

CESR General Medicine



Dr Lauren Davies

Background

- Undergraduate training in RSA
- Specialist training in RSA
- GMC registration since 2001
- Moved to UK in 2017
- LAT
- Acting consultant since 2018

Pitfalls and lesson learnt

I DON'T
Sugar Coat
THINGS I'M NOT
WILLY WONKA



Degrees

- Translated into English- by court or council appointed translators/ reputable commercial translation services
- Send original and translated version must be stamped and signed by translation services
- Authentication – done by lawyer unless been authenticated in person at GMC

Professional Experience

- Exact dates that match CV and job descriptions
- Need hospital addresses

Registration and Licensing history

- Excludes GMC
- Only last 5 years
- Certificate of Good standing- 3/12 from issue date
- Must be in English

Referees

- One must be your current CD
- Others up to you
- Send them the information you want in their structured report
- GMC will use their registered e mail regardless of the e mail address you provide- given 21 days to reply

How ever can my
brilliance be captured
in a one-page resume?



Structured Report for specialty equivalence

1. The applicant	
Name of applicant	
GMC reference number	
Specialty of applicant	
Referee details	

SAMPLE

2. Your credentials

If you are returning this form by post, the official hospital/university/institute stamp must be stamped over this section and **every page** of this report.

If you do not have an official stamp please submit this report under cover of a letter on headed paper from your hospital/university/institute.

You do not need to stamp this form if it is being returned by email

Stamp

Please state

- Your specialty, qualifications, current position and place of work;
- Your position and place of work when the applicant was working with you;
- Your relationship to the applicant for example supervisor to trainee, colleague to colleague, Medical Director to specialist.

3. Knowledge, skills and performance (Domain 1)

3a) Level and maintenance of professional performance. Please list below the applicant's post(s) to which this report applies giving for each post listed:

- The title of each post
- Name of the hospital/institute
- Start and end dates
- A description of the applicant's role and level of responsibility (both clinical and managerial if applicable).

3b) If you think the applicant has the full range, depth, breadth of experience and skills to those required by the CCT curriculum (if applying in a CCT specialty) or a substantive consultant in any of the UK Health Services (if applying in a non CCT specialty), please list from your **direct observation** how the applicant demonstrated these and what evidence was available.

If you do not think the applicant has the full range, depth, breadth of experience and skills required, please list:

- The skills and competencies not covered in the above posts
- The specialty areas where you have not observed or have no direct knowledge of the applicant; or
- Where the applicant did not demonstrate the appropriate depth and breadth of skills and competencies.



3c) Please explain whether the applicant has demonstrated application of knowledge and experience to practise (for example recognising and working within the limits of their competence). In particular, how they:

- Keep up to date with Continuous Professional Development (CPD)
- Apply the skills and attitudes of a competent teacher/trainer
- Make appropriate referrals to colleagues and keep clear and legible records?

If so give examples from your **direct observation** of working with the applicant.

4. Safety and quality (Domain 2)

4a) Has the applicant put into effect systems to protect patients and improve care (for example by taking part and responding to the outcome of audit, appraisals, performance reviews, risk management and clinical governance procedures, and reporting adverse drug reactions or concerns about risks to patients)?

If so, please explain how the applicant has demonstrated this and give examples from your **direct observation** of working with the applicant.

4b) Does the applicant monitor and respond to risks to safety and safeguard and protect the health and wellbeing of vulnerable people (for example responding to risks posed by patients and following infection control procedures)?

If so give examples from your **direct observation** of working with the applicant.

4c) Has the applicant protected patients and colleagues from any risk posed by their health?

If you are aware of any relevant circumstances, please explain whether the applicant has demonstrated this. If so give examples from your **direct observation** of working with the applicant.

5. Communications, partnership and team working (Domain 3)

5a) Does the applicant communicate effectively with patients (for example keeping them informed about progress of their care) and colleagues in clinical and management situations within and outside the team (for example passing on information when patients transfer, encouraging colleagues to contribute to discussions)?

