**Paediatrics**

This guidance is to help doctors who are applying for entry onto the Specialist Register with a CESR in Paediatrics. You will also need to read the Paediatrics Curriculum documentation.

<table>
<thead>
<tr>
<th>Can I get advice before I submit my application?</th>
</tr>
</thead>
<tbody>
<tr>
<td>You can contact us and ask to speak to the Specialist Applications team for advice before you apply. You are strongly advised to contact the Royal College of Paediatrics and Child Health (RCPCH) for guidance before you submit an application or a reapplication.</td>
</tr>
</tbody>
</table>

Additional guidance on applications in paediatrics is on the web at [http://www.rcpch.ac.uk/training-examinations/certification/cesr](http://www.rcpch.ac.uk/training-examinations/certification/cesr) and the RCPCH can be contacted at equivalence@rcpch.ac.uk.

<table>
<thead>
<tr>
<th>What is the indicative period of training for a Certificate of Completion of Training (CCT) in Paediatrics?</th>
</tr>
</thead>
<tbody>
<tr>
<td>The indicative period of training for a CCT in Paediatrics is eight years and it is very unlikely that you would achieve the competencies required for a CCT in a shorter period of time.</td>
</tr>
</tbody>
</table>

Applicants need to demonstrate that they have achieved the competencies required for all stages of the paediatrics curriculum: Level 1 (basic knowledge and skills), Level 2 (enhance knowledge and skills and gain competencies in three particular areas – neonates, community child health and acute paediatrics) and Level 3 (deepen and strengthen skills in general paediatrics).

This list is given for example purposes only and is not exhaustive – for a complete list refer to the Paediatrics Curriculum documentation.

<table>
<thead>
<tr>
<th>Submitting your evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do not submit original documents.</td>
</tr>
</tbody>
</table>

All your copies must be authenticated or validated, and anonymised. You can read an explanation of this in our important notice about evidence.

You will also need to submit translations of any documents that are not in English. Please ensure the translations you submit meet our translation requirements.
How much evidence to submit

This guidance on documents to supply is not exhaustive and you may have alternative evidence. You do not necessarily have to supply every type of evidence listed, but you must submit sufficient evidence to address each of the required competencies. We recognise that you may not have all the evidence listed here and you may wish to delay submitting an application until you are able to gather it.

Your evidence must cover the knowledge, skills and qualifications to demonstrate the required competencies in all areas of the Paediatrics Curriculum documentation. If evidence is missing from one area of the curriculum for example, then the application may fail.

If you have a piece of evidence that is relevant to more than one domain, do not include multiple copies in your bundle. Instead, include one copy and list it in your evidence list under each relevant area, stating that the document is located elsewhere. (For example you might state: “document included in teaching and training section”.)

It will help us to deal with your application more quickly if you make sure that you send us only evidence that is directly relevant.

Our guidance on compiling your evidence will help you to decide what is relevant and what is not. We recommend that you read it carefully.

Evidence of your competencies should be recent. In general, evidence of skills or experience more than five years old should not be submitted, as typically it does not demonstrate that the competencies have been recently maintained.

As a general guide, we would usually expect to see around 800 - 1000 pages of evidence.

Types of evidence are divided into four different domains. We recommend that you apportion the evidence you provide with your application as shown in the pie chart.

Domain 1: 75%
Domain 2: 20%
Domains 3 and 4: 5%

It is important to note that you will not be able to compensate for shortfalls in your evidence of training and experience in a particular area of the curriculum by providing extra evidence in other areas.
<table>
<thead>
<tr>
<th>Unsuccessful applications or poor evidence</th>
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</thead>
<tbody>
<tr>
<td>It is our experience that applications from doctors in the specialty of Paediatrics are often submitted with inadequate or poor evidence in the following areas.</td>
</tr>
<tr>
<td>• Applicants do not provide evidence to cover the full breadth of the CCT curriculum. If you have not covered a specific area of the curriculum in the past five years it is advisable to postpone an application until you have been able to gain or refresh this experience. Applicants <strong>must</strong> ensure they can provide primary evidence of their competencies in acute general paediatrics, neonatal medicine and community child health, including child protection.</td>
</tr>
<tr>
<td>• Applicants do not have current certification in resuscitation. Applicants <strong>must</strong> provide valid certification in APLS and NLS, or equivalent advanced paediatric and neonatal life support skills.</td>
</tr>
<tr>
<td>• Applicants do not provide evidence for child protection. Applicants <strong>must provide</strong> valid certification in level 3 child protection training and evidence of recent experience in child protection cases.</td>
</tr>
<tr>
<td>• Applicants provide poor evidence of clinical governance. Applicants <strong>must</strong> provide evidence of various audits in which you played a lead role, together with contributions to service improvement or risk management projects you have written. The actual verified audits themselves are required as evidence, not just email correspondence or statistics. Evidence of service improvement, risk management projects or other clinical governance activity is also needed.</td>
</tr>
<tr>
<td>• Applicants provide poor evidence of training and assessing junior colleagues. These areas may not form part of your role, however it is essential that evidence is supplied that confirms that you have the skills even if you have not had the opportunity to regularly put them into practice. This may be best demonstrated by attendance at a course and the training or supervision of more junior colleagues. You <strong>must</strong> also provide evidence of your competence in teaching in the form of presentations or Powerpoint slides, in addition to evidence of feedback from students on your teaching ability and evidence of feedback you have given to students. The latter could take the form of assessments, multisource feedback, reference letters and constructive advice that you have provided to students, junior doctors and colleagues.</td>
</tr>
<tr>
<td>• Applicants provide limited evidence of management skills. It is recognised that you may not have experience of managing a department, however some forms of management should be demonstrated e.g. rota management, meeting/event management, budget management, leading ward rounds, leading on educational or research related activities.</td>
</tr>
</tbody>
</table>

