

Gwent and South Powys- Handbook for new starters

Welcome to the Gwent and South Powys GP training programme. This trainee handbook is to go alongside the information on the deanery webpage and help from the buddy scheme.

This can be found at www.Gwentandsouthpowysgpscheme.co.uk

Here you can find more information on the different placements available, the official handbook and the teaching timetable.

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GUIDELINES

NICE CKS

These are the evidence-based recommendations for the management of many conditions and diseases. They are useful to guide both your knowledge for the applied knowledge test and for clinical management.

EG. Search 'NICE CKS Hypertension' 'NICE CKS Pneumonia'

Microguide

This app provides your local antibiotic guidelines for infective conditions, which you can download.

Select your guide by choosing the appropriate health board.

Aneurin Bevan: YYF, Royal Gwent, Grange University Hospital

Cwm Taf: Prince Charles Hospital

You will also need to select 'primary' or 'secondary' care.



BNF

This is the app to use for medications with indications, dosing and side effects. The app will provide you with both the adult and paediatric books.



Aneurin Bevan paediatric guidelines

This website gives you access to some healthboard guidelines and UHW in Cardiff. It is also very useful for patient leaflets for common conditions such as bronchiolitis/croup etc.

<https://abbhealthiertogether.cymru.nhs.uk/professionals/gp-primary-care-staff>

MDCalc

This is another Useful app/website for calculating various scores quickly eg. Feverpain score for sore throat, Wells score for PE.

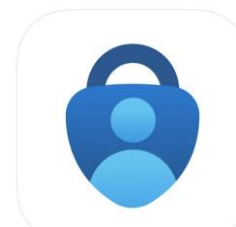


Emails

You will each be set up with an NHS email address.

To get this set up to access on your phone:

1. Download 'Outlook' and 'Authenticator' app
2. Set up multi-factor authenticator on app
3. Add account onto outlook
4. Enter your NHS email address log in details
5. Complete the authentication process



Ensure your phone is password protected and as extra security set the outlook app up with face recognition/password protection and two-factor authentication.

If you have any issues with setting this up the IT department should be able to help with this. To call them, go through your hospital switchboard.

EMPLOYMENT RELATED ADMIN

Expenses

Working for NHS Wales entitles you to claim certain expenses during your training. These are from Single Lead Employer and so the Programme Leads and your individual practices are unlikely to be aware of the rules. Some things you can claim for include:

- Relocation expenses
- Travel expenses
- Study leave expenses
- Eye Tests

To find if you are eligible for relocation and to find how to apply:

<https://nwssp.nhs.wales/ourservices/employment-services/all-wales-relocation/>

Website to claim:

www.sel-expenses.com (there is also an app although it's a bit harder to navigate!)

Company ID: NHSWales

Username: Employee number

Password: Chosen when set up

Usually you will be emailed regarding your new expenses account. If you have not received an email then email:

Nwssp.traininggradeexpenses@wales.nhs.uk

Queries

If you are unsure if something is able to be expensed, you are able to arrange appointments with the expense team to discuss.

Virtual appointment 1:1

1:1 session to discuss individual issues with expenses, how to make a claim, etc.

<https://outlook.office365.com/owa/calendar/Office@wales.nhs.uk/bookings/s/hQwCVynoo0SjNPH-8KqIZQ2>

Virtual Appointment - Group Sessions

Overview of expenses and what to expect as a user, recommended for new users.

<https://outlook.office365.com/owa/calendar/Office@wales.nhs.uk/bookings/s/YWHtdqs96Em5F0EXXnFCIg2>

You have to apply to be approved for expenses for each expense type. Eg. Junior doctor relocation, junior doctor excess travel. This has to be done before you can submit a claim. Not needed for study leave expenses.

Travel expenses

Firstly, to be entitled to claim travel expenses, you need to have business car insurance for your vehicle and to have your car added to your expenses account. You can claim excess mileage if you have had to travel beyond where your 'Base' is.

However, if you live a large distance from home to Base, any small journeys less than this will not be included as excess mileage. Your Base is set by SLE. If you think it is incorrect, then discuss with them before claiming.