Please explain whether the applicant has demonstrated this. If so give examples from your **direct observation** of working with the applicant.

5b) Does the applicant work constructively with colleagues by supporting them, delegating effectively, acting as a positive role model and providing effective leadership?

Please explain whether the applicant has demonstrated this. If so give examples from your **direct observation** of working with the applicant.

5c) Does the applicant establish and maintain partnerships with patients, encourage them to take an interest in their health and obtain appropriate consent for treatment?

Please explain whether the applicant has demonstrated this. If so give examples from your **direct observation** of working with the applicant.

6. Maintaining trust (Domain 4)

6a) Does the applicant show respect for patients (for example is polite, considerate and honest with patients and implements systems to protect patient confidentiality)?

Please explain whether the applicant has demonstrated this. If so give examples from your **direct observation** of working with the applicant.

6b) Has the applicant treated patients and colleagues fairly and without discrimination (for example being honest and objective when appraising or assessing colleagues, writing references, giving constructive feedback, raising issues of colleagues' performance and responding promptly to complaints)?

Please explain whether the applicant has demonstrated this. If so give examples from your **direct observation** of working with the applicant.

6c) Has the applicant acted with honesty and integrity (for example being honest and accurate in any financial dealings, practice reports, and obtaining appropriate ethical approval for research projects)?

Please explain whether the applicant has demonstrated this. If so give examples from your **direct observation** of working with the applicant.

7. Any further comments

7a) If you are familiar with the UK medical registration system, would you support this applicant for approval for entry onto the Specialist Register?

If you would support approval for entry onto the Specialist Register, would you employ this doctor as a consultant in any of the UK health services?

If you would not support this applicant for approval of entry onto the Specialist Register or would not employ this applicant as a consultant, please state why.

If you are aware of any disciplinary issues please give details below.

Please also add any further comments you wish to make about this individual's application to the GMC.

8. Your declaration

I declare that the information I have given on this structured report is true and accurate to the best of my knowledge. I understand that it will be used by the GMC, and any relevant third party the GMC involves in an evaluation of this doctor's application, as part of the evidence for making a decision on whether the applicant is eligible for entry onto the GMC's Specialist Register.

I understand that this structured report may be released to the applicant if they request a copy or it forms part of the documentary evidence in relation to an appeal by the applicant against a decision of the GMC.

Please return the form to us as soon as possible, but no later than 21 days from «GMC_DATE_X», to:

equivalence@gmc-uk.org

If you return the form from an email address that you have not registered with the GMC we may make enquiries to confirm the report has come from the referee.

Alternatively, **if you do not have access to email** please sign and date and complete section 2 of the form and return it to us at:

General Medical Council
Specialist Applications Team
3 Hardman Street,
Manchester
M3 3AW

Please note if you are returning the structured report by post please sign and date in the space provided. If you are returning the structured report by email then please date and either insert an electronic signature or simply type your name into the signature field below.

Name:	
Signature: (only if sending a paper copy)	
Date:	

CV

- Must match employment letters to EXCAT dates
- Must match Job description letters

How should I format my CV?

You should:

- number each page
- show your surname and initials at the top of each page
- use bullet points
- include a short description for each item

Section	Detail
Personal details and contact information	Your name on your CV must match your name on your proof of identity. Your contact information should match the details we hold, which can be updated using GMC Online.
Registrations	Give your GMC reference number and details of any other medical regulators you are registered with.
Memberships	List your memberships of professional bodies.
Qualifications	List your qualifications.

Start with the most recent and work backwards.

Please show:

- post title (please give the title you were

Employment history 1 - posts held

- dates you worked in the post, from and to, in the format DD/MM/YYYY
- if the post is part-time, what percentage of whole time equivalent
- institution name and location
- the name of your supervisor (especially required for training posts)
- give a brief job description of the duties needed for that post and include the level of supervision.