We strongly recommend that you closely match your experiences against the current curriculum and provide evidence of equivalence across all areas. We also strongly recommended that all your referees should be fully conversant with the current curriculum and able to provide detailed support for your competence across all or most areas.
Anonymising your evidence

It is important that you anonymise your evidence before you submit it to us. You must remove:

• All patient identifying details
• Details of patients' relatives
• Details of colleagues that you have assessed, written a reference for, or who have been involved in a complaint you have submitted

This includes:
• Names (first and last)
• Addresses
• Contact details such as phone numbers or email addresses
• NHS numbers
• Other individual patient numbers
• GMC numbers

The following details don’t need to be anonymised:
• Gender
• Date of birth

It is your responsibility to make sure that your evidence has been anonymised. Evidence which has not been anonymised will be returned to you. More information can be found on our website.
## Domain 1 - Knowledge, skills and performance

### Qualifications

<table>
<thead>
<tr>
<th>Qualification</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary medical qualification (PMQ)</td>
<td>If you hold full registration with us, you do not need to submit your PMQ as we saw it when we assessed your application for registration. If you do not hold registration, please provide an <strong>authenticated copy</strong> of your PMQ.</td>
</tr>
<tr>
<td>Specialist medical qualification(s)</td>
<td>Please provide an <strong>authenticated copy</strong> of any specialist medical qualifications you hold. For College examinations the College may confirm details of any examinations you have undertaken. Applicants must demonstrate an appropriate test of knowledge to that required for the CCT which is the Membership of Royal College of Paediatrics and Child Health (MRCPCH). The College has a curriculum for the following specialty: • A Competency Based Curriculum for Specialty Training in Paediatrics. If your specialist qualification is covered by this document then curricula/syllabi do not need to be submitted with your application. There are no qualifications from outside Europe that enable automatic entry to the Specialist Register in any specialty. An evaluation is made based on an applicant’s whole career and therefore two applicants with the same qualifications but different training and/or experience may not receive the same decision. Please list unsuccessful attempts at examinations (where you have not subsequently been successful) in the application form.</td>
</tr>
</tbody>
</table>
| **Curriculum or syllabus (if undertaken outside the UK)** | Please provide a **validated copy** of your curriculum or syllabus.  
This should include the requirements of the qualification and **must** relate to the specialty in which you are applying. The curriculum or syllabus (including assessment methods) **must** be the one that was in place when you undertook your training.  
If a formal curriculum or syllabus (including assessment methods) is not available please provide a letter from the awarding body outlining the content of the training programme or examination.  
For qualifications, we will look to evaluate:  
• where the curriculum covers areas of the CCT curriculum;  
• the complexity of the work undertaken;  
• how examinations are evaluated or quality assured (external assessment). |
| **Specialist registration outside the UK** | Please provide a **validated copy** of details of the registration requirements of that authority. This will demonstrate what is expected of a registrant by that authority and how your application for registration was evaluated. |
| **Honours and prizes** | Please provide **copies** of certificates or letters showing what the prize or honour was for, including the selection and eligibility criteria and pool of eligible individuals.  
Where you have not provided evidence of success in an examination that is a requirement of the CCT curriculum, evidence in this area may contribute to your demonstration of equivalent knowledge. |
| **Other relevant qualifications and certificates** | You must provide evidence of current valid APLS and NLS certification or equivalent advanced paediatric and neonatal life support skills.  
You must provide evidence of current valid level 3 child protection training or equivalent child protection and safeguarding skills.  
Other postgraduate qualifications, e.g. communication skills, “Training the Trainer”, research methodology, are desirable but not essential.  
Applicants may also include degrees or diplomas in relevant areas such as management, business, IT, communication, education or law.  
Please provide **copies** of certificates. |
<table>
<thead>
<tr>
<th>Assessments and appraisals</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Appraisals and assessments</strong></td>
</tr>
<tr>
<td>Please provide <em>validated copies</em> of the evidence required in this area.</td>
</tr>
<tr>
<td><strong>There are many different forms of assessment which form part of the Paediatrics CCT curriculum; for details please refer to the <a href="http://www.gmc-uk.org">Assessment Tools</a>. Many of these tools are available for those not in training to use.</strong></td>
</tr>
<tr>
<td>For non-training posts you should provide evidence of ongoing evaluation of your performance. This may take the format of formal appraisals by the department head or line manager (clinical director, medical director, professor).</td>
</tr>
<tr>
<td>In the UK, a revalidation or appraisal portfolio would be appropriate (if it is completed retrospectively less weight will be given to the information provided).</td>
</tr>
<tr>
<td>Alternative evidence may include letters (written at the time) commenting on your performance. In addition, where no formal appraisal or assessment forms are available, you <strong>must</strong> provide <em>validated</em> information on the method of career review or progression.</td>
</tr>
<tr>
<td>There are many different forms of assessment which form part of the various CCT curricula. Many of these tools are available for those not in training.</td>
</tr>
</tbody>
</table>
### RITAs, ARCPs and training assessments

