

## GP Induction & Refresher Scheme: Information Pack

### Introduction to the Scheme

In March 2015, the BMA [General Practice Committee](#) (GPC) [Health Education England](#) (HEE), [NHS England](#) and the [Royal College of General Practitioners](#) (RCGP) reviewed and revised the UK GP Induction and Refresher (I&R) scheme. The revised scheme aims to safely and quickly introduce experienced GPs into the NHS workforce. It standardises the pre-existing schemes in England and removes the barriers that had previously been reported by doctors returning to or entering the NHS as a GP.

The scheme provides two programmes of support for qualified doctors who hold a [CCT](#) (for GP), are qualified [through the EU](#) or have a [CEGPR](#) and are on the [GMC GP Register](#) with a current [licence to practice](#).

[All GPs undertaking an I&R placement must be included on the England Medical Performers List \('EMPL'\) before they start in their practice placement.](#)

**Induction** is for qualified doctors who have never worked as an NHS GP

**Refresher scheme** is for qualified GP's with previous NHS experience who have not practised for two or more years and would like to return to work as an NHS independent practitioner in England

The I&R bursary programme is to support GP's 'in [Good Standing](#)' and those without current [NHS England](#) or [GMC undertakings or conditions](#).

- If the GP is subject to formal conditions or undertakings with NHS England EMPL or the GMC applicants will not be eligible for the centrally funded NHS England I&R scheme
- Doctors with formal undertakings or conditions should contact their NHS England local office to discuss their specific needs and the requirements of a locally supported retraining programme

Full details of the I&R scheme can be found on the website <https://gprecruitment.hee.nhs.uk/Induction-Refresher>

Following a review of the application process by HEE and NHS England, we have produced FAQs and this guidance document.

### Key changes to the policy

- There is now one national policy for England

- I&R scheme links for [Northern Ireland](#), [Scotland](#) and [Wales](#), are on the GP [NRO website](#)
- This scheme offers bursaries for doctors in a supervised placement
- Doctors who go on to work in the NHS can claim back some assessment fees
- The scheme is co-ordinated by the GP National Recruitment Office (NRO)
- The application process can be started overseas including the multiple choice question papers (MCQ) learning needs assessment in some locations
- Recognition of a rapid return shortened support programme for qualified and experienced [GPs working in primary care](#) outside the UK
- Portfolio route for GP's with previous UK NHS experience currently working in an equivalent primary health care role who wish to return to work within 5 years and continue to work in an appropriate overseas primary care role

## **Application guidance:**

### **Overview**

In order to work as a GP in England, a doctor must:

- Be medically qualified and have completed formal training as a general practitioner in the UK (CCT), approved EU qualification or hold a Certificate of Eligibility for GP Registration (CEGPR)
- Be on the GMC GP Register, without GMC [conditions or undertakings](#) (except those relating solely to health matters) and hold a current licence to practice as a GP
- Have the right to work or hold a [visa that permits you to work in the UK](#)
- Be granted approval by NHS England to be included on the EMPL with conditions that permit completion of the GP I&R scheme (refer to examples 3 and 4 at the end of this document) for the standard set of conditions. Doctors with conditions related to [performance or concerns](#) are managed under separate NHS England guidelines.

### **Initial enquiries**

Contact the GP National Recruitment Office (NRO) in the first instance.

Visit the [I&R website](#) or email [iandr@wm.hee.nhs.uk](mailto:iandr@wm.hee.nhs.uk)

### **Application timing**

It is important that doctors begin the application process to the GMC and EMPL as soon as possible. Some of the checks involved can take up to three months to complete, for example

the Disclosure & Barring Service (DBS). Please refer to the process flowchart (Example 1) for further information and associated timescales.

## **I&R registration**

The [NRO website](#) has information and registration form.

Completed registration forms should be sent to the NRO who will provide applicants with details of the relevant Health Education England local I&R lead and the NHS England local office (check [post code or country](#)).

The HEE I&R lead will ask for a brief CV with a letter outlining your plans and to make an appointment for a review in person or by phone.

Local I&R leads review applications which include previous training and current experience and will advise on the steps required to participate in the scheme.

Applicants will then be asked to apply for the learning needs assessment. The multiple choice question papers (MCQ), a Clinical Problem Solving paper (CPS) and a Professional Dilemmas paper (PD), is delivered online at a Pearson Vue test centre and can be sat at venues across the UK and in some sites overseas.