Employment history 2 - gaps in employment

Start with the most recent and work backwards.

List any gaps that span over 28 days and include a brief explanation.

Awards	List any awards you have received.	Conferences attended	Give details of any conferences you have attended. You may find it helpful to divide them up into international, national, regional and departmental to show their importance.
Research experience	Give a brief explanation of any research you have undertaken, or have participated in.	Courses attended	Give details of any courses you have attended. You may find it helpful to divide them up into international, national, regional and departmental to show their importance.
Publications	List your publications.	Audit	List and give a brief description of your audit activities.
Presentations	Give details of any presentations you have given. You may find it helpful to divide them up into international, national, regional and departmental to show their importance.	Teaching and training experience	List and give a brief description of your teaching and training activities.
Continuing Professional Development (CPD)	List your CPD activity in the last five years.		

Management
experience

List and give a brief
description of your
management activities.

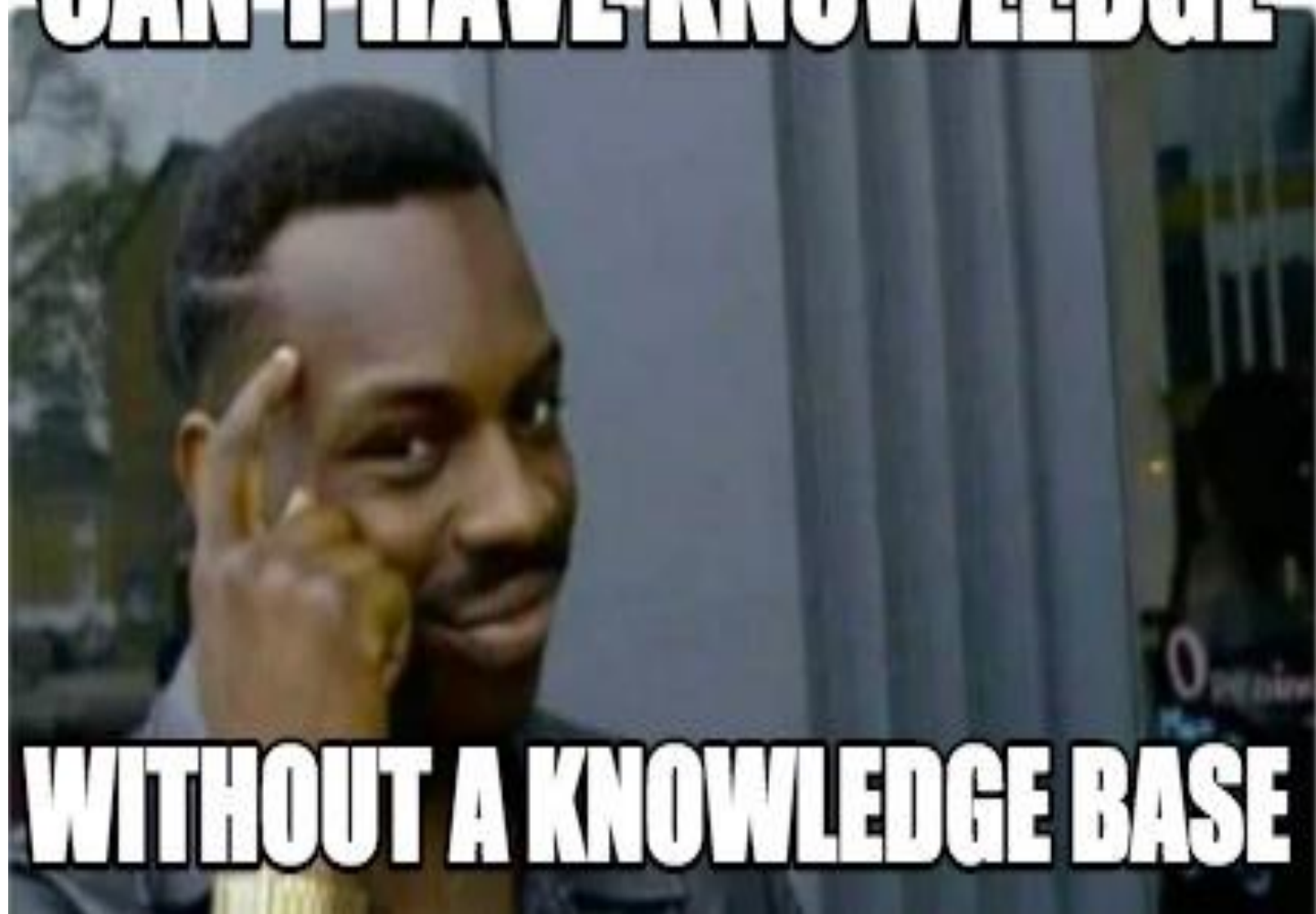
Procedures

List the procedures you
have performed.

Any extra
activities

If there is anything else
relevant to this application
you can list it here.

CAN'T HAVE KNOWLEDGE



WITHOUT A KNOWLEDGE BASE

Knowledge, skills and performance

- Primary and specialist medical qualifications
- Curriculum if undertaken outside UK
- Specialist registration if outside UK
- Honours and Prizes
- ALS
- E- portfolio- needs to be converted into PDF's and uploaded, needs CD sign off
- E portfolio and GMC training criteria often do not correlate- IMPACT
- Rotas- 3-4 per year, show afterhours and weekends