Please provide **validated copies** of the evidence required in this area.

**Workplace-based assessments (WPBAs)** are not compulsory as part of an application for CESR, however their provision, or similar assessments, will strengthen an application.

The indicative number of WPBAs for current specialty trainees are as follows:

- **Mini Clinical Evaluation Exercises (Mini-CEX)** of index cases focus on core clinical skills and are designed as a 15-20 minute snapshot of a trainee's interaction with a patient. A minimum of 6 Mini CEX are required per year to give adequate evaluation of clinical skills.

- **Direct Observation of Procedural Skills (DOPS)**, are designed to assess procedural skills. A minimum of 6 per year are required to give adequate evaluation of practical skills.

- **Case based discussion (CBD)**, gives feedback from a supervisor on a recently seen case. A minimum of 6 per year are desirable.

Applicants unable to produce the above evidence should submit annual trainer’s reports, annual appraisals of skills and performance, multisource feedback from a range of colleagues and other assessments of procedures, clinical evaluation, management of cases and decision-making.

If you have undertaken training in the UK in level 2 or 3 training or equivalent, you should provide a **validated copy** of your formal records. In addition, if you held any of these approved training posts (except locum posts), please provide evidence of your training number.

If you have undertaken training outside the UK you **must** provide evidence of formal periodic assessment during your training. This evidence **must** have been completed at the time the training was undertaken (if it is completed retrospectively less weight will be given to the information provided). If you do not supply formal assessment documents, you **must** provide the curriculum to demonstrate how you were assessed. A detailed letter of verification from an educational supervisor would satisfy this requirement.

If that training was recognised by relevant authorities outside the UK please provide evidence and recognition standards.

If areas for development were highlighted, please provide evidence to demonstrate that you have subsequently addressed them.

There are many different forms of assessment which form part of the CCT curriculum. Many of these tools are available for those not in training to use.

### 360˚ and multi-source feedback

You should show evidence of evidence of multi-source feedback, e.g. ePaedMSF, eSPRATs. See [Multi-Source Feedback](#).

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This is the specialty specific guidance for Paediatrics

Please make sure you are reading the latest version. You can find all the guidance you need at [www.gmc-uk.org](http://www.gmc-uk.org).
You may wish to supply evidence of feedback from colleagues of all levels (peers, nursing, auxiliary staff, patients, management) completed at the time. This may be in the format of letters, references for posts applied for etc.

<table>
<thead>
<tr>
<th>Awards and discretionary points letters</th>
<th>You may wish to include copies of certificates and letters.</th>
</tr>
</thead>
</table>

**Personal development plans (PDP)**

Please provide **validated copies** of the evidence required in this area.

For details of what to include please use the latest appraisal guidance relevant to your UK location – appraisal guidance and templates have been issued by each of the four UK countries in advance of revalidation.

You should also provide evidence of review of your PDP at appraisal. PDPs normally form part of your annual appraisal system and you should submit them with appraisal documentation.
Logbooks, records of daily clinical practice and portfolios

The evidence you supply here must demonstrate that you have achieved all the requirements and competencies as set down in the CCT curriculum for your specialty or, for non-CCT applicants, your sub-specialty Grid curriculum.

Where you have recently worked in an area of sub-specialty for a substantial period of time, you should submit evidence both that you have previously achieved the requirements and competencies of the curriculum for your specialty and that you have since maintained these skills. You will also need to provide evidence that your current specialised practice allows you to meet all of the requirements of Good Medical Practice.

