF visit report, Patient questionnaires, significant event analysis  
Form 4 / PDP from your NHS Appraisal and an audit  
| **Associate Dean comments**  
Met / Partially met / Not met  
*Decision relates to KSS Trainer Accreditation process*  
See Kent University / KSS mark sheet for PG certificate submissions |
<table>
<thead>
<tr>
<th>Mandatory standard: All placements must comply with the EWTD</th>
</tr>
</thead>
</table>
| **2.7**  
How will you ensure your timetable for a GPStR is compliant with national guidelines? |
| **Evidence**  
Timetable normal working week for GPStR |
| **Associate Dean comments**  
Met / Partially met / Not met |
Decision relates to KSS Trainer Accreditation process  
See Kent University / KSS mark sheet for PG certificate submissions |
### Domain 3  
**Equality, Diversity and Opportunity**  
*Standard: Postgraduate training must be fair and based on principles of equality*

*Mandatory standard:* At all stages training programmes must comply with employment law, the *Disability Discrimination Act*, *Race Relations (Amendment) Act*, *Sex Discrimination Act*, *Equal Pay Acts*, the *Human Rights Act* and other equal opportunity legislation that may be enacted in the future, and be working towards best practice. This will include compliance with any public duties to promote equality.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1&lt;br&gt;Reflect on how you promote equal opportunity and diversity within your practice and how have you approached DDA?&lt;br&gt;What changes have you been able to implement for the benefit of staff, patients or learners?</td>
<td><em>Answer relates to PG Certificate Module 3 Collaborative Working</em></td>
</tr>
<tr>
<td>3.1(b)&lt;br&gt;When did you last undertake Equal Opportunities and Diversity training?</td>
<td></td>
</tr>
<tr>
<td>3.3, 3.4&lt;br&gt;How have you made trainees aware of health and safety policies and occupational health services?</td>
<td></td>
</tr>
</tbody>
</table>

**Evidence** ~ Evidence of your own training in EO & D (copy certificate), EO and D policy/practice handbook, GPR induction timetable

**Associate Dean comments**  
*Met / Partially met / Not met*  
*Decision relates to KSS Trainer Accreditation process*  
*See Kent University / KSS mark sheet for PG certificate submissions*
Domain 4  
Recruitment, selection and appointment  

*Standard:* Processes for recruitment, selection and appointment must be open, fair and effective

*Mandatory Standard:* Candidates will be **eligible** for consideration for entry into a specialist training programme if they are a fully registered medical practitioner or hold limited registration with the General Medical Council or are eligible for any such registration, and are fit to practice.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
</table>
| 4.1 | Reflect on your processes for undertaking pre-employment checks including GMC and CRB  
*Answer relates to PG Certificate Module 1 Supervision in the workplace* |
| 4.1(a) | Are Deanery approved contracts in place?  
*Yes*  
*No* |

**Evidence** ~ Registrar check list, copies of educational contract

**Associate Dean comments**  
**Met** / **Partially met** / **Not met**  
*Decision relates to KSS Trainer Accreditation process*  
*See Kent University / KSS mark sheet for PG certificate submissions*

*Mandatory Standard:* All those involved in selection must be trained in competency based assessment and equal opportunities.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
</table>
| 4.4 | How have you familiarised yourself with the selection criteria used in the recruitment process?  
*Associate Dean comments*  
**Met** / **Partially met** / **Not met**  
*Decision relates to KSS Trainer Accreditation process*  
*See Kent University / KSS mark sheet for PG certificate submissions* |
Domain 5
Delivery of the curriculum including assessment

*Standard: The requirements set out in the curriculum must be delivered and assessed*

*Mandatory Standard: The placement within a training programme, combined with a range of other learning opportunities must together, provide GPSTRs with exposure to a range of patients, clinical problems, training environments and training opportunities sufficient to deliver the GP curriculum and so equip them for a career in independent practice.*

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.2, 5.3 &amp; 5.4 Reflect on how will you ensure that your registrar has had sufficient opportunities to acquire the competencies set out in the GP curriculum?</td>
<td>Answer relates to PG Certificate Module 2 Evidence Based Medicine</td>
</tr>
</tbody>
</table>

**Evidence ~ timetables, learning log & ePortfolio extracts**

**Associate Dean comments**

**Met / Partially met / Not met**

*Decision relates to KSS Trainer Accreditation process*

*See Kent University / KSS mark sheet for PG certificate submissions*

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.1, 5.2, 5.4 How have you made provision to expose your trainee to preventative care including child surveillance and child protection and CPR training updates. How have you made provision for your trainee to develop their skills in minor surgery?</td>
<td>Answer relates to PG Certificate Module 2 Evidence Based Medicine</td>
</tr>
</tbody>
</table>