More details can be found [on the MCQ website](#)

## **GMC registration**

Applicants are required to be on the GMC GP Register (without conditions or undertakings - except those relating solely to health matters) with a license to practice before they begin a clinical placement.

Apply to the [GMC](#):

1. For re-registration or registration and approval of your GP training, EU or [CEGPR](#) if not a CCT (UK) holder or previously registered
2. Applications must be completed within 3 months from initial application. Applicants will be required to visit the GMC offices (by appointment) for identification and [document checks](#) in person.

Evidence of GMC registration is required before applicants can sit the simulated surgery exam but it is not necessary to hold an active licence to practice.

## **Deciding where to work**

Doctors should decide where they wish to work (at least in the short term) and apply to the local office of NHS England for the EMPL as early as possible, to avoid any unnecessary delay. NHS England has a single MPL list so there is a standard process across England.

## **National Medical Performers List (EMPL) application**

Medical performers wishing to provide NHS GP services in primary care must be included on the EMPL. This includes GPs undertaking induction and refresher or training posts. NHS England's Board has given delegated responsibility, currently to their local offices, to assess applications from primary medical performers. The length of time it takes to process an application can vary considerably depending on a number of factors, such as evidence and qualifications provided, how quickly referees respond to requests, the length of time taken to get a DBS certificate and Occupational Health clearance. This can take up to three months in some circumstances.

Applications from overseas can take longer than 3 months as there may be additional checks by organisations in the country of application.

Full guidance and information about how to apply for the EMPL can be found on the [performer's list website](#)

### **Specific guidance for doctors wishing to join the EMPL**

1. Applications are processed by NHS England local offices.

Applicants will be required to visit an NHS England regional office (by appointment) for document checks in person, before inclusion on the EMPL. Applicants can choose to [attend the local office](#) nearest to their intended practice or the London or Manchester office at the same time as visiting the GMC.

1. Contact details can be found [using the look up function](#)
2. Download the [EMPL application form](#) which includes a range of personal and professional information as well as the requirement to disclose information relating to previous criminal or disciplinary actions. Some of this information will have been covered in the registration form (which is already held on file) and need not be duplicated.
  - Section 1: Only answer question 14. Other questions can be left blank
  - Section 2: Leave blank. Health Education England will provide NHS England with this information once your clinical placement is confirmed
  - Section 3: Answer questions 25-29 and 32-39. Leave questions 30 and 31 blank, as you will already have provided this information in the registration form
  - Section 4: Leave blank. Relevant information about your communication skills will be provided by NHS England
  - Section 5: Leave blank. Information is covered on the registration form
  - Complete sections 6, 7 and 8
  - Complete Annex B
  - Sign and submit your form to your NHS England local office

The following evidence must be provided before EMPL applications are considered by NHS England.

Evidence	Notes
Police check from non-UK country	Required if you have been living overseas or resident in a country outside the UK  Applicants are recommended to request this evidence as soon as possible
Certificate of good standing from non-UK country	NHS England will accept registration with the GMC in place of this certificate
Face to face appointment for ID checks	<a href="#">Search by postcode</a> for the local NHS England office
Disclosure & Barring Service (DBS) check  Requires a UK practice location to process	This will usually be in a placement practice. Please clarify this with the NHS England local office  Register for the on-line service at the same time to save being charged again
Occupational Health check	Download <a href="#">the form</a> to <a href="#">find a provider</a>
Child protection training	Applicants require level 2 training at the start of their clinical placement and need to achieve level 3 before inclusion on the EMPL. Applicants with an NHS email address, can access this training or register for the MCQ for the link
Indemnity Certificate	Indemnity is not required until just before a placement starts although GPs will need confirmation that a policy is ready to be activated before being added to the EMPL.  Doctors on the I&R scheme can access on-line learning modules at a lower fee