| Logbooks | Logbooks of procedures may be helpful but are not essential. The RCPCH needs to see a range of evidence of satisfactory career progression and development over time (e.g. annual appraisals, trainers’ reports, end of year reports) in a portfolio, such as but not limited to the RCPCH’s ePortfolio. See the ePortfolio page for what we expect to see in a portfolio. The portfolio should contain evidence such as:
| All evidence in this area must be validated and anonymised for individual patient data. |
| All patient names (first and last), contact details (including full address) and any patient ID numbers (such as NHS numbers or hospital numbers) must be removed from your evidence before you submit it to us. |
| • trainers’ reports, |
| • directly observed procedures |
| • annual appraisals |
| • notes on complex cases |
| • recommendations |
| • medical reports |
| • details about training curriculum (if qualification not on GMC website). |
| It is important that these cover the full range of the curriculum demonstrating the breadth and depth of the specialty, and show that you have either achieved or maintained these competencies over the past 5 years. |
| Consolidation, cumulative data sheets, summary lists and annual caseload statistics | You should provide a summary of the total numbers for the various procedures listed in submitted logbooks. This should be completed annually and include your role in the procedure. |
| All evidence in this area must be validated and anonymised for individual patient data. |

This is the specialty specific guidance for Paediatrics

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<table>
<thead>
<tr>
<th>Topic</th>
<th>Guidance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical reports</td>
<td>All evidence in this area must be validated and anonymised for individual patient data. You should provide examples across the breadth of your practice. You can use these to demonstrate: • your involvement or role in cases • the types and complexity of cases you are involved in • your handling of patient paperwork • your respect and protection of confidential information • triangulation with logbook information.</td>
</tr>
<tr>
<td>Case histories</td>
<td>All evidence in this area must be validated and anonymised for individual patient data. Case histories that you provide should include: • dates • diagnosis • nature of your involvement in the management of the case • which curriculum competencies were involved. You can use these to demonstrate: • your involvement or role in cases • the types and complexity of cases you are involved in • your handling of patient paperwork • your respect and protection of confidential information • triangulation with logbook information.</td>
</tr>
</tbody>
</table>
| Referral letters discussing patient handling | All evidence in this area must be validated and anonymised for individual patient data. Please provide examples of letters to patients and colleagues showing your case mix and range of patients seen, highlighting complexity and range over the whole paediatric practice. Include letters and reports written for non-
**anonymised** for individual patient data.

<table>
<thead>
<tr>
<th><strong>Patient lists</strong></th>
<th><strong>Departmental (or trust) workload statistics and annual caseload statistics</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>All evidence in this area <strong>must be validated and anonymised</strong> for individual patient data.</td>
<td>Please provide <strong>validated copies</strong> of the evidence required in this area.</td>
</tr>
</tbody>
</table>

Medical and allied health professionals. This may include examples of letters:
- requesting a second opinion
- advising clinical colleagues or answering particular questions regarding patient management
- from clinical colleagues regarding applicants involvement in patient management.

You can use these to demonstrate:
- your involvement or role in cases
- the types and complexity of cases you are involved in
- your relationship with your colleagues in other disciplines
- your handling of patient paperwork
- your recognition of the limits of your professional competence
- your respect and protection of confidential information.

<table>
<thead>
<tr>
<th></th>
<th>You can use these to demonstrate:</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>your involvement or role in cases</td>
</tr>
<tr>
<td></td>
<td>the types and complexity of cases you are involved in</td>
</tr>
<tr>
<td></td>
<td>your participation in teaching and training (where you are supervising a junior colleague)</td>
</tr>
<tr>
<td></td>
<td>the volume of cases you undertake</td>
</tr>
<tr>
<td></td>
<td>triangulation with rota, timetable and job plan information</td>
</tr>
<tr>
<td></td>
<td>triangulation with logbook information.</td>
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</tbody>
</table>

You may wish to include copies of patient lists. You can use these to demonstrate:
- your involvement or role in cases
- the types and complexity of cases you are involved in
- your relationship with your colleagues in other disciplines
- your handling of patient paperwork
- your recognition of the limits of your professional competence
- your respect and protection of confidential information.
- triangulation with logbook information

| Rotas, timetables and job plans | Where you have undertaken a number of roles provide details for each post or role. You can use these documents to demonstrate:  
- details of clinical and non-clinical duties you undertake  
- your on-call commitment  
- your participation in meetings and teaching  
- triangulation with logbook information. |

Please provide **validated copies** of the evidence required in this area.

| Courses relevant to curriculum | You must submit up-to-date level 3 child protection training, such as CPD courses on child protection within the last three-five years, primary evidence of experience, e.g. child protection reports, case-based discussions, evidence within caseload, e.g. outpatient letters, referrals and reports. For examples of courses, see [Safeguarding Children and Young People](#).  
Where courses have not been undertaken, evidence of equivalent knowledge or skills **must** be provided. |

| Portfolios (electronic or revalidation) | Do not submit your whole portfolio. You need to separate the evidence in it and submit relevant items under the correct headings as set out in this guidance. |

### Details of posts and duties (including both training and experience posts)

| Employment letters and contracts of employment | The information in these letters and contracts **must** match your CV. They will confirm the following:  
- dates you were in post  
- post title, grade, training  
- type of employment: permanent, fixed term, or part time (including percentage of whole time equivalent) |

Please provide **validated copies** of the evidence required in this area.
### Job descriptions

Please provide **validated copies** of the evidence required in this area.

These **must** match the information in your CV. They will confirm the following:

- your position within the structure of your department
- your post title
- your clinical and non-clinical commitment
- your involvement in teaching or training.