For example, you live in Cardiff and work at Prince Charles hospital (Base). If you have clinic in Royal Glamorgan hospital in the morning with clinic in YCC in the afternoon, you may not get excess mileage as each section of the journey is shorter than your home to base journey.

Home to base mileage distance will be deducted from every step you input on the excess mileage claim.

Your base hospital should be the closest hospital to your home that is listed on Intrepid as a placement for you.

Study Leave/Expenses

Study leave is to be requested on Intrepid. You must inform your rota co-ordinator and clinical supervisor. Once study leave has been approved and you have attended, then you can claim expenses. You must keep any relevant receipts.

You should have received a log in for intrepid at the start of your training.

Eye Tests

You are able to claim for the cost of an eye test and HEIW will contribute up to £50 toward the cost of glasses if they are to be used for computer usage.

You must complete the 'Display Screen Equipment User form' with your line manager and the optician.

Payslips

Each monthly payslip will be uploaded onto your account on ESR. You should be given your ESR log in details via email. If you do not receive them, you can contact the ESR team via this link.

<https://my.esr.nhs.uk/dashboard/web/esrweb>

ESR help: esrhub.wales@wales.nhs.uk.

Tax back

You can claim tax back for your RCGP membership, either 20% or 40% dependent on how much tax you pay. BMA memberships can also be tax deductible.

If you complete a self-assessment tax return then it's included on the employment page. If you do not file a tax return either contact HMRC directly or complete a P87 form.

Incremental credit

If you have prior experience as a qualified doctor (either overseas or within the UK), you may be able to apply for incremental credit. If approved, you would be moved up the pay scale to take your previous experience into account.

This application needs to be completed within 3 months of starting. You should receive an email from your Single Lead Employer with more information when starting. If you do not receive this, you can ask through the following email address for an application form and what documents they require.

Support@single-lead-employer.zendesk.com

BMA

This is the UK doctors/medical student union. They can provide help with contract related issues and other guidance. Look through their website for more information. If you are new to the UK, then membership is free for the first year. They also have a e-resource available aimed at people new to the UK.

LIFE IN THE UK

The following section is to try and help those of you who are new to the UK to organise the practical parts of settling. There is also lots of information to be found on the VTS Handbook on the deanery website.

Accommodation

There are a number of ways to find accommodation in the UK depending on your situation and is something your buddy may be able to help you with.

There are a few websites which are useful for searching for rental properties.

www.Rightmove.co.uk

www.Zoopla.co.uk

Many estate agents will list their properties on these websites. If you know the area you would like to live in, you can also go through the estate agents working in that area directly. Estate agents are usually happy to take your details and your requirements and can contact you when any new properties become available.

If you are new to the UK, it is possible to look for a property in advance through these websites. The estate agents are often able to provide you with a video tour of the properties, if you are not in the country and have no-one to view them on your behalf.

If you are new to the UK and don't have payslips, references, etc., then they will assess your eligibility for a property using the following affordability test.

- Monthly rent x 30 = minimum salary requirement for affordability testing
- Eg. Monthly rent £1000/pcm x 30 = Minimum £30,000 salary

You will therefore require confirmation from Single Lead Employer of your type of contract and your salary. There will also need to be proof of your immigration status. If you are wanting to rent a property based only on a video tour, they will also request that you sign a non-viewing indemnity form.

People may go through private landlords directly, but be careful to ensure the contracts are fair and you are happy with the property beforehand.

Alternatively, you may prefer to move into temporary accommodation on arrival and view properties on arrival to the country. This is usually cheaper through websites such as Airbnb, rather than hotels, but ask for a long stay discount.

Alternatively, if you want to house share with others, www.spareroom.com can help you find available rooms in existing rentals.

There are a lot of options available to you and it can be overwhelming, even for just choosing an area. Please ask your buddy for advice if you need it.

Driving licences

The rules for getting a UK driving licence is specific for each country. **Please** check the website for information relevant to you.