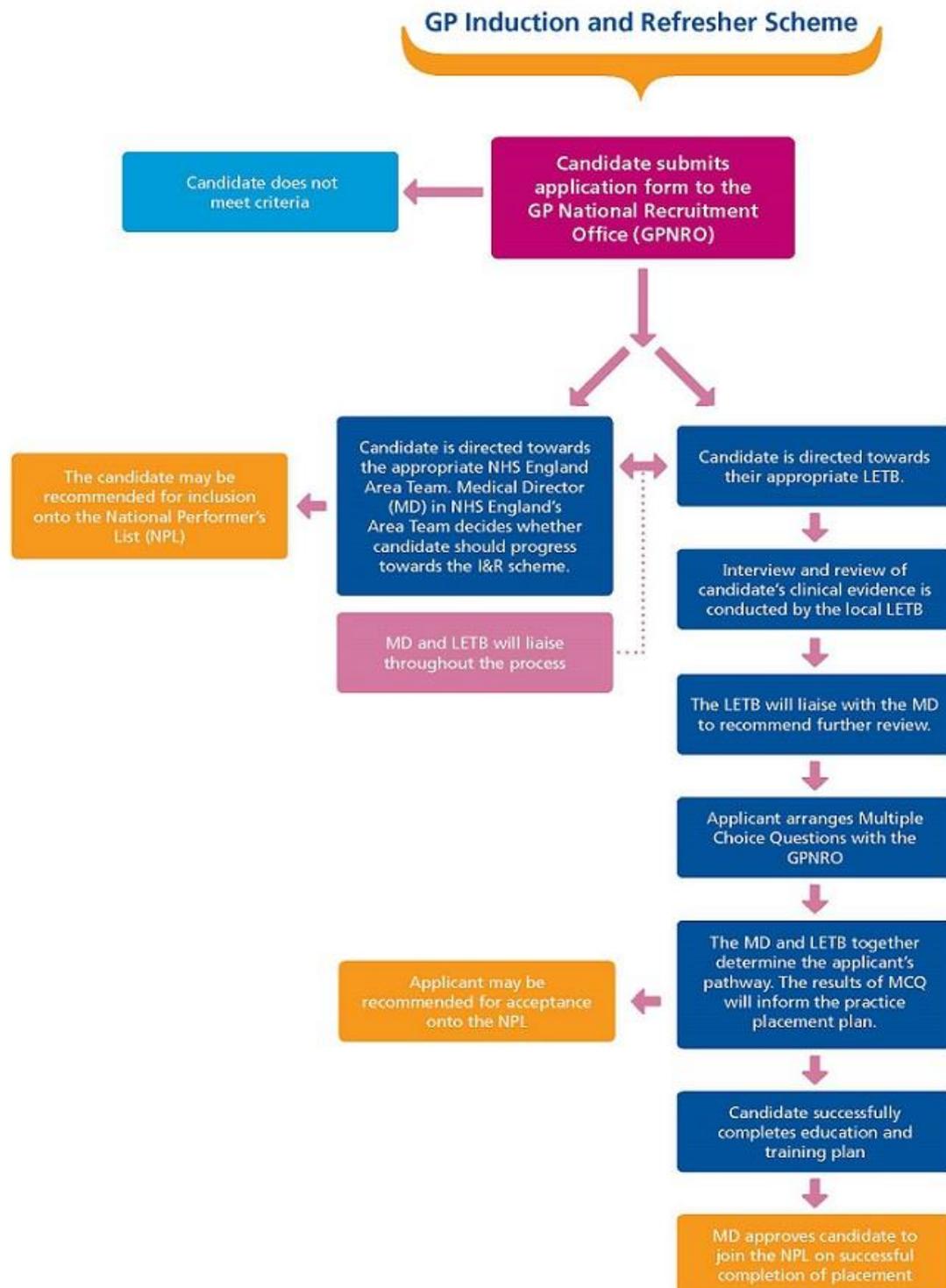
Application approval rests with the Performers List Decision Panel (PLDP) within the relevant NHS England local office. PLDPs meet regularly to consider applications.

Applicants will be asked to sign an agreement to be included on the EMPL with conditions that they comply fully with the I&R scheme. Signing this form does not mean the applicant is included on the EMPL. Applications will be held by NHS England until the learning needs assessment has been completed and the Health Education England local team identifies a suitable clinical placement.

Once the applicant has been included on the EMPL, a copy of the formal inclusion letter will be sent to the applicant by NHS England, copied to the HEE I&R lead and the placement practice. No I&R GP must begin their clinical placement until a copy of this letter has been received by the practice.

## Template examples

### 1. Process Flowchart



## 2. Clinical Reference

The Health Education England (HEE) local I&R scheme lead has requested that you **provide two clinical references covering the last two years**. Please ask your referees to complete the form below and return it to the HEE lead who is managing your I&R scheme application - It should not be sent to the NRO.

Clinical references must relate to:

1. Two recent posts (one of which will usually be a current post and one in the last two years) each of which lasted at least three months (continuous period) without a significant break or
2. Where posts have been of a shorter duration or you have worked as a locum in a number of casual posts, you may include a referee from a frequently-held, recurrent post.
3. If you have been in your current post continuously for two or more years you may request two referees from your current post.