### Job plans

Please provide **validated copies** of the evidence required in this area.

Where you have undertaken a number of roles, provide details for each post or role. You can use these documents to demonstrate:

- the main duties and responsibilities of the post
- your out of hours responsibilities, including rota commitments
- that you have covered for colleagues' periods of leave
- any professional supervision and management of junior medical staff that you have undertaken
- your responsibilities for carrying out teaching, examination and accreditation duties
- your contribution to postgraduate and continuing medical education activity, locally and nationally
- any responsibilities you had that relate to a special interest
- requirements to participate in medical audit and in continuing medical education
- your involvement in research
- your managerial, including budgetary, responsibilities where appropriate
- your participation in administration and management duties.
## Research, publications and presentations

| Research papers, grants, patent designs | Please include any research relevant to your current practice.  
|                                         | If the research is published, please submit the first page of the published paper.  
|                                         | If the research is not published, please provide a summary or abstract of the research.  
|                                         | Colleges may undertake web searches to check the information you provide.  
|                                         | You can use these documents to demonstrate:  
|                                         | • the types and complexity of cases you are involved in  
|                                         | • triangulation with logbook information  
|                                         | • working with colleagues (where research is joint or multi disciplinary)  
|                                         | • Continuing Professional Development (CPD). |

| Publications within specialty field | Include a copy of the front page of each publication.  
|                                   | More weight is given where:  
|                                   | • the applicant is first author  
|                                   | • the publication has a high impact factor.  
|                                   | You must not change the listing of the authors (the order in which the authors are listed) in papers where there is more than one author.  
|                                   | Colleges may undertake web searches to check the information you provide.  
|                                   | You can use these documents to demonstrate:  
|                                   | • the types and complexity of cases you are involved in  
|                                   | • triangulation with logbook information  
|                                   | • working with colleagues (where publications are joint or multi disciplinary)  
|                                   | CPD. |
### Presentations, poster presentations

All evidence in this area **must be validated** by the hospital or relevant body who can attest to the event.

You may wish to supply invitations to present at national or international meetings to demonstrate your recognition within your specialty. You may also supply feedback from presentations or meeting agendas or programmes that show your participation.

You can use these documents to demonstrate:
- the types and complexity of cases you are involved in
- triangulation with logbook information
- CPD
- teaching and training.

### CPD and CME

<table>
<thead>
<tr>
<th>CPD record certificates, certificates of attendance, workshops and at local, national and international meetings or conferences</th>
<th>You should provide a variety of these to cover all aspects of your work and to demonstrate the breadth of your practice. Where you have specialised the provision of CPD records covering the other aspects of the relevant curriculum is important to demonstrate the maintenance of your skills. Please provide details of the events you have attended describing the content. Support this with documentary evidence of your attendance (CPD certificates etc). See the <a href="https://www.rchp.org.uk/">RCPCH CPD guidelines</a>.</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPD registration points from UK Medical Royal College (or equivalent body overseas)</td>
<td>Please provide evidence of registration within a formal system. Colleges/Faculties may confirm attainment of College requirements if the applicant is based in the UK and signed up to the <a href="https://www.rchp.org.uk/">RCPCH CPD scheme</a>.</td>
</tr>
</tbody>
</table>
### Membership of professional bodies and organisations

List the following for your current membership of professional bodies and organisations. Provide documentary evidence showing membership information:

- organisation name
- date of joining
- status of membership (member, associate etc)
- how membership is achieved (evaluation, examination, is membership restricted or open to all?)

Where membership has been attained through an evaluation or examination and you have not provided evidence of success in an examination that is a requirement of the CCT curriculum, evidence in this area may contribute to your demonstration of equivalent knowledge.

<table>
<thead>
<tr>
<th>Teaching and training</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Teaching timetables</strong></td>
</tr>
</tbody>
</table>

Where you have undertaken a number of roles provide details for each post or role, indicate the level of the teaching. Where teaching is not formal (timetabled) indicate how you participate in teaching.

<table>
<thead>
<tr>
<th>Lectures</th>
</tr>
</thead>
</table>

Please provide validated copies of the evidence required in this area.

Please include evidence showing the audience and topics covered, such as presentations, posters advertising the events, educational timetable from trust education centre, letter from education centre indicating your involvement in specialty trainee formal education programme.

You can use these documents to demonstrate:

- the types and complexity of cases you are involved in
- CPD
- teaching and training
- communication skills.

Where you have not provided evidence of success in an examination that is a requirement of the CCT curriculum,
<table>
<thead>
<tr>
<th>Evidence in this area may contribute to your demonstration of equivalent knowledge.</th>
</tr>
</thead>
</table>

**Feedback or evaluation forms from those taught**

All evidence in this area **must be validated** and **anonymised** for individual patient data.

Please provide copies of feedback from teaching events you have participated in. You can use these documents to demonstrate:
- CPD
- teaching and training
- leadership
- relationships with colleagues
- communication skills.