- Courses- related to your CESR specialty
 - Core and advanced courses
 - Communication
 - Teaching- Train the Trainers, CEP not recognised in England

Knowledge, skills and performance

- 360 MSF – use online system like WASP
- PDP- up to date and targets met
- Job plans- match your CV and include out of hours/on call duties
- Appraisals
- Observed ward rounds + **Reflection**
- Log books- convert to PDF/ remove any patient identifying data, meet criteria eg 1000 IP/ 186 clinics
- Departmental and personal statistics
- Patient lists/ medical reports- remove data with pen and crayon

Research

- Course from the UK- eg Introduction to Qualitative and Quantitative research Methodologies(Edinburgh Clinical Research Facilities) www.ed.ac.uk/crfcourses
- education@EdinburghCRF.ed.ac.uk
- Good clinical Practice
- Publications and poster presentations
- Feedback
- **Reflection**

CPD & Professional bodies

- Submit CPD diaries- electronic with summaries and PDP goals
- **Reflection**
- Join all/any professional bodies

Teaching

- Timetables
- Lecture slides- convert to PDF
- Posters to advertise event- be creative
- Feedback from students, participants and organisers
- Teaching over wide range
- Letter from teaching lead
- Involvement in ARCP or appraisals- ASK 😊
- **Reflection**

I'm not sucking up, I'm
'managing up.'



your  cards
someecards.com

Ask for the following

- Letters from colleagues
- Ask to sit on interview panel/ appraisal etc
- Ask to chair a meeting
- Ask for a topic to be on the Agenda, discuss it and conclude the matter, must be in meetings minutes

A close-up photograph of a baby's face. The baby has light skin, blue eyes, and a slightly furrowed brow, giving them a skeptical or questioning expression. The baby is wearing a dark-colored garment. The background is out of focus, showing some greenery and a light-colored wall.