<https://www.gov.uk/exchange-foreign-driving-licence>

Word of warning: the waiting lists for the practical driving exams can be very long so look into this with plenty of time, if this is something you would require.

Childcare

This is covered in the VTS handbook and so please refer to that. Try to organise this as early as possible as places are often limited. The links on there to the websites for the area you live in provide a lot of information. If you are struggling to find somewhere, reach out for advice early.

Bank account

Try and open this as soon as possible when you arrive. You'll need a UK bank account for payroll to pay you. The following website can give you advice; there are a number of different banks to use in the UK. You will need proof of UK address to open an account.

<https://www.citizensadvice.org.uk/wales/debt-and-money/banking/getting-a-bank-account/>

THE GP TRAINING PROGRAMME

There is a lot of information on the deanery website and I have avoided duplicating a lot of that. This is mostly to give you an overview of the FourteenFish portfolio.

Medical indemnity

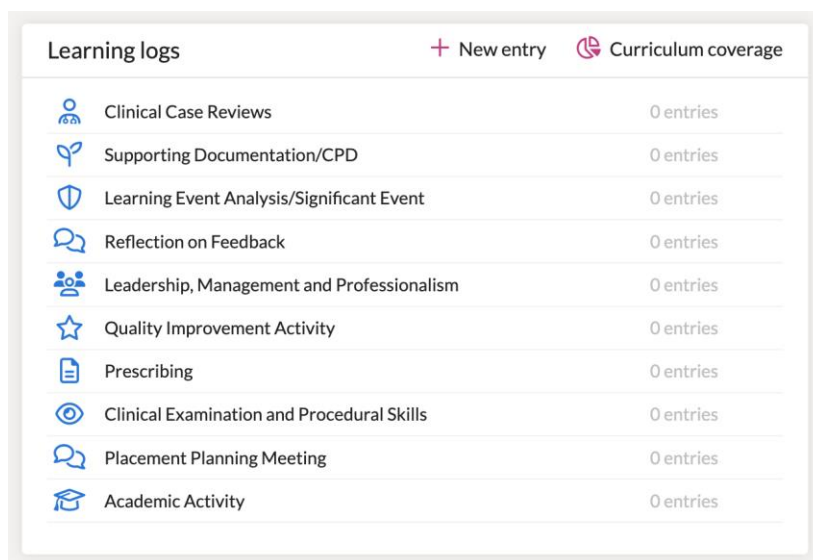
You will need to arrange medical indemnity for yourself in addition to the NHS indemnity cover provided and is a reduced rate for GP trainees. The main companies used are MDU or MPS.











OOH

Whilst on GP placements you will have to complete 36 hours of out of hours shifts per 6 months. You will be given an induction at the start of your training on what is expected during OOH and how to book shifts.

Using Fourteenfish

The main emphasis should be to engage with the portfolio as you go along; don't wait until your ESR (sign-off) to try and put everything on.



Learning logs		+ New entry	Curriculum coverage
	Clinical Case Reviews	0 entries	
	Supporting Documentation/CPD	0 entries	
	Learning Event Analysis/Significant Event	0 entries	
	Reflection on Feedback	0 entries	
	Leadership, Management and Professionalism	0 entries	
	Quality Improvement Activity	0 entries	
	Prescribing	0 entries	
	Clinical Examination and Procedural Skills	0 entries	
	Placement Planning Meeting	0 entries	
	Academic Activity	0 entries	

Clinical case reviews

This is where you will reflect on your management of patients. You will want to choose a variety of different patients to reflect on to cover the whole range of clinical experience groups and capabilities. By the time it comes to your 6 month ESR you will need to have filled each of those white circles (lozenges) and so you need to be strategic on which cases you reflect on.

I will discuss personal development plans (PDP) further through this handbook, but you will need to have a clinical case review to link to each of your PDP goals.

Wellmedic have a YouTube video with some pointers on how to complete a clinical case review. Some key areas to think about:

- Brief description should be brief; just outline the case.
- Choose capabilities which it demonstrates and be mindful of which capabilities you need to show more of.

