

GDM8

Implementation Period GDM – for applications received before 1 Jan 2021

Guidance for assessing if an applicant has the necessary experience / foundation for future practice

Introduction

- 1 This guidance is for decision makers within the Registration and Revalidation directorate who are asked to consider whether applicants applying under [Section 19](#) or [Section 21B](#) have the necessary experience/ foundation for future practice (experience) to practise as a fully registered doctor in the UK. This guidance aims to ensure consistency, fairness and proportionality in our approach to making decisions in this area.
- 2 This document should be read in conjunction [with the key principles document](#) which sets out the factors that decision makers should consider when making decisions.
- 3 On 6 October 2015, the Strategy & Policy Board approved [two new patterns of experience](#)¹ developed with reference to expertise from within the GMC² and the requirements of the UK Foundation Programme³.
- 4 Given the volume of Section 21B and Section 19 applications received and the variety in training systems in place across the world it is neither possible nor desirable to develop patterns of experience that replicate exactly the outcomes of the Foundation Programme. As such, the two new broad patterns apply common standards to assess whether the type, breadth and duration of medical experience undertaken by an applicant is sufficient to demonstrate that s/he is *comparable* to a UK graduate who has satisfactorily completed

¹ The 2015 patterns replace the former Registration Committee's decision on acceptable patterns of experience (22 November 2005 - Item 2b). Please note it also replaces the decision that registration could be granted under section 19 in circumstances where the applicant did not have an acceptable pattern of experience but could demonstrate that they had an aggregate period of 5 years of practice, been in practice for three out the last five years (including the 12 months immediately prior to the application date. This guidance was subsequently also applied to section 21B applicants. However, the guidance in relation to breaks in practice made in the same paper (para 2(b)(i-ii) is not affected.

² Workshop with Assistant Registrars in Registration & Revalidation directorate; Approving foundation programme training and new programmes for provisionally registered doctors outside of the UK https://www.gmc-uk.org/-/media/documents/approval-of-foundation-training-overseas-mar-16_pdf-56435746.pdf

³ UK Foundation Guide 2019, this is updated each year and can be found at <https://www.foundationprogramme.nhs.uk/>

F1. The award of Certificate of Experience upon completing F1 is also acceptable evidence of experience.

- 5 Section 19 and Section 21B applicants will satisfy the Registrar that they have the relevant experience or 'foundation' for full registration if they fulfil all of the elements of either Pattern A or Pattern B.
- 6 Applicants applying through the PGQ or Sponsorship routes are considered to have the demonstrated the necessary experience for full registration.
- 7 It is important to note that this guidance does not fetter the Registrar's discretion. Registrars can depart from the guidance but must provide reasoned justification for their decision to do so. Where an application does not satisfy the evidence, the Registrar is not prevented from considering the evidence submitted and making a decision as to whether it demonstrates that the applicant has the experience necessary for practising as a fully registered doctor. For example, in cases where an applicant has undertaken at least 12 months (uninterrupted & continuous) of a training programme but has not completed the entire training programme, the Registrar may wish to consider whether the applicant meets all other elements of Pattern A and has received a satisfactory outcome from the relevant educational authority.

Factors to consider

- 8 Decision makers should take the following factors into account when considering whether an applicant has the experience necessary to practise as a fully registered doctor in the UK.
- 9 All evidence should be robust, objective, independent and verifiable.

Checklist – Pattern A	
1	Has the applicant provided evidence of satisfactory completion of a minimum of 12 months continuous medical practice in a training programme ⁴ undertaken immediately prior or immediately ⁵ following graduation? ⁶
2	If the training programme was completed more than two years after graduation, has the applicant provided an explanation and evidence to explain the break?
3	Has the applicant completed at least three months of practice in medicine and three months in surgery? (applicable for training programmes between 12-18 months ; both periods of practice must be continuous and uninterrupted)
4	Has the applicant completed at least six months of practice in medicine and six months in surgery? (applicable for training programmes of 18 months or longer ; both periods of practice must be continuous and uninterrupted)

⁴ The programme must be satisfactorily completed and must be an approved training post. Honorary posts are not acceptable. All periods of practice must be continuous, uninterrupted internship rotations (or equivalent) completed as part of the training programme and posts which involve observation, such as clinical attachments, shadowing, observerships and clerkships, rather than active medical practice with direct patient contact, are not acceptable.