**SO LET ME GET
THIS STRAIGHT...**

**YOU'RE IMPROVING HEALTHCARE
THROUGH QUALITY IMPROVEMENT**

Safety and Quality



- Audit- close the loop
- **Reflection**
- Service improvement- LAMP
- Get QIPAT (Quality improvement assessment tool)
- Make friends with QI Lead
- Attend Infection control meetings
- Become a member of infection control committee
- Logbook and audit of infections
- Change in practice and **reflection**



Communication, partnership and teamwork

- Letters and testimonials
- Correspondence to show MDT
- Reference for colleagues- offer
- Feedback for colleagues
- Thank you letters/Cards(annonomised)
- 360 feedback-WASP
- Complaints and responses-hypothetical

**IT IS NOT ABOUT REDUCING
MORBIDITY OR MORTALITY**



**IT IS ABOUT SENDING A
MESSAGE**

Clinical governance or M&M Meetings

- Attend meetings
- Evidence your participation
- Letter from Leads
- Presentations
- Feedback
- **Reflection**

Maintaining trust

- Appraisal
- Certificate of good standing
- Courses
- Feedback patients and colleagues
- Testimonials
- Thank you letters
- Complaints

Reflective diaries

- From e portfolio
- Cover clinical, learning events, adverse events
- Include as many as you can
- How you have changed your practice for the better

Cross-Reference



quickmeme.com

Submission

- 4 weeks to be allocated a supervisor
- 4 weeks for them to check and you to respond/add evidence
- Then get verification sent out- 2 weeks to verify your evidence
- Then goes to internal audit for final checking
- Then sent to relevant College

Verification



Pro-forma for verified evidence

Parts 01-03: to be completed by the applicant

01 Applicant details

Our guidance for applicants is available to view [here](#)

Full name:	Lauren Davies						
GMC reference number:	6	0	8	6	1	4	1

02 Hospital/Institution details

Important: this is where your evidence is from, please use *one pro-forma per hospital/institution*. If you're unsure please contact us.

Full name of hospital/institution evidence relates to:	Royal Infirmary Edinburgh, NHS Lothian
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03 Index of evidence

Important: evidence *must* be anonymised in line with our [guidance](#)

If you aren't providing one of the types of evidence listed below from your institution please leave that section blank.

Evidence name	Description of document	Type of document	Date of document	Total number of pages
Examples are given in grey italics for each piece of evidence, please type over these or delete if not included in your evidence.				
For the page total, if a document is double-sided, please include both sides in your total.				
Curriculum or syllabus if undertaken outside the UK)				
Appraisals and assessments	<i>Assessment and Appraisals</i>	<i>PDF</i>	<i>26/09/2019</i>	<i>12</i>

RITAs, ARCPs and training assessments	<i>ARCP and AIM curriculum</i>	<i>PDF</i>	<i>26/09/2019</i>	<i>55</i>
	<i>RITA's, ARCP and assessments-ACAT 2018</i>	<i>PDF</i>	<i>26/09/2019</i>	<i>37</i>
	<i>RITA's, ARCP and assessments-ACAT 2019</i>	<i>PDF</i>	<i>26/09/2019</i>	<i>64</i>
	<i>Case Based Discussions 2018</i>	<i>PDF</i>	<i>26/09/2019</i>	<i>38</i>
	<i>Case Based Discussions 2019</i>	<i>PDF</i>	<i>26/09/2019</i>	<i>42</i>
	<i>Mini Cex 2018/2019</i>	<i>PDF</i>	<i>26/09/2019</i>	<i>34</i>
	<i>Library folder evidence for NHS</i>	<i>PDF</i>	<i>14/11/2019</i>	<i>13</i>
	<i>GIM curriculum sign off</i>	<i>PDF</i>	<i>03/10/2109</i>	<i>22</i>
MSF Patients and Observed ward rounds	<i>MSF Patients</i>	<i>PDF</i>	<i>26/09/2019</i>	<i>66</i>
360 and multi-source feedback	<i>360 and multi-source feedback</i>	<i>PDF</i>	<i>04/10/2019</i>	<i>36</i>
PDP's	<i>Personal Development Plans</i>	<i>PDF</i>	<i>14/11/2019</i>	<i>4</i>
Logbooks	<i>Log book All patients</i>	<i>PDF</i>	<i>26/09/2019</i>	<i>68</i>
	<i>Log book clinic patients</i>	<i>PDF</i>	<i>26/09/2019</i>	<i>22</i>
	<i>Log book admissions</i>	<i>PDF</i>	<i>26/09/2019</i>	<i>43</i>
Consolidation, cumulative data sheets, summary lists and annual caseload statistics	<i>Refer Log book</i>			