Choosing capabilities

Ensure you are selecting cases which help you demonstrate a range of capabilities. Using the word descriptors, incorporate these into the explanation of your assessment. Select up to 3 capabilities for each case.

Capabilities that this entry provides evidence for (max 3) ▲

Capability:

Justification: I recognised when the child was uncomfortable with the examination and took steps to ensure the patient and their parents were happy and felt safe with the examination by using appropriate communication skills and built up a good rapport with the child. I recognised which aspects of the examination they were most upset with and put them at ease. I proficiently identified the scope of the examination to investigate the patients problem.

Capabilities that this entry provides evidence for (max 3) ▲

Capability:

Justification: I used pattern recognition to identify the diagnosis of bronchiolitis quickly. I remained aware of the limitations of pattern recognition and took into account the patients past history of admission with bronchiolitis. I was able to reflect on the decision of whether to send the patient to hospital and was able to work alongside the parents to discuss their options. I ensured they were comfortable and competent to recognise the signs of deterioration and when to take their child to hospital.

Briefly reflect on the case and your performance, explain what you think you did well and what you would like to improve on or stop.

Reflection and Learning needs

Reflection: What will I maintain, improve or stop?:

I will continue to work collaboratively with patients and their relatives to build joint management plans that are safe and each party is happy with. I will improve my knowledge of available resources to signpost parents to for each condition.

Learning needs identified from this event:

I will look into the [healthboard](#) website Healthier together to review which patient leaflets are available.

Clinical examination and procedural skills

Making a decision/diagnosis

Supporting documentation/CPD

This is a good section to put any certificates from teaching or learning you've done and to reflect on it there. When recording your Out of Hours ensure you title each session with how many hours you did, how many hours are remaining.

Eg. OOH 6 hours- 30 hours remaining/6 months.

You will receive more detailed information regarding OOH in a separate induction session.

Clinical examination and procedural skills (CEPS)

There are a number of examinations listed in this section; you do not have to complete all of them every year. Instead, you need to show competency by the end of ST3 which means 'competent to perform the procedure unsupervised'. It is a good idea to try and get some completed as you go and not try to get them all signed off in one day.

Case based discussion (CBD)

There needs to be 2 CBD's per placement. These are discussions with a supervisor regarding your management of a particular patient. Each supervisor likes them done slightly differently. As a guide you should expect to present the case, your examination findings, differential diagnosis and management plan. You must also expect to have discussions regarding each part of this. Choose a patient you managed independently and consider which capabilities it has best demonstrated.

COTS/Mini CEX

COTS are recorded consultations which are only done during GP placements. Download the Fourteenfish consult app and gain patient consent at the start and end of each video. It's a good idea to record more than needed in order to get comfortable with being recorded. You can share the consultations you want to review with your supervisor. You don't have to share them all and sometimes re-watching them on your own can be good for your own reflection.


If you are in hospital placements, these COTS are replaced by mini-CEX, where you are observed with a patient by a supervisor. You should aim for one of these to be with your clinical supervisor, the second could be with anyone ST4+.

Preparing for your ESR

You have an interim ESR which is towards the end of your first 6 month placement. You then have your full ESR towards the end of your first year of training.

For each ESR, whether interim or main, you will need to complete the following list. You can access each page by clicking on each of these hazard triangles.

To be completed before submission

-  Please complete the Clinical experience coverage
-  Please complete the Educational assessment progress
-  Please complete the Health: Regulatory and Voluntary Proceedings
-  Please complete the Probity: Convictions and Disciplinary Actions
-  Please complete the ESR sign off process
-  Please complete the Time out of training
-  Please add at least 3 action plans (click on the relevant capability)
-  Please rate and mark as finished all the Capabilities. (Fitness to practise, Maintaining an ethical approach, Communication and consultation skills, Data gathering and interpretation, Clinical examination and procedural skills...)

Clinical experience coverage refer to the 'lozenges' mentioned earlier. You will need to have enough entries to have covered each capability and clinical experience groups. You may not have had the opportunity to see enough of each clinical experience group due to the

placement you have been on eg. Older adult if you have been on paediatrics. There is the option to write an explanation when clicking on 'complete the clinical experience coverage'.