**Evidence ~ timetable**

**Associate Dean comments**

**Met / Partially met / Not met**

*Decision relates to KSS Trainer Accreditation process*

*See Kent University / KSS mark sheet for PG certificate submissions*

*Mandatory Standard: GPSTRs must not be asked to undertake routine or repeated activities of no educational value or relevance to the GP Curriculum.*
<table>
<thead>
<tr>
<th>5.1, 5.2, 5.3</th>
<th>Critically evaluate the processes you use to ensure the trainee is exposed to graded experience of the full range of work a GP would be expected to undertake including administrative tasks such as signing prescriptions, practice management as well as the clinical work?</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Answer relates to PG Certificate Module 3 Collaborative Working</em></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Associate Dean comments</strong></th>
<th><strong>Met / Partially met / Not met</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Decision relates to KSS Trainer Accreditation process</td>
<td>See Kent University / KSS mark sheet for PG certificate submissions</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5.1 &amp; 5.2</th>
<th>Reflect on how you follow up on out-of-hours sessions and make decisions as to the trainee's development in this area?</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Please give an example using recent registrars</em></td>
<td></td>
</tr>
<tr>
<td><em>Answer relates to PG Certificate Module 1 Supervision in the workplace</em></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Evidence</strong></th>
<th>Entries in GPR’s learning log/PDP</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th><strong>Associate Dean comments</strong></th>
<th><strong>Met / Partially met / Not met</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Decision relates to KSS Trainer Accreditation process</td>
<td>See Kent University / KSS mark sheet for PG certificate submissions</td>
</tr>
</tbody>
</table>

| **Mandatory Standard:** Educational supervisors must be familiar with MRCGP guidance and regulations |
|---|---|
| GPStRs must be provided with information on the MRCGP and on how to register for the assessment |

<p>| 5.6 | Reflect on how you have you developed your own understanding of the MRCGP registration process for trainees, the assessment process and the ePortfolio? |</p>
<table>
<thead>
<tr>
<th>Answer relates to PG Certificate Module 2 Evidence Based Practice</th>
</tr>
</thead>
</table>

5.6(a)
Reflect on how have you prepared other members of your team to support you and your trainee in undertaking assessments?

Answer relates to PG Certificate Module 3 Collaborative Working

<table>
<thead>
<tr>
<th>Associate Dean comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Met / Partially met / Not met</td>
</tr>
<tr>
<td>Decision relates to KSS Trainer Accreditation process</td>
</tr>
<tr>
<td>See Kent University / KSS mark sheet for PG certificate submissions</td>
</tr>
</tbody>
</table>

**Mandatory Standard:**

GPStRs must be supported in preparing for all components of the MRCGP and provided with the necessary facilities, assessments, support and feedback in all primary and secondary care placements.

**GPStRs must have regular, formal appraisals in accordance with the requirements of the Gold Guide and the GMC.**

<table>
<thead>
<tr>
<th>5.8, 5.9</th>
</tr>
</thead>
<tbody>
<tr>
<td>How have you used feedback and drawn up and adapted individual learning plans for your registrars in the light of assessments and other sources of information in order to meet outstanding learning needs</td>
</tr>
<tr>
<td>Please give a examples using recent registrars</td>
</tr>
</tbody>
</table>

Answer relates to PG Certificate Module 1Supervision in the workplace

<table>
<thead>
<tr>
<th>5.9</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reflect on your processes for supporting the development of your trainees as autonomous learners</td>
</tr>
<tr>
<td>How have you undertaken a formal appraisal with your GPST3 after the ARCP process?</td>
</tr>
</tbody>
</table>

Answer relates to PG Certificate Module 1Supervision in the workplace

<table>
<thead>
<tr>
<th>Evidence ~</th>
</tr>
</thead>
<tbody>
<tr>
<td>Copy of an Educational Supervisors Report</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Associate Dean comments</th>
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<tr>
<td>Met / Partially met / Not met</td>
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<tr>
<td>Decision relates to KSS Trainer Accreditation process</td>
</tr>
<tr>
<td>See Kent University / KSS mark sheet for PG certificate submissions</td>
</tr>
</tbody>
</table>
### Domain 6
Support and development of trainees and trainers and the local faculty

**Standard:** Trainees must be supported to acquire the necessary skills and experience through induction, effective educational supervision, an appropriate workload, personal support and time to learn.

**Mandatory Standard:** GPSTRs starting new placements must receive induction that will enable them to practice and learn safely, under supervision, in the placement.