Medical reports	<i>Medical reports</i>	<i>PDF</i>	<i>14/11/2019</i>	<i>51</i>
Case histories	<i>Case Histories</i>	<i>PDF</i>	<i>26/09/2019</i>	<i>57</i>
Referral letters	<i>Referral letters</i>	<i>PDF</i>	<i>26/09/2019</i>	<i>30</i>
Working in multidisciplinary teams	<i>Working in multidisciplinary teams</i>	<i>PDF</i>	<i>26/09/2019</i>	<i>38</i>
Patient lists	<i>See Log Book</i>	<i>PDF</i>	<i>26/09/2019</i>	<i>As above</i>
Departmental (or trust) workload statistics and annual caseload statistics	<i>Departmental (or trust) workload statistics and annual caseload statistics</i>	<i>PDF</i>	<i>14/11/2019</i>	<i>5</i>
Rotas	<i>NHS Rotas</i>	<i>PDF</i>	<i>14/11/2019</i>	<i>31</i>
Employment letters and contracts of employment	<i>Employment letter</i>	<i>PDF</i>	<i>26/09/2019</i>	<i>2</i>

Patient lists	<i>See Log Book</i>	<i>PDF</i>	<i>26/09/2019</i>	As above
Departmental (or trust) workload statistics and annual caseload statistics	Departmental (or trust) workload statistics and annual caseload statistics	<i>PDF</i>	<i>14/11/2019</i>	5
Rotas	<i>NHS Rotas</i>	<i>PDF</i>	<i>14/11/2019</i>	31
Employment letters and contracts of employment	<i>Employment letter</i>	<i>PDF</i>	<i>26/09/2019</i>	2
Job descriptions	<i>Job descriptions</i>	<i>PDF</i>	<i>03/10/2019</i>	34
Job plans	<i>Job Plan</i>	<i>PDF</i>	<i>26/09/2019</i>	3
Research papers, grants, patent designs	<i>Courses attended</i>	<i>PDF</i>	<i>26/09/2019</i>	3
	<i>Letter</i>	<i>PDF</i>	<i>15/11/2019</i>	1
Publications within specialty field (if not available online)	<i>Improving VTE assessment & prophylaxis rate in the acute and general medical patient</i>	<i>PDF</i>	<i>26/09/2019</i>	5
Presentations	<i>Presentation and poster presentations</i>	<i>PDF</i>	<i>14/11/2019</i>	4
CPD	<i>CPD in UK</i>	<i>PDF</i>	<i>14/11/2019</i>	51
Membership of professional bodies and	<i>Membership of professional bodies</i>	<i>PDF</i>	<i>26/09/2019</i>	4

Complaints	<i>Complaints and responses to</i>	<i>PDF</i>	<i>27/09/2019</i>	13
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	<i>complaints</i>			
Trainee feedback completed forms	Trainee completed feedback forms	<i>PDF</i>	<i>14/11/2019</i>	66

Parts 04-05 to be completed by the verifier

04 Verifier details

Important: If you're GMC registered, please provide your GMC registered email address as we'll contact you on this. If you're not GMC registered please provide a professional/work email address.