⁵ Pre-graduate programmes that start outside the final year of study will be considered, providing the programme does not take place before the final year. We will require verification from authorities overseeing the training programmes where the programme otherwise meets our minimum standards but has been completed before the final year because of a requirement to undertake national service. Postgraduate programmes commenced more than two years after graduation may require referral to an AR

5	Was the first 12 months of the training programme uninterrupted with no more than 20 working days absence ⁷ in any 12 month period? (in addition to annual leave which can be up to 25 working days or five weeks) ⁸
6	Has the applicant provided evidence to support any break in training (other than for undertaking medical related education, training or experience, or contractual maternity/ paternity leave) after the first 12 months of the programme? The evidence should include formal authorisation for the break from the authority overseeing the training programme. The break ⁹ should be for no longer than 12 months after which the applicant should have returned to complete the programme.
7	Was any part of the training programme undertaken in another country or jurisdiction? This should be supported by formal authorisation from the authority responsible for overseeing the training programme and must form part of final sign-off by the home authority (i.e. rotations undertaken during this period should be shown together with the rest of the applicant's rotations on the certificate or document that confirms successful completion).

⁷ This means absences for sickness or other statutory reasons such as maternity, paternity, adoption or shared parental leave. This approach is based on that taken by the UKFPO set out in the UK Foundation Guide 2019 which can be found at <https://www.foundationprogramme.nhs.uk/> It states: 'Absences from training (including OOP not approved towards training), other than for study leave or annual leave, may impact on a doctor's ability to demonstrate competence and progression through the curriculum. Where a trainee has been absent for statutory (eg maternity/paternity/adoption/shared parental) reasons for a total of 20 working days or more within each 12-month period, an early review will be triggered of whether the trainee needs to have their F1 or F2 year extended.'

⁸ Periods of leave referred to in this section cannot be used to make up a shortfall in a training programme (either separately or in combination)

⁹ All breaks after the first 12 months must be authorised by the authority overseeing the training programme. Breaks taken for reasons other than the pursuit of medical-related education, training or experience or contractual maternity/paternity leave will require referral to an Assistant Registrar.

8	Has the relevant medical regulatory or educational authority confirmed that the applicant has satisfactorily completed the training programme and all of its component parts ¹⁰ ?
9	Having taken all the above factors into account, does the evidence and information submitted provide assurance that the applicant has the type, breadth and duration of medical experience and training necessary to practise as a fully registered doctor in the UK?
Checklist – Pattern B	
1	Has the applicant provided evidence of satisfactory completion of a minimum of two years continuous postgraduate medical practice?
2	<p>Was the postgraduate medical experience undertaken in a public hospital that meets the standards set out in the guidance?</p> <p>Examples of the types of evidence that could be sought to verify this are:</p> <ul style="list-style-type: none"> ▪ Evidence that the hospital is subject to regulation/ regular inspection by a relevant government department/ organisation ▪ Evidence that the hospital is recognised as suitable for medical teaching and training ▪ Job descriptions which relate to the post(s) the applicant held ▪ Documents relating to assessments/ reviews carried out during the period of employment provided by either the applicant, clinical supervisor or employing organisation
3	Has the applicant undertaken a minimum of three months each in at least one branch of medicine AND one branch of surgery?

¹⁰ Any parts of the programme undertaken in another country or jurisdiction must be approved by the authority responsible for overseeing the programme and must form part of the final sign off by the home authority. The rotations should be shown together with the rest of the applicant's rotations on the certificate or document that confirms the applicant has successfully completed the programme.

	The periods of practice must be continuous and uninterrupted and should be assessed in detail to establish if the applicant's experience includes both surgical and medical experience.
4	Was the first 12 months of the postgraduate practice uninterrupted with no more than 20 working days absence in any 12 month period? (in addition to annual leave which can be up to 25 working days or five weeks)
5	Has the applicant provided evidence to support any break in training (other than for undertaking medical related education, training or experience, or contractual maternity/ paternity leave) after the first 12 months? The evidence should include formal authorisation for the break from the employing organisation. The break ¹¹ should be for no longer than 12 months after which the applicant should have returned to medical practice.
6	Has the applicant's supervising consultant completed an evidence of postgraduate medical practice form confirming satisfactory completion?
7	Having taken all the above factors into account, does the evidence and information submitted provide assurance that the applicant has the type, breadth and duration of medical experience and training necessary to practise as a fully registered doctor in the UK?

This guidance was approved on 3/03/2020

¹¹ All breaks after the first 12 months must be authorised by the employing organisation. Breaks taken for reasons other than the pursuit of medical-related education, training or experience, or contractual maternity/paternity leave will require referral to an Assistant Registrar.