GP training information

Twyford Surgery is an approved/accredited learning environment.

Throughout the year we may host undergraduate students such as those completing degrees in Paramedic Sciences or Physician Associate students from the University of Reading.

We may also host Medical Students from London or Oxford from time to time.

These learners are 'preregistration' and will therefore either be solely observing clinicians work in practice or may on occasion be consulting patient under the direct supervision of a senior clinician.

Twyford Surgery is also a training practice, and this means we will be helping to train the GPs of the future. These doctors in training are referred to as Residents.

They are fully qualified doctors who have been working for a minimum of 2 years already in hospital positions. A final year GP resident will have a minimum of 4 years postgraduate experience as a fully qualified doctor already. Some residents will have spent time working in other jobs and so may have much more experience beyond these 4 years.

The following is some important information on the background to resident GPs, sometimes also referred to as Registrars, and some special circumstances that relate to their training and requirements to become full qualified independently practicing GPs.

<u>Pathway through the training system</u>

To become fully qualified independent GPs, doctors need to go through the following:

1. **Medical School** – this is normally 5 years. You are not a doctor until you have graduated from medical school
2. **Foundation years**. Called FY1 and FY2 (Foundation Year 1 and 2). These are two years in which newly qualified doctors rotate around posts. These are normally hospital posts, in which they may work four months in each of several specialities. They may have a GP placement as part of these years. They are qualified doctors at this stage and are paid a salary. They must demonstrate various competencies to progress.

3. **Specialty training.** Once the foundation years are completed, doctors can choose to train to become a GP. They can do this in three years – called ST1, 2 and 3 (speciality training years 1-3). The first two of these years comprise a combination of posts in hospital departments and in GP surgeries. For the final year, they are attached for the whole year to a GP practice, as an ST3 trainee.

Exams

To progress to be a qualified GP, residents must pass various exams. There are 2 exams to complete to gain an MRCGP qualification (Member of the Royal College of GPs). This qualification allows GPs to work as fully-qualified, independent GPs. These are the AKT (Applied Knowledge Test – which is a written exam), and the SCA (simulated consultation assessment – which is a practical exam). Residents at the practice may therefore be preparing for these exams.

Some residents choose to take extra qualifications, although these are not mandatory, such as diplomas in various specialities.

In addition to the above exams, they need to complete an e-portfolio online of their learning experience, reflection on this, and skills gained, etc.

Special circumstances in consultations

JOINT CLINICS

Residents will spend time sitting in on other clinics to observe other's consulting skills or learn more about specialist clinics. They will also sometimes be running "joint" surgeries with their trainer – i.e. where both Dr Hey or Dr Agarwal and the trainee are seeing patients together. This allows direct observation of either the Resident consulting, or the Resident observing the consultation methods of their trainer and joint reflection and learning on cases.

VIDEO RECORDED CLINICS

The other special situation for Residents is that they will need to record some of their consultations, and patients will be notified on days that this is happening. They will be notified electronically when the appointment is booked and there will be a consent form to complete.

Only the trainer and resident will watch these videos and they are for the sole purpose of assessing and reviewing consultation skills' of the trainee. These recorded consultations without the trainer present (as with joint clinics as above) provide an invaluable different perspective on consulting skills to be reviewed, and can really help highlight specific points (good and bad) for the resident to observe themselves doing and be able to reflect upon.

Videos are deleted in a timely manner and held as confidentially as any medical records are.

There is no obligation for patients to agree to this, and you have the right to decline if you prefer to do so.

We thank you all for your patience and input with helping us to train the GPs and healthcare professionals of the future. We wouldn’t be able to do it without your support.