**Letters from colleagues**

All evidence in this area **must be validated** and **anonymised** for individual patient data.

You can use copies of letters from colleagues to demonstrate similar information to feedback forms (see above).

**Attendance at teaching or appraisal courses**

Please provide documentary evidence that you attended the courses and information on the content of the course including whether they were generic or aimed at medical professionals.

**Participation in assessment or appraisal and appointments processes**

Please provide **validated copies** of the evidence required in this area.

You may provide the following types of evidence to support this area:
- copies of invitations to appraisals or assessments including attendance at appraisal/assessment courses
- evidence of participation in the ARCP, RITA or other trainee appraisal/assessment processes
- evidence of participation in appointments for trainees (including invitations to participate and interview panel information, including attendance at interview and appointment related courses).

You can use these documents to demonstrate:
- contribution to postgraduate and continuing medical education activity, locally and nationally
- any responsibilities which relate to a special interest
- participation in administration, management duties
- participation in teaching and training
- communication, partnership and teamwork
- relationships with colleagues (including giving feedback)
- leadership.
## Domain 2 – Safety and quality

### Participation in audit, service improvement

<table>
<thead>
<tr>
<th>Audits undertaken by applicant</th>
<th>You should provide evidence of the five stages of the audit process:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please provide <strong>validated copies</strong> of the evidence required in this area.</td>
<td>1. Definition of criteria and standards</td>
</tr>
<tr>
<td></td>
<td>2. Data collection</td>
</tr>
<tr>
<td></td>
<td>3. Assessment of performance against criteria and standards</td>
</tr>
<tr>
<td></td>
<td>4. Identification of changes (alterations to practice)</td>
</tr>
<tr>
<td></td>
<td>5. Re-evaluation</td>
</tr>
</tbody>
</table>

**Evidence you could supply includes:**

- audit reports (collections of data alone are not considered as a full clinical audit)
- publications
- submissions to ethics committee (not satisfactory alone)
- presentations of audit work (see above for details required for presentations)
- letter from audit or clinical governance lead confirming participation in audit or governance activities
- guidelines produced to reflect lessons learned within audit
- notes from self-reflective diaries.

**You can use these documents to demonstrate:**

- the types and complexity of cases you are involved in
- triangulation with logbook information CPD
- communication, partnership and teamwork
- relationships with colleagues, patients
- leadership
| **Reflective diaries** | For details of what to include please see the CPD guidelines.

You can use this document to demonstrate

- triangulation with logbooks
- relationships with colleagues
- your recognition of the limits of your professional competence
- handling of critical incidents or complaints
- how you have changed your practice in the light of experiences.

As this evidence is self-produced, for its content to be given weight it must be supported or triangulated by other evidence.

| **Service improvement and clinical governance meetings** | This area could be demonstrated in a number of ways including:

- draft protocols or clinical guidance
- service improvement or risk management projects
- minutes of meetings demonstrating your attendance and participation in the meeting
- invitations to attend meetings.

You can use these documents to demonstrate:

- communication, partnership and teamwork
- relationships with colleagues
- leadership
- multi disciplinary working
- participation in audit or clinical governance.

Service improvement and clinical governance meetings should also show active participation in risk management.

All evidence in this area must be **validated** and **anonymised** for individual patient data.
<table>
<thead>
<tr>
<th>Safety</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Health and safety</td>
<td>Please provide evidence to support your awareness and following of Health and Safety requirements, evidence of effective skills in ensuring a responsible approach to personal health, stress and well-being for yourself and others and evidence of participation in health and safety training, e.g. certificates of attendance at health and safety courses, lectures.</td>
</tr>
</tbody>
</table>
## Domain 3 – Communication, partnership and teamwork

### Communication

<table>
<thead>
<tr>
<th>Colleagues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please provide <strong>validated copies</strong> of the evidence required in this area.</td>
</tr>
</tbody>
</table>

Please provide evidence to support your communication with colleagues, both within your immediate team and the wider team (including non-clinical).

This can be demonstrated by:

- letters of correspondence between you and your colleagues, demonstrating referrals and collaboration over management of patient care, including across multidisciplinary teams
- management, including organising staff rotas
- presentations
- copies of appraisals or references written for colleagues (these must be anonymised with relation to colleague data).
- You can use these documents to demonstrate:
  - communication, partnership and teamwork with colleagues and multidisciplinary partners in allied health services, social work and education
  - relationships with colleagues
  - leadership
  - multidisciplinary working
  - participation in governance and management meetings
  - honesty and objectivity.
Patients

All evidence in this area **must be validated** and **anonymised** for individual patient data.