**Mandatory Standard:** GPSTRs must use the RCGP’s ePortfolio which they must discuss with the educational and/or clinical supervisor for the placement at the start of each placement. GPSTRs must have further meetings with their educational and/or clinical supervisor at least once every three months to discuss progress, outstanding learning needs and how to meet those needs.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.1 &amp; 6.14 Reflect on your personal and practice processes for inducting the registrar.</td>
<td>Answer relates to PG Certificate Module 3 Collaborative Working</td>
</tr>
</tbody>
</table>

**Evidence** ~ Induction timetable, educational log, extracts from trainee induction pack

**Associate Dean comments**
**Met / Partially met / Not met**
*Decision relates to KSS Trainer Accreditation process*
*See Kent University / KSS mark sheet for PG certificate submissions*

<table>
<thead>
<tr>
<th>6.8 Have you signed an educational contract with your registrar?</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reflect on the process of discussing the educational contract with your learner</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Answer relates to Module 1 Supervision in the Workplace</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Mandatory Standard:** GPSTRs must be supported to acquire generic professional skills at all stages of training. This will include training in the use of significant event analysis

| 6.12 Reflect on how you support your registrar to engage in, and learn from the audit process? | |
|------------------------------------------------------------------------------------------| |
| Answer relates to PG Certificate Module 2 Evidence Based Practice | |
### 6.12(a)
**Please give an example of an audit you have recently carried out yourself - reflect on the process and how it benefited patient care?**

*Answer relates to PG Certificate Module 2 Evidence Based Practice*

### 6.12(b)
**Reflect on how you have supported a learner in learning from a significant event.**

*Answer relates to PG Certificate Module 3 Collaborative Working*

**Evidence ~ Significant event analyses**
- Trainee Audit

**Associate Dean comments**
- **Met / Partially met / Not met**
  - *Decision relates to KSS Trainer Accreditation process*
  - *See Kent University / KSS mark sheet for PG certificate submissions*

### Mandatory Standard: *In both primary and secondary care settings systems must be in place to enable GPSTrs to learn from and with other healthcare professionals.*

### 6.13
**Critically reflect on the opportunities that are available within your practice for team members to meet and learn together?**

*Answer relates to PG Certificate Module 3 Collaborative Working*

**Give examples of how the team has supported individual learners**

*Answer relates to PG Certificate Module 3 Collaborative Working*

**Evidence ~**
- *learning log, minutes from practice learning events and extract from ePortfolio*

**Associate Dean comments**
- **Met / Partially met / Not met**
  - *Decision relates to KSS Trainer Accreditation process*
  - *See Kent University / KSS mark sheet for PG certificate submissions*

**Mandatory standard: The findings of GMC trainee and trainer surveys must inform quality management of training programmes**
6.14
Critically reflect on how you encourage a learner to give feedback about your and their training programme?

Reflect on how feedback from registrars has helped you to improve their experience of training?

Answer relates to PG Certificate Module 1 Supervision in the Workplace and Module 2 Evidence Based Practice

**Evidence** - GMC survey result. Exit Interviews. GPR Survey results (if you have received a copy of your online survey)

<table>
<thead>
<tr>
<th>Associate Dean comments</th>
<th>Met / Partially met / Not met</th>
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</thead>
<tbody>
<tr>
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<td>Decision relates to KSS Trainer Accreditation process</td>
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<tr>
<td></td>
<td>See Kent University / KSS mark sheet for PG certificate submissions</td>
</tr>
</tbody>
</table>

**Mandatory Standard:** There must be ready access to career advice

6.15
How have you guided your registrars in obtaining career advice?

Answer relates to PG Certificate Module 1 Supervision in the workplace

<table>
<thead>
<tr>
<th>Associate Dean comments</th>
<th>Met / Partially met / Not met</th>
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<tbody>
<tr>
<td></td>
<td>Decision relates to KSS Trainer Accreditation process</td>
</tr>
<tr>
<td></td>
<td>See Kent University / KSS mark sheet for PG certificate submissions</td>
</tr>
</tbody>
</table>

**Mandatory standard:** GPStrs must not be subject to, or subject others, to behaviour that undermines their professional confidence of self-esteem

6.15(a)
Can you confirm that your registrar has not been bullied nor has he/she bullied others?  

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
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</table>

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<tr>
<th>Associate Dean comments</th>
<th>Met / Partially met / Not met</th>
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<td></td>
<td>Decision relates to KSS Trainer Accreditation process</td>
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<tr>
<td></td>
<td>See Kent University / KSS mark sheet for PG certificate submissions</td>
</tr>
</tbody>
</table>
**Mandatory Standard:** GPSRIs must be provided with information on how to apply for study leave, what courses are appropriate for them and what funding is available.

6.18
How do you ensure that your registrar has adequate time for attending relevant courses including regular contact with the programme director?