If this is not possible because you have not been engaged in clinical work in the last two years, please provide the names and addresses of two alternative referees to complete your EMPL application.

References are required before your review with the local I&R lead and must be returned before you apply to the scheme.

You will need photo ID and confirmation of your GMC registration (but not necessarily hold a licence to practice) by the time you sit the simulated surgery assessment.

Your name has been given as a referee by the named applicant on the report who is applying to the GP induction and refresher scheme. Please read the information below.

This professional report should verify factual information and comment on the strengths and weaknesses of the candidate as an indicator of his or her suitability. It is not a personal testimonial but an objective assessment of competencies based on the schemes eligibility criteria.

This reference form has been developed with the General Medical Council (GMC) publication 'Good Medical Practice' in mind. Your attention is drawn to the following paragraph:

***“When providing references for colleagues, your comments must be honest and justifiable; you must include all relevant information which has a bearing on the colleague’s competence, performance, reliability and conduct”***

(GMC Good Medical Practice, Second Edition, July 1998 – The duties of a doctor registered with the General Medical Council, Item 11 – References.)

<b>Health Education England region</b>			
<b>Applicant Name</b>			
<b>Applicant GMC No</b>		<b>Applicant Ref No</b>	

Please state the dates the applicant worked with you			
Date started		Date finished	
Position held			
Location			

Was the applicant subject to any disciplinary procedure, formal or otherwise, during their time with you?
YES <input type="checkbox"/> NO <input type="checkbox"/> If Yes, please give details:

This post is exempt from the provision of section 4 (2) of the Rehabilitation of Offenders Act 1974 (exceptions order 1975). Under this order are you aware of any criminal convictions or cautions which may affect the applicant's suitability for the post?*
YES <input type="checkbox"/> NO <input type="checkbox"/> If Yes, please give details:
<i>*It is contrary to the Act for referees not to reveal any information they may have, concerning convictions which may otherwise be considered "spent" in relation to this application which you consider relevant to the applicant's suitability for employment.</i>

Please give your opinion regarding the applicant's present knowledge, skills and personal attributes by ticking the appropriate boxes on the next three pages. Statements are provided to give examples of behaviours that would constitute different levels of performance, though this is not intended to be an exhaustive list. Please use the space provided to give examples of the candidate's behaviour that support the rating you have given them in each area, this is **essential if you have given a rating of 1 or 2.**

<b>Clinical Expertise:</b> Capacity to apply sound clinical knowledge and awareness to full investigation of problems. Makes clear, sound and proactive decisions, reflecting good clinical judgement.			
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Cause for concern	Weak	Satisfactory	Good to excellent
Comments/evidence:			

**Communication skills:** Capacity to adjust behaviour and language (written/spoken) as appropriate to needs of differing situations. Actively and clearly engages patient (and colleagues) in equal/open dialogue

1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Uses technical language that patients do not understand, ignores what they have to say	Can be lacking in clarity and coherence when speaking to patients	Often uses lay language to help patients understand	Always speaks clearly, give patients time and checks that they understand

Comments/evidence:

**Empathy and sensitivity:** Capacity and motivation to take in patient/colleague perspective, and sense associated feelings. Generates safe/understanding atmosphere. The understanding approach

1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Is not sensitive to the feelings of patients and treats them in an impersonal manner	Shows some interest in the individual and occasionally reassures patients	Usually demonstrates empathy towards patients	Always shows empathy and sensitivity, gives reassurance to the patient

Comments/evidence:

**Professional integrity:** Capacity and motivation to take responsibility for own actions (and mistakes). Respects/defends contribution and needs of all. (Respect for position, patients and protocol).

1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Does not take responsibility for their actions or show enthusiasm for job	Sometimes seeks to blame others for their actions	Often shows respect to patients and enthusiasm for their job	Puts patients needs before their own and takes full responsibility for their own actions

Comments/evidence:

**Problem-solving skills:** Capacity to think/see beyond the obvious, analytical but flexible mind. Maximises information and time efficiently, and creatively