<table>
<thead>
<tr>
<th>Evidence demonstrating this area could include:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• letters to patients and/or families</td>
</tr>
<tr>
<td>• guidance or information leaflets written for patients and families</td>
</tr>
<tr>
<td>• patient feedback surveys</td>
</tr>
<tr>
<td>• thank you letters and cards from patients and families</td>
</tr>
<tr>
<td>• complaints and responses to complaints.</td>
</tr>
<tr>
<td>• This may include complaints received against your department or a colleague where you have been involved in the resolution. This is to demonstrate how you handle complaints. Having a complaint made against you will not adversely influence your application. You must anonymise colleague information from this evidence.</td>
</tr>
</tbody>
</table>

You can use these documents to demonstrate:

| • effective skills in written communications for children and their families |
| • engaging children in consultations and in the management of their care |
| • effective skills in conveying and discussing difficult information, including death and bereavement, with young people and their families |
| • effective skills in responding to complaints |
| • involvement in health promotion activities specific to general paediatrics or a paediatric sub-specialty |
| • following the principles and legal aspects of obtaining and explaining consent and confidentiality. |
## Partnership and teamwork

| Working in multidisciplinary teams | Evidence which demonstrates multidisciplinary working e.g. work with diabetes clinics, multidisciplinary child development centres.  
This area could be demonstrated in a number of ways including:  
- clinical correspondence referring cases to colleagues and coordinating multidisciplinary care, including allied health professionals, education staff, and social services  
- minutes of multidisciplinary team meetings demonstrating your attendance and participation  
- medical reports which indicate involvement across disciplines  
- appraisals which include this information.  
You can use these documents to demonstrate:  
- communication, partnership and teamwork  
- relationships with colleagues  
- leadership  
- multidisciplinary working. |

| Management and leadership experience | Applicants must provide evidence of leading ward rounds, leading audits and implementing the results, and providing feedback to colleagues on the audit outcomes and proposals. This could include minutes of meetings outlining your role, job descriptions and statements from colleagues.  
This area could be demonstrated in a number of ways including:  
- invitations to attend meetings, lead ward rounds or audits  
- minutes of meetings demonstrating your attendance and participation in the meeting  
- job plans which indicate this as a duty  
- appraisals which include this information.  
You can use these documents to demonstrate: |

---

This is the specialty specific guidance for Paediatrics  
Please make sure you are reading the latest version. You can find all the guidance you need at [www.gmc-uk.org](http://www.gmc-uk.org).
<table>
<thead>
<tr>
<th>Chairing meetings and leading projects</th>
<th>This area could be demonstrated in a number of ways including:</th>
</tr>
</thead>
</table>
| All evidence in this area **must be validated** and **anonymised** for individual patient data. | - project reports  
- publications or presentations  
- invitations to attend meetings  
- minutes of meetings demonstrating your attendance and participation in the meeting  
- job plans which indicate this as a duty  
- appraisals which include this information  
- letters from colleagues. |
| You can use these documents to demonstrate: |  
- communication, partnership and teamwork  
- relationships with colleagues  
- leadership  
- multidisciplinary working  
- participation in directorate and management meetings  
- CPD. |
Domain 4 – Maintaining trust

Acting with honesty and integrity

<table>
<thead>
<tr>
<th>Honesty and integrity</th>
<th>You can demonstrate this with:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• the declarations on your application form</td>
</tr>
<tr>
<td></td>
<td>• statements from your referees</td>
</tr>
<tr>
<td></td>
<td>• appraisal forms</td>
</tr>
<tr>
<td></td>
<td>• having no restrictions on your registration (UK based doctors)</td>
</tr>
<tr>
<td></td>
<td>• Certificate of Good Standing (overseas based doctors).</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Equality and human rights (including disability, human rights, race, religion and ethnicity awareness and equal opportunities)</th>
<th>You can demonstrate this with:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• evidence of attendance at relevant courses (please provide details of course content)</td>
</tr>
<tr>
<td></td>
<td>• feedback from patients and colleagues</td>
</tr>
<tr>
<td></td>
<td>• statements from your referees</td>
</tr>
<tr>
<td></td>
<td>• testimonials.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Data protection</th>
<th>You can demonstrate this with:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• attendance at relevant courses (please provide details of course content)</td>
</tr>
<tr>
<td></td>
<td>• feedback from patients and colleagues</td>
</tr>
<tr>
<td></td>
<td>• your application and evidence being appropriately anonymised.</td>
</tr>
</tbody>
</table>
### Relationships with patients

| Testimonials and letters from colleagues | You may include “To whom it may concern letters”.
|                                        | All evidence in this area **must be anonymised** for individual patient data. |
| Thank you letters, cards from colleagues and patients | Please ensure that these are **anonymised** (for individual patient data). |
| Complaints and responses to complaints   | This is to demonstrate how you handle complaints. Having a complaint made against you will not adversely influence your application. |
|                                        | You may include complaints received against the department within which you worked or one against a colleague where you have been involved in the resolution. |
|                                        | You may provide a reflective diary of how you would handle a hypothetical complaint. |
|                                        | All evidence in this area **must be anonymised** for individual patient data. |
Appendix A

CESR in a non-CCT specialty

Some doctors may be eligible to apply for a CESR in a non-CCT specialty. Doctors following this route are listed on the Specialist Register in their chosen specialty only, as their sub-specialty training is not equivalent to a full CCT programme.