6.18(a)
Reflect on your processes of educational needs planning - how do you ensure that courses that the registrar undertakes are relevant to his or her learning needs?

*Answer relates to PG Certificate Module 1 Supervision in the workplace*

Evidence ~ record of courses attended with learning achieved, learning log

**Mandatory Standard:** GPSRIs should be exposed during their training to the academic opportunities available in their specialty. They must be given formal confirmation of how much an academic training programme will contribute towards a CCT

6.21
How have you encouraged your registrar to look at further academic opportunities?

**Associate Dean comments**

Met / Partially met / Not met

*Decision relates to KSS Trainer Accreditation process*

*See Kent University / KSS mark sheet for PG certificate submissions*

**Mandatory Standard:** GP Trainers must be trained and selected in accordance with GMC requirements and the General and Specialist Medical Practice (Education, Training and Qualifications) Order 2003. An educational supervisor must demonstrate that they are involved in educational activities within and/or out-with the practice.

6.23
Reflect on how you have kept up to date with the requirements of the regulations that support training in the UK such COGPED and the RCGP guidance for specialty training?

*Answer relates to PG Certificate Module 2 Evidence Based Practice*

Evidence: Form 4/ PDP of your NHS Appraisal, record of learning from trainers events
<table>
<thead>
<tr>
<th>Mandatory Standard: Educational Supervisors must demonstrate an understanding of the professional guidance contained in GMC guidance “Good medical Practice”, “Maintaining Good Medical Practice”, “Good Medical Practice for GPs” and “The Doctor as Teacher”. They must demonstrate an enthusiasm for general practice and inform their director of postgraduate GP education (or nominated deputy) of concerns over, or restrictions on, their fitness to practice.</th>
</tr>
</thead>
</table>

6.25(i)
How can you demonstrate your own commitment to the GMC Guidance contained in the documents listed above?

Reflect on how you have you made trainees aware of the GMC Guidance?

Answer relates to PG Certificate Module2 Evidence Based Practice

<table>
<thead>
<tr>
<th>6.25(ii)</th>
</tr>
</thead>
</table>
I understand the need for a GP Trainer to inform the director of GP Education of concerns over or restrictions on fitness to practice since your last accreditation?

Have you had any complaints not resolved by the in-house complaints process since your last accreditation?

If so please give details.

Answer relates to PG Certificate Module2 Evidence Based Practice

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Associate Dean comments</th>
</tr>
</thead>
</table>
Met / Partially met / Not met
Decision relates to KSS Trainer Accreditation process
See Kent University / KSS mark sheet for PG certificate submissions

Mandatory Standard: Educational supervisors must be members or fellows in good standing of the RCGP or be able to demonstrate their commitment to the maintenance of high standards and the discipline of general practice in other ways

6.26
I am a member or fellow of the RCGP in ‘good standing’

Answer relates to PG Certificate Module2 Evidence Based Practice

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>
### Associate Dean comments
Met / Partially met / Not met  
*Decision relates to KSS Trainer Accreditation process*  
*See Kent University / KSS mark sheet for PG certificate submissions*

### Mandatory Standard: Educational Supervisors must relate well to GPSTRs, colleagues and patients both face to face, on the telephone and in writing. They must communicate effectively within their clinical practice and help GPSTRs develop effective communication skills.

| 6.27 | I understand the need to communicate effectively and efficiently with the GP Educational network | YES | NO |

### Mandatory Standard: Educational Supervisors must have an up to date personal development plan derived through annual appraisal for their work as an educator, be willing to undergo performance review and be familiar with current medical literature and its implications for both general practice and general practice teaching.

| 6.28 | Reflect on how clinical and educational activities you have undertaken this year influenced your teaching? |  |
| Answer relates to PG Certificate Module2 Evidence Based Practice |

**Evidence** ~ Form 4 / PDP of your NHS Appraisal  
Reflections on courses attended

### Associate Dean comments
Met / Partially met / Not met  
*Decision relates to KSS Trainer Accreditation process*  
*See Kent University / KSS mark sheet for PG certificate submissions*

| (J) | Reflect on how you have used feedback from peers involved in GP education to improve your teaching skills with previous learners |  |
| Answer relates to PG Certificate Module 3 Collaborative working |

**Evidence** ~ GP Educator Review & Appraisal document

| (K) | Critically reflect on your experience of undertaking an appraisal with another trainer using the GP Educator Review & Appraisal document.  
Reflect on your competencies against the KSS Educator competency framework contained in the GP |  |
<table>
<thead>
<tr>
<th>Educator Review &amp; Appraisal document</th>
</tr>
</thead>
<tbody>
<tr>
<td>Answer relates to PG Certificate Module 1 Supervision in the workplace</td>
</tr>
</tbody>
</table>