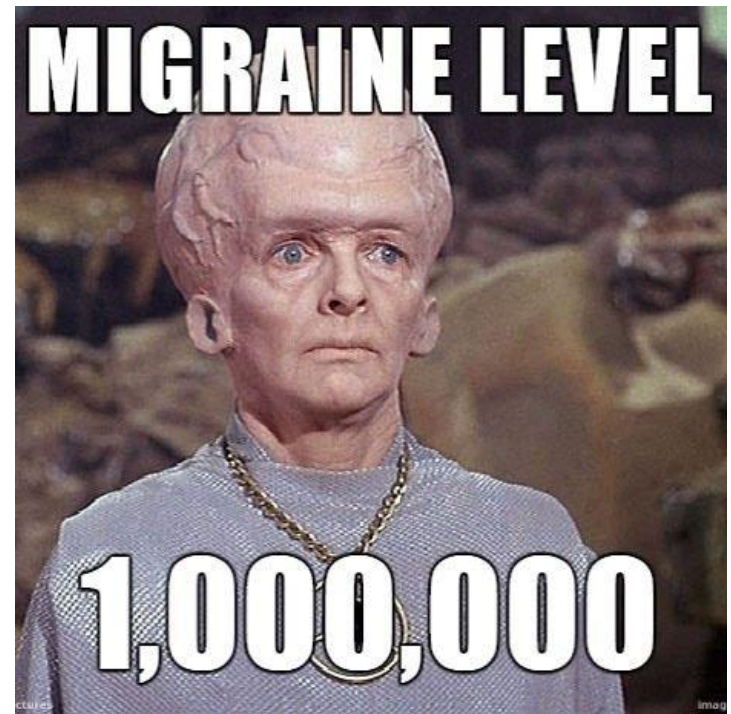
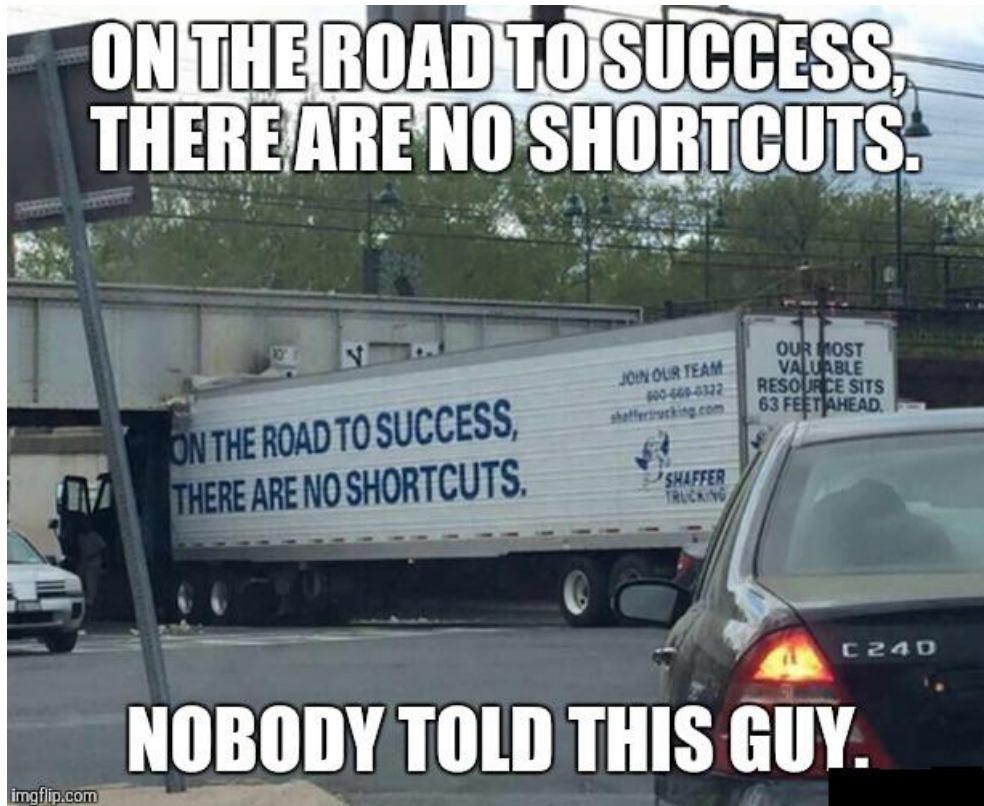
Full name:	Dr Johanne Simpson
Job title:	Clinical Lead Acute and General Medicine, Royal Infirmary of Edinburgh
GMC reference number (if applicable):	
GMC registered email address:	
Professional/work email address:	

