

F1 Annual Review of Competence Progression (ARCP)

Guidance for F1 Doctors

This document sets out the process for the review of the information submitted by F1 doctors to evidence that they have achieved the required standard to complete foundation year 1; they have met the requirements of the foundation programme curriculum; the outcomes determined by the Education Committee of the GMC; they have achieved the required standard to progress to foundation year 2, and have satisfied any additional STFS requirements.

1. You must complete all ARCP requirements and have your ePortfolio ready for review by the ARCP panel by **31 May 2017. This is the ARCP census date and any evidence submitted after this date will not be considered by the ARCP panel.** The requirements for F1 sign off are documented in section 7, Table 1, pages 49-50 of the UKFPO Reference Guide 2016 (available on the [UKFPO web page](#)).
2. It is recommended that you meet with your educational supervisor during April to review your ePortfolio, identify any gaps and agree an action plan to fill these prior to the ARCP deadline. It is your responsibility to maintain your ePortfolio to provide evidence that you have met the requirements for satisfactory completion of your F1 year.
3. You must also complete an F1 Form R which is available in ePortfolio. This is a self-declaration and allows you to formally record and demonstrate that you are up to date and fit to practise. The form will require you to provide information on: a. Scope of practice, b. Significant events, c. Complaints, d. Compliments, e. Probity/Health.
4. In addition to this, an integral part of the ARCP process is the completion of an F1 to F2 Transfer of Information form which must be reviewed and signed by your FTPD and submitted to your local FP administrator by **31 May 2017**.
5. For administrative purposes, F1 ARCP is completed before the end of F1. It is, however, subject to satisfactory completion of the entire F1 programme. All ARCP outcomes are, therefore, awarded provisionally.
6. The ARCP panel will meet on behalf of the local foundation faculty group to review your ePortfolio against the checklist of evidence required (see Appendix 2).
7. The ARCP panel will complete the ARCP outcome form in ePortfolio. For further information see the STFS foundation ARCP training module, designed for panel members but also of interest to foundation doctors – see [ETFT ARCP training module](#).
8. The possible F1 ARCP outcomes are set out below:

Outcome Code	Description
1	Satisfactory completion of F1.
3	Inadequate progress – additional training time required, generally 1
4	Released from training programme.
5	Incomplete evidence presented – additional training time may be required to complete, typically 2 weeks.
8	Time Out of Foundation programme.
Other	e.g. working LTFT, on sick leave, missed review, etc.

9. If you submit incomplete or otherwise inadequate evidence (by the ePortfolio census date – 31 May 2017) the panel will not make a decision about your performance or progression but will issue an Outcome 5 – Incomplete evidence presented. You will:
 - a. be required to explain to the panel, in writing, the reasons for the deficiencies in the documentation
 - b. be allowed a 2-week window to submit additional evidence to the ARCP panel (via ePortfolio, if appropriate)
 - c. receive a new ARCP outcome based on the additional evidence provided but the original Outcome 5 will remain as a part of your record.

Please note that you are not able to appeal against an Outcome 5.

10. The foundation school director/associate director will review the outcome awarded and, once approved, STFS will issue the Foundation Year 1 Certificate of Completion document if you have received an approved satisfactory outcome (Outcome 1).
11. If the ARCP panel members reviewing your ePortfolio feel unable to recommend sign off, as the requirements have not been met, you will be given an appropriate outcome. The panel will also document recommendations about further training and support which may include an extension for remedial training. The FTPD will meet with you to explain the decision and the outcome.
12. You should electronically sign the ARCP outcome form within the ePortfolio (by clicking on “Add link” at the bottom of the submitted form and selecting “Add electronic signature”) as soon as possible once you have received notification from the Foundation Administrator and ideally before **21 June 2017**. Please note - your final certification cannot be issued to you without this electronic signature.
13. Foundation doctors may appeal against the decision of the foundation ARCP panel, which is acting under the guidance of the deanery/foundation school. The process for appeals is described in the FP 2016 Reference Guide (p57). The STFS Appeals Policy is published on the STFS website: see [STFS ARCP Guidance](#)
14. ARCP outcomes are provisional until reviewed and confirmed by the STFS Foundation School Director/Associate Director. Once approved, a Foundation Year 1 Certificate of Completion document will be produced and issued to you via your ePortfolio by 11 July 2017.