(L) Reflect on your use of the KSS video log and peer feedback to review a recent videoed teaching event

Answer relates to PG Certificate Module 3 Collaborative working

<table>
<thead>
<tr>
<th>Evidence ~ Video log and reflections</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Associate Dean comments</th>
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</thead>
<tbody>
<tr>
<td>Met / Partially met / Not met</td>
</tr>
</tbody>
</table>

Decision relates to KSS Trainer Accreditation process

See Kent University / KSS mark sheet for PG certificate submissions
Domain 7  
Management of Education and Training  
*Standard: Education and training must be planned and maintained through transparent processes which show who is responsible at each stage*

**Mandatory standard:** Educational supervisors, through the training Programme Director, must involve the deanery as soon as it is clear that a GPStR is in difficulty, there are concerns about performance or the GPStR has been absent from a placement for more than two weeks.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>7.11 Do you understand the process for identifying, supporting and managing GPStRs whose conduct, health progress and performance causes concern?</td>
<td>YES</td>
</tr>
<tr>
<td>7.12 Reflect on any experience of dealing with any conduct, health, progress or performance issues with learners</td>
<td></td>
</tr>
<tr>
<td>Answer relates to PG Certificate Module1 Supervision in the workplace</td>
<td></td>
</tr>
</tbody>
</table>

**Evidence ~ educational supervisors reports**

**Mandatory standard:** Training providers must immediately inform the deanery of any significant change to their organisation and/or structure that would affect the training experience.

<table>
<thead>
<tr>
<th>7.14 Have there been any changes in the practice since the last accreditation which might have affected training?</th>
<th></th>
</tr>
</thead>
</table>

**Associate Dean comments**

**Met / Partially met / Not met**  
*Decision relates to KSS Trainer Accreditation process*  
*See Kent University / KSS mark sheet for PG certificate submissions*
## Domain 8

### Educational resources and capacity

**Standard:** the educational facilities, infrastructure and leadership must be adequate to deliver the curriculum

### Mandatory Standard: The overall educational capacity of the institution and any unit offering training placements within it must be adequate to accommodate the practical experiences required by the GP curriculum along with the educational requirements of all the healthcare professionals in the unit.

### Questions and Answers

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.1(a) Describe the provision of a consulting room for your trainee – (sole use / shared / hot desking)</td>
<td></td>
</tr>
<tr>
<td>Is there lockable storage space?</td>
<td>YES</td>
</tr>
<tr>
<td>8.1 If you have a number of learners – how have you made sure that there is adequate capacity for them to learn satisfactorily?</td>
<td></td>
</tr>
</tbody>
</table>

### Associate Dean comments

**Met / Partially met / Not met**

*Decision relates to KSS Trainer Accreditation process*

*See Kent University / KSS mark sheet for PG certificate submissions*

8.1, 8.3 How long have you set aside each week for protected teaching time with your registrar?

Reflect on how your practice has supported your work as an educator

*Answer relates to PG Certificate Module3 Collaborative Working*

### Evidence

~ Learning plans and tutorial log

### Associate Dean comments

**Met / Partially met / Not met**

*Decision relates to KSS Trainer Accreditation process*

*See Kent University / KSS mark sheet for PG certificate submissions*

### Mandatory Standard:

There must be access to an evidence base and decision support information in all workplaces of a standard sufficient to enable GPSiRs to achieve the outcomes of the programme as specified in the curriculum.

Relevant specialty specific education resources must be available and accessible where these are stipulated in the GP Curriculum.
<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.2 &amp; 8.3 Reflect on the paper and electronic resources you have within the practice to support learning? How do you ensure that these meet the needs of the learners?</td>
<td>Answer relates to PG Certificate Module2 Evidence Based Practice</td>
</tr>
</tbody>
</table>

**Evidence** ~ library catalogues, library updating policies, electronic evidence of work based resources

**Associate Dean comments**
**Met / Partially met / Not met**
*Decision relates to KSS Trainer Accreditation process*
*See Kent University / KSS mark sheet for PG certificate submissions*

| 8.1, 8.2 How do you ensure there is adequate IT provision for the registrar to undertake private study? | |
| **Associate Dean comments** | **Met / Partially met / Not met** |
| *Decision relates to KSS Trainer Accreditation process*
| *See Kent University / KSS mark sheet for PG certificate submissions* |

| 8.1 & 8.5 Can you confirm there adequate audio visual equipment available to record patient consultations? | YES  
NO |
| **Associate Dean comments** | **Met / Partially met / Not met** |
| *Decision relates to KSS Trainer Accreditation process*
| *See Kent University / KSS mark sheet for PG certificate submissions* |

| 8.1 What equipment do you provide for use by the trainee? Can the registrar access drugs equipment and a doctor’s bag for the appropriate care of patients? | YES  
NO |
| **Associate Dean comments** | **Met / Partially met / Not met** |
Decision relates to KSS Trainer Accreditation process
See Kent University / KSS mark sheet for PG certificate submissions
<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>9.1</strong></td>
<td>What have been the results of the AKT and CSA for your registrars?</td>
</tr>
<tr>
<td><strong>9.1(a)</strong></td>
<td>Reflect on how you have supported your learners in achieving the career progression that they wished for?</td>
</tr>
<tr>
<td></td>
<td>Answer relates to PG Certificate Module1 Supervision in the workplace</td>
</tr>
</tbody>
</table>