05 Verifier declaration

By typing your name and dating you are confirming that you:

- know the applicant named in box 01.
- work in a medical supervisory position at the hospital/institution named in box 02
- have reviewed all the documents listed in the 'Index of evidence' in box 03.
- attest to the authenticity and accuracy of all the evidence listed in box 03.
- have read and understand the **verifier guidance**.
- agree to be contacted by the General Medical Council to verify the applicant's evidence further.

organisations				
Teaching timetables	<i>Teaching timetables and Posters</i>	<i>PDF</i>	<i>14/11/2019</i>	30
Lectures	<i>Lectures</i>	<i>PDF</i>	<i>14/11/2019</i>	23
Feedback or evaluation forms from those taught	<i>Feedback</i>	<i>PDF</i>	<i>14/11/2019</i>	11
Letters from colleagues	<i>Letters of thanks and letters of recommendation</i>	<i>PDF</i>	<i>27/09/2109</i>	6
	<i>Testimonials from NHS</i>	<i>PDF</i>	<i>03/10/2019</i>	8
Participation in assessment or appraisal and appointments processes	<i>Participation in Appointment process</i>	<i>PDF</i>	<i>26/09/2019</i>	4
Audits	<i>Audits undertaken by applicant</i>	<i>PDF</i>	<i>14/11/2019</i>	13
Service Improvement and clinical governance meetings	<i>Service Improvement and clinical governance meetings</i>	<i>PDF</i>	<i>27/09/2019</i>	63
Infection control	<i>Infection control</i>	<i>PDF</i>	<i>14/11/2019</i>	19
Communication with colleagues	<i>Communication with colleagues</i>	<i>PDF</i>	<i>27/09/2019</i>	23
Working in multidisciplinary teams	<i>Working in multidisciplinary teams</i>	<i>PDF</i>	<i>26/09/2019</i>	38
Management and leadership experience	<i>Management and leadership experience NHS</i>	<i>PDF</i>	<i>14/11/2019</i>	55



What now





EPIC FAIL

TRY AGAIN

Round two ☹️

- Logbooks (with minimum of 30 cases)
- Caseload statistics – these must demonstrate your current caseload (e.g. average number of patients, type of cases per clinic, frequency of on calls and number of admissions.)
- Clinic Lists
- A minimum of 3 ACATs demonstrating long term monitoring of patients
- Job plans for the last 3 years demonstrate frequency of on call duties

- Completion of a relevant teaching course (such as 'train the trainers')
- Evidence of teaching junior doctors (interdepartmental teaching, Grand round presentations, CMT teaching)
 - PowerPoint presentations, timetables, trainee evaluation/feedback

Evidence should include:

- A relevant course on record keeping
- AND
- Reflection on record keeping

Evidence should include:

- Evidence of Clinical Governance meeting attendance i.e. meeting minutes/agenda

OR

- Morbidity and mortality review meetings i.e. meeting minutes/agenda

Evidence must demonstrate your attendance and participation

- Clarification on involvement in Quality Improvement project on C.Diff provided such as:
 - Testimonial letter confirming role
 - QIPAT
 - Reflection on QIP

Evidence should include:

- 360-degree feedback with feedback representation from a range of respondents, including nurses, secretaries and allied health professionals

Evidence should include:

- Evidence of attendance and participation at multi-disciplinary team meetings (e.g. meeting minutes, meetings agendas, certificates)

Lessons Learnt

- GMC e mail to address on THEIR records
- Verifiers leave
- Format of files- all PDF
- Little chunks of evidence with good descriptions
- Give yourself a strict time frame
- Volunteer for EVERYTHING
- Need CD support

EVERY GROUP PROJECT



Awesome team work!!!!!!!

YA'LL GOT ANY



QUESTIONS?