GMC Registration

15. All F1 doctors should read the GMC guidance regarding full registration: see [Applying to join the Register](#)
16. UK Graduates should contact their medical school (contact details will be available on the GMC website) for advice on completion and deadline for submission of their GMC Certificate of Experience. If you have received a satisfactory outcome, STFS will send your Foundation Year 1 Certificate of Completion document to your medical school of graduation. If you have received an unsatisfactory outcome, STFS will send a copy of your ARCP outcome form to your medical school with advice on your anticipated completion date.
17. EEA Graduates should note that STFS will issue their Foundation Year 1 Certificate of Completion document and this will be available in the ePortfolio. It is the responsibility of the EEA graduate to forward their Foundation Year 1 Certificate of Completion document together with their Certificate of Experience to the GMC.
18. Non-EEA Graduates should read the GMC guidance regarding full registration arrangements.
19. You will also be required to log on to the GMC website, pay the fee for full GMC registration, download the Certificate of Experience and send this directly to the appropriate person in your graduating medical school (a list of medical school contacts dealing with full registration will be available on the GMC website).

Appendix 2: Requirements for satisfactory completion of F1

	Requirement	Notes
1	Provisional registration and a licence to practise with the GMC	
2	Completion of 12 months of F1 training by August 2017 (taking account of allowable absence)	The maximum permitted absence from training (other than annual leave) during the F1 year is 4-weeks (20 days). (See GMC guidance on sick leave for provisionally)
3	A satisfactory educational supervisor's end of year report.	The report should draw upon all required evidence listed below.
4	Satisfactory educational supervisor's end of placement reports.	An educational supervisor's end of placement report is not required for the last placement; the educational supervisor's end of year report replaces this.
5	Satisfactory clinical supervisor's end of placement reports	If the F1 doctor has not satisfactorily completed one placement but has been making good progress in other respects, it may still be appropriate to confirm that the F1 doctor has met the requirements for satisfactory completion of F1. The last end of placement review must be satisfactory.
6	Satisfactory completion of the required number of assessments: <i>The minimum requirements are set out in the Curriculum. The deanery/foundation school may set additional requirements.</i>	Team assessment of behaviour (TAB) (minimum of one per year).
		Core procedures (all 15 GMC mandated procedures)
7	A valid Immediate Life Support (ILS) or equivalent - certificate	If the certificate has expired, it may be appropriate to accept evidence that the doctor has booked to attend a refresher course.
8	Evidence of participation in systems of quality assurance and quality improvement projects.	Foundation doctors should take part in systems of quality assurance and quality improvement in their clinical work and training. This includes completion of the national trainee survey and any end of placement surveys.
9	Completion of the required number of Supervised Learning Events. <i>The minimum requirements are set out in the Curriculum. The deanery/foundation school may set additional requirements</i>	Direct observation of doctor/patient interaction: • Mini CEX • DOPS (minimum of nine observations per year; at least six must be mini-CEX).
		Case-based discussion (CBD) (Minimum of six per year / two per placement)
		Developing the clinical teacher (Minimum of one per year).
10	An acceptable attendance record at generic foundation teaching sessions	It has been agreed that an acceptable attendance record should typically, be 70%. However, if the F1 doctor has not attended 70% of teaching sessions for good reasons, it may still be appropriate to confirm that the F1 doctor has met the required standard e.g. making up missed sessions by completion of appropriate on-line learning modules. If there are concerns regarding engagement or if attendance is below 50%, the FTPD should discuss this with the STFS Director.
11	Attendance at the appropriate level of Safeguarding Children training	STFS requirement
12	Attendance at an approved simulation course	STFS requirement to attend a day of simulation
13	F1 – F2 Transfer of Information (TOI) form	STFS requirement
14	Signed probity and health declarations	This is in addition to the Declaration of Fitness to Practise required by the GMC when applying for full registration.
15	Leadership assessment	All STFS F1 doctors are strongly encouraged to have completed a leadership assessment within the ePortfolio (LEADER tool).
16	SCRIPT prescribing modules	Complete a minimum of 6 prescribing modules.
17	F1 Form R	To be completed via ePortfolio.