



## Guidance for Obstetrics and Gynaecology training programme ARCPs in 2020

We have developed new guidance to support ARCPs during the COVID-19 pandemic

### **General principles**

- 1) Priority for those completing ST7 and trainees at critical progression points (ST2 and ST5). Panel meetings to take place remotely with TPD/Head of School and an experienced ES. For those ARCPs where there is an outcome 3 or 4 expected then an external rep or Associate Dean should be on the panel in addition to the other two panel members.
- 2) ARCPs should **not** be postponed for trainees who have not been able to sit the MRCOG due to the postponement of Part 3 MRCOG in May 2020 and Part 1 and Part 2 MRCOG in July 2020. Detailed guidance on outcomes for these trainees is detailed below.
- 3) ARCP panels will communicate the outcomes with the College tutors in each training unit. For this year only because of the unusual situation, the College is keen for College tutors to have face-to-face meeting with each trainee to explain the outcome of the ARCP whether the outcome is satisfactory or not.

Please see [Supporting the COVID-19 Response: Enabling Progression at ARCP' \(HEIW/NIMDTA/NES/HEE\) and the 2020 ARCP recording where coronavirus \(COVID-19\) has impacted on a trainee \(GMC/COPMeD/NHS\).](#)

### **Additional information**

1) The 2018 /2019 matrix of progression will be used for those trainees remaining on the 2013 curriculum and the 2019/2020 matrix of progression will be used for those trainees who have moved onto the new 2019 curriculum.

2) For this year only one set of TO1s/T02 will be required if these have been satisfactory and no issues have been highlighted. For those trainees where significant issues have been identified in their first cycle of TO1s then a further set should be completed prior to the ARCP.

In addition, those remaining on the 2018/2019 matrix of progression will only be required to have completed 6 x mini CEX, 6 x CbDs and 6 x Reflective practice.

For those trainees who are on the 2019 curriculum then there are no specific numbers of workplace based assessments to be completed but there should be some evidence attached to each CiP.

[2018/2019 matrix of progression \(COVID-19\) \(Attachment 1\)](#)

[2019/2020 matrix of progression \(COVID-19\) \(Attachment 2\)](#)

3) This year ARCP panels in addition to all the usual outcomes will also be able to give an outcome 10. There are 2 parts to this:

**10.1**-Progress is satisfactory but the acquisition of competencies/ capabilities by the trainee has been delayed by COVID-19 disruption. Trainee can progress

**10.2**- Progress is but the acquisition of competencies/ capabilities by the trainee has been delayed by COVID-19 disruption. Trainee is at a critical progression point and additional training time is required.

When using one of these outcomes then it is important to use a C code to document the reason for giving an outcome 10.1 or 10.2. (see GMC document [2020 ARCP recording where coronavirus \(COVID-19\) has impacted on a trainee](#))

Outcome N13 should be used where an ARCP was not held for a trainee due to COVID 19-disruption.

4) ST7s undergoing their final ARCPs. To be awarded an outcome 6 all aspects of the core curriculum must be completed and all practical capabilities/skills of the ATSMs must be completed. We have for this year only removed the requirement to complete ATSM theoretical courses for ST7s approaching their final CCT and also the requirement for ST7s to complete a leadership and management course.

We have removed the requirement for ST7s who have moved to the 2019 curriculum to achieve OSATs for surgical wound debridement.

ST7 trainees not meeting these standards should be awarded an outcome 10.2 and the relevant C code.

5) Outcome 10s should be used for those trainees who are meeting all other requirements for the training matrix but progression to the next year of training is dependent on passing either the Part 1 MRCOG or Part 2 &3 MRCOG. These trainees should progress to the next stage of training and should receive an outcome 10.1 Code C1. A trainee who fails the necessary exam at the next sitting will require an extension to their training time at the next ARCP.

6) For trainees who are not in ST7 and have made satisfactory progress but have been unable to attend a mandatory course due to COVID-19 then they should be awarded an outcome 10.1 C code: C2.

7) Trainees who are currently shielding due to Covid 19 and therefore not working in the clinical environment can be awarded 10.1 or 10.2 C code:C4

8) The training ePortfolio platform will support the implementation of the new ARCP outcomes and is undergoing development to introduce the new functionality in time for ARCP seasons.

9) There will be no RCOG TEF this year. The GMC National training surveys for both doctors in training and trainers are postponed at present.

## **Summary of Changes to RCOG curriculum requirements for ARCPs 2020**

Changes to the curriculum requirements in light of the current COVID-19 pandemic for 2020 are as listed below.

### ***ST6/7s trainees remaining on the 2013 RCOG curriculum***

- 1) Reduction of T02 from 2 to 1 if all TO1s in the first cycle were satisfactory (i.e. no fields were scored with 'some concern' or 'major concern')
- 2) Reduction in the number of miniCEXs, CBDs and reflective practices from 8 to 6
- 3) Remove the requirement to complete ATSM theoretical courses for ST7s approaching their final CCT. All other elements of the ATSMs must be completed
- 4) Remove the requirement for ST7s to complete a leadership and management course

**All other curriculum requirements and practical competencies remain the same.**

A ST7 trainee could be awarded an outcome 6 if all curriculum requirements have been met and they have a satisfactory ESR but lack either an ATSM theoretical course or leadership and management course.

### ***Trainees on the new 2019 RCOG curriculum***

- 1) Reduction of T02 from 2 to 1 if all TO1s in the first cycle were satisfactory (i.e. no fields were scored with 'some concern' or 'major concern')
- 2) If trainee unable to sit MRCOG Part 1 prior to the end of ST2 and all other curriculum requirements are met then trainee to be awarded outcome 10.1 and progress to ST3. The trainee must attempt and pass the part 1 MRCOG at the next sitting.
- 3) If trainee unable to sit Part 3 MRCOG prior to the end of ST5 due to the cancellation of the exam and all other curriculum requirements are met then the trainee should be awarded an outcome 10.1 and can progress to ST6 and commence ATSMs. The trainee must attempt and pass the part 3 MRCOG at the next sitting.
- 4) Prior to the Covid-19 pandemic it had been decided for ARCPs in 2020 that trainees only required one summative OSAT for a new procedure introduced into the 2019 curriculum that would normally need completion by that particular training year e.g. vulval biopsy in ST4. The remaining two summative OSATs would be achieved in the next training year. Now, trainees not obtaining 1 summative OSAT for new procedures introduced into the curriculum in 2019 should be awarded an outcome 10.1 and achieve the required OSATs in the next training year.

5) Trainees unable to attend a recommended course due to COVID-19 should be awarded an outcome 10.1 with this requirement documented in their PDP for the next training year.

6) Remove the requirement to complete ATSM theoretical courses for ST7s approaching their final CCT. All other elements of the ATSMs must be completed

7) Remove the requirement for ST7s to complete a leadership and management course.

8) Remove the requirement for ST7s who have moved to the 2019 curriculum to achieve OSATs for surgical wound debridement.

**All other curriculum requirements and practical competencies remain the same.**

So, an ST7 trainee could be awarded an outcome 6 if all curriculum requirements have been met and they have a satisfactory ESR but lack either an ATSM theoretical course or leadership and management course.