To be eligible to apply you must have either:

- a specialist medical qualification from outside the UK in any non-CCT specialty
  
  or

- at least six months continuous specialist training outside the UK in any non-CCT specialty.

Please consult the list of GMC-approved sub-specialties in paediatrics to see which sub-specialties may be certified by this route. The GMC can advise if you are eligible to apply.

Specialty specific guidance for non-CCT applicants

CESR applicants in a non-CCT specialty should follow the same specialty specific guidance above, with the following changes.

Clinical competencies: refer to the relevant sub-specialty training curriculum for the skills, knowledge and experience you will need to demonstrate in your evidence. You do not need to submit evidence of level 3 clinical competencies in the CCT programme unless they are required as part of the sub-specialty programme (e.g. sub-specialty neonatal medicine requires CCT neonatal competencies).

Resuscitation: all applicants must provide valid certification in APLS and NLS, or equivalent advanced paediatric and neonatal life support skills.

Child protection: all applicants must provide valid certification in level 3 child protection training and evidence of recent experience in child protection cases. You do not need to submit evidence of recent experience in child protection cases, unless this is a required component of your sub-specialty (e.g. community child health).
Appendix B
Advice from a successful CESR applicant

A paediatric consultant who recently entered the Specialist Register through CESR has offered the following points of guidance and advice for doctors considering applying for CESR.

1. Understand the time and effort that is required to make a successful application. You are asked to provide evidence that you have fulfilled all the competencies defined in the CCT curriculum. Doctors who have gone through the formal training programme will normally have taken around eight years to gain these competencies, so it is not something you can gather overnight.

Depending on your recent work history, experience and the evidence you have available, the CESR may be a matter of starting an application now, or it may be a more long-term process to work towards as a goal in your career development.

2. Good preparation is key. Make sure you look carefully at:
   a. the current curriculum in paediatrics (sub-specialty curriculum for non-CCT CESR applicants).
   b. this Specialty Specific Guidance.
   c. the Royal College of Paediatrics and Child Health guidance for applicants.

3. Recognise that you will need others to support you in the application process. Think about who can help, explain to them what help you need and ask if they can support you.

4. Try benchmarking yourself against this guidance. For each area of competence, try looking at:
   a. where you already have evidence of competence and start to gather this in one place.
   b. where you have competencies, but as yet cannot provide evidence. Think about what evidence you could provide. Try to gain some work based assessments, such as Directly Observed Procedural Skills (DOPS) and Mini Clinical Evaluation Exercises (MiniCEX) across a range of clinical presentations.
   c. where you have previously had competences but need to gather evidence to show that your skills are still up to date. For example, if you have specialised in community paediatrics, make sure you have current certification in APLS and NLS or equivalent resuscitation. If you specialise in acute paediatrics, ensure you have current certification in level 3 child protection.
   d. where you do not yet have competencies. Make a plan of how you could address these gaps. Discuss these gaps with your lead consultant in your specialty and ask if they can support you in getting experience to meet these gaps.

5. The CESR places most emphasis on evidence gathered in the last five years. If you are providing evidence from before this time, think about what you can do now to show that you still have these competencies. For example, if you still have contacts in that unit you could ask if they would be prepared for you to go back and have some workplace-based assessments in that area. The Trust would probably want you to have an honorary contract for this.
6. Choose the referees for your structured reports carefully. The GMC provides guidance on who should give structured reports, but you should also think about who values you enough to put in the time and effort to ensure that their report provides the information you need.

Think about what you can do to support them in this process. The structured reports they provide have to be from their own direct observation of your practice. Do not assume they can remember everything you have done; like you, they are busy people. Consider drafting a prompt sheet to help them recall the clinical experience you have, any safeguarding experience, any management you have done and any governance work. It is entirely up to them what they write, but there is no harm in reminding them of the good work you have carried out.

7. Make sure you understand which evidence needs to be validated and that you follow the correct validation procedure, to ensure that all your evidence is accepted and does not need to be resubmitted. If in doubt, the GMC can advise on what needs to be validated and what types of validation can be accepted. Check the GMC’s guidance on validating evidence.

Validation can be a time consuming task for whoever you are asking to do this on your behalf. It is not just a case of going through, stamping and signing; they need to be sure that it is honest evidence. Try to meet in advance with someone who can validate your evidence and discuss how they would prefer to do this task, e.g. waiting until you have gathered all your evidence and validating everything at once, or in instalments while you are compiling it.

8. Take care to arrange your evidence following the order it is set out in this guidance, so it is easier for assessors to find the evidence they need for each of the sections.

9. Finally: keep going and don’t lose heart! There will probably be a point in the middle where the task feels huge. When this happens, allow yourself a couple of weeks off CESR then look at it afresh.

Additional guidance on applications in paediatrics is on the web at http://www.rcpch.ac.uk/training-examinations/certification/cesr and the College can be contacted at equivalence@rcpch.ac.uk.