Dated 17/04/2020

***Sent to all* *GPSTs, APDs, TPDs, MEMs, DMEs, ES’, CS’, Patch Teams and GP Admin Team on behalf of Dr Simon Newton***

Dear Colleagues,

I am writing with a further update on training in the current Covid crisis. Modelling of Covid cases now seems to suggest that the surge in Severn and the SW will be later than we had first thought. Colleagues tell me that the north of the patch (Bristol, Swindon, Gloucester) is starting to see larger numbers of patients, and ICU pressures are becoming severe, but further west it is still quieter than previously anticipated at this stage. Nationally I understand that the SW’s peak will be later than other regions, and the peak may be less high. My HEE admin team will be supporting NHSE and North Bristol Trust by working at the new Nightingale Hospital to onboard their new starters. A huge thank-you to all our trainees and supervisors for the hours and the effort you are all putting in to look after our patients in these unprecedented times.

There are some areas of GP training where I think we can now provide further clarity.

**WPBA/ARCP**

* We now have detailed guidance on ES responsibilities and ARCP processes for GPST3s finishing this summer. See: [https://www.rcgp.org.uk/training-exams/training/mrcgp-workplace-based-assessment-wpba.aspx](https://protect-eu.mimecast.com/s/NbDfCmYgRC5n6D5IOfqA8?domain=eur01.safelinks.protection.outlook.com)
* We have also just received guidance from the RCGP on WPBA requirements and ARCP processes for all trainees not due to CCT before August. This is being circulated separately with a guidance note from John Edwards, our ARCP lead.
* We do not however yet have information on processes for those trainees due to CCT in the next few months, but who have yet to pass one or both of the CSA/AKT. We will share that with you as soon as we hear.

**Trainee Redeployment**

* We have slightly amended our approach to redeployment of trainees with significant skills and experience in Anaesthetic and ICU. If a Trust has a need for staff to work in these specialties we are prepared to release GPSTs with this experience from their GP posts, pending their agreement. We would also need agreement from their host practice, but the expectation will be that the practice releases them if they are needed in the Trust. This move should be primarily driven by a Trust’s needs, rather than a trainee’s wants.
* Conversely it is possible that trainees who a Trust is struggling to deploy, i.e. those self-isolating and those needing to work remotely, could be moved back into primary care where remote working/consulting is becoming increasingly the norm. The School will explore these on a case-by-case basis.

**Trainee Support**

* All programmes are holding virtual support sessions for GPSTs. We are also recruiting retired educators to support out programme teams as they are pulled back by their practices. We now have 10 ex-educators currently signed up; more news when the scheme goes live
* I have discussed with the GPST committee the current suspension of the 7/3 clinical/educational split of the working week and the potential for trainees to work up to 10 clinical sessions (see last update). More detailed guidance on the supervision and support of GPSTs in GP placements during Covid is still awaiting national approval, but in the meantime, trainees should as a minimum have opportunities for debriefing after surgeries and time to reflect on their work each week. Trainees must still be supervised at all times, and the level and type of this supervision (direct, near or remote) should be agreed with the trainee and reflect the trainee’s level of competence and confidence.

**Trainees working additional hours**

* Trainees working in GP practices can be paid for additional hours beyond the 40 hour working week (trainees can work up to 48 hours a week, or up to 56 hours a week if the trainee waives their EWTD rights – more information on the process for this can be sought from [ghn-tr.gptrainee@nhs.net](mailto:ghn-tr.gptrainee@nhs.net)). However there is as yet no national agreement on how these payments should be made and who will ultimately foot the bill. Currently trainees can document additional hours worked and therefore claim additional payments by submitting an exception report. The Lead Employer for our trainees (Gloucester Hospitals) is setting up a simple system to allow this to happen. More news soon.

My previous updates and a variety of documents supporting our work during this time are available at: <https://primarycare.severndeanery.nhs.uk/training/severn-gp-covid-19-faq-and-resources/>

This continues to be a unique time for the NHS as we struggle to manage a pandemic under significant diagnostic and logistic constraints. I hope you all manage to grab some real or virtual downtime with family and friends and that you can stay safe.

Best wishes,

**Dr Simon Newton, Head of School of Primary Care (Severn) FRCGP MMedEd**

**HEE (Severn PGME)**

Park House **|** 1200 Bristol Parkway North**|**Newbrick Rd**|** Bristol **|** BS34 8YU

E: [simon.newton@hee.nhs.uk](mailto:simon.newton@southwest.hee.nhs.uk)

W: [www.severndeanery.nhs.uk](http://www.severndeanery.nhs.uk/)

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