**Associate Dean comments**

Met / Partially met / Not met

Decision relates to KSS Trainer Accreditation process

See Kent University / KSS mark sheet for PG certificate submissions

Please indicate how you have addressed the issues raised at your last accreditation:

I confirm that the submitted form and the attached supporting evidence is a true and accurate account of my activities and development as a trainer within a training practice.

**INSERT NAME:**
**Conclusions on Trainer Selection Process**

Associate Dean’s comments:

---

**Areas where development must take place**

<table>
<thead>
<tr>
<th>Section Reference</th>
<th>Mandatory Requirements For Trainer Accreditation</th>
<th>Target Date</th>
</tr>
</thead>
<tbody>
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</table>

**TSC Approval:**

- 5 years
- Other

Please state:

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**Conclusion – PG Cert Process**

_For PG Certificate – please see attached KSS / Kent University Mark Sheet_
<table>
<thead>
<tr>
<th>Feedback on Submission of SEQ for academic award</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Associate Dean’s comments:</strong></td>
</tr>
<tr>
<td>(<em>To be read in association with University Kent / KSS Mark Sheet for PG Certificate</em>)</td>
</tr>
<tr>
<td>Comments on Evidence Presented for:</td>
</tr>
<tr>
<td>Module 1 Supervision in the Workplace:</td>
</tr>
<tr>
<td>Module 2 Evidence Based Practice</td>
</tr>
<tr>
<td>Module 3 Collaborative Working</td>
</tr>
</tbody>
</table>
Appendix 8 Concessions Form (for consideration by exam board)

UNIVERSITY OF KENT (Medway Campus)

For full details concerning concessions, please refer to:

http://www.kent.ac.uk/registry/quality/credit/creditinfoannex9.htm

➢ Note: This mandatory documents to be submitted with this completed form is NOT to be used for an application for an extension to coursework deadline, failure to submit coursework by the deadline, or failure to attend classes (please use separate 'Concessions Form for Application for an Extension').

STUDENT NO: .......................................................... EMAIL ADDRESS: ..........................................................

FIRST NAMES: .......................................................... ....... SURNAME: ..........................................................

(in CAPITALS)

PROGRAMME OF STUDY: .......................................................... STAGE: ..........................................................

This statement concerns (please indicate one or more):

☐ Failure to attend an examination

☐ Examination/assessment performance impaired by concessionary factor(s)

➢ (In which case the form Mandatory Evidence must be submitted within 5 days of the examination electronically)

➢ For 1st Re-accreditation visit please see Guidance Notes and NEW list of mandatory evidence that must be submitted.

➢ Since the original SEQ some questions have been added/amended – these are highlighted in pale grey to assist those who submitted the original documentation at first appointment

Additional to which it refers.)
STATEMENT OF REASONS FOR SUBMITTING A CONCESSIONS FORM TO THE BOARD OF EXAMINERS

Please outline below the circumstances you wish to be taken into account (evidence may be supplied as suggested to support the application) details of your failure to meet one or other of the Faculty's module rules and (ii) the grounds for your concessions application. You should also attach any supporting evidence, such as a medical note from a doctor, where possible.)

should also of nature of circumstances (please attach extra sheets if necessary):

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Please tick if you have asked your doctor to write a medical note and have asked your Senior Tutor to forward a copy to the QA Officer (UKM)

Please tick if you have asked your tutor or another member of academic staff to write a supporting statement, and to Forward it to the QA Officer (UKM). You are advised that your application will be strengthened by such a supporting statement, particularly in cases not involving medical certification

SIGNATURE: ............................................................ Date: ...........................................................

This completed form must be returned to QA Officer c/o Medway Building Reception

Extension Request Form

UNIVERSITY OF KENT (Medway Campus)

CONCESSIONS FORM FOR APPLICATION FOR AN EXTENSION TO COURSEWORK DEADLINE / FAILURE TO SUBMIT COURSEWORK BY THE DEADLINE / FAILURE TO ATTEND CLASSES

Deadline: This form must be submitted no later than the deadline for the coursework for which you are applying for an extension.
Appendix 9 Student Appeals and Complaints Procedures for Taught Programmes

What is an academic complaint?