Educational assessment progress

Helpfully, there is a table showing how many of each entry you need per post.

	ST1	ST2	Current review	Total
Clinical Case Review	41/36	27/36	1/16	68/108
Mini-CEX / COT / Audio-COT	6/4	3/4	1/2	9/15
CbD / CAT	8/4	2/4	0/2	10/13
Colleague Feedback	1/1	0/1	0/1	1/3
Colleague Feedback: Leadership	0	0	0	0/1
CSR	2/1 per post	0/1 per post	0/1 per post	2/3
Patient Feedback	0	0	0	0/1
QIP	0/1	0	0	0/1
QIA	1/1	0/1	0/1	1/3
All trainees must demonstrate involvement in Quality Improvement at least once a year.				
Placement Planning Meeting	2/1 per post	1/1 per post	0/1 per post	3/3
Learning Event Analysis (LEA)	1/1	0/1	0/1	1/3
Prescribing Assessment	0	0	0	0/1
Leadership	0	0	0	0/1

The column for current review is for the 6 month block you are on currently.

Prescribing/Leadership/Patient feedback are for ST3.

1x QIP needed during training, usually best during your general practice posts in ST1/2. QIA in each year where a QIP has not been completed.

Colleague feedback is best to do towards the end of a placement but allow plenty of time for people to complete it.

In your **full** ESR, you will need to complete your form R part A and B which are found on your intrepid log in. You need to have recorded any time out of training (eg. Sick leave) on both this form R and your portfolio and they will need to match up. Form R does not need completing for interim ESR's.

Capabilities

The number in brackets is the number of entries linked to this Capability whereas the pink number is the entries linked as evidence.

Capability	Trainee	Learning logs	Assessments	MSF
Fitness to practise	-	0 (0)	0	0
Maintaining an ethical approach	-	0 (0)	0	0
Communication and consultation skills	-	0 (0)	0	0
Data gathering and interpretation	-	0 (0)	0	0
Clinical examination and procedural skills	-	0 (0)	0	0
Making a decision/diagnosis	-	0 (0)	0	0
Clinical management	-	0 (1)	0	0
Managing medical complexity	-	0 (1)	0	0
Working with colleagues and in teams	-	0 (1)	0	0
Maintaining performance, learning and teaching	-	0 (0)	0	0
Organisation, management and leadership	-	0 (0)	0	0
Practising holistically, promoting health and safeguarding	-	0 (0)	0	0
Community orientation	-	0 (0)	0	0

Rating and finishing all capabilities: Click on each capability. It will show you which entries you have linked to this capability. Select those which best demonstrate this capability to link as evidence. Remember to look at the word descriptors to help you reflect on your level in this capability.

You will need to choose at least 3 capabilities that you would like to improve on and create an action plan for how you will do this in your next placement.

Personal development plans (PDP)

You are encouraged to discuss these with your supervisor at your placement planning meeting. If you have identified a learning need then a PDP is how you aim to address this.

● Goal 1: Palliative Care Review this goal >

● Goal 2: 6 week baby checks Review this goal >

● Goal 3: Motivational interviewing Review this goal >

If not all of your agreed PDP items from your previous PDP are above, you can manually add a new agreed PDP entry or you can pull forward agreed PDP entries from a previous PDP.

You can view all past PDP entries on your All entries screen.

In your ESR, you will have to review the goal to reflect on whether you have met this goal or not. Remember to have done a clinical case review for each PDP which you 'link' to show your progress in meeting this goal.

If there have been reasons you have not been able to complete a PDP, then in your ESR you are able to explain what difficulties you faced. However, you should not need to carry every goal over. The aim would be to complete them.

For example, with Goal 1: Palliative care. You may have found were able to gain some experience in completing community DNA CPR's and having discussions with relatives but you did not get experience in prescribing. This goal could be carried over and built upon to reflect your new learning need.

If you recognise during your placement you are going to have problems completing your PDP, it is good to discuss these with your supervisor early and think how you may be able to make progress on them.