1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Misses minimal cues and symptoms, lets	Often relies on surface information	Usually thinks beyond surface	Thinks beyond surface information

assumptions guide diagnosis	and doesn't probe deeper	information, picks up on cues/minimal symptoms	and gets to the root cause
Comments/evidence:			
<b>Organisation and planning:</b> Capacity to organise information in a structured and planned manner, think ahead, prioritise conflicting demands, and build contingencies. Delivers on time			
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Is always late for meetings/deadlines and unable to prioritise tasks	Is often late for meetings and deadlines and disorganised with paperwork etc	Usually able to prioritise tasks and organise paperwork	Excellent at managing time and prioritising tasks
Comments/evidence:			
<b>Learning and Development:</b> Ability to identify own learning and development needs, commits time and resources to appropriate training and development activities			
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Reacts badly to constructive criticism or feedback, not interested own development	Needs assistance in identifying own training needs/developing personal targets	Often learns from experience, generally reacts well to constructive criticism	Actively seeks out and welcomes constructive criticism/feedback
Comments/evidence:			
<b>Team involvement:</b> Collaborative style, works with colleagues in partnership, able to compromise. Assumes role of leader when necessary, provides support, views self as part of larger organisation			
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Sticks rigidly to their own agenda and doesn't negotiate	Tends to take a 'back seat' rather than participating	Good at negotiating and usually able to compromise	Is excellent at supporting and motivating others and at negotiating
Comments/evidence:			

**Ability to deal with pressure:** Capacity to put difficulties into perspective, retaining control over events. Aware of own strengths/limitations, able to “share the load”.

1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Loses temper easily and refuses to share workload	Finds it difficult to share workload with others or to switch off after work	Often recognises when to share workload with others, usually remains calm under pressure	Remains calm under pressure at all times, recognises when to share work load
Comments/evidence:			

Is their attendance/timekeeping satisfactory?

YES  NO  If No, please give details

Are you aware of any health issues which may affect the candidates' ability?

YES  NO  If Yes, please give details:

If you have any other comments regarding this applicant, please give details here:

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Would you be happy to work with this doctor again?

YES  NO

This reference is based upon:		Support of candidate for a placement in the GP I&R Scheme	
General impression	<input type="checkbox"/> a	Strongly without reservation	<input type="checkbox"/> 1
Close observation	<input type="checkbox"/> b	Could recommend as competent	<input type="checkbox"/> 2
Collective opinion of colleagues	<input type="checkbox"/> c	Would have some reservations	<input type="checkbox"/> 3
Employers views	<input type="checkbox"/> d	Could not recommend	<input type="checkbox"/> 4

<b>SIGNATURE</b>		<b>NAME</b> (print in block capitals)	
<b>POSITION HELD</b>		<b>CONTACT TELEPHONE NO.</b>	
<b>GMC or Equitant Ref no.</b>		<b>DATE</b> (dd/mm/yyyy)	

It is **essential** that this form is stamped with an **official practice stamp**. If no stamp is available, please attach a compliment slip signed by the clinician providing the reference. Forms received without a stamp or a signed compliment slip will be returned.

<b>Official practice stamp</b>	Thank you for completing this reference. This form should be returned to the address given on the accompanying e-mail or handed back to the applicant in a sealed envelope. If you have returned the completed form by e-mail, please ensure that a paper copy is returned by post.
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### 3. NHS England – Conditions bank

local office The conditions bank for I&R candidates normally includes:

Condition 1	You must not perform any primary medical services, except when acting for and under the supervision of the GP named by the Health Education England Director of Postgraduate General Practice Education (or their deputy) for your GP Induction and Refresher scheme.
Condition 2	Whilst under the GP Induction and Refresher scheme you must comply in full with all assessments and training specified by the Health Education England Director of Postgraduate General Practice Education (or their deputy).
Condition 3	On completion of the GP Induction and Refresher scheme you must provide NHS England with a report from the Health Education England Director of Postgraduate General Practice Education (or their deputy) that states you are suitable to work in NHS general practice in an unsupervised capacity.

If you cannot provide NHS England with a report as detailed in condition 3, NHS England will need to take a view as your continued inclusion on the Medical Performers List.

## **Glossary of terms**

CCT	Certificate of Completion of Training (GP)
CEGPR	Certificate of Eligibility for GP Registration
CPD	Continuing professional development
CPS	Clinical Problem Solving
EU	European Union
GMC	General Medical Council
HEE	Health Education England
HMRC	HM Revenue and Customs
I&R	Induction and refresher
MCQ	Multiple choice questions
MD	Medical Director
MDDUS	Medical and Dental Defence Union of Scotland
MDO	Medical Defence Organisations (General term for all the MD organisations)
MDU	Medical Defence Union
EMPL	National Medical Performers List (England)
MPS	Medical Protection Society
MSF	Multi source feedback
NRO	National Recruitment Office
PD	Professional Dilemmas
PSQ	Patient satisfaction questionnaire
RO	Responsible Officer
SJT	Situational Judgement Test
WPBA	Workplace Based Assessment