A specific concern about the provision of a programme of study or related academic service: e.g. delivery of teaching, availability of learning of resources.

What do I do if I want to make an academic related complaint?

In the first instance you should contact an appropriate member of staff at your institution (if you unsure who this is, ask at the administration office). If you remain dissatisfied and wish to pursue the issue, you should consult your institution’s complaints procedure for instructions on how to make a formal complaint. Institutions will have set procedures for this. If you remain dissatisfied having exhausted the complaints procedure at your institution, you may further your complaint by submitting a grievance to the University of Kent's Council provided that this is within 3 months of notification of the outcome of the complaint made at your institution. To do this, you must write to by writing to Karen Goffin, Secretary of the University’s Council, at the address at the foot of this document.

What do I do if I have a compliant regarding a non-academic matter?

If you have a specific complaint, other than one relating to an academic matter, you should consult your institution’s complaints’ procedures or ask a member of staff. If you have a concern over a service that the University of Kent provides, you should contact the Office for Quality Assurance and Validation at qa@kent.ac.uk.

What is an academic appeal?

A request for a review of a decision made by a Board of Examiners in regards to matters of progression to the next stage, assessment results or academic awards.

On what grounds might I make an academic appeal?

1. If there is reasonable ground (supported by evidence) to suggest that there has been an administrative, procedural or clerical error which has affected the decision of the Board of Examiners; or
2. Where there is evidence of illness or other misfortune which has caused exceptional interference to your academic performance and for good reason meant that you were unable to submit work by the published deadline; or
3. If evidence relating to illness or other misfortune was submitted under your institution’s concessions procedures within the prescribed time limit and was not properly considered by the Board of Examiners. However, appeals that are based on concessionary circumstances which, without good reason, were not brought to the attention of the Board of Examiners through concessions procedures at the appropriate time may not be considered.

Please note that you cannot appeal against the academic judgement of the examiners

How do I make an academic appeal?

As the awarding body of your study the University of Kent will consider all student appeals. Appeals against the recommendations of Boards of Examiners will not be considered if they are received more than 21 days from the date of the publication of assessment results.

You can pick up copy of the appeals form from your institution (ask at the administration office) or online at http://www.kent.ac.uk/ualt/quality/credit/Appeals_Form_Sep09[1].pdf
It should be accompanied by a letter explaining in full the grounds for the appeal and include all related documentary evidence. Your appeal form should indicate the remedial action that you are seeking. Once completed, you should send it to Rachel Evans at the Office for Quality Assurance and Validation at the University of Kent.

**What happens once I have submitted an appeal?**

The University of Kent will contact you if the appeal does not meet the requirements of the appeals process. If it does meet the requirements, your case will be considered by the appropriate Dean of Faculty at Kent and there are various possible outcomes including:

- Administrative errors being immediately rectified
- Board of Examiners being asked to reconsider their decision
- Review Panels being established to consider your case; or
- The Dean rejecting your appeal

Staff at the University of Kent will inform you of the action taken and if you need to attend a review panel meeting.

**And if I am still not happy that the correct procedures have been adhered to?**

Where an appeal against a recommendation of a Board of Examiners is considered not to meet the technical conditions outlined, or where it is rejected by a Dean, or a Chair of a Board of Examiners or a Faculty Review Panel, you have a further right of appeal to the Senate Academic Review Committee (SARC), which will consider only whether the original appeal was considered properly and fairly by the Faculty.

**How do I appeal to the Senate Academic Review Committee (SARC)?**

You must complete the SARC Appeal Form as available at [http://www.kent.ac.uk/uelt/quality/regulations/index.html](http://www.kent.ac.uk/uelt/quality/regulations/index.html) and send it to the Secretary of the Committee, Karen Browne (K.Bowne@kent.ac.uk), not later than 21 days after the notification of the decision prompting the appeal. You must include a written explanation as to why you believe your original appeal was conducted improperly or unfairly, and be sure to include all relevant evidence and supporting documentation. The Secretary shall determine, on the basis of your representation, whether the appeal is appropriate to the remit of the Committee and will inform you if there is no basis to proceed with the appeal.

Where the appeal is judged as submitted on grounds appropriate to the remit of the Committee, the Secretary shall request an account of the conduct of the appeal from the Faculty. If you present new evidence the Secretary shall determine if there is good reason why this evidence was not made available to at the time of the consideration of the original appeal, and shall proceed as follows:

- if good reason for the late submission of new evidence is found, the case will be remitted for reconsideration;
- if good reason is not found for the late submission of new evidence, the Secretary shall recommend to the Chair that it be discounted when undertaking a prima facie assessment of the case.

**What can the Senate Academic Review Committee do?**

The Committee has the power to remit the case for re-consideration to the appropriate Board of Examiners or the Faculty, or to confirm, vary or reverse the original appeal decision. The Committee shall only do so in cases where the University’s procedures followed have been irregular or unfairly operated, or where it is satisfied that in the light of the evidence (whether originally
available or newly tendered) the decision is in the view of the Committee unreasonable or unduly harsh and therefore unfair.

Is SARC the final adjudicator of appeals at the University?

No. If you are unhappy with the outcome of your appeal to SARC you may submit a grievance to the University’s Council by writing to Karen Goffin, Secretary of the University’s Council, to request a review by the Council not later than three months after the date of the letter informing you of the outcome of your appeal to SARC. You should note that the Council would not normally intervene to change decisions by University Officers or formal bodies which has been properly exercised or determined unless procedural fault, bias, irregularity or other inadequacy was found.

What is the Office for the Independent Adjudicator (OIA)?

The Office for the Independent Adjudicator (OIA) operates an independent student complaints scheme. Should the University’s Council reject your academic appeal or complaint and so conclude the process as far as Kent is concerned, you will be issued with a ‘Completion of Procedures’ letter explaining that you can take the matter to the OIA if you wish to do so. Full details are available at www.oiahe.org.uk

Can I appeal against disciplinary action taken against me for academic offences?

Yes, your institution will have policies and procedures in place for dealing with academic offences, details of which may be found in the materials your institution produces for its students. The University of Kent requires all its validated and franchised institutions to establish a Disciplinary Committee to deal with such academic offences and process any such cases arising (see Annex 10 of the University’s Credit Framework http://www.kent.ac.uk/ult/quality/credit/creditinfoannex10.html ). However, if you wish to appeal to the University against the outcome of such a case, you may only do so where:
• that there is evidence of a failure to follow the procedures set out in these regulations, which casts reasonable doubt on the reliability of the decision; and/or
• that fresh evidence can be presented, which could not reasonably have been made available before the decision was made, and which casts reasonable doubt on the reliability of the decision; and/or
• that the decision was unreasonable or not justified given the evidence which was available at the time.

For further enquiries regarding the Appeals Procedures:

Visit http://www.kent.ac.uk/ult/quality/credit/creditinfoannex9.html If you have any questions, please contact qa@kent.ac.uk

Contact Address

The University of Kent, Canterbury, Kent, CT2 7NZ
Appendix 10 Intermission

Intermission Procedures

It is important that you seek help if you are experiencing problems with your studies.

If you seek a period of intermission you are strongly advised to check the financial consequences with your sponsors. It is very important that your sponsor is consulted.

Students take time out from their degree (known as intermitting) for a variety of reasons, mainly personal, but sometimes academic or financial. If you feel you need some time out, go and see your School's Senior Tutor or the University Counselling Service. Intermitting does not change the duration of your degree it just gives you the opportunity to take some time away from University should you need to. The University does not encourage students to take longer than normal to complete their studies but is willing to discuss this with you. Whatever is decided you will need to speak to your funding body to ensure that any funding you receive is not affected by intermission.

Intermission is normally given for a complete academic year, or occasionally part of an academic year. Your School's Senior Tutor will ultimately be responsible for authorising your period of intermission. However, no intermission will be granted after the end of student examination/assessment confirmation ie end of week 15.

Possible reasons for leave to intermit are:

1. Personal Grounds - Family or personal reasons (other than illness) prevent you from continuing your studies.
2. Financial Grounds - Where your financial situation prevents you from continuing your studies.
3. Medical Grounds:
   (a) Absence from the University due to medical or emotional reasons, or other such extenuating circumstances.
   (b) Illness or extenuating circumstances, which are having a negative impact on your studies.
   (c) Illness or extenuating circumstances that have interrupted your studies

When the reason for intermitting is medical, medical evidence will be requested from you. Before you return from intermission, you will be required to provide another medical certificate to testify that you are fit to return to your studies.
A few things to remember:

• Intermitting does not change the number of terms you will spend at the University, or your examination results.

• Intermitting is intended to relieve you of a disadvantage, not put you at an advantage to other students.

• You must check funding issues / implications with your Funding Body / the University Finance Office.

• If you subsequently want to change the period for which you have been permitted to intermit, you must seek approval from your School’s Senior Tutor.

• If you have to go out of residence quickly for medical reasons, make sure you are seen by a doctor at the time so they can give you a medical certificate that reflects the severity of your condition.

Further guidance is available at

http://www.kent.ac.uk/teaching/qa/guidance/intermission%